

*Library*  
IRC International Water  
and Sanitation Centre  
Tel.: +31 70 30 889 80  
Fax: +31 70 35 889 84

GOVERNMENT OF BANGLADESH - UNICEF

RURAL WATER SUPPLY  
AND SANITATION PROGRAMME

PROJECT PROPOSAL

FOR

SOCIAL MOBILISATION

FOR SANITATION

1993 - 1995

MAY 1993

## ACRONYMS

BRDB	-	Bangladesh Rural Development Board
CDD	-	Control of Diarrhoeal Disease
DPHE	-	Department of Public Health Engineering
IA	-	Integrated Approach
EE	-	Executive Engineer
GOB	-	Government of Bangladesh
ICDDR'B	-	International Centre for Diarrhoeal Disease Research, Bangladesh
KAP	-	Knowledge, Attitude and Practice
MIS	-	Management Information System
MP	-	Member of Parliament
MOHFW	-	Ministry of Health & Family Welfare
NGO	-	Non-government Organization
ORT	-	Oral Rehydration Therapy
PCIS	-	Programme Communication Information Section (UNICEF)
SAE	-	Sub-Assistant Engineer
SDE	-	Sub-Divisional Engineer
TOR	-	Terms of Reference
TWM	-	Tubewell Mechanic
VSC	-	Village Sanitation Centre
WATSAN	-	Water and Sanitation
WESS	-	Water and Environmental Sanitation Section (UNICEF)

ZRC

Zonal Review Committee  
PO Box 93190, 2509 AD THE HAGUE  
Tel.: +31 70 30 689 80  
Fax: +31 70 35 899 64  
BARCODE: 14 24 2  
LO: 822 BD93

## LIST OF CONTENTS

	<u>PAGES</u>
<i>EXECUTIVE SUMMARY</i>	
1. <i>BACKGROUND</i>	1
2. <i>DEVELOPMENT OF THE SOCIAL MOBILISATION STRATEGY FOR 1993-95</i>	5
3. <i>OBJECTIVES</i>	10
4. <i>OVERALL APPROACH</i>	11
5. <i>COMMUNICATION DESIGN DEVELOPMENT</i>	13
6. <i>DPHE CAPACITY DEVELOPMENT</i>	19
7. <i>SUPPORT TO ALLIES</i>	22
8. <i>ACTION RESEARCH</i>	27
9. <i>ACTIVITIES AND OUTPUTS</i>	31
10. <i>TIME FRAME</i>	37
11. <i>BUDGET</i>	43
12. <i>PROGRAMME MANAGEMENT</i>	48
13. <i>MONITORING AND EVALUATION</i>	51

### *ANNEX - A DETAILED BUDGET ESTIMATE*

### FIGURES

- Figure 1 : Social Mobilisation Sanitation for All in Bangladesh*
- Figure 2 : Communication Design Development Process*
- Figure 3 : Social Mobilisation Organogram - DPHE*
- Figure 4 : Sanitation Organogram - UNICEF*
- Figure 5 : Coordination Committees*

GOVERNMENT OF BANGLADESH – UNICEF  
RURAL WATER SUPPLY AND SANITATION (RWSS)  
PROGRAMME 1992–95.

SUMMARY SHEET

Name of the Programme : Rural Water Supply and Sanitation Programme.

Duration : January 1993 – June 1995

Government Implementing Agency : Department of Public Health Engineering (DPHE),  
Ministry of Local Government, Rural Development and Cooperatives.

\*000 US\$)

Programme Cost : \* Approximate Govt. Contribution : 229,300  
 \*\* Approx. Beneficiary Contribution : –  
 UNICEF Contribution : 3,533,352

Total :	3,762,652
---------	-----------

Phasing of UNICEF Assistance  
(In Thousand of US \$)

	JAN 93 TO JUN 93	JUL 93 TO JUN 94	JUL 94 TO JUN 95	TOTAL US\$
Social Mobilisation Project	269,300	1,513,675	1,155,675	2,938,650
Project Support Services (UNICEF HQ) 6%	16,158	90,821	69,341	176,319
Inflation (2½% + 7½%)	–	37,842	86,676	124,518
Contingencies (10%)	26,930	151,368	115,568	293,865
<b>TOTAL:</b>	<b>312,388</b>	<b>1,793,705</b>	<b>1,427,259</b>	<b>3,533,352</b>

\* Only full time Project Staff costed. Excludes cost of other DPHE staff.

\*\* Beneficiaries time not costed. Latrine materials costed in Village Sanitation Project.

## EXECUTIVE SUMMARY

*The Government of Bangladesh has achieved a considerable water supply coverage in the rural areas, with 85% of the population having access to tubewell water within 150 metres and 96% using tubewell water for drinking. However, diarrhoeal incidence and mortality remain high. One of the contributing factors is poor sanitation practices. For example, only 26% of the rural population use sanitary latrines.*

*The objective of the project is to improve excreta disposal, personal hygienic practices and use of safe water for domestic purposes in order to reduce diarrhoeal disease and improve the quality of life of the rural communities.*

*The project will mobilize people at all levels to create a conducive social environment to promote sanitation at the family level. It complements the "Village Sanitation" project already funded by DANIDA and SDC for the period 1992-95, which focusses largely on the "hardware" component of sanitation.*

*The inauguration of a national conference on social mobilization for sanitation by the Honourable Prime Minister in February 1992 added a new dimension to the social mobilization initiatives taken up by DPHE and other allies in several parts of the country. Support of local politicians, administrators and community leaders will be sought to raise the priority on sanitation as well as enhance success of programme implementation.*

*The proposed activities have been developed, based on the outcome of a series of planning workshops with the participation of NGOs, UN agencies and consultants. The successes as well as weaknesses of on-going and earlier sanitation activities were analyzed and the lessons learnt have been incorporated in the formulation of the proposal.*

*The social mobilization strategies are developed on four major premises, namely, increased involvement of the community in planning and implementation; strengthening of the programme communication and training; the forging of alliances with various partners to link up with the community; and the importance of political and social commitment which can be achieved through advocacy.*

*Community involvement, is envisaged in planning, development and implementation. Community members will be involved in the development of the communication strategy. Union Water and Sanitation committees will be supported to implement the programme. In selected areas, village advisory groups will be formed, which can play a role in advising on the effectiveness of on-going strategies.*

*The strengthening of the communication package is given high priority. The core communication package will be developed based on needs assessment studies, and strategies will be designed with community groups. This package will form the basis of the communication strategy.*

*Training curricula and materials, based on the communication package will be developed. Media will be developed to reinforce the communication strategy.*

Extensive training of DPHE field staff will be undertaken to develop their role as communicators as well as technologists. The Training Division will be involved in the development of the core communication package and training curricula. They will train the DPHE field staff in communication skills, the core communication package and implementation of the social mobilisation programme. Participatory approach will be used in trainings.

After training the DPHE field staff will support the Union Parishads to implement the programme through the Union WATSAN committees, in a phased manner. Each Union WATSAN committee will be chaired by the UP chairman, and will include ward members and representatives from villages, local government field workers and NGOs.

The communication core package materials and training will be given to allies such as other government sectors, NGOs, religious leaders, service clubs, and scouts and guides. NGO Forum will carry out intensive social mobilisation in 20 Thanas through the field workers of their partner NGOs.

Action research will be undertaken to pilot and evaluate other supplementary strategies using different methodologies to motivate community members and different allies to undertake the motivation tasks. The activities will include the training of headmasters as motivators, courtyard meetings by Thana officials, education of private producers, workshops with community influencers, and use of community sanitation promoters. Based on evaluation of these strategies, these activities may be expanded.

As the implementing agency, DPHE will take the overall responsibility of the project, and will be assisted by UNICEF. DPHE will establish a Social Mobilization Division, which will be staffed by engineers and communication officers, to implement the programme; and a Training Division with communication training staff, to carry out the extensive training programme.

The formative and operations research activities, as well as the development of the communication packages will be undertaken largely by consultants with support from DPHE and UNICEF.

The project activities will be monitored by DPHE field staff and by the respective implementation partners, with the support of DPHE and UNICEF field staff. Monitoring of key indicators will also be undertaken at specified intervals to determine the impact of the programme interventions and modify the programme as necessary.

UNICEF will support DPHE in programme implementation, including the forging of alliances and planning of the activities. UNICEF will play a major role in advocacy, the implementation of formative research, development of communication and training packages, and networking with allies. The progress of implementation will be monitored through regular meetings with DPHE and allies as well as field visits to monitor the quality of implementation.

The project will be implemented from January 1993 to June 1995. The budget is estimated at US\$ 3.5 million.

## 1. BACKGROUND

### 1.1 Introduction

In Bangladesh, under-five child mortality is high (133 per 1000 live births in 1991). It is estimated that about one third of these deaths are caused by diarrhoeal disease alone (Khan 1983).

The GOB has achieved considerable tubewell water supply coverage. A recent national survey (Mitra, 1992) showed that 85 percent of the rural population have access to tubewell water within 150 meters, and 96 percent use tubewells for drinking water. However, diarrhoea incidence and mortality remain high. With the increased coverage by clean water supplies, it was anticipated that there would be a related drop in disease incidence. However, it is now appreciated that this will not happen until there is a vast improvement in sanitation. The major threat to children is the insanitary disposal of human excreta. Faecal pollution of the environment and poor hygiene practices contribute to the continued transmission of disease.

Improvement in sanitation has lagged behind water supply. A report (Laubjerg, 1986) indicated that in 1983 only two per cent of rural families used waterséal latrines, and a small unspecified percentage used pit latrines. According to a recent survey (Mitra, 1992), the hygienic latrine coverage was estimated at six percent in 1987, raising to ten percent in 1989, and a significant increase to 26 percent in 1991. About 40 percent of the hygienic latrines, in 1991, were of the waterséal type, while 60 percent were homemade pit latrines. But this still means that 74 percent of the rural population are either using unhygienic latrines or practicing open defecation. It is estimated that about 20,000 metric tons of faecal matter is deposited in the open, every day. Although 91 percent of families with latrines use them regularly, only 10 percent of children under five use the latrines. The majority of the population use tubewell water for drinking but still use polluted ponds and rivers for other domestic purposes.

### 1.2 Early Sanitation Promotion

DPHE has been promoting sanitation for many years, though the main effort has been concentrated on provision of tubewell water. In 1978, Village Sanitation Centres (VSCs) were set up to produce and sell low cost waterséal latrines. By 1985, 460 VSCs had been built and now there are 1000 VSCs covering every Thana. A growing number of private producers are also selling latrine parts. Homemade pit latrines have also been promoted, since 1987, for families who cannot afford to buy the waterséal latrines. Of the families with hygienic latrine, 60 percent are of homemade type (Mitra, 1992).

Increased importance to promotion of sanitation has been given through the Integrated Approach (IA) since 1987. Tubewell applicants are encouraged to construct hygienic household latrines before tubewell installation. Seminars and inter-sectoral meetings are organized by DPHE to mobilise local government officers, field workers, teachers, NGOs, and local political and government officials.

### 1.3 Recent Sanitation Experiences

In 1990, DPHE/UNICEF decided to give a major thrust to sanitation. It was realised that the communication aspect of the programme needed to be strengthened to promote sanitation among the rural population. High level commitment combined with the assistance of other government sectors and non-government organisations were required to create a positive social atmosphere using all available resources.

An intensive social mobilisation campaign was launched in Barisal District by the Deputy Commissioner in collaboration with DPHE in 1990. Multi-sectoral seminars and monthly Thana and Union meetings were held. Village "courtyard" meetings were arranged by Thana Nirbahi Officers, with DPHE and field workers of other sectors. These field workers discussed development issues with a priority on sanitation with groups of 20-25 families. Workshops were held with high school headmasters. As a result, high school teachers and students constructed latrines in their own homes; made demonstration latrines in their schools, and visited the local community to promote sanitation. Awards were given for schools achieving high coverage. Three Thanas were involved and within 18 months, sanitation coverage rose to 70 percent in these Thanas.

Though the Barisal sanitation programme achieved high latrine coverage, several lessons were learned about implementation. Two studies were conducted on the programme, one by ICDDR'B and one by UBINIG. Their findings showed that high coverage was achieved, particularly due to DPHE staffs' active commitment, and involvement of school teachers who are respected in the community. A high level of awareness was created on the importance of using hygienic latrines to prevent environmental pollution. In some instances, an element of coercion in enforcing Public Health Law was identified as threatening to villagers, which may have an undesirable effect for sustainability. The data showed that villagers were not adequately aware of how to empty and dispose the waste when their latrine pits are full. It was observed that more communication and promotional material was needed. The studies recommended that schools should have hygiene latrines for their students. It was felt that more involvement and coordination with Imams, local political leaders, village doctors health workers and women would strengthen the programme.

In Rajshahi Division, sanitation was promoted through Primary Schools, and as a result the school children motivated their families to build latrines in their homes. The programme started in mid-1991. A survey in one District, in March 1992, showed that 10 percent of students' families had built hygienic latrines. However, in more than 50 percent, maintenance was poor.



Twenty four diarrhoea prone Thanas were selected by DPHE/UNICEF for intensive sanitation activities in 1992-93. A profile of basic data has been prepared on each Thana, including the number of NGOs, private latrine producers, schools etc. located in each of the unions within the respective Thanas, to be used for planning purposes.

In order to enhance the role of women in the IA Thanas, special seminars are held for women. The motivational works are increasing the latrine construction and usage. Thus, the average rate of sanitary latrines to new tubewells has increased from an estimated 2.1 in 1987 to 7.0 in 1992. 249 Thanas have so far been covered by IA and another 70 Thanas are being covered in the year 1992-93. All 460 Thanas will be covered by 1995.

#### 1.4 Advocacy and Social Mobilisation

In February 1991, UNICEF organised a retreat in Savar, where participants from DPHE, UNICEF, MOHFW, ICDDR'B, and NGOs discussed the problems in sanitation and drew up recommendations for an intensive Social Mobilisation Programme. From this retreat, a Technology and Training Group, and a Media and Mobilisation Group, were set up. These groups later merged into an informal National Committee for Social Mobilisation for Sanitation.

The Social Mobilisation Committee organised a National Conference on Sanitation in February 1992. As a result of high level advocacy, the Prime Minister inaugurated the conference and launched the National Sanitation Logo. MPs, top government officials, media, cultural groups, donors and NGOs attended. This created a high profile for the sanitation programme and a positive attitude and understanding of the programme at a high political level, with good media coverage. Following this, a Divisional Level Conference was held in Chittagong District.

The Social Mobilisation Committee has continued to provide a forum for sharing experiences between different sectors and NGOs involved in sanitation. For instance, a stronger sanitation component has been included in the training curriculum for CDD programme of MOHFW.

A workshop has been held with a small group of Imams to plan a national conference for Imams under the Ministry of Religious Affairs. At religious meetings, leaflets of Koranic messages on sanitation were distributed, and addresses on sanitation were made. "Pirs" (Islamic saints) have been encouraged to promote sanitation at large gatherings.

A workshop on GOB-UNICEF-NGO collaboration was held in August 1991. Participants produced recommendations on how to strengthen collaboration between GOB, UNICEF and NGOs for sanitation. Following this, some NGOs have submitted proposals for funding of special projects to give an added thrust to their sanitation promotion activities.

Recognising the need to intensify its social mobilisation efforts, DPHE established their Sanitation Circle in early 1992. This is headed by the Project Director Sanitation, and presently has two units, Village Sanitation I for implementation, and Village Sanitation II for research and development. In mid-1992, the UNICEF team was strengthened by the addition of a senior officer in the Sanitation Unit in WESS, and one consultant in PCIS.

A literature review of sanitation messages was made and recommendations made for priority messages, based on local culture. A National Logo for Sanitation was developed through formative research.

### 1.5 Needs Assessment Studies

In order to strengthen communication and training design, two studies were conducted, in late 1992, to provide the necessary background information for improving the communication strategy and training. The Needs Assessment for the Sanitation Programme was conducted by Associates for Community and Population Research (ACPR). The Sanitation Training Curricula Review/Needs Assessment was conducted by Development Planners and Consultants (DPC). They have outlined the strengths and the problems in sanitation, and made recommendations for strengthening the programme.

The ACPR study showed that knowledge of sanitation was generally poor except in a few special programme areas. Dissemination of information was highest in Banaripara, followed by NGO areas, and LA areas with more than two years intervention. Messages on hygienic latrines were disseminated more than messages on personal hygiene. Villagers mainly got information from DPHE workers, followed by NGO workers and health workers. Awareness on waste disposal after the pit is full is poor, leading to costly and unhygienic practices of emptying. Productive use of faeces would make two-pit or two-latrine system more viable. The study showed that disposal of infants/childrens faeces and washing of soiled napkins is a problem. The more latrine technology options are required for different groups of people to meet their different needs and affordability. It was noted that villagers have made useful innovations which could be used in the programme. Lack of knowledge, poverty and landlessness were found to be the major barriers. The respondents indicated that proper information and education has more long term benefit than use of coercion which tends to cause alienation. It was also found that NGOs provide a significant contribution especially in education. However, their programme and performance vary and therefore guideline policies and coordination is needed. Latrines are needed in schools, health centres and at public places.

The DPC study showed that there is a need for more intensive training and communication at all levels. A need was felt by trainers and trainees for training on hygiene education and community participation, with preference for participatory methodology in training. There is a lack of good training and communication materials. It was found that beneficiaries prefer communication designed for non-literates such as songs, dance, drama, video, films, posters, flip-charts and demonstrations, and messages through TV, Radio and public miking at bazars. The study recommended that DPHE establish a training unit in partnership with allies. It was recommended that a core training curriculum should be developed integrating software and hardware. Core materials should be developed and a Bank/Library set up for use by all involved organisations. Monitoring and evaluation should be strengthened.

## 2. DEVELOPMENT OF THE SOCIAL MOBILISATION STRATEGY FOR 1993-95

*Discussions on strengthening the programme have been on-going, leading to a series of workshops on the Social Mobilisation Strategy held in November/December 1992. Participants from DPHE, UNICEF, WHO, UNDP, ICDDR'B, ACPR, and DPC, NGO Forum and several NGOs involved in sanitation, analysed the problems, as well as the strengths of the programme, and recommended strategies for the programme for 1993-1995.*

*They identified many positive ideas and values in the village communities, on which the communication strategy can be built. These include ideas which are indigenous in the community and the available resources in the country. The group highlighted the momentum which has already been created by sanitation and social mobilisation activities, e.g.*

- *People have aspirations for a better life.*
- *A good latrine increases the prestige of the household.*
- *Education has increased and people are becoming more aware of the importance of sanitation. This creates a social pressure to improve household sanitation.*
- *Religion and culture are also in favor of cleanliness and privacy, and support sanitation.*
- *People are receptive to ideas of disposing and confining faeces.*
- *Most people are positive and sympathetic to the idea of sanitation, and women in particular need privacy.*
- *People are very receptive to participation, and are supportive of methodologies which involve their active participation.*

### *The following problems were identified:*

#### *I. Information Problems.*

- (a) *People do not know or understand hygienic practices eg. they use open defecations; latrines are joined to public water sources; latrines are generally not used by children under seven years.*
- (b) *People do not understand sanitation technology eg. they break the waterseal latrine; they do not know how to shift latrines or use faecal manure hygienically; they do not know where to buy a latrine.*
- (c) *Sanitation is thought to be a low priority by villagers and workers.*

II. *Communication design problems.*

- (a) *Messages and materials are not prioritised and standardised. Sometimes they are inconsistent, confusing, and gender biased.*
- (b) *Hardware & software are separated.*
- (c) *Messages are not always meaningful and realistic to the community.*
- (d) *Publicity, messages & materials do not reach the majority.*

III. *Communication strategy problems.*

- (a) *Poverty is a constraint & economic benefit of latrines has not been understood.*
- (b) *Coercion alienates people.*
- (c) *Communication focuses on information rather than behaviour change.*
- (d) *Strategies are not sufficiently based on existing behaviour and community needs.*
- (e) *Communication messages rely on literate mode though literacy is low in rural areas. Communication processes do not use traditional processes and networks.*

IV. *Policy Problems.*

- (a) *Policy makers & planners do not see sanitation as a high priority.*
- (b) *Budget provision for software is insufficient.*
- (c) *There is a gender bias in policy making.*
- (d) *There is insufficient coordination between Government sectors and private sector.*
- (e) *Inconsistent policy & subsidies are used by different organisations.*
- (f) *Hygienic institutional & public latrines are not available eg. at schools, clinics & public places.*

V. *Technology problems.*

- (a) *The present technology is too expensive for many families.*
- (b) *The current technology is not appropriate for all areas and needs eg. coastal belts.*
- (c) *Transport of waterseal slabs & rings is difficult and expensive.*
- (d) *Limited space is available for second latrine in some areas.*

VI. *Training Problems.*

- (a) *DPHE staff are not adequately trained in social mobilisation & communication skills.*
- (b) *Trainers are not trained in participatory training and communication skills.*
- (c) *Curricula are not systematically developed or standardised. They are not need based. Materials are inadequate and monitoring is poor.*
- (d) *Gender sensitivity is not addressed.*

*The following solutions/strategies were recommended:*

I. *Communication Design recommendations.*

- (a) *Conduct further background research on beliefs, practice & process of change.*
- (b) *Establish an Image bank.*
- (c) *Involve community in communication design and planning.*
- (d) *Develop appropriate media based on village level folk media.*

II. *Communication Strategy recommendations.*

- (a) *Promote community-based management.*
- (b) *Develop union site selection committee into Union WATSAN committee with expanded membership to implement social mobilisation at community level.*
- (c) *Hire community sanitation promoters.*

- (d) *Publicise sanitation through media competitions.*
- (e) *Modify and promote Banaripara social mobilisation approach.*
- (f) *Involve, support and network all effective allies - especially political leaders, Union Parishads, school teachers, religious leaders, NGOs, school teachers, scouts & guides, private sector.*
- (g) *Develop strategies to motivate field workers, and improve their linkage with the community through influencers.*

### III. *Policy recommendations.*

- (a) *Strengthen DPHE staff at Thana level with additional officer at SAE level and four female sanitation promoters.*
- (b) *Encourage women and social scientists to join DPHE especially as trainers.*
- (c) *Increase funds for software activities.*
- (d) *Rationalise and increase subsidies and simplify buying procedures.*
- (e) *Supply DPHE latrines at union level.*
- (f) *Conduct market research for sale of latrines, and use marketing agencies for promotion.*
- (g) *Enforce Public Health law only for the rich who can afford it and then only as an end strategy.*

### IV. *Technology recommendations.*

- (a) *Design appropriate, affordable, sustainable technology with the users, including disposal of babies faeces, community shared latrines and technology for coastal belts.*
- (b) *Promote economic use of faeces eg manure/biogas.*
- (c) *Research & promote villagers' technology innovations.*

V. *Training recommendations.*

- (a) *Establish a training unit in DPHE.*
- (b) *Train DPHE staff in communications skills.*
- (c) *Develop job specific curricula with convergence of software and hardware, using participatory methodologies and non-literate methods, including gender and community sensitivity and disaster management.*
- (d) *Develop appropriate training materials and make them accessible to partners.*

*The workshop was followed by extensive discussion between DPHE and UNICEF to select the most effective strategies and develop the methodology to implement them. This proposal was developed on the basis of these discussions.*

### 3. OBJECTIVES

#### 3.1 General Objectives

The general objectives of the GOB-UNICEF water supply and environmental sanitation programme 1992-1995 are to help the Government:

- (a) *reduce the incidence of diarrhoeal diseases and parasitic infections in children by further expanding clean water facilities, integrated with improved sanitation and promotion of personal hygiene; and*
- (b) *strengthen its national capacity to provide water supply and sanitation facilities for rural areas and urban slums and fringes in a way that will achieve the maximum possible health impact, and with particular emphasis in the underserved coastal and low water table areas, and behavioral change in sanitation and hygiene practices.*

*The social mobilisation for sanitation project forms part of this programme.*

#### 3.2 Specific Objectives

*The specific objectives of this project are:*

1. *To increase the proper and sustained use of hygienic latrines among rural families.*
2. *To increase hygienic hand washing practices.*
3. *To increase use of safe water for all domestic purposes.*
4. *To build DPHE capacity in communications.*



#### 4. OVERALL APPROACH

*Social Mobilisation will be carried out in 460 Thanas phase by phase (excluding urban areas). DPHE will implement the project through Union Parishads (who will act as the main channel) and other allies. This will be backed up by a National programme for advocacy and media. In 20 selected Thana, NGO Forum, through its partners, will work to assist DPHE in implementing the project.*

*To administer the project and strengthen the software capacity of DPHE, a social mobilization division and a communication training division will be established. The former is for preparing annual workplan, implementing and monitoring, while the latter is for developing communication skills of DPHE field staff. From SDE to tubewell mechanics, all field staff will receive two rounds of seven days training in communication skills.*

*Community involvement has been ensured at all steps from the starting point of developing the process of communication to actual implementation. A review of existing studies on communication process and strategies in Bangladesh will be undertaken. An Image Bank of existing materials will be established, and existing materials will be used as far as possible, where appropriate. Appropriate communication processes and messages will be further developed with selected villagers. These will be used to develop the core communication package, including communication and training curriculum materials.*

*DPHE field staff will support the Union Parishads who will act as the main channel to reach the people through Union WATSAN committees which will be headed by UP chairmen. Ward members and representatives from villages and different sections of the community will be the members of these committees. The strategy will be tested on a pilot basis to develop the methodology of operation. The committees will be mobilized, phase by phase, as SAE and TWMs of each thana get communication training. SAEs and TWMs will orient the committee members and will mobilise and support the committees. The committee members will encourage sanitation in their communities with the support of SAE and TWMs.*

*The on-going programme, including IA programme, inter-sectoral collaboration with education department and Control of Diarrhoeal Diseases programme (CDD), NGO activities, and other allies will continue to be supported. Additional support will be given, including research and development of the communication processes, training and technology development.*

*Several action research studies will be undertaken at different stages of the project. These will be undertaken to develop, test and modify the different strategies to strengthen the social mobilization programme.*

The programme is diagrammatically represented in Figure 1. High level advocacy at the centre creates a positive commitment and leadership for sanitation. National level alliances use existing organisations to promote sanitation through their programme communication and training with field workers and media. DPHE field level staff implement and support the programme through the Union Parishad and other field level workers. The Union, WATSAN committees and beneficiary communities are involved in research and development of the programme communication strategy and technology, and in implementing the programme.

# Social Mobilization: Sanitation for All in Bangladesh

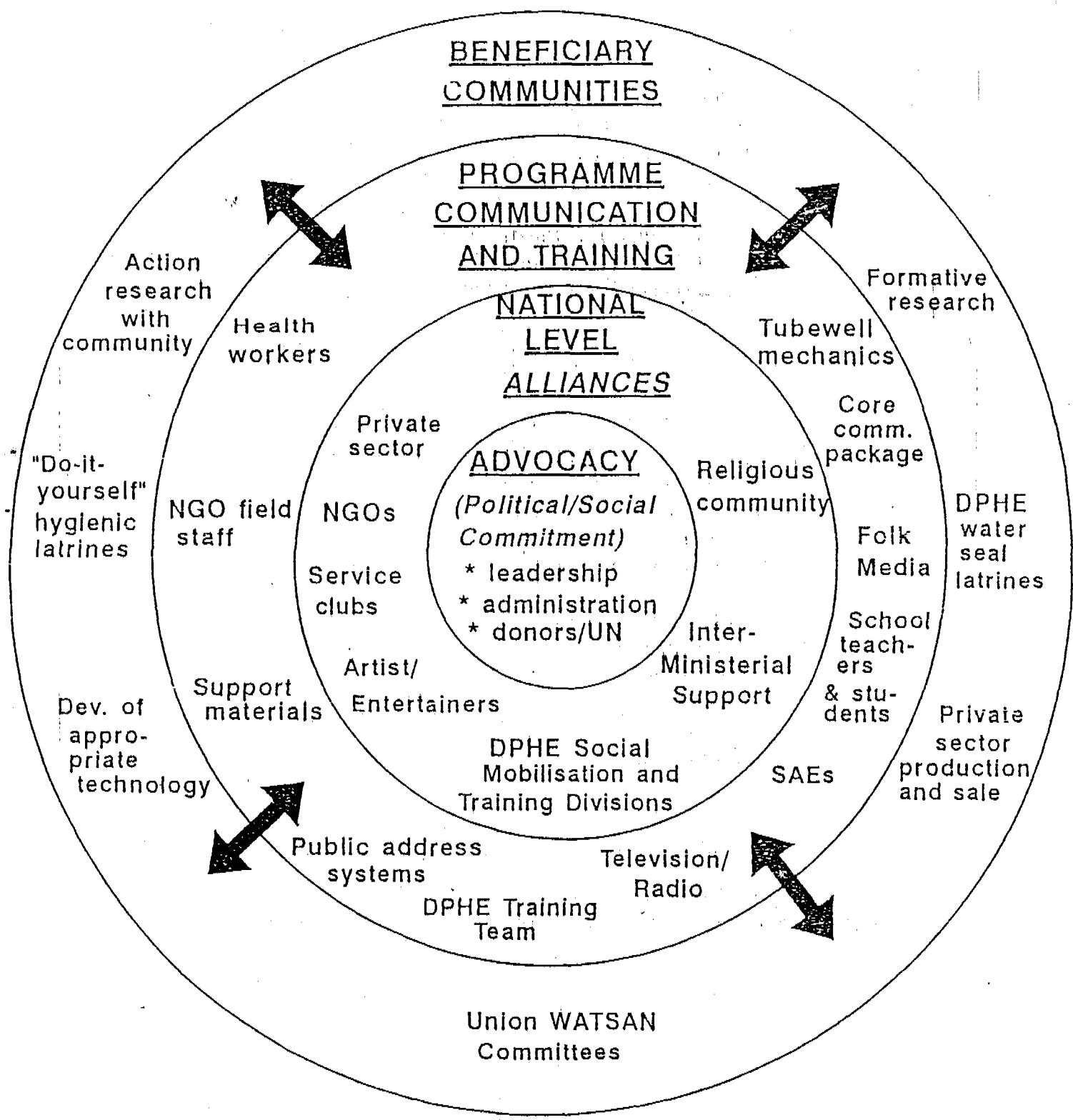


Figure - 1

## 5. COMMUNICATION DESIGN DEVELOPMENT

A major thrust of the social mobilization drive for sanitation is to strengthen the communication package in order to improve communication between workers and the target population for sustained behavioural change. A core communication package will be designed by UNICEF and DPHE with assistance from consultants. The task will be assisted by a Communication Working Group. In the development phase, background communication research, as well as technology and health research will be undertaken, including literature review and village based studies. The community will be involved in planning and development of the communication package. From the core communication the curricula for specific target groups and media will be developed.

### 5.1 Coordination:

To coordinate communication development, a working group will be formed under the Social Mobilisation Committee. The group will assist strategy, design activities and disseminate new ideas. Group members will assist development of priority communication processes, messages, and materials as guidelines to allies. They will assist standardization of priority messages for use by all allies. The group will consist of key members from DPHE, UNICEF, NGOs, Agencies, and communication consultants (refer Figure 5 Coordination Committees).

The Communication Working Group will identify agencies working in Sanitation, and the problems and gaps in communication. National core materials will be produced from the community-based development projects and disseminated to all allies. Group members will collect and edit success stories and disseminate these. They will also coordinate support from communication consultants to involved allies. When the International Training Centre is established, the project will coordinate with it.

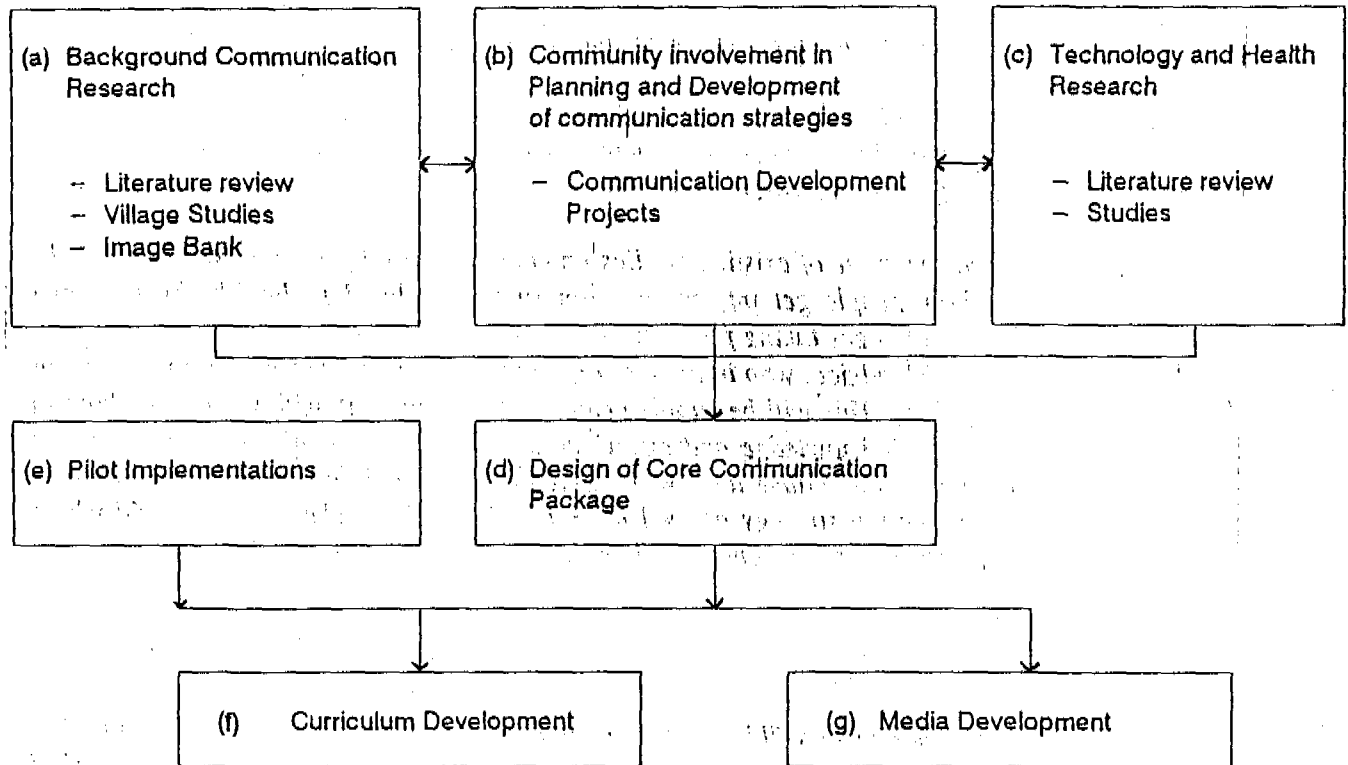
### 5.2 Communication Design Development:

UNICEF will be responsible for developing appropriate communication and training strategies and materials which are adequately field tested before being implemented on a large scale.

Design of effective communication materials and processes will involve the use of communication consultants in all stages, from development with villagers to national level. They will develop and design the strategy in close coordination with the communication working group, the social mobilisation unit and particularly the core training unit in DPHE, and UNICEF Sanitation Unit. The process of communication design development is visually represented in Figure - 2.

UNICEF will contract consultants using UNICEF procedures. DPHE will be involved in developing the Terms of Reference, and in the selection procedure.

Figure-2: Communication Design Development Process



(a) Background Research for Communication Design Development:

Literature reviews of Communication Processes and Strategies:

*Several literature reviews of overall communication strategies for population and health, and a review of institutional capacity have been conducted. These will be reviewed for their relevance to sanitation, to learn from the most effective strategies.*

*A literature review will be made of existing studies on communication processes in Bangladesh, in order to identify how people get information (on subjects related to health, hygiene and sanitation as well as on changes taking place in other parts of the country), which sources they trust, from whom they seek advice, who influences decisions and who makes decisions regarding community and family life. This will be supplemented with discussions with people working in the field to draw upon their knowledge and experiences. Thus the most effective and common communication channels at the village level will be identified. This information will be used in developing the communication strategy as well as in training field workers on how and whom to approach in the communities (March-April 1993).*

Image Bank:

*A consultant or consultant agency will be contracted to establish an Image Bank, based in DPHE Sanitation Circle, as a bank of communication materials. All involved agencies will be asked to contribute their ideas, process and materials (April-June 1993). Then, all these materials and ideas will be circulated to all with credits to contributors (July-September 1993). In this way each agency gains more than it gives. The folder will also contain advice on how to design materials. As the national core materials are produced, they will also be included (September-December 1993).*

Village Based Study:

*A small study in four villages, using anthropological techniques, to observe how women handle water, soiled clothes, faeces (human and animal), food and the practical problems they would face in following the advice given by the project, as well as their strategies for dealing with lack of privacy in fulfilling bodily needs. This information will be used to make the communication messages realistic and relevant, and to avoid alienating people by merely telling them what to do without taking into account their objective situation. The study will be conducted for two weeks in each village using participant observation, informal interviews and group discussions (March-May 1993). Follow-up in the monsoon season will be conducted in two villages to compare with the dry season (June-July 1993).*

(b) Communication Development Projects

*The communication strategy will be based on indigenous communication channels, and language, and will mobilise traditional community resources: Villagers from the target group will be involved in planning and designing the communication messages and processes as they can advise which messages and strategies will work with their people, and who will be the most effective communicators.*

*Small communication development projects will be set up to develop the strategies. These projects will be in four or five Unions in order to be representative of different geographical and cultural areas. They will be taken up by the communication consultants and core trainers in collaboration with DPHE and UNICEF field staff. Field workers will participate in the learning process. Each project will involve a small number of selected villagers workshops to design materials and processes.*

*The villagers involved will be informal natural male and female influencers selected to represent the target groups. These will be members of the target group known to be respected in their groups and interested in the welfare of their communities. They might, for example, be para leaders, or tea shop owners, or respected grandmothers or grandfathers, or people who others naturally go to for advice or support. Village level communicators and media will also be involved in developing the communication strategies, such as dramas, stories, songs etc. This could include dramatists, story tellers, song composers, drum beaters, tea shop owners and other communicators in the villages. Pilot Union WATSAN committee members will also be involved in workshops to design effective strategies for their use.*

*These projects will at first run in parallel with the background studies, with lessons learned from the studies assisting the design development process. Information gained from both the studies and the projects can be crosschecked at the same time. These projects will be set up in March 1993 and expect to be completed by July 1993. The core communication package will be designed based on these studies and projects.*

*The core communication package will be shared with these project groups and pretested in their area. They will give feedback on the effectiveness of strategies, assist in problem solving and generating new ideas.*

*Villagers advisory groups will be formed from the communication development projects as an ongoing resource in strategy development. Selected effective participants or groups will continue to be involved in evolving and modifying the communication strategies and advising on the effectiveness of ongoing strategies. They will provide the programme with ongoing linkage with the community through further meetings and workshops. It is likely that, as they become more experienced, they will become a very valuable resource for the programme.*

*(c) Technology & Health Information:*

*Appropriate technology messages will be developed. Ring and slab waterseal latrine and homemade latrines will be promoted. Particular attention will be given to the advantages of having a hygienic latrine, proper construction/installation, use and maintenance, and sustainability, including hygienic pit emptying. Hygienic hand washing practices (using both hands with ash or soap, after using latrine and before handling food) and use of safe water for domestic purposes will be promoted.*

*The communication strategy needs to be based on sound scientific and technological research. Appropriate techniques will be formulated for disposal of babies' and young children's faeces in the communication development projects. Villager's innovations in appropriate technology will be documented. A study will be conducted on homemade latrines, in early 1993, by WHO. This will look at construction, durability, use, maintenance, affordability, appropriateness and acceptability. Sanplat will be promoted if testing shows that it is an appropriate technology. Appropriate technology will be developed for offset two pit latrine systems. Depending on the families' financial status, the project will explore the viability of adding the second pit after one or two years, thereby delaying the full cost. Technology (pit size related to number of families and low cost materials) will be developed for shared latrines for the landless. These will be developed by Research and Development Section of Village Sanitation Project (March-May 1993), under the Village Sanitation Programme in coordination with the Social Mobilisation Programme.*

*Scientific health studies on sanitation will be reviewed, and new operational research conducted as necessary, to ensure the correct scientific and health basis for priority messages and technology (e.g. use of pond water and use of hand pump water for domestic purposes, most effective hand washing practices, hygienic disposal of babies' faeces, pathogenicity of faecal manure, deworming). This will be done with ICDDR'B (March-September 1993).*

*Research and Development in technology is an ongoing activity under the Village Sanitation Project. Research will continue in order to develop more affordable, socially and culturally acceptable technologies for different target groups and geographical areas, particularly for coastal areas. Possibilities for commercialisation of faecal manure will be explored to make latrines more economically attractive. Plastic pan, slab and ring models are presently being developed for testing with villagers. Plastics are light and easily transportable and may be a viable alternative to the present concrete models. They will be tested with villagers for suitability, both as slab with chute for pit latrines, and for pan and slab for waterseal options. Local potters have been making pottery pans and rings. This will be investigated to explore the feasibility for commercial promotion of pottery as a cheap and locally available technology. Further health studies will be made as necessary to ensure the health impact of sanitation promotion activities.*



(d) Design of Core Communication Package:

Based on the studies, Image Bank and communication development projects, the core communication package will be developed. Materials and processes will be designed for the non-literate to reach the majority of the target population, using local communication channels. Messages will be built on existing cultural values and practices and will consider practical constraints. There will be convergence of hardware and software education. Clear and specific messages will be developed, prioritized and standardized, focusing on positive behavior change. Messages and materials will be developed to create understanding which leads to sustainable behavior change, rather than just giving instructions.

Strategies will be specially designed to reach women. Gender awareness consultants and women's organisations will be involved in assisting communication development. Gender balance will be promoted in materials and processes.

The core communication package will be developed by September 1993. Pretesting will be completed by November/December 1993.

Ongoing development of the communication strategy will follow implementation, further research & development, and action research studies. Consultants will be given short contracts as necessary for further development work.

(e) Pilot Implementation

Pilot WATSAN Committees

Union WATSAN committees will be established gradually after January 1994. However, the strategy will be tested on a pilot basis in 1993 in 16 Unions. Orientation will be given to four SAEs and their TWMs in each of four Divisions, by DPHE District staff and UNICEF field staff with support from DPHE Sanitation Circle and UNICEF Sanitation Unit. The SAEs will each establish one Union WATSAN committee in their area. They will be supported by UNICEF Divisional staff (one UNICEF field assistant per Union) and the core training group. Through this experience the methodology for supporting the committees will be worked out, problems assessed, and solutions developed, which will be incorporated into the training curriculum of the SAEs and TWM communication training courses. (April-December 1993).

Pilot Village Support through TWMs

Each Tubewell Mechanic (TWM) will select one or two villages in consultation with the concerned Sub-Assistant Engineer. At the beginning, the TWMs will collect basic data related to water use and sanitation. They will try to understand the villagers and help and support them to solve their problems related to water and environmental sanitation. They will motivate the villagers to use safe water for all purposes, practice hygienic hand washing and use hygienic latrines. To do this, each TWM will choose one male and one female villager as focal points. Their experience will be assessed during the training sessions. This will help them to identify the problems which need to be addressed. (April-December 1993).

(f) Training Curriculum Development :

Curriculum development will be based on the core communication package. The consultants involved will preferably be from the same agency as the design consultants and they will work closely together. The core training team will work with the curriculum consultants to design the curriculum package. The curriculum should be finalised by November 1993.

Appropriate standardized core training curriculum will be developed with job specific training and materials. Curriculum will be developed related to service delivery, and messages will be designed to be practical and implementable.

All trainings will use participatory approach. Trainees will be taught communication skills, how to run participatory workshops, and will be sensitised on community and gender issues. Community level planning and monitoring will be included. Non-literate communication processes will be used in training. Communication research and development skills will be included.

Integrated approach (IA) and caretakers training curricula will be modified and improved to incorporate the key elements of the core communication package.

(g) Media Development:

Appropriate media, will be developed, based on the communication package developed in the community based projects. Folk media will be developed with groups who have experience in designing folk media for development e.g. folk poets and musicians and drama groups. These will be taken up in the National media which will be used as a back-up to reinforce other strategies, and will complement campaigns to reinforce messages. Over two years, workshops will be held at Divisional/District level for local folk drama groups, poets and musicians to orient them and encourage them to incorporate sanitation in their shows.

National media are very interested in using materials on development themes. National and local media personnel and agencies including journalists will be oriented on sanitation by UNICEF (PCIS). Sanitation stories will be regularly provided to them (for TV/Radio/News papers/Magazines). Appropriate materials will be produced for "Three Minutes for Children" which is both a TV and radio programme on social themes in prime commercial time. Success stories in communication research and strategy development will be documented for the media, and existing films will be shown e.g. "Paribartan" and "Arayaga Niketan". Video films will be produced on demonstrations, and on village stories. Radio stories related to village life will be developed. Slogans will be developed for TV and Radio. Film stars and sports stars will be used to promote sanitation and hygiene behavior.

As TV/Radio has a large audience among the middle class, the programmes will be designed to promote positive attitude and respect for villagers and to portray good role models for field workers, to enhance the development process. Gender equality will also be encouraged.

National Magazines and other local Magazines on Water, Sanitation, Health and Education will also be used to promote sanitation. The possibility of using consumer products to carry sanitation and hygiene related messages will be explored. Other existing resources will be used such as local magazines, mobile audio-visual units of the Information Department and commercial agencies.

## 6. DPHE CAPACITY DEVELOPMENT

In the recent years, the DPHE has given higher priority to the promotion of sanitation. However, with the expansion of the sanitation programme, it is recognised that the DPHE infrastructure and capacity need to be strengthened to meet the new challenges, particularly in the non-engineering aspects. It is planned to significantly enhance the communication skills and information base of the DPHE staff to make them more effective programme implementors. A Social Mobilization Division and Communication Training Division will be established under the Project Director of Village Sanitation. The Social Mobilization Division will coordinate the overall sanitation activities related to the software aspects. The Training Division, with the support of training consultants, will form the core training group which, after their own orientation by UNICEF and DPHE, will train DPHE staff at all levels (Figure-3).

### 6.1 Strengthening of DPHE Infrastructure for Social Mobilisation

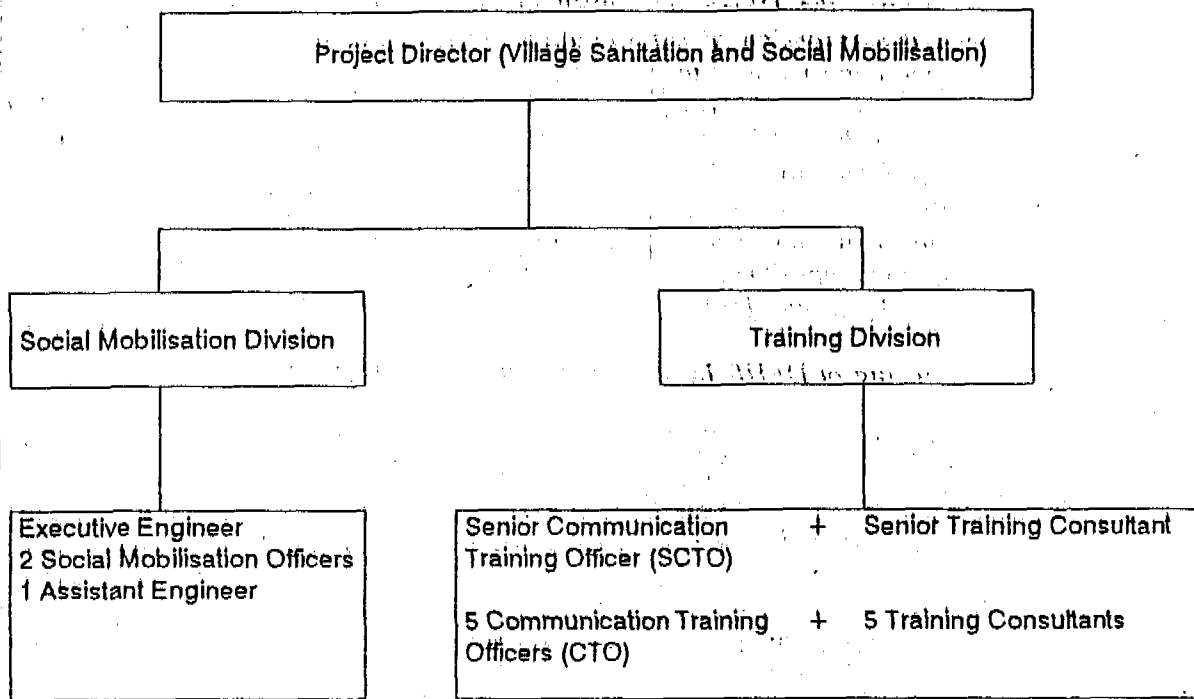
DPHE organisational study will be conducted in the first half of 1993. In this context, the structure for supporting social mobilisation and communication will be explored and recommendations developed to strengthen DPHE capacity in these roles. However, in the interim, in order to start the social mobilisation project, the following posts will be established immediately.

To administer the project and strengthen the "software" capacity of DPHE, a Social Mobilisation Division and a Communication Training Division will be established with GOB project funds under the Project Director (Village Sanitation). All posts will be financed by DPHE, and filled by June 1993, so that the staff are available to participate in the development of project activities.

The Social Mobilisation Division will be headed by an Executive Engineer, who will be responsible for implementation and monitoring of the project. An Assistant Engineer will be appointed to assist the Executive Engineer in technical and administrative issues, and two Social Mobilisation Officers, with social sciences/communication background, will be appointed to assist in software issues.

The Training Division will be established with one Senior Communication and Training Officer (SCTO) with a social sciences background appointed at a level equivalent to an Executive Engineer, to be responsible for training. Five Communication Training Officers (CTO) with a social sciences background will be placed under the SCTO, and posted in the Offices of the Superintendent Engineers in the five GOB administrative divisions. They will have the rank of SDE. The SCTO and five CTOS will each be supported by a training consultant. In each of the five SEs offices, the CTO and the training consultant will form the core training team and be responsible for organizing and implementing all training activities related to the social mobilisation project. These five training teams, along with the SCTO and consultant, will form the core training group. They will all initially be placed in Dhaka in order to participate in developing and testing the communication strategy, training curricula and materials, and also to ensure a common approach to the task. Once this is done, they will move to the divisions (Figure-3). Communication equipment will be procured for communication and training activities in each Division (5 TV/VCR, 5 Cassette Tape Recorders; 5 Overhead Projectors,

FIGURE-3 : SOCIAL MOBILISATION ORGANOGRAM – DPHE



5 Slide Projectors), Office Equipment for Headquarters and Divisions will be procured (6 Computers, 6 Photocopiers); and Motorcycles will be procured for each Division (5 Motorcycles) for provide transport for the training group.

As communication will be the responsibility of all DPHE field staff, the Health Educators role is seen as supportive to the field staff. To operationalise this, the Health Education staff are being relocated to District level and they will provide support to Thana level staff in communication strategies and in running workshops. Previously Health Educators worked in teams of three (Health Educator, Health Assistant and Projectionist). However, DPHE has decided to relocate them individually to District level so that they can give more support, each taking responsibility for a smaller area. Their roles will be defined more precisely in the next few months. They will receive training for their new responsibilities under this programme. They will be under the SDE/EE at the District, though the Chief Health Education Officer will be the overall responsible officer. Under the organisational study, the role of health educators, their strength, and development of their career structure will to be examined.

#### 6.2 Development of Communication Skills of DPHE Field Staff

The main strategy of the DPHE programme will be to increase the motivation and communication skills of field staff as well as their levels of information regarding sanitation and hygiene and their sensitivity to community and gender issues. Field staff will then be expected to activate Union WATSAN committees, widen their membership as appropriate through the involvement of local influencers (local leaders, government employees such as school teachers and health workers, NGO workers, etc.) and work in cooperation with them to promote hygiene and sanitation.

#### Training of Trainers

The core training group will be oriented by UNICEF, DPHE staff and design consultants (June-August 1993). They will participate in development of the core communication package and the training curriculum. They will also be given further training in participatory training techniques through training workshops organised in Dhaka. UNICEF Divisional staff will be oriented by UNICEF Sanitation Unit, DPHE core training group and design consultants (September-October 1993).

#### Orientation of DPHE Staff

Once the core communication package has been developed, orientation courses will be conducted for all DPHE Field Officers, Sub-Assistant Engineers and Health Education staffs. For all territorial Superintending Engineers, Executive Engineers and Sub-Divisional Engineers, three-day orientation workshops will be arranged in four groups (September/October 1993). Next, three-day orientation workshops will be arranged for SAEs and for health education staff in twenty groups (October/November 1993). These workshops will help them to understand the project concept, objectives, methodology and their role in implementation.

### Training of DPHE Staff

All 71 SDEs, 460 SAEs, 60 Health Education staff and 1840 Tubewell Mechanics (TWMs) will receive two rounds of seven days training in communication techniques as well hardware and software aspects of hygiene and sanitation. The training will emphasize the need to increase levels of information and understanding within the community regarding hygiene, sanitation and health rather than focus on instructing people on what to do through messages. In the training workshops, they will plan how to support the Union WATSAN committees, run courtyard meetings, and support sanitation implementation at the village level. The second training will be held four to six months after the first training, and they will review their programme, analysis success and failures, and develop solutions and plans for further implementation.

All training and management workshops will be carried out using a participatory approach, and the number of participants will therefore normally be limited to around 20-25 per session. Communication training for SAEs, Health Education staffs and TWMs will be conducted for each district phased over 18 months (January 1994 - June 1995). Communication training workshops for all SDEs within an administrative Division will be conducted in each Division. All the communication training workshops will be arranged at administrative Division HQ. Trainings will be conducted by core trainers in each Division, supported by SDEs. After the first training course, the SAE will mobilise and support Union level WATSAN committees for implementation of the project at community level.

Village Sanitation Centres (VSC) masons will be trained at District level by SDEs, HEs & SAEs in 3 day workshops. This will cover installation, maintenance, pit emptying and hygiene and sanitation education.

Arrangements will be made for field staff<sup>3</sup> to visit areas where social mobilisation is working well and to share experiences. Arrangements will also be made for staff to attend conferences and for study tours to other countries when appropriate.

## 7. SUPPORT TO ALLIES

DPHE will promote sanitation through field level workers at VSCs and at community level. However, to reach the majority, and to make a significant impact in social change, it is necessary to involve other organisations and personnel who have linkages with the community and are interested in promoting positive approaches to social development; behaviour changes will be achieved through motivation and education of the communities. All possible effective resources, organisations, personnel and networks will be explored as potential for DPHE partners in social mobilisation. DPHE will provide technical support to these partners in implementation. Work has already been initiated with much success and the programme will build on these strengths, using the most effective organisations and strategies.

### 7.1 Advocacy:

Advocacy to promote the importance of sanitation and to support the social mobilisation process will play a very important role in raising the priority on sanitation. The aim is to promote sanitation, by making it a natural topic of discussion and breaking down taboos. This helps to build an atmosphere of acceptance and to create positive associations with sanitation. These concepts help to seed the idea, as well as providing the motivation to actually put the idea into practice. It helps to mobilise allies involvement, as it is seen as a useful and good activity to promote, and to be seen to be involved in. It also encourages field workers that their work is worthwhile and appreciated.

It is proposed to seek the support of political leaders to promote sanitation, including Members of Parliament at national level and, in selected Thanas, the local political and elected leaders. They will be invited to open events, workshops, orientations etc.

To create publicity, a few competitions will be held, such as competitions on paintings, essays, photographs, debates, and school quiz/competitions. A postal stamp on sanitation with Sanitation Logo on the first day cover is proposed. Manufacturers will be encouraged to use their advertising and consumer goods to carry sanitation and hygiene messages. Posters and bill boards and other media will be used in strategic public places.

Performance awards will be given at different levels (e.g. individual, institution, area). Incentives will be given to areas achieving high coverage. These would act as publicity and provide encouragement/motivation. These will be given for quality programmes, not only for high achievement of latrine construction.

District level one-day orientations will be held in each District after SAE/TWM training to orient District level key officials to the project and gain their support for involvement of their staff. These will be organised by the Executive Engineer/SDE of the District. Participants will include District level officers of MOHFP, BRDB, Womens Affairs, Education, Social Services and NGOs etc. Similarly Thana level orientations will be organised by the SAEs to orient Thana level officials.

## 7.2 Involvement of Union Parishads

Union Parishads are the lowest level of local government, each covering 10-15 villages. Each Union Parishad consists of one elected chairperson, nine elected members and three selected female members. The new government structure decentralises representation to the Union level for more effective community involvement and participation in the governing process. The GOB is committed to promoting and supporting increased involvement of these Parishads in development and social activities. Various activities related to villagers depend on the active participation of these Parishads.

The Chairmen and Members of these Parishads are influential in their areas. Also, villagers themselves, they know the style of living, behavioral patterns, language and day to day life of the villagers. With their influence and understanding, they can play an important role in motivating and mobilising their communities. It is therefore believed that Union Parishads have the potential to be effective in implementing social mobilisation for sanitation at the community level.

### Orientation of Union Parishad Chairmen

One day Orientation of Union Parishad Chairmen will be held to orient them to the project. DPHE staff from Dhaka and District Offices will hold these orientations in each District. This is planned for November 1993 after orientation of DPHE District and Thana Officers (EEs, SDEs, SAEs and Health Education).

The Union Parishad Chairmen and SAE will brief their Union Parishad Members and they will be encouraged to discuss sanitation at village meetings, in their homes and informal groups.

### Union WATSAN Committees

The responsibilities of the Union site selection committees will be increased to include promotion of sanitation, their membership will be increased, and their name will be changed to Union WATSAN committees. These WATSAN committees will be activated in each District after training of the SAEs and TWMs. The SAE will be responsible to mobilise the committee and to provide necessary support. He will act as Member-Secretary of that committee. Each SAE will cover, on average, about ten Unions. TWMs will attend the committee meetings of the Unions which they will cover for sanitation.

The Union Watsan Committees will be activated in each Thana in a phased manner. Two Unions will be taken up in each Thana after the first phase of SAE/TWM training. The quality of the programme will be monitored carefully and adjusted accordingly as necessary.

The Union WATSAN committee will consist of the following:

1. Union Parishad Chairman.
2. Ward Members (9 elected Members, 3 Selected Women Members).
3. One female representative from each village.

and active and socially committed representatives will be selected from among the following:



4. Health workers.
5. BRDB cooperative workers.
6. Headmasters of Primary/High Schools.
7. Representative from local NGO working in WATSAN activities (if any).
8. Active social and religious leaders.

The success of the committees will depend on the quality of local leadership, as well as the support from DPHE field workers. Therefore the criteria for selection of non-elected committee members will be most important. This will be developed during the pilot phase. The representatives will be selected by the SAE in consultation with the Union Parishad Members. One woman will be selected from each village. Each field worker will choose one village to support intensively.

The actual number of members and composition on of the committee will vary from place to place depending on local leadership. It expected to have about three representatives from each village, one man, one women and one field level worker. These will be link persons for the SAE and TWMs in their respective villages. The SAE/TWMs will assist committee members to construct hygienic latrines at their own houses. They will regularly visit the members in their villages to provide technical support and assistance for sanitation.

A one day workshop will be held by the SAE and TWMs to orient the committee members on the project and to plan their involvement. It is expected that members will discuss sanitation at village meetings, in informal groups, and in their homes. Male members will encourage the men of the community and female members will encourage the women. Headmasters will encourage teachers and students, and cooperative leaders will encourage their group members. NGO workers will promote and support sanitation among their target group.

The committee members will organise, with the SAE, mobile production and sale of latrines at Union level, when there is sufficient local demand. They will make demonstration latrines in front of the Union Parishad Offices. As this is a public place it means many people will be able to see how to make a latrine and also it will give importance and status to the construction of latrines. They will organise courtyard meetings at the village level with SAE/TWM and other government field workers to orient community members. They will encourage school headmasters/ management committees to organise school meetings and will participate in these meetings.

Follow up workshops will be held quarterly to review progress, discuss successful strategies, gain new information, solve problems and plan the next quarter's activities. Between workshops, members will informally gather information on the hygienic practices in their community and monitor behavior changes. This community monitoring will be introduced step by step (e.g. firstly latrine coverage and use, then hand washing practices, then use of safe water). During the review workshops, they will plan the next quarter's activities and village visits of the SAE/TWMs.

Integrated Approach (IA) has already covered 249 Thanas and will cover all Thanas by 1995. IA seminars at District, Thana and to a limited extent at Union level have already created awareness and interest in sanitation. Building on this interest, Union WATSAN committees are seen as a second phase of social mobilisation to operationalise actions more intensively at the Union and village level. IA was taken up Thana-wise and Union WATSAN committees will be taken up District-wise. However, as far as possible, Union WATSAN committees will be

activated phase-wise in Thanas which have already completed orientation through IA. All Thanas will be covered by 1995.

### 7.3 Inter Sectoral Collaboration:

Inter sectoral collaboration will be encouraged for social mobilisation for sanitation between DPHE and all concerned Ministries. Convergence of programmes will be encouraged.

MOHFW National Control of Diarrhoea Diseases Programme (CDD) has included sanitation as part of CDD core curriculum for the prevention of diarrhoeal diseases. Sanitation will be encouraged in other Health Programmes. A directive has already been issued asking all Health Assistants and Family Welfare Assistants to install hygienic latrines in their own houses.

Sanitation will be promoted in ORT corners. As part of EPI Plus strategy, sanitation will gradually be phased district-wise into educational inputs at MCH/Immunisation sessions at outreach sites, and demonstration latrines will be established at these sites on pilot basis.

School latrines act as demonstration, provide a necessary facility, and establish good sanitation habits in children and encourage girl child attendance, if they are well maintained and properly used. GOB/UNICEF have initiated a programme of sanitation in Primary Schools in 16 Thanas for constructing latrines and training in motivation for use and maintenance. It is planned to expand the programme to cover more schools in subsequent years. Although this programme is not included under this proposal, it will link with promotion activities.

In coordination with the Ministry of Womens Affairs, sanitation will be promoted through womens organisations.

### 7.4 Non-Government Organisations (NGOs):

NGOs have the advantage of strong involvement at the community level through their field workers. Many NGOs are already promoting sanitation. Linkages between DPHE and NGOs will be strengthened for partnership in social mobilisation for sanitation. The Social Mobilisation Committee will network NGOs working in sanitation.

NGOs have established close relationships with villagers through their development work. They can provide house-to-house motivation and group discussions through their field workers, to supplement the limited staff of DPHE. NGOs will be encouraged to increase the quantity and quality of their sanitation activities. DPHE Thana staff will provide technical assistance. Womens' organisations will be increasingly encouraged to be involved in order to promote and support sanitation effectively among women. The core communication package will be shared with all NGOs working in sanitation. Support will be given for orientations, training of trainers and communication materials.

NGO Forum is an umbrella group for NGOs working in Water and Sanitation, and supports about 350 small to medium sized NGOs. At present their training group consists of one Chief Trainer and four trainers funded by SDC/DANIDA. Of these, the four trainers are all engineers, and trainings mainly focus on technology. It is proposed to strengthen their communications training by supporting two additional trainers who are experienced in participatory training and communication skills. NGO forum will support one more software trainer. They will train their partner NGOs in the core communication package for sanitation.

SDC/DANIDA is bilaterally supporting NGO Forum to strengthen its capacity for supporting NGOs in Water and Sanitation and some social mobilisation activities. Additionally the project will assist NGO Forum to support NGOs in 20 Thanas (7+7+6) for intensive social mobilisation activities phased over three years.

Under a DPHE/UNICEF/NGO Forum contract, these NGOs will carry out house-to-house motivation and inter personal communication through their field workers. They will organise meetings with community leaders and promote publicity and a variety of communication strategies in their areas. They will assist with operation research on communication strategies. The project will support field level supervision and extension workers, training, communication materials, transport monitoring and evaluation. Baseline surveys will be conducted in each of the Thanas through or with the respective NGO, and evaluation surveys will be conducted to analyse the impact.

#### 7.5 Religious leaders

Religious leaders can be good motivators for sanitation. A conference for Imams is planned for March 1993 under the Ministry of Religious Affairs, in which sanitation will be a major component. Research is going on to plan the messages from the Koran for a communication kit for Imams. Further workshops will follow. Imams can preach on sanitation on Fridays and discuss sanitation during house visits. Other religious leaders will be approached to develop their involvement.

#### 7.6 Service Clubs, Scouts and Guides

Service clubs such as Rotary, Lions etc. are already promoting sanitation, and have taken up various community projects with their own resources. Interested service organisations will be supported in their activities with communication and training materials and training of core trainers, to promote sanitation through their members. Scouts and Girl Guides organisations are interested to promote sanitation. It is proposed that scouts/guides with no latrine at home can be motivated to make one at home. Those who have a latrine at home can motivate a close relation, and their leader and team can assist them in construction. They would receive a badge for sanitation. Already a national workshop has been held with Scouts, and divisional workshops are planned.

#### 7.7 National Coordination Committees

Networking and coordination will be most important to make the maximum benefit of the mobilisation of many departments and organisations. It is felt that a committee is needed at the highest national level to coordinate. Therefore, a Coordination Committee will be set up at Secretariat level for inter-sectoral coordination. At DPHE level, the Social Mobilisation Committee will coordinate DPHE and involved allies. Working groups will be set up under the Social Mobilisation Committee for specific issues (e.g. Communication Working Group). It is envisaged that the Coordination Committee would meet half-yearly, the Social Mobilisation Committee two-monthly, and working groups as needed. (refer 12.3 Role of Committees and Figure 5).

## 8. ACTION RESEARCH

*A number of research activities will be made in order to test and evaluate different strategies for social mobilisation. After careful evaluation, successful strategies will be expanded to enhance the effectiveness of the programme.*

*In the Barisal area, a number of combined strategies resulted in a high level of community awareness and sanitation coverage. These strategies included motivation by school teachers, courtyard meetings by Thana Officers, and involvement of Union Parishads. Union Parishads will be involved through the Union WATSAN committee which will be carefully monitored and evaluated. The school programme and courtyard meetings will be separately tested and assessed through action research studies. Three other new strategies will also be tested and assessed for their potential to strengthen the programme.*

*The following activities will be tested, monitored and evaluated in selected areas.*

- 1. Training of school headmasters.*
- 2. Courtyard meetings.*
- 3. Training of private producers in sanitation education and communication.*
- 4. Influencers workshops.*
- 5. Community sanitation promoters.*

*A baseline KAP study will be conducted, including key indicators, in each study area. Regular monitoring will be done by DPHE and UNICEF field staff, with designed monitoring format to assess process indicators. After one year, an evaluation study will be carried out to evaluate process and KAP key indicators. Five Thanas, one in each Division, will be selected as controls where no intervention will be implemented. Baseline study and evaluation will be conducted by an independent research agency.*

### 8.1 Training of School Headmasters

*Training of school headmasters have already been carried out in some districts of Khulna and Rajshahi division, with some success. In Khulna two districts have been covered. In Jalokati District 58,890 students from 260 primary and high schools reported 47,113 latrines constructed. In Barisal District 540 high schools reported 117,000 latrines constructed by 158,000 students. A small cross check by UNICEF, DPHE and Education field staff, showed 70% were well maintained. It is felt that the strategy has potential, as school teachers can be good mobilisers and social motivators.*

*5 Thanas in each Division will be taken up for this programme. Lessons learned from Khulna and Rajshahi will be incorporated. Training curricula and materials will be developed in late 1993, based on the core communication package and adapted for schools. Training programme will be organised with Education Department, DPHE and UNICEF to orient Thana level Education Officers and headmasters. Headmasters will organise construction of demonstration latrines in their schools and train teachers to motivate students to build hygienic latrines at their homes. In some Unions, only High schools will be covered; in some Unions only Primary schools will be covered; and in some Unions both will be covered, to compare effectiveness.*

SDE & SAEs will conduct the training workshops for headmasters. TWMs will participate in the workshops, and will follow up with teachers to support the school programme. SDE, SAEs and TWMs will be trained in communication skills, and they will activate two Union WATSAN committees before launching the school programme. The Unions with WATSAN committees and school programme can then be compared with these with only the school programme. They will be trained specially for this programme by the design consultants, in one training in each Division.

Record keeping will be designed based on process indicators and selected key indicators. The schools will maintain monthly progress reports on the cards supplied to the Head Teachers during the Thana level training. The Assistant Thana Education Officers will collect information from schools and will forward quarterly progress reports to the Thana Education Officers. The Thana Officer will forward consolidated reports to District Education Officers (with copy to SAE of the DPHE) who will forward consolidated reports on Thana basis to the SDE of DPHE, UNICEF Divisional Office and Deputy Directors of Education.

The Thana Education Officer will hold a quarterly meeting with Headmasters, inviting the participation of the concerned SAEs and UNICEF Divisional Officers to assess progress. Training will start in April 1994 and evaluation will be made in May 1995.

### 8.2 Courtyard Meetings by Thana Officials

In Barisal District, in 1990, Courtyard Meetings were organised by the TNO with Union Parishads as part of social mobilisation for sanitation. Thana level government staff of various sectors (DPHE, Health & Family Planning, BRDB, Education, Agriculture etc.) held meetings in village courtyards at the centre of a cluster of households. Various development issues were raised by the villagers and discussed with the team. One of the main issues was sanitation. This approach combined with the involvement of the High Schools, contributed largely to the success of the Barisal experience. However, the effect of these courtyard meetings as independent strategy, has not been assessed.

Therefore this will be replicated in one Thana of each Division. Courtyard meetings will be held in each Union, organised by the Union WATSAN committee. Follow up will be done by SAE and TWM. These will be started in March 1994, after the SAEs and TWM have had their first training. They will be evaluated in March 1995.

### 8.3 Private Producers

A national situation analysis of private producers, and research on marketing strategies in selected Thanas will be conducted under the Village Sanitation Project in 1993.

In one District in each Division, private producers of rings and slabs will be oriented to give hygiene education and advice on use and maintenance of latrines when they are selling the units. This is expected to raise their status as well as to improve their effectiveness. The possibility of private producers selling other sanitation products such as soap, brushes, smokeless stoves will also be explored.

Training will be held at District level by DPHE staff and followed up by the Thana SAE and TWM. There are expected to be about three to five private producers per Thana, i.e. about thirty in one district. Workshops will be held in August 1994.

#### 8.4. Influencers Workshops

Linkages between community and field workers (GOB or NGO) need to be strengthened. Though the Union WATSAN Committees will provide some linkage, a further strengthening of this link will be piloted with village level influencers from the target groups. These influencers will be similar to the influencers which will be used in the communication development projects. They will be the natural leaders, the elder or respected men and women from the majority of the rural population, the poor farmers or labourer's families. This is seen as a possible third phase of social mobilisation, after Union WATSAN Committees, which will build closer and more intensive link within the community. This will be done through workshops with these influencers on a pilot basis in four Unions. During these workshops, the influencers will share their beliefs and practices and the DPHE staff will share information on technology and health science. Based on the sharing of these two cultures, traditional and modern, together they will work to develop appropriate communication strategies for their area, which combine both traditional values and modern scientific values.

After the workshops, the influencers will share these ideas and new knowledge with their communities. DPHE staff will use these strategies in other areas and will report these strategies to their supervisors.

Forty influencers (50% male 50% female) will be selected in each union, and two workshops will be held with 20 participants each. These will be followed up with field visits by SAE and TWMs to support implementation at community level. Influencers will provide a personal link between the community and the DPHE staff for their more effective integration in the community. The workshops will be organised by the SAEs and TWMs, with assistance from the core training teams and UNICEF field assistants.

The strategy will be carried out in four Unions, one in each Division, starting in July 1994, in Unions where the Union WATSAN Committees are already well established. Evaluation will be done in May 1995.

#### 8.5 Community Sanitation Promoters

From January 1994, on a pilot basis, one Sanitation promoter will be engaged in each of 50 Unions in one Thana of each division, on a contract basis, from local unemployed women. Their function will be to motivate people to use tubewell water for all purposes, practice hygienic hand washing and use hygienic latrines. They will also promote sale of waterseal latrine produced by DPHE. 50 percent of promoters will work under the direct supervision of SAE in Thanas where Union WATSAN committees have not been activated, but the SAEs and TWM will be given training in communication skills. 50 percent will work under Union WATSAN committees supervision, with technical and administrative support from SAEs. The two administrative strategies will be compared. A monitoring format will be designed for supervision and monitoring. GOB will fund a further 50 community sanitation promoters (male) and their performance will be compared with the female promoters.

*In January 1995, a mid-term evaluation will be done. If the findings are positive, more unions will be included. The actual number of unions to be included will depend on the findings of the evaluation. Otherwise the programme will continue with necessary changes and modification till June 1995.*

8.6. *Other pilot studies*

*As a result of the communication design development process, other potential intervention strategies may be identified. These will be assessed and viable options tested in small pilot studies.*

## 9. ACTIVITIES AND OUTPUTS

ACTIVITIES	IMPLEMENTATION	EXPECTED OUTPUTS
<b>1. COMMUNICATION DESIGN DEVELOPMENT</b>		
1.1 Establish and Support Social Mobilisation Working Group	UNICEF	1 Working group to assist communication design development.
1.2 Contract communication design consultants	UNICEF	2 Consultants for 9 months to assist design of communication core package.
1.3 Undertake background research	Consultants	Research undertaken to provide Background for communication design development.
1.3.1 Literature reviews of communication process and strategies ✓	Consultants	1 Review report on existing studies.
1.3.2 Image Bank ✓	Consultants	One Image Bank for Sharing of materials between organisations.
1.3.3 Village based study ✓	Consultants	Study report on Village life related to sanitation.
1.4 Undertake Communication Development Projects(five)	UNICEF/DPHE & Consultants	Community based communication strategies. ✓
1.5 Develop appropriate health and technology messages		
1.5.1 Design two pit latrine systems ?	DPHE	Two-pit latrine design.
1.5.2 Design shared latrines. ?	DPHE	Shared latrine design.
1.5.3 Document villagers technology innovations ?	DPHE/UNICEF	Material for manual and video.
1.5.4 Scientific health studies (five)	ICDDR'B	Scientific basis for message design.
1.6 Design and Produce Core Communication Package		
1.6.1 Design package	UNICEF/DPHE Consultants	Core communication package produced for DPHE and allies (manuals, leaflets, posters, videos, etc.
1.6.2 Pretest package	UNICEF/DPHE Consultants	- do -
1.6.3 Print materials	UNICEF	- do -
1.6.4 Further development studies (as necessary).	UNICEF/DPHE Consultants	- do -
1.6.5 Further printing of materials	UNICEF	- do -



1.7	Pilot Implementation		
1.7.1	Pilot Union WATSAN Committees (16)	DPHE	Design of operation methodology for WATSAN committees.
1.7.2	Pilot Village Support through TWMs (3680 Villages)	DPHE	TWM gain experience of supporting villagers in sanitation, & identify problems as a basis for their training.
1.8	Design and Produce Training Curricula		
1.8.1	Contract curriculum consultants (2x6 months)	UNICEF	2 Consultants for 6 months to assist curricula design.
✓ 1.8.2	Develop Curricula	UNICEF/DPHE Consultants	Curricula designed for DPHE and allies.
1.8.3	Print materials	UNICEF	Training manuals and materials printed.
1.9	Develop Appropriate Media		
1.9.1	Folk media development	UNICEF/DPHE Consultants	Folk media developed for communication media.
1.9.2	Folk media workshops (20 workshops)	UNICEF/DPHE	10 Workshops per year over 2 years to orient folk media.
1.9.3	Media orientations (national and local) (16)	UNICEF/DPHE	16 Media orientations.
1.9.4	TV and Video films and spots	UNICEF/DPHE	Video films and TV spots developed and shown + 2 films reproduced.
1.9.5	Radio stories	UNICEF/DPHE	Radio stories developed & broadcast.
1.9.6	Stories for newspapers/journals	UNICEF/DPHE	Stories published.
1.9.7	Use of existing mobile audio visual units	DPHE	Mobile audio visual units hired to show films in rural areas.
2.	<u>DPHE CAPACITY DEVELOPMENT</u>		
2.1	Strengthen DPHE infrastructure		
2.1.1	Establish Social Mobilisation Division	DPHE	Social Mobilisation Division to Administer Project.
2.1.2	Establish Training Division	DPHE	Training Division to conduct Training.
2.1.3	Contract Communication Training Consultants (6)	UNICEF	6 Training consultants to support DPHE Training Division
2.1.4	Procure communication equipment	UNICEF	TV, VCR, Cassette player, Overhead Projector, Slide Projector, screen for each Division (5 sets).

2.1.5	Procure office equipment	UNICEF	6 Computers, 6 Photocopiers.
2.1.6	Procure motorcycles (five)	UNICEF	5 Motorcycles.
2	Develop DPHE staff communication skills		
2.2.1	Training of trainers	UNICEF/DPHE	2 Workshops to train core training group.
2.2.2	Training of UNICEF Divisional Staff	UNICEF/DPHE	1 Workshop to train UNICEF Divisional Staff.
2.2.3	DPHE staff orientations		
	- SE, EE, SDE Orientations (4 groups)	DPHE	4 Orientations of management staff.
	- SAE, HE Orientations (20 groups)	DPHE	20 Orientations of SAEs & HEs.
2.2.4	DPHE Staff training		
	- SDEs Training (5 Divisions)	DPHE	5 Workshops for SDEs in communication skills.
	- SAE, HE, TWM Training (64 Districts) (100 Workshops)	DPHE	100 Workshops for SAE, HE, TWM phased over 18 months (Jan 94 - Jun 95) for training staff in communication skills.
2.2.5	DPHE VSC Masons Training	DPHE	1000 Masons trained in Sanitation Education
	<u>SUPPORT ALLIES</u>		
1	Promote sanitation through advocacy		
3.1.1	Invite political and elected leaders to events etc.	DPHE	High level political support.
3.1.2	Publicity through competitions, Logo, advertising	UNICEF/DPHE	Publicity to raise awareness.
3.1.3	Awards and incentives	DPHE	Incentives to encourage allies.
3.1.4	District orientations (64)	DPHE	64 Orientations to gain support of District Officers.
3.1.4	Thana orientations (460)	DPHE	460 Orientations to gain support of Thana Officials.
2	Involve Union Parishads		
3.2.1	Orient Union Parishad Chairmen	DPHE	4500 Union Chairmen Oriented to the Project in 1993.
3.2.2	Baseline study in 5 Thanas	UNICEF/Research Agency	Baseline study

3.2.3	Establish and orient Union WATSAN committees (phased over 18 months)	DPHE	920 Union WATSAN committees established & oriented. (300 in 1993-94 & 620 in 1994-1995).
3.2.4	Support Union WATSAN committees - quarterly workshops	DPHE	650 workshops in 1993-94 and 10,000 workshops in 1994-95).
	- courtyard meetings/village visits/VCR hire etc.	DPHE	WATSAN committees supported in their activities.
3.2.5	Evaluation study in 5 Thanas	UNICEF/ Research Agency	Evaluation of Union WATSAN committees.
3.3	Collaborate with other government sectors		
3.3.1	Develop sanitation in EPI Plus & CDD - Sanitation education in ORT corners and outreach sites	UNICEF	Communication materials supplied.
	- Demonstration latrines at outreach sites	DPHE	1000 demonstration latrines constructed.
3.3.2	Develop materials for schools	UNICEF	Communication materials supplied to schools.
3.3.3	Promote sanitation in womens organisations	UNICEF	Communication materials supplied to Ministry of Womens Affairs.
3.4	Support NGOs	UNICEF/DPHE	
3.4.1	Support with communication and training package and materials.		Materials supplied to NGOs.
3.4.2	Support orientations, and training of trainers	UNICEF/DPHE	5 Workshops in each of two years (10).
3.4.3	Support NGO Forum - support two communication trainers	UNICEF/DPHE	Improved software training for NGOs.
	- support activities in 20 Thanas through partner NGOs.	UNICEF/DPHE	7 Thanas covered in each of 3 years with intensive village level promotion of sanitation.
3.5	Support religious leaders		
3.5.1	Conference for Imams	UNICEF/DPHE	One conference held to orient Imams.
3.5.2	Workshops for religious leaders	UNICEF/DPHE	10 Workshops in each of two years (20)
3.6	Support Service Clubs, Scouts and Guides		
3.6.1	Training of core trainers	UNICEF/DPHE	10 Workshops.
3.6.2	Support communication and training materials	UNICEF/DPHE	Materials supplied.

3.7	Establish Coordination Committees		
3.7.1	Establish coordination committee and convene half yearly meetings.	DPHE	Half yearly meetings for high level coordination.
3.7.2	Coordinate Social Mobilisation Committee (two-monthly meetings)	DPHE/UNICEF	Two-monthly meetings for coordination of allies.
4.	<u>CONDUCT ACTION RESEARCH STUDIES</u>		
4.1	Control Thanas (five)		
4.1.1	Baseline study	UNICEF/ Research Agency	Baseline study of 5 control Thanas.
4.1.2	Evaluation study	UNICEF/ Research Agency	Evaluation study of 5 control Thanas for comparison with Action Research areas.
4.2	Training of School Headmasters	DPHE	Headmasters trained for School Programme to assess effectiveness of this Schools Programme.
4.2.1	Develop training curricula and materials and monitoring format	UNICEF Consultants	
4.2.2	Orientations for headmasters (five Districts)	DPHE	
4.2.3	Baseline study	UNICEF/ Research Agency	
4.2.4	Monitor progress	DPHE	
4.2.5	Evaluation	UNICEF/ Research Agency	
4.3	Courtyard Meetings by Thana Officials		250 courtyard meetings held in 5 Thanas to assess effectiveness of Multisectoral courtyard meetings.
4.3.1	Baseline study	UNICEF/ Research Agency	
4.3.2	Organise multisectoral courtyard meetings by Thana level officials (five Thanas)	DPHE	
4.3.3	Evaluation	UNICEF/ Research Agency	
4.4	Private Producers		
4.4.1	Baseline study	UNICEF/WHO	5 Orientations held (one in each of 5 Districts) to assess effectiveness of educating private producers.

4.4.2	Orientation of private producers (five districts)	DPHE	
4.4.3	Evaluation	UNICEF/WHO	
4.5	Influencers Workshop		
4.5.1	Baseline survey	UNICEF/ Research Agency	4 Workshops held (one in each of 4 Unions) to assess effectiveness of involving influencers.
4.5.2	Select influencers (4 Unions)	DPHE	
4.5.3	Influencers workshops	DPHE/UNICEF	
4.5.4	Evaluation	UNICEF/ Research Agency	
4.6	Community Sanitation Promoters		50 Promoters employed by Union WATSAN committees in 50 Unions in 4 Thanas and 4 workshops held to train the promoters to assess the effectiveness of community sanitation promoters.
4.6.1	Baseline survey	UNICEF/ Research Agency	
4.6.2	Select and support community sanitation promoters (Five Thanas)	DPHE	
4.6.3	Training workshops (ten)	DPHE	
4.6.4	Monitor progress	DPHE	
4.6.5	Evaluation	UNICEF/ Research Agency	
4.7	Conduct Other Pilot Studies as necessary	UNICEF/DPHE	Other studies to be taken up to test new strategies.
4.8	Expand activities of successful strategies	DPHE	Expansion of Successful strategies.

## 10. TIME FRAME

ACTIVITIES	1993												1994												1995					
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
1. <u>COMMUNICATION DESIGN DEVELOPMENT</u>																														
1.1 Establish and Support Social Mobilisation Working Group			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
1.2 Contract communication design consultants			X	X	X	X	X	X	X	X	X	X																		
1.3 Undertake background research																														
1.3.1 Literature reviews of communication process and strategies			X	X																										
1.3.2 Image Bank																														
- gather materials			X	X	X	X																								
- develop and circulate folder							X	X	X	X	X	X																		
1.3.3 Village based study			X	X	X	X	X																							
1.4 Undertake Communication Development Projects			X	X	X	X																								
1.5 Develop appropriate health and technology messages																														
1.5.1 Design two pit latrine systems			X	X	X																									
1.5.2 Design shared latrines			X	X	X																									
1.5.3 Document villagers technology innovations			X	X	X																									
1.5.4 Scientific health studies			X	X	X	X	X	X	X																					
1.6 Design Core Communication Package																														
1.6.1 Design package							X	X	X																					
1.6.2 Pretest package										X	X																			
1.6.3 Print materials																														
- first batch (limited number)												X																		
- second batch													X	X	X															

ACTIVITIES	1993												1994												1995					
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
1.6.4 Further development studies (as necessary).												X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.6.5 Further printing of materials (as necessary).														X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>1.7 Pilot Implementation</b>																														
1.7.1 Pilot Union WATSAN Committees				X	X	X	X	X	X	X	X																			
1.7.2 Pilot Village Support through TWMs			X	X	X	X	X	X	X	X	X																			
<b>1.8 Design and produce Training Curricula</b>																														
1.8.1 Contract curriculum consultants						X	X	X	X	X	X																			
1.8.2 Develop Curricula						X	X	X	X	X																				
1.8.3 Print materials																														
- 1st batch (limited number)											X																			
- 2nd batch												X	X	X																
<b>1.9 Develop Appropriate Media</b>																														
1.9.1 Folk media development						X	X	X																						
1.9.2 Folk media workshops								X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.9.3 Media orientations (national and local)								X	X	X		X	X	X	X	X														
1.9.4 TV and Video films and spots								X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.9.5 Radio stories								X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.9.6 Stories for newspapers/journals								X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.9.7 Use of mobile audio visual units								X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>2. DPHE CAPACITY DEVELOPMENT</b>																														
<b>2.1 Strengthen DPHE Infrastructure</b>																														
2.1.1 Establish Social Mobilisation Division				X	X	X																								
2.1.2 Establish Training Division			X	X	X																									
2.1.3 Contract Communication Training Consultants			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	

ACTIVITIES	1993												1994												1995											
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J						
2.1.4 Procure communication equipment							X	X	X	X	X	X																								
2.1.5 Procure office equipment							X	X	X	X	X	X																								
2.1.6 Procure motorcycles (five)							X	X	X	X	X	X																								
2.2 Develop DPHE staff communication skills																																				
2.2.1 Training of trainers						X	X	X																												
2.2.2 Training of UNICEF Divisional Staff									X	X																										
2.2.3 DPHE staff orientations																																				
- SE, EE, SDE Orientations (4 groups)									X	X																										
- SAE, HE Orientations (20 groups)										X	X																									
2.2.4 DPHE Staff training																																				
- SDEs Training (5 Divisions)													X																							
- SAE, HE, TWM Training (64 Districts)													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X						
2.2.5 DPHE VSC Masons Training																		X	X	X	X	X	X	X	X	X	X	X	X	X						
3. <u>SUPPORT ALLIES</u>																																				
3.1 Promote sanitation through advocacy																																				
3.1.1 Invite political and elected leaders to events etc.									X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X						
3.1.2 Publicity through competitions, Logo, advertising									X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X						
3.1.3 Awards and incentives																			X	X	X	X	X	X	X	X	X	X	X	X						
3.1.4 District orientations													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X						
3.1.5 Thana orientations													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X						
3.2 Involve Union Parishads																																				
3.2.1 Orient Union Parishad Chairmen											X																									
3.2.2 Baseline study 5 Thanas										X	X																									
3.2.3 Establish and orient Union WATSAN committees (phased over 18 months)													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	



ACTIVITIES	1993												1994												1995					
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
<b>3.2.4 Support Union WATSAN committees</b>																														
- quarterly workshops														X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
- courtyard meetings/village visits/hire of VCR etc.												X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
- demonstration latrines at U.P. Centres												X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
<b>3.2.5 Evaluation study in 5 Thanas</b>																														
<b>3.3 Collaborate with other government sectors</b>																														
<b>3.3.1 Develop sanitation in EPI Plus &amp; CDD</b>																														
- Sanitation education in ORT corners and outreach sites									X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
- Demonstration latrines at outreach sites								X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.3.2 Develop materials for schools</b>								X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.3.3 Promote sanitation in womens organisations</b>								X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.4 Support NGOs</b>																														
<b>3.4.1 Support with communication and training package and materials</b>									X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.4.2 Support orientations, and training of trainers</b>											X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.4.3 Support NGO Forum</b>																														
[ - support two communication trainers ]				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
- support activities in 20 Thanas through partner NGOs	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.5 Support religious leaders</b>																														
<b>3.5.1 Conference for Imams</b>		X																												
<b>3.5.2 Workshops for religious leaders</b>						X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.6 Support Service Clubs, Scouts and Guides</b>																														
<b>3.6.1 Training of Trainers</b>				X	X							X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<b>3.6.2 Support communication and training materials</b>				X	X							X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	

ACTIVITIES	1993												1994												1995					
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
3.7 Establish Coordination Committees																														
3.7.1 Establish intersectoral coordination committee and convene half yearly meetings							X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.7.2 Coordinate Social Mobilisation Committee (two-monthly meetings)		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
4. CONDUCT ACTION RESEARCH STUDIES																														
4.1 Control Thanas																														
4.1.1 Baseline study										X	X	X																		
4.1.2 Evaluation study																										X	X	X		
4.2 Training of School Headmasters																														
4.2.1 Develop training curricula and materials and monitoring format							X	X	X	X	X																			
4.2.2 Orientations for headmasters (five Districts)															X	X														
4.2.3 Baseline study										X	X	X																		
4.2.4 Monitor progress															X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
4.2.5 Evaluation																										X	X			
4.3 Courtyard Meetings by Thana Officials																														
4.3.1 Baseline study										X	X																			
4.3.2 Organise multisectoral courtyard meetings by Thana level officials (five Thanas)															X	X	X	X	X	X	X									
4.3.3 Evaluation																										X	X			

ACTIVITIES	1993												1994												1995					
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
4.4 Private Producers																														
4.4.1 Baseline study																	X	X												
4.4.2 Orientation of private producers (five districts)																				X	X									
4.4.3 Evaluation																												X	X	
4.5 Influencers Workshop																														
4.5.1 Baseline survey													X	X	X															
4.5.2 Select influencers																		X												
4.5.3 influencers workshops																			X	X										
4.5.4 Evaluation																											X	X		
4.6 Community Sanitation Promotors																														
4.6.1 Baseline survey											X	X	X	X																
4.6.2 Select and support community sanitation promotors													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
4.6.3 Training workshops (five)													X	X																
4.6.4 Monitor progress																X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
4.6.5 Evaluation																											X	X		
4.7 Conduct Other Pilot Studies as necessary													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
4.8 Expand activities of successful strategies																									X	X	X	X	X	X

## 12. PROGRAMME MANAGEMENT

### *12.1 Role of DPHE in Project Implementation*

*As the implementing agency, DPHE will take the overall responsibility of the project, but will be assisted by UNICEF. The Project Director (Village Sanitation and Social Mobilisation) will be the focal point for the project at the national level. The Social Mobilisation Division will be established to implement the Programme, and the Training Division will be established to carry out the training programme (pending results of the organisational study). The Superintending Engineer will coordinate all the activities under his jurisdiction (Circle) and report to the Project Director. The Executive Engineer/Sub-Divisional Engineer will coordinate at District level. The Sub-Assistant Engineer will coordinate all the Thana level activities. The more specific role of DPHE at the Headquarter level will include the following:*

- (a) develop annual workplans covering the project activities.*
- (b) monitor the overall project activities.*
- (c) convene regular meetings of the Social Mobilisation Committee, with all major allies for sharing of experiences.*
- (d) in collaboration with UNICEF, undertake through consultancies the various formative and operational researches/studies as well as the development of training curriculum and communication/training packages.*
- (e) in collaboration with UNICEF, plan and implement the national activities, such as conferences/workshops for advocacy and partnership building and training of national allies.*
- (f) orient DPHE staff.*
- (g) orient UP Chairmen.*
- (h) organise training of DPHE staff.*

*At the Divisional/District level, the DPHE's major role will include the following:*

- (i) training DPHE staff.*
- (ii) linkage between national and Thana level.*
- (iii) supervise monitor and support activities at Thana level.*
- (iv) raise issues as necessary at Divisional and District Coordination Meetings.*

- (v) *forge alliances with partners, such as school teachers, NGOs, religious and local leaders and media, in collaboration with local administrators.*
- (vi) *act as resource persons at various seminars and training courses for identified allies.*

*At the Thana level, the DPHE's major role will include the following:*

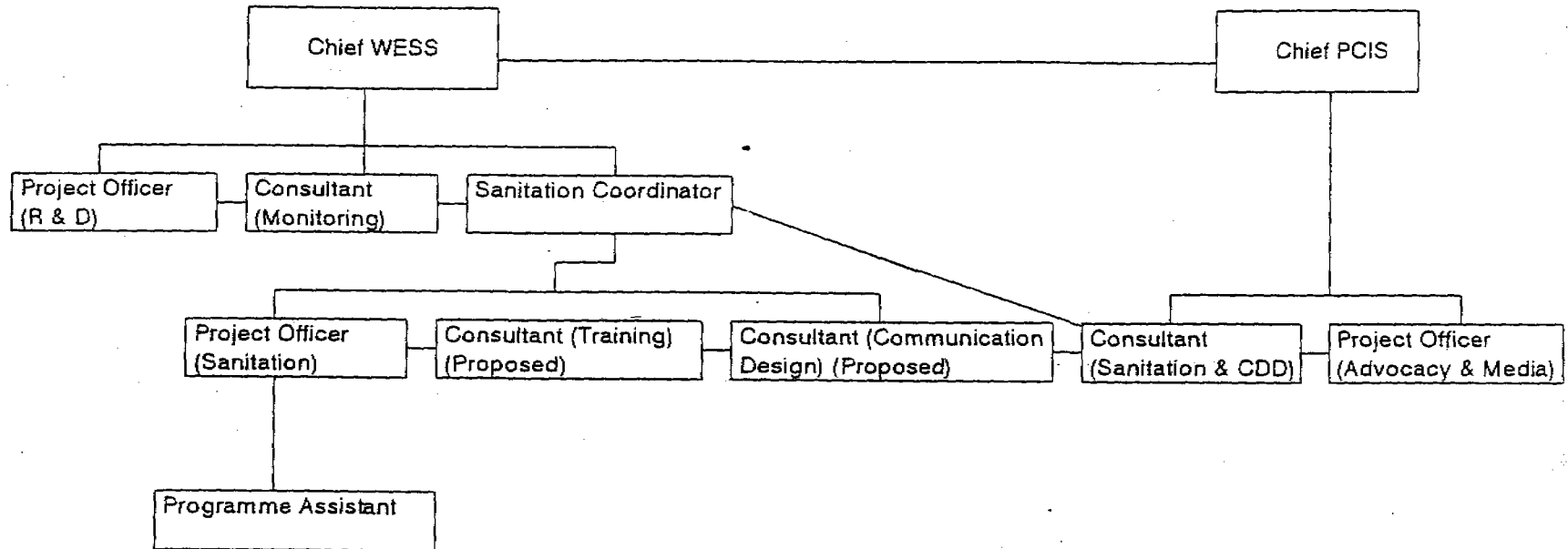
- (i) *assist communication design projects in selected areas.*
- (ii) *form and support Union WATSAN committees.*
- (iii) *provide information on the technical aspects of the programme, particularly on the latrine design, through inter-personal contacts with communities at the DPHE Village Sanitation Centres, IA seminars and caretakers training programme.*
- (iv) *implement action research studies in selected areas.*
- (v) *monitor and report the field activities through review and field visits. The feedback will be used to make adjustments to project strategies as necessary.*

## 12.2 Role of UNICEF

*UNICEF Dhaka will support DPHE Headquarters. The Sanitation Coordinator will be the focal point for the project. The Sanitation Unit will play a major role in the implementation of the formative research, development of the training and communication components of the project, and networking of NGOs and other allies. Monthly meetings will be organized with the Project Director, DPHE to review progress and take actions as necessary, to address emerging issues. In addition, UNICEF Dhaka will support the Divisional Offices which will play the predominant role of supporting DPHE field activities. Programme Communication and Information Section (PCIS) will play a major role in advocacy, media and forging alliances, and will assist with identifying consultants and with formative research and communication development. UNICEF will liaise with donor agencies involved in promoting sanitation in Bangladesh on policies and strategies. The Organogram of the Sanitation Unit is given in Figure-4.*

*The Divisional officers will assist DPHE field staff in implementing the activities outlined above. The WATSAN focal person will participate in regular meetings with the Executive and Sub-Divisional Engineers as well as in the ZRC meetings to review progress. The field officers will participate in review meetings with NGOs, and allies, as well as attend training/orientation sessions for the staff of DPHE and concerned agencies. They will support the formation and development of Union WATSAN committees. They will assist development of communication and training packages, pilot studies and action research studies. In addition, frequent field activities will be undertaken to support and monitor the quality of implementation.*

FIGURE - 4 : SANITATION ORGANOGRAM - UNICEF



Note: Consultants are appointed with UNICEF on special services contracts.

### 12.3 Role of Committees

*The committees will assist and support collaboration between allies in social mobilisation development and implementation (Figure-5).*

*The Intersectoral Coordination Committee will be chaired by the Secretary/Joint Secretary, LGRD. The committee will consist of representatives from DPHE, UNICEF, and concerned Ministries such as, MOHFW, Ministry of Education (Primary and Secondary), Ministry of Womens Affairs, Rural Development Cooperatives Division (RDCCD). It will meet half yearly. The role of the committee will be to promote intersectoral coordination and to encourage involvement and commitment to sanitation in other sectors.*

*The Social Mobilisation Committee will be chaired by the Additional Chief Engineer/Project Director (Village Sanitation and Social Mobilisation). The committee will consist of representatives from DPHE, UNICEF, concerned Departments, involved NGOs, WHO, UNDP and research and development agencies. It will meet every two months. The role of the committee will be to share experiences and new developments in technology, health, and communication strategies, and to create a network between the different allies.*

*The Communication Working Group will be chaired by the Sanitation Coordinator, UNICEF. The group will consist of the key people involved in communication design, and experts who will advise and assist with the design and research, eg., Project Director (VS & SM), SCTO, Senior Training Consultant, EE (Social Mobilisation), Communication Design Consultants, UNICEF Project Officers, representatives from ICDDR'B, NGO Forum, CARE and other agencies involved in sanitation communication design, as necessary. (CARE is planning a Sanitation action research study over the next 18 months to pilot and test and develop effective communication strategies for sanitation). The role of the Working Group will be to advise and assist with strategy design and research development, and dissemination of developments to allies. The Groups will meet frequently in the first year of the project during the development phase (fortnightly/monthly), and as necessary thereafter.*

*Divisional Coordination Committees meet regularly under the respective Divisional Commissioner to coordinate GOB activities in each Division. Related issues on social mobilisation for sanitation may be raised at these meetings by the Superintending Engineers as necessary.*

*District Coordination Committees meet regularly, chaired by the respective Deputy Commissioner. Related issues may be raised by EE/SDEs as necessary.*

*Union WATSAN Committees will be formed in each Union chaired by the respective Union Parishad Chairman. They will be operationalised only after the SAE & TWM have received training and the SAE will be member-secretary. They will consist of ward members, and selected active and committed women representatives from each village, government field workers and other social leaders. They will meet for quarterly workshops to review and plan activities for social mobilisation in their villages.*

FIGURE 5 : COORDINATION COMMITTEES

LEVEL	COMMITTEES	GOB	UNICEF
National	Inter-sectoral Coordination Committee (Proposed)	Secretary/Joint Secretary, LGRD	Senior Programme Coordinator/ Chief, WESS
	Social Mobilisation Committee (Exists informally – to be formalised)	Additional Chief Engineer/Project Director (Village Sanitation and Social Mobilisation)	Sanitation Coordinator
	Working Group/s (Proposed)	Executive Engineer (Social Mobilisation) and Senior Communication Training Officer	Sanitation Coordinator
Divisional/Zonal	Divisional Coordination Committee (Existing)	Divisional Commissioner	Deputy Chief Divisional Office
District	District Coordination Committee (Existing)	Deputy Commissioner	Field Assistant (Occasionally)
Union	Union WATSAN Committee (Proposed)	Union Parishad Chairman (SAE Member – Secretary)	Field Assistant (Occasionally)



### 13. MONITORING AND EVALUATION

*The project comprises of many activities covering a wide range of issues, from community level involvement to capacity building and advocacy at different levels. In project monitoring, focus will be given to the assessment of the progress related to the key indicators, which include:*

- a) Construction of hygienic latrines, including type.*
- b) Use of hygienic latrines (male/female/children under five)*
- c) Maintenance of latrines.*
- d) Disposal of babies' faeces and washing of soiled napkins.*
- e) Use of second pit, when the first is full.*
- f) Hygienic handwashing.*
- g) Availability of soap/ash and water at the latrine.*
- h) Use of tubewell water for domestic purposes.*
- i) Disposal of animal faeces.*

*Process indicators will be developed for different activities, including training and Union WATSAN committees. These will include qualitative as well as quantitative feedback.*

*Key indicators will be assessed by interviews and observation. For more detailed observations, a small village-based evaluation will be conducted in early 1993 to use anthropological techniques of participatory observation and informal group discussion and interviews, similar to the village based study in 1993.*

*The feedback from the monitoring activities will be analyzed and, as necessary, adjustments will be made to the programme strategies and implementation to achieve improved performance.*

*The field level activities will be monitored by the three major partners, namely DPHE, UNICEF and concerned allies, wherever applicable. For support activities, such as formative research, development of curriculum and communication packages, and training, DPHE and UNICEF will jointly monitor.*

*In addition to the regular monitoring activities, the action research studies will all be preceded by baseline survey and also evaluated by an independent research agency (as described under "Action Research"). Five Thanas will also be surveyed as control Thanas. No motivational activities will take place in these Thanas until the end of the project period. SAEs/TWMs working in these Thanas will be included in the last training batch.*

The major partners at the field level will be the Union WATSAN committees. NGOs under NGO Forum will carry out intensive activities in 20 Thanas. The monitoring procedures for these are outlined below.

### 13.1 Union WATSAN Committee monitoring

An action research study will be made of the first Union WATSAN committees to monitor and evaluate the implementation and effectiveness of this programme strategy. Modifications or changes will be made in the programme as a result. In the first phase of training, one Thana from each Division will be selected for monitoring and evaluation. A KAP baseline survey will be conducted, including key indicators. Regular monitoring will be done by DPHE and UNICEF field staff, with a designed monitoring format to assess process indicators. After one year, an evaluation survey will be conducted to evaluate process indicators and KAP including key indicators. Baseline study and evaluation will be conducted by an independent research agency.

Regular monitoring of all Union WATSAN committees will be conducted by SAEs, and reporting will be incorporated in their routine reporting system. Union WATSAN committees will make community level assessments of key indicators for microplanning. DPHE staff refresher courses will include feedback and analysis of successes and failures in programme implementation.

### 13.2 NGO Forum Monitoring

NGO Forum will prepare quarterly progress reports, reflecting changes in selected key indicators, (a)(b)(c)(g), qualitative/quantitative information on the activities undertaken and any constraints in implementation. The reports will be forwarded to DPHE and UNICEF field offices with copies to the Dhaka offices. In addition, monthly reports outlining the key activities undertaken and any problems encountered will be prepared by the NGO Forum with copies submitted to the DPHE and UNICEF field officers.

Quarterly reviews will be held with the participation of NGO Forum, DPHE and UNICEF officers. UNICEF and DPHE staff will periodically visit the project areas at least on a quarterly basis to ascertain the process and quality of implementation.

Baseline KAP surveys will be conducted through NGOs/agencies in all 20 Thanas before field implementation. Mid-term evaluation will be undertaken, in order to make appropriate modifications in programme planning, by an external agency commissioned by DPHE-UNICEF. A final evaluation will be carried out at the conclusion of the project. The terms of reference will be drawn up by UNICEF in consultation with DPHE and will cover the major indicators as well as key processes.

### 13.3 Monitoring by DPHE

At the Thana level, the SAEs will monitor the activities of the Union WATSAN committees and concerned allies. In addition, the SAEs and their field staff will undertake field visits to monitor the quality of programme implementation, cross-check the data and interact with the community. The monthly reports will be forwarded to their respective SDEs and EEs.

*At the district level, the respective SDEs and EEs will review reported progress at their monthly meetings with SAEs and Health Education staff. The activities of the Health Education staff will also be reviewed at that meeting. Monthly reports will be forwarded to the Executive Engineer, Social Mobilisation Division and the Chief Health Education Officer (Health Education portion) with copies to the respective Superintending Engineers. Field visits will be undertaken to supplement review of progress.*

*At the DPHE Zone level, the progress will be reviewed during the quarterly Zonal Review Committee meetings, and both monthly and ZRC reports will be forwarded to the Project Director, (Village Sanitation and Social Mobilization).*

*At the Dhaka level, the Project Director will prepare monthly reports, which will be forwarded to the Chief Engineer with copy to Superintending Engineer (Planning) and to UNICEF, Dhaka.*

#### 13.4 Monitoring by UNICEF

*UNICEF field officers will participate in quarterly Zonal Review Committee meetings as applicable. They will also monitor, on a sample basis, the training conducted by DPHE, and the Union WATSAN committees. In addition, the field officers will undertake regular field visits to assess the quality of programme implementation and interact with the community members. Monthly reports will be prepared by the UNICEF Divisional Office and forwarded to UNICEF, Dhaka. Relevant field trip reports, and Note for Records and letters to supervising officers will be copied to UNICEF, Dhaka for qualitative feedback and to draw attention to specific issues.*

*UNICEF Dhaka will participate in the quarterly review meetings with NGO Forum. In addition, field visits will be undertaken in the project areas to monitor the quality of field implementation. On a monthly basis, UNICEF Dhaka will review progress with the Project Director, DPHE.*

*A company is being hired to assist WESS in monitoring of the Water Supply and Sanitation Programme. The task will include the design of monitoring formats, monitoring activities and providing feedback and design of baseline, evaluation and research studies.*

PI 194 0p0192

LIST OF REFERENCES

D-R

2 0002 H T N . T 2

1. ACPR, "Needs Assessment for the Sanitation Programme," 1993 (under finalisation).
2. DPC, "Sanitation Training Curricula Review/Needs Assessment," 1993 (under finalisation).
3. ICDDR'B, "An Integrated Approach for Sanitation : Banaripara Experience," 1992.
4. Laubjerg Kr., "Towards a Strategy for Health Promotion (Socio-Economic Studies)," Report No.7, DPHE-UNICEF-DANIDA, 1986.
5. Mitra and Associates, "The 1991 National Survey on Status of Rural Water Supply and Sanitation for DPHE/UNICEF," 1992.
6. Social and Marketing Research Associates, "Report on Sanitation Poster Pre-Test," 1991.
7. UBINIG, "Quick Survey for DPHE/UNICEF Water and Sanitation Programme in Banaripara," 1992.



Sprogvej 19

~~STG~~

ST. TH 2000 S