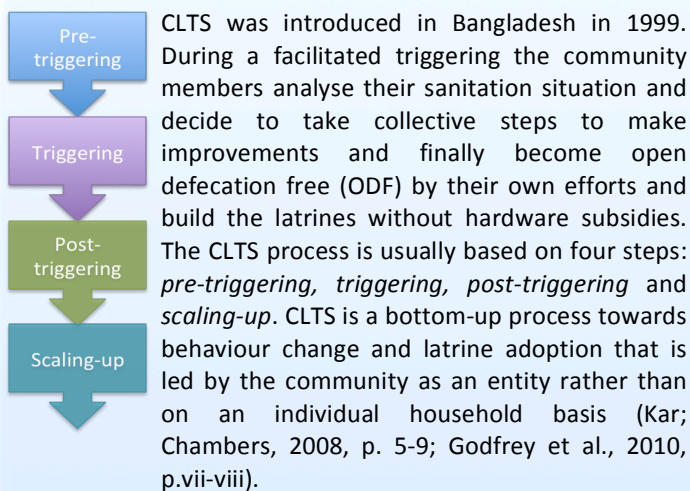


SUSTAINABILITY OF RURAL SANITATION: INTEGRATING COMMUNITY-LED TOTAL SANITATION (CLTS) AND SANITATION MARKETING

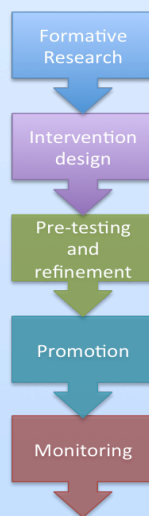
Sanitation marketing and Community-led Total Sanitation (CLTS) are relatively new demand-led approaches for sanitation promotion. Whilst their promotion process, target audiences and addressed behaviour changes differ, both approaches refer to the concept of the 'sanitation ladder' i.e. incremental improvements rather than top-down technology adoption. Consequently, both reflect the increasing emphasis for understanding the households' current sanitation behaviours and determinants for sanitation adoption or improvements in order to find the most appropriate (combination of) sanitation intervention(s). However, it has been recognized that sanitation demand and behaviour change will not be sustainable without an efficient supply side and, as a key factor, governmental and institutional arrangements that provide a supportive enabling environment for sanitation demand and supply.

Community-led Total Sanitation (CLTS)



Sanitation Marketing

Sanitation marketing is defined as "the application of commercial concepts and principles on the whole latrine promotion strategy" (Budds et al., 2001, p.174). Sanitation marketing approaches aim to enhance the demand for sanitation goods and services using effective well-targeted promotion or advertising messages for sanitation behaviour change but also strengthen and support the supply side by supporting the private sector in its performance and capacity. Being based on the principles of social marketing, sanitation marketing adapts the marketing mix commonly referred to as the four P's of marketing: *Product, Promotion, Place* and *Price*. Several authors propose to add supplemental P's (e.g. *Policy/Politics, Partnerships* or *People*) to fulfil the specific requirements of sanitation marketing. The sanitation marketing process generally involves five steps: *formative research, intervention design, pre-testing and refinement, promotion* and *monitoring*. (Godfrey et al. 2010, p.viii).



Reasons for combining CLTS and sanitation marketing

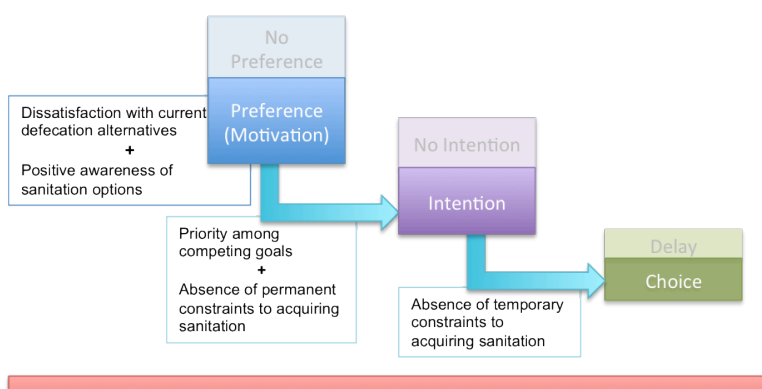
"...there seems to be reason to believe that the CLTS and marketing approaches are not only mutually compatible, but mutually complementary."
(Mukherjee et al., 2009, p.296)

Many countries introduced Community-Led Total Sanitation (CLTS) programmes to overcome open defecation and stimulate latrine adoption. However, the sustainability of CLTS in terms of the quality standard of the constructed latrines and long-term sustainability of the triggered behaviour change are still under discussion (e.g. Mukherjee, 2009). The potential of enhanced sustainability through sanitation marketing is seen in its focus on the demand and the supply side (Perez, 2011, p.2). Sanitation marketing offers possibilities to climb-up the ladder towards more improved sanitation but might not be the appropriate initial step for people who still practice open defecation. Although long-term evaluations for either of the approaches hardly exist (for sanitation marketing even less than for CLTS), there is now a growing interest in combining or even integrating CLTS and sanitation marketing. Experiences with CLTS and sanitation marketing (combined or separated) have shown the additional importance of institutional support or a functioning enabling environment as a key for sustainability of sanitation interventions.

Understanding sanitation behaviours and demand

Various factors in a complex decision-making process influence sanitation adoption or non-adoption. The process of decision making for household sanitation adoption follows three stages as shown in Figure 1 (Jenkins & Scott, 2007, pp.2430-2431)

- 1) **Preference** is determined by the household's dissatisfaction with the current defecation alternative AND a positive awareness of sanitation options.
- 2) **Intention** (describing a general plan to build or purchase a latrine) follows if sanitation is a priority amongst competing goals and permanent constraints to acquiring sanitation are absent.
- 3) In absence of temporary constraints to acquiring sanitation the household may proceed to **Choice**, taken to mean the final decision and implementation of the plan.



Jenkins (2004, p.3) argues, “demand is created when consumers have motivation, opportunity and ability to purchase sanitation technology which suits their needs”. Opportunity needs to be understood as having access to information, products and service, whereas ability refers to necessary resources (financial, time, skills, decision making etc.) (ibid.).

Figure 1: Three phases of household decision making for sanitation

Source: Adopted from Jenkins & Scott (2007, p.2430)

Finding the right products and interventions: market segmentation

As a next step a holistic understanding of the various incentives and barriers for adopting or improving a latrine as well as the socio-economic background and starting points (i.e. current sanitation practices) of the target population enables the design or adaption of appropriate sanitation interventions in the right combination and sequencing (Figure 2). In marketing terms this step is called market segmentation, which is a key output of the formative research. Market segmentation divides the target population into more manageable homogenous segments. By acknowledging key behaviours, motivators and obstacles, a **range** of relevant options or products and **set** of (marketing) strategies can be developed, so as to avoid the exclusion of parts of the population through inappropriate and inflexible measures (Thomas, 2010, p.12; Jenkins & Scott, 2007, p.24).



Figure 2: Barriers and motivators for sanitation adoption and improvements

Source: Adopted from Thomas (2010, p.8)

Understanding the supply side

In most countries the rural sanitation supply sector is largely informal, non-professionalized and fragmented. However, the increasing attention towards marketing approaches for sanitation has also enhanced the interest in business models that improve capacity of the private sector and offer viable business opportunities for private suppliers and therefore improve the access to sanitation products and services for the rural population. There is still a lack of evidence based knowledge of which model(s) is (are) suitable for which conditions, the three most commonly discussed models are described below.

The one-stop-shop model

Located at an accessible place, a contractor or SaniMart sells various types of products needed for the construction and maintenance of latrines. Ideally, SaniMarts should be stocked with a trained sanitation promoter, who should be able to give guidance about the construction, maintenance and use of a latrine. This will provide the customer with an informed choice and the SaniMart may act as a showcase for the health benefits of sanitation and hygiene. Further support is provided by a number of trained masons, who can also be hired for latrine construction (Peal et al., 2010, p.92; Kolsky et al., 2000, p.28). The suitability of SaniMarts to improve access to sanitation and their economic viability and sustainability is still under debate (e.g. Mendiratta, 2000; Kolsky et al., 2000; IRC & SNV, 2011).

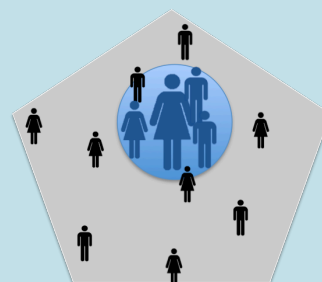


Figure 3: One-stop-shop model
Source: Author

The micro-franchising model

Micro-franchise models take into account that not everybody has the skills or wants to be an entrepreneur. Small businesses are encouraged to engage in the same business idea at scale. The micro-franchise model is centred around one leading business or entrepreneur owning a proven business plan. This entrepreneur or business will then help the franchisee with training, product development and branding as well as bulk purchases (IRC & SNV, 2011, p.19). So far, there are only very few documented examples of sanitation businesses applying a micro-franchising model, especially in rural areas but the WSP *Global Scaling Up Project* considers promoting elements of a social franchising approach in their target areas (Devine, 2010, p.48).

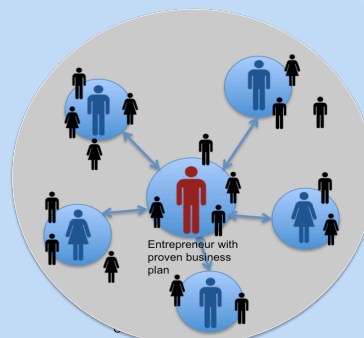


Figure 4: Micro-franchising model
Source: Author

The network-model

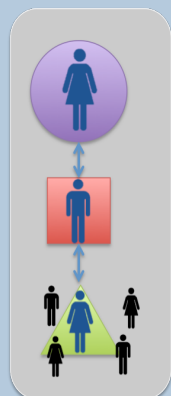


Figure 5: Vertical network model
Source: Author
(e.g. slab manufacturer - retailer - mason)

In a horizontal and/or vertical network, cooperative sanitation providers (i.e. masons, shopkeepers, middle-men) work together to provide services. Sometimes the network-model includes linkages between sanitation suppliers and health workers and the service provision is organised to a greater or lesser extent.

Experiences from East Java indicate that this model is suitable as a primary model to increase access to sanitation and move people from open defecation to ODF. Successful experiences were made within small-scale settings and with a local actor operating as a network-catalyst, who facilitated the access to demand data, generated demand and facilitated the arrangements with the local providers (IRC & SNV, 2011, p.21).

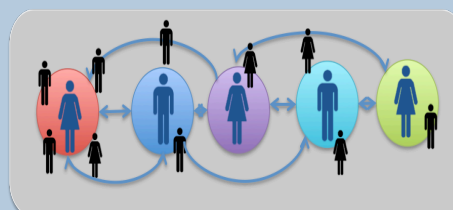


Figure 3: Horizontal network model
Source: Author
(e.g. independent but collaborating providers in different villages)

Enabling environment for applying sanitation marketing and CLTS at scale

A comprehensive inventory study on the application of CLTS (or variations of CLTS summarized as Total Sanitation (TS) approaches) and sanitation marketing (Godfrey et al., 2010) points out that governmental participation and institutional support is often considered as a key factor for scaling-up and long-term sustainability of the programmes. Lack of governmental capacity (insufficient and inadequately trained human resources, inadequate budget allocations, lack of advocacy and accountancy in fragmented institutional settings) is recognized as a frequent problem for effective sanitation programme implementation (Devine, 2010, p.44-46; Godfrey et al. 2010, p.28-36). Consequently, the only current project that purposefully combines CLTS and sanitation marketing at scale, the World Bank Water and Sanitation Programme (WSP) *Global Scaling Up Rural Sanitation Project* has a strong emphasis to work

Box 1: Resource requirements of local governments

- **Financing:** Annual budget allocation for TSSM
- **Human resources:** Adequate number of qualified staff for CLTS AND sanitation marketing activities as well as for planning, supervision and capacity building roles
- **Supplies/equipment:** Availability of adequate equipment for TSSM activities (e.g. transport etc.)

Source: According to Rosensweig and Kopitopoulos (2010, p.5)

within existing institutional and policy structures and to strengthen the enabling environment for rural sanitation (Perez et al., 2011, p.2). Local (e.g. district level) governments are identified as the most suitable implementing level for sanitation marketing and CLTS programmes (Rosensweig & Kopitopoulos, 2010, p.1). Roles and functions of local governments in integrated CLTS and sanitation marketing (Total Sanitation Marketing (TSSM)) programmes are *strategy and planning, advocacy and promotion, capacity building, supervision, monitoring and evaluation, regulation as well as coordination* (ibid., p.iii). The minimum requirements to enable the local governments to fulfil these roles are summarized in Box

1.

The WSP Global Scaling Up Rural Sanitation Project

The WSP *Global Scaling Up Rural Sanitation Project* was started in 2007, against a background of recognition of the importance of enhancing efforts in rural sanitation amongst governments and international development partners. Despite this, there was a significant lack of evidence based knowledge about successful programme design of respective programmes at scale. Therefore the WSP project has two main objectives (Perez, 2011, p.1):

- 1) improving sanitation for a large rural population in the target area
- 2) improving the knowledge on an effective design and implementation of large scale rural sanitation projects

Target areas of the project are 10 districts of Tanzania, two states in India and 29 districts in East Java Indonesia (Perez, 2011, p.1).

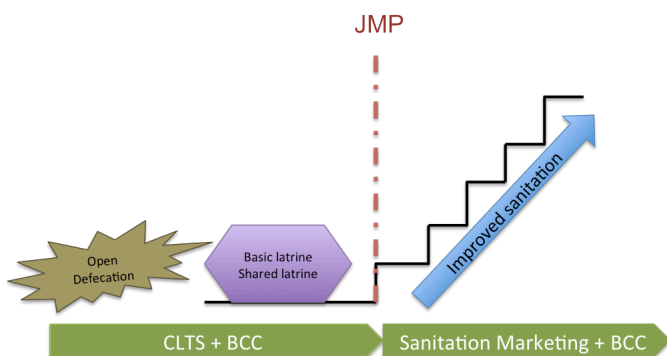


Figure 4: Conceptual model of Global Scaling Up Project

Source: Perez (2011, p.2)

The project combines CLTS, behaviour change communication (BCC) and sanitation marketing in a systematic manner. CLTS is used to create initial community commitment for behaviour change and as a means to move people away from open defecation. BCC strategies continuously support and sustain the behaviour change. While CLTS is targeting community behaviour, BCC is targeting individuals or households. Sanitation marketing is applied as a means to create demand for improved sanitation products and services and to build the capacity of the local suppliers in order to enable them to

provide appropriate and affordable products and services. WSP is providing technical assistance to the central and local governments and the private sector and paid the on-time upfront costs, but does not provide household subsidies for latrine construction or government related labour costs or on-going recurrent costs (Perez, 2011, p.2).

Learning outcomes

So far the progress of the project showed very different results for the three countries. In 2009, India had already over-achieved the end of project targets for access to improved sanitation and number of ODF communities, while Tanzania was clearly lagging behind (Godfrey et al., 2010). Perez¹ summarizes the key success factors learnt so far as: carrying out formative research to understand market segments and key behavioural determinants, focusing on behaviour change prior to construction and identifying and developing delivery models at scale. Furthermore, from the governmental side there is the need to have a clear and explicit rural sanitation policy and appropriate institutional reforms at all governmental levels, as well as a distinct budget allocation for sanitation and hygiene.

Outlook

Sanitation marketing and CLTS and their combined or integrated application are still very new approaches for sanitation promotion. Future programme evaluations will enhance understanding of their general effectiveness and sustainability in triggering lasting behaviour change, but also contribute to knowledge on successful implementation models (e.g. concerning financing and private supplier business models as well as sequencing (see Box 2) and conditions). The discussion about what will be the global targets for development in a post Millennium Development Goals (MDG) world is becoming increasingly relevant. Current methods to measure the MDG targets for drinking water and sanitation have been criticized for neglecting or failing to measure quality and sustainability issues. It is likely that post-2015 the monitoring and evaluation standards for programmes and targets will place an increased emphasis on these attributes (WSSCC, 2011, p.2-3).

Box 2: Sequencing of sanitation marketing and CLTS

Some experiences suggest that premature introduction of sanitation marketing programmes before the achievement of an ODF community status will dilute or even eliminate the triggering process (Thomas, 2010, p.9). Nevertheless, so far no comprehensive study has presented evidenced-based knowledge for a 'best-practice' for sequencing CLTS and sanitation marketing that could be used as a basis for general conclusions or recommendations for practitioners.

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¹ Eduardo Perez, WSP Senior Sanitation Specialist, presentation during WEDC Open Day, Loughborough University, UK, 05 July 2011