Sanitation marketing in Cambodia

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Concerns about enduring low rural sanitation coverage figures in Cambodia prompted a series of studies providing insight into overall sector performance, sanitation demand and existing supply chains. Findings from the research led to the formulation of a sanitation marketing pilot aiming to make affordable, desirable latrines available through market channels. Option design, contractor training, awareness raising and marketing are the main components of the programme, implemented in two provinces. To date (22 months since inception) the project has resulted in a branded, low-cost pour-flush latrine sold by trained suppliers, who have sold more than 7,400 units. Planned next steps include expanding technology choices (still lower costs, and/or suitable for challenging physical circumstances), developing stronger linkages with micro-credit schemes and developing approaches for scaling up the approach.

Keywords: Cambodia, marketing, household sanitation, supply chain, Easy Latrine

For nearly 20 years, Cambodia was isolated from the international community by war and internal strife

Cambodia is one of only three countries *not* in sub-Saharan Africa with rural sanitation coverage below 20 per cent

CAMBODIA IS LOCATED IN the South-east Asia peninsula. It is a little over half the size of Vietnam and about a third of the size of Thailand. For nearly 20 years, Cambodia was isolated from the international community by war and internal strife that began in the early 1970s and resulted in a massive loss of life as well as the devastation of the economic and social infrastructure. To a large extent, the considerable development challenges facing Cambodia are a result of this legacy of war. According to the 2008 census, Cambodia today has a population of almost 13.4 million, and is still overwhelmingly rural, with 80 per cent of the population living in rural areas (NIS, 2009). According to the same source, some 23 per cent of the rural population has access to improved sanitation, although the JMP put rural coverage at 18 per cent in 2008, a difference of over 100,000 families (JMP, 2010). In global terms, Cambodia is one of only three countries *not* in sub-Saharan Africa with rural sanitation coverage below 20 per cent (ibid).

In 1993, the newly elected democratic government faced a rural infrastructure in ruins. There was no electrical grid, few passable roads and insufficient irrigation to secure the country's food supply.

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doi: 10.3362/1756-3488.2011.003, ISSN: 0262-8104 (print) 1756-3488 (online)

Villagers relied on ponds for domestic water supply, and the earliest estimates of sanitation coverage in 1995 put rural improved sanitation at just 2 per cent (JMP, 2008).

Sanitation project activities most often consisted of supplying concrete rings (for pit lining) and slabs to villagers

NGOs were the first to assist in the task of reconstruction, and in the rural water supply and sanitation sector alone, 43 agencies were implementing a total of 66 assistance projects by 1994 (Water and Sanitation Sector Group, 1994). The vast majority of projects in the sector were focused on improving water supplies, and efforts to involve the community in decision-making and implementation were limited at first. Sanitation was not always part of the project activities, and where it did receive attention most often consisted of supplying concrete rings (for pit lining) and slabs to villagers.

Up to 2005, JMP data indicated that rural sanitation coverage between 1995 and 2002 remained static at 8 per cent, suggesting that sanitation projects did not play a big role in the sector. Smaller scale project surveys indicate a large variation in coverage among different areas of the country (ranging from 1 to 15 per cent) (Robinson, 2007) and among income groups, with 3 per cent of the poorest quintile in rural areas having access to sanitation, vs. 33 per cent of the richest quintile (Rosenboom et al., 2007). Census data confirm the fact that the majority of sanitation facilities are high cost, with 72 per cent of rural connections being water flushed (the actual survey results mention connection to sewer or septic tank. As there are no sewer systems in rural Cambodia, this is most likely an issue with translation).

The Royal Government of Cambodia has set its own Millennium Development Goals (CSD, 2003), known as the CMDGs, which include the specific target of 'increasing the proportion of rural population with access to improved sanitation from 8.6 per cent in 1996 to 30 per cent in 2015'. The Sanitation CMDG has been further reinforced by the Rural Water Supply and Sanitation Sector Vision (contained in the National Policy for Water Supply and Sanitation) that every person in rural communities has access to safe water supply and sanitation services by 2025.

Although a meaningful examination of these targets is difficult in light of available data, it is clear that sanitation promotion will have to accelerate tremendously if significant progress is to be made. Using the highest coverage figure available (census 2008), we can conclude that there were at least 8.1 million rural residents without access to improved sanitation in 2008. Even if the CMDG target of 30 per cent coverage is reached, by 2015 this number will have grown to more than 8.4 million, just because of population growth.

The low rate of sanitation coverage in Cambodia has serious consequences in terms of health, environment, water resources, economic opportunity and human dignity. The Economics of Sanitation Initiative (ESI) report by the Water and Sanitation Program (WSP) highlights

that the economic losses due to poor sanitation in Cambodia total US$448 m per year: $187 million in health costs, $149 million in water access costs, $38.2 million in time loss, and $73.7 million in tourism loss. This total is equivalent to 7 per cent of Cambodia's GDP (Kov et al., 2008).

A 2007 analysis of sanitation in Cambodia concluded that 'At current rates, it will take about 30 years to reach the 2015 target, and another 150 years to reach universal rural sanitation coverage' (Robinson, 2007). It was against this background of low coverage and slow progress that WSP Cambodia decided to carry out an analysis of sanitation demand and supply to better understand the reasons behind the slow growth and design approaches to overcome any obstacles. Available data showed that the private sector already provides the majority of latrines installed in the country. Furthermore, subsidized latrine construction programmes have by and large not led to sustained latrine use, or been very effective at reaching the poor. Thus the decision was taken to particularly look at the private supply chain for latrines.

Subsidized latrine construction programmes have typically not led to sustained latrine use, or been effective at reaching the poor

Sanitation demand and supply studies

This private sector latrine supply chain is characterized by a fragmented network of small businesses and masons that provide construction services. Latrines are made from a range of components and materials brought together at the installation site, and either constructed into a latrine by a local mason, or self-built by the purchasing family. Improving sanitation coverage through increased demand and a stronger supply chain requires interventions that address both the supply and demand for latrines: on the one side, by formulating social marketing strategies that increase the demand for latrines; on the supply side, through product and service offerings that are more tailored to the consumers' needs, making latrines more affordable and the purchasing process more convenient. This facilitation of supply and stimulation of market demand needs to be designed with a clear and in-depth understanding of both the supply and demand sides of the market. For this purpose, we carried out two studies, one on the demand for latrines, and the other on the supply of latrines in rural and peri-urban areas of Cambodia. Objectives of the studies were to:

Improving sanitation coverage requires interventions that address both the supply and demand for latrines

- investigate perceptions, desires and actions of non-latrine owners as well as latrine owners;
- verify whether there is opportunity to increase latrine purchase and installation via market forces; and
- outline the required interventions on both the demand and supply side of the market to address constraints and achieve increased latrine purchases.

The surveys were undertaken in the rural areas of Svay Reing, Kandal and Siem Reap province, as well as the urban areas in the provincial capitals (Svay Reing, Phnom Penh and Siem Reap). This survey area encompassed a range of socio-economic and environmental conditions broadly representative of rural and urban areas in Cambodia including areas with high, medium and low sanitation access. Two special study villages were included because they had previously been exposed to community-led total sanitation (CLTS) programmes and we were interested in exploring complementarities between market-based and CLTS-based strategies as well as comparing findings among CLTS and non-CLTS communities. Findings from the surveys are briefly summarized below. A WSP Field Note with detailed descriptions and analysis is available online (WSP, 2008).

Sanitation demand assessment, March 2006

This survey was carried out in 41 villages in the target provinces and covered 939 households, including current latrine owners and non-owners. Among the survey population, 13 per cent of rural households and 79 per cent of urban households own a latrine. Latrine coverage varied widely among villages, ranging from 0 to 100 per cent, depending on environmental conditions, socio-economic factors and the influence of NGO programmes. Overall, about 17 per cent of rural latrines were received from NGOs suggesting that some 83 per cent of rural latrines have been installed privately.

Latrine ownership was more common among better-off households than in poorer households. Cost is the obstacle most commonly cited for not yet owning a latrine but it is clear that it is not the only barrier to latrine ownership since ownership exists among the poorest households and non-ownership is common among better-off households.

An 'ideal' latrine consists of an offset tank, pour-flush pan, and solid walls and roof

There appears to be a strong perception of an 'ideal' latrine consisting of an offset tank, pour-flush pan, and solid walls and roof – a relatively expensive design costing $150 on average. Lower-end latrines were considered unattractive and likely to last only a short time. Respondents expressed a reluctance to purchase anything less than the ideal latrine, preferring instead to wait until they could afford a better model. High-end expectations appear to be clashing with low ability to pay resulting in delayed purchase decisions. Lower cost, acceptable models are currently lacking in the market.

Good hygiene behaviour and latrine use did not necessarily follow from the high level of reported awareness

The survey indicated a generally high level of awareness of hygiene issues. The majority of respondents could name basic sanitation messages and health/hygiene were in the top three perceived benefits of latrine ownership and top two motivations for latrine purchase. However, good hygiene behaviour (e.g. latrine use) did not necessarily follow from the high level of reported awareness.

Although sanitation ranked low in household spending priorities, only 6 per cent of non-latrine respondents were satisfied with their current practices. The perceived ability of respondents to pay for a latrine increased with decreasing latrine cost. Approximately 10 per cent of both rural and urban non-latrine owners could afford a $100 latrine while about 50 per cent believed they could afford a $20 latrine.

Sanitation supply chain analysis, January 2007

The latrine supply chain consists primarily of small, independent enterprises

The supply study consisted of 131 interviews and four focus group discussions, encompassing the entire latrine supply chain as well as national and international organizations active in the sector. The survey identified four main categories of enterprises in the rural supply chain for latrine components: masons, producers of concrete rings and slabs, building supply retailers and construction material importers/wholesalers. The supply chain consists primarily of small, independent enterprises with little coordination; no one actor has a view of the whole chain.

The supply chain includes: masons, producers of concrete rings, building supply retailers and construction material importers

Supply chain enterprises have a passive sales approach and lack capacity to innovate or differentiate in terms of quality, new products, service or financing. Latrine materials and services typically make up only a small percentage of their total business activities (except for masons, who may derive up to 30 per cent of their income from latrine construction in the dry season).

Masons are not particularly trusted by consumers, and are not seen as providers of reliable or credible information about sanitation. Quality of workmanship is often low, because of cost-cutting as well as low skills. Neither the mason, nor his customers are usually able to ensure quality work (in terms of construction, but also design and positioning of facilities) and thus ensure access to truly improved sanitation.

There is minimal awareness or availability of alternative latrine designs or components. Porcelain pour-flush pans and concrete rings and slabs are the dominant product offerings. Staged latrine building or upgrading was not evident.

The marketing pilot

Following the completion of the studies, a number of potential interventions were considered to address constraints on the supply- as well as the demand side, based on the concepts of social marketing of sanitation. In this approach, project funds are not used to provide direct subsidies for latrine hardware; instead they are invested in laying the

foundations for demand-driven, self-financing market systems. Up-front investment is used to develop and adapt technology, strengthen supply chains, create initial awareness and demand among potential users, and monitor impacts.

Potential **supply-side** interventions to increase rural latrine access and coverage include the following:

- Introduce and/or develop low-cost latrine designs, components or materials to increase the range of attractive and affordable latrine options available. The ability to start simple and upgrade over time would help to make latrines more accessible to poorer households.
- Improve supply chain coordination by enabling lead enterprises to develop a broader understanding of the whole supply chain. A lead enterprise could then facilitate communication of consumer needs; improve the flow of price information; identify geographic areas or market segments with greater or faster-growing demand; innovate products or service combinations to better meet consumer requirements; identify and correct inefficiencies in the supply chain; and encourage group latrine purchases.
- Capacity building of individual enterprises in technical and business skills.
- Improve linkages between supply chain enterprises and micro-finance institutions (MFIs) or other financing schemes to improve supply chain functioning.

Potential **demand-side** interventions include the following:

- Promotional campaigns aim at raising awareness and stimulating demand for latrines and are based on an understanding of the consumer's decision drivers and emotional triggers.
- Credit linkages or an option to purchase in instalments would increase affordability and effective demand for latrines among poorer households.
- Facilitating group purchases of latrines can encourage more latrine purchases through social pressure and social support within communities and creates economies of scale resulting from reduced transaction and mobilization costs for supply chain enterprises.
- 'Smart' subsidies effectively target the poorest households, require a co-payment from the recipient, do not bypass the local private supply chain, and do not distort perceptions of the real value of latrines.

We designed a project to test and demonstrate social marketing interventions

We designed a project to test and demonstrate these social marketing interventions, originally in three districts of Svay Reing province (but with additional funding from USAID Cambodia later expanded

to include three districts of Kandal province). The project consists of a design and an implementation phase, schematically shown in Figure 1. It was clear from the studies that there was a mismatch between user desires and ability to pay vs. the expensive latrines supplied through the private sector. So the first phase of the project was a 9-month design phase aimed at identifying or developing affordable, upgradeable and desirable latrine models that could be marketed at a profit by small rural businesses. The 21 month implementation phase following this would then focus on strengthening the network of private importers, manufacturers, distributors, retailers and masons, as well as increasing demand for sanitation by developing and implementing a promotional campaign. A steering group consisting of representatives from government, NGOs, the project donors and other stakeholders in the sector provides guidance to the implementation process, while a robust monitoring and evaluation (M&E) system ensures learning through the documentation, analysis and use of results.

There's a mismatch between user desires and ability to pay vs. the expensive latrines supplied through the private sector

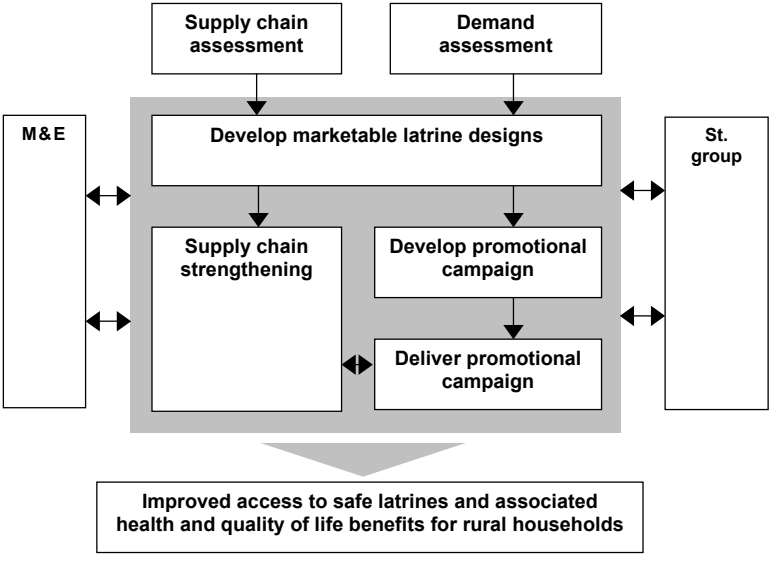

Figure 1. Schematic overview of the marketing project, showing (in the shaded area) the design phase followed by the implementation phase on the supply side as well as the demand side

Design phase

Rural Cambodian households demand latrines that are not only affordable and functional but, more important, desirable

In the design phase, the needs and desires of two very different and distinct groups of stakeholders needed to be brought together:

- *Rural Cambodian households*. The end users, who demand latrines that are not only affordable and functional but, more important, desirable.
- *Private sector suppliers* require solutions that are both marketable and profitable. These stakeholders are key participants in providing the products and services necessary for improved household sanitation and hygiene. They also play a vital role in educating users, and promoting latrine adoption through their marketing and sales activities.

Private sector suppliers require solutions that are both marketable and profitable

Figure 2 schematically summarizes the balance that needs to be found. As prices go up (horizontal axis), the willingness to invest goes down for households, but up for suppliers (vertical axis). The area circled in the graph represents the price where supply meets demand and would in theory be the optimum price.

Figure 2 illustrates the need for design solutions that motivate both stakeholder groups to invest in sanitation: - latrines that are affordable to the largest population possible that provide enough profit to the private sector.

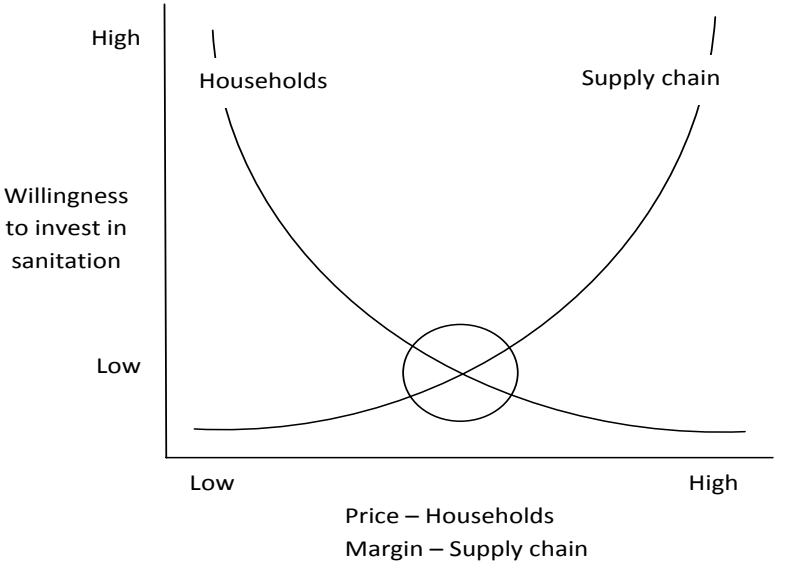

Figure 2. Willingness to pay vs. price

Design process: Human centred design

To develop marketable designs satisfying these dual needs, a design team was formed, led by IDEO design firm consultant Jeff Chapin. Members included staff from project implementer IDE Cambodia, staff from WSP and the Ministry of Rural Development as well as stakeholders from the World Toilet Organization, Lien Aid and other local NGOs. The team undertook a three month research phase using a methodology known as human centred design (HCD).

HCD is a design process and philosophy that engages and seeks input from all stakeholders at every step – from initial concepts, refinement and prototyping, to final design (IDEO, 2009). Sanitation stakeholders engaged in this project included masons, concrete producers, retailers, latrine owners and non-latrine owning households.

Key learning

Throughout the design process, a number of findings from the earlier studies were confirmed, while new ones also surfaced. These shaped the final latrine design and resulting programme implementation strategies:

Household stakeholder learning

Evaluation of CLTS experience found reversion from the use of simple pits back to open defecation

The preference for flushed latrines (wet pits) is strong, because of concerns over collapse in the wet season, smell and flies, and negative memories from the Khmer Rouge regime (who enforced simple latrine use). Thus the field is seen as better than a dry latrine, but wet is best of all. A recent evaluation of CLTS experience found reversion from the use of simple pits back to open defecation approaching 50 per cent (Kunthy and Catalla, 2009), which further reinforces these findings.

Households only want to spend time and money to build their latrine once, rather than see it as a 'project in progress'

Also confirmed was the finding that households only want to spend time and money to build their latrine once, rather than see it as a 'project in progress' with successive upgrade steps, as reflected in the Cambodian cultural philosophy that 'temporary is permanent'.

New insights on the household side included:

- *Too many choices*. Various NGO and government sanitation education initiatives focus on extensive and detailed education regarding latrine pit, slab and shelter options, leaving people overwhelmed and confused by countless combinations. People then put off building a latrine because the decision appears complicated. The fear of making a wrong decision is magnified by the size of investment necessary for the desired option.

- *Out of sight, out of mind.* Shelter construction varies greatly from house to house depending on income and personal taste. This above ground part of the latrine is the major determinant in fulfilling status needs, and choices range from mud or bamboo to concrete structures with wash basins and other features. The underground part or 'plumbing' is less understood, and is viewed as a less important investment/purchase determinant, so long as basic needs are met (wet flush, easy to empty, won't fill too fast). If people have to choose between spending more money on a second pit system or a bigger/nicer shelter they will put their money into the shelter.
- *Health is not the major factor driving the purchase decision*. Contrary to what the demand study found, household decisions seemed to be more driven by status, convenience and other lifestyle benefits resulting from latrine ownership than by considerations of better health.
- *The planning and purchasing process places a big burden on the villager.* If someone makes the decision to invest in a latrine, the purchase process is complex and time consuming, creating another barrier to latrine adoption. The average latrine purchase involves three steps:

  1. Contract and consult a local mason to build the latrine. The mason gives the household a list of materials required to build the latrine of their desire and budget.
  2. Purchase all required materials (and negotiate for best prices) from concrete producers and hardware retailers.
  3. Once the purchaser transports the materials to the home (or pays for delivery), the mason would then build the latrine over the course of a couple of days. Mason labour costs add significantly to the overall latrine price.

Household decisions seemed to be driven by status, convenience and other lifestyle benefits resulting from latrine ownership

These results mean that from the user perspective, the design should focus on the following:

- *Make it a pour-flush latrine*, with offset lined pit, to meet aspirational needs of households. This will also address the marketing side to some extent, as private suppliers would be more interested in marketing a desirable product.
- *Keep the choices simple*. Make the design simple to understand and allow for shelter customization but with standard mass-produced underground components.
- The marketing process should *focus on true aspirations and motivations* if it is to succeed in making latrine purchase a priority over other consumer goods that fulfil social status needs (most notably cell phones). The purchasing process should be simple so it does not become a barrier.

Make latrine purchase a priority over other consumer goods that fulfil social status needs

Supply chain stakeholders learning

The field work here confirmed that construction and household improvement products are not well differentiated, and marketing is almost non-existent. In addition, it became clear from discussions with suppliers that latrine sales typically account for only a small proportion of overall business. The 'low volume, high profit margin' model used by the businesses meant little attention to sales, and little if any innovation to improve profits.

Turning this around would require a clear demonstration of profit potential using an approach relying on large sales volumes and small profit margins, to increase affordability. Achieving large sales volumes will require significant capacity building in the areas of sales and marketing.

The final product

It should be an aspirational latrine, easy to self-install, mass manufactured at margins attractive to private enterprise, and affordable

Guided by these lessons the final latrine design sought to include the diverse needs of the different stakeholders: an aspirational latrine that is easy to self-install, can be mass manufactured at margins attractive to private enterprise, and is affordable for the majority of rural households. Because up to half the cost of a traditional latrine is spent on masons (10–20 per cent) and cement (30 per cent), the designers looked for ways to minimize those items.

What emerged was a latrine design focused solely on the underground core or the 'plumbing' (the most critical component for protection of public health through safe disposal and storage of waste), consisting of a pour-flush squat pan, concrete slab, catchment box, PVC pipe and offset storage concrete rings to line the pit.

A pour-flush latrine with offset pit is rather unremarkable and not a new design by any means. What makes the new design special is the innovation in design, production and process, leading to a dramatically cheaper product:

- *Cheaper, improved design*. The biggest design change was the use of a pre-cast concrete catchment box. This is required because all PF pans available in Cambodia are constructed for use on a direct pit, not an offset one. They have no connection for a pipe. Traditionally, a mason constructs a box on-site, using bricks and concrete. This is slow and expensive. The pre-cast concrete box costs only $1.25 to produce and allows for self-installation. Additionally, the use of rice husk ash as a partial substitute for cement increases final concrete strength, allows for the use of thinner rings, and decreases costs from $4.45 to $2.50 per ring (production costs excluding profit).

The Easy Latrine as it is sold today. A slab (optionally including a tiled surface) with ceramic pan sits atop a 'universal receptacle' which is connected by PVC pipe to an offset tank consisting of three rings with a concrete cover. Material and labour costs for the model shown add up to $20 (excluding transport and profit)

Any ceramic pan available in Cambodia fits on top of the universal catchment box shown in the picture. Smooth sloping insides channel the contents towards the opening where the pipe is fitted. This concrete cast box eliminates the need for a mason.

- *Faster production, lower prices*. Traditional approaches allow for the production of two rings per mould per day. The introduction of a more industrial approach to production, using a head frame and crane as well as a different production process triples production capacity per mould. This allows for 'high volume, low margin' production, with lower prices. For an online video demonstrating the process, see Clouet (2009).
- *One-stop shopping*. The latrine core is designed as a complete package manufactured and sold at one location, home delivered after purchase. This simplifies the purchase process, saving the buyer time and providing private enterprise with a product that can increase their attention to and investment in sanitation as a business opportunity. The use of direct sales agents working at village level (see 'Results' below) has further increased convenience for potential buyers, as there is no need to even leave the village to buy a latrine.

The use of direct sales agents working at village level has further increased convenience for potential buyers

In addition to these innovations, just like most other pour-flush latrines, the new design can be upgraded over time (e.g. by adding a second pit or an improved shelter), it can be self-installed without

The design team was able to reduce the production cost, including labour and transport (within 8–10 km) to no more than $25

hiring a mason and it can be sold in different versions (e.g. with tiled slab, extra rings, second pit) depending on the needs and budget of the buyer.

With these innovations the design team was able to reduce the production cost, including labour and transport (within 8–10 km) to no more than $25. The sales price ranges from $27 to $32, including home delivery. This is higher than the $20 target price (affordable by 50 per cent of rural residents according to the earlier surveys), but in practice it appears that ability to pay is higher than in theory.

Implementation

Introducing the latrine design to the marketplace involved training and support of the supply chain, demand creation activities in rural villages, and communication and coordination with local government bodies.

Supply chain training

The ultimate objective is a supply chain that can generate and fulfil demand without the need for donor funds in the long term

The ultimate objective of any development intervention in the private sector is a supply chain that can generate and fulfil demand without the need for donor funds in the long term.

Producers of concrete products (culverts, slabs, etc.) are the businesses to manufacture and sell the latrine core because they already manufacture 90 per cent of the components and have the required skills, facilities and resources.

To create a sustainable supply chain and introduce the latrine design to the marketplace three key changes to current practices are required of these producers:

- *Investing in sanitation*. To start manufacturing, the producers need to invest $1,150 ($400 for the moulds and crane system to increase production capacity, and $750 for stock of 30 latrines). This is a rather large investment for what was perceived as a small market opportunity and the very first entrepreneurs to take on this risk were supported with loan guarantees. Once the success of the early producers was demonstrated, other producers made the investment without need for such guarantees.
- *Thinking long term*. The producers also need to agree to a strategy of selling larger volumes of latrines at lower margins in order to earn greater profits over the long run. Increasing production volume requires learning new production methods through the use of the crane and moulds system.
- *Active sales and marketing*. Asking producers to become active salespeople has proven to be the most challenging aspect of the programme. Traditionally they have been passive labourers working

Asking producers to become active salespeople has proven to be challenging

with their hands, and only a handful have shown themselves effective in taking on an expanded role. On the one hand, training producers to become convincing and outgoing salespeople can be seen as a difficult but necessary task, worth persevering with. On the other hand, the use of commissioned sales agents who work at community level and are paid by the supplier has proven to be an effective way to overcome this obstacle.

To help the producers make the required changes, the programme provides training in four main areas:

- *Sanitation and hygiene education*. Understanding basic hygiene principles, why every household needs a latrine, the health consequences of open defecation, and benefits of latrine ownership and how to install a latrine sanitarily.
- *Technical/Production*. Latrine design manufacturing and stock and production management.
- *Business management*. Sales force and labour management, order and delivery management, and basic accounting.
- *Sales and marketing*. Pricing strategies, simple sales skills and tactics, use of marketing materials, customer service principles, working with local authorities in support of latrine adoption.

An Easy Latrine marketing display in the field

'Have Latrine, Have Good Life' is the basic message displayed on this sticker, distributed as part of the social marketing campaign

Training is done by programme field staff and additional monitoring and support is provided until producers are able to function independently and sustainably.

Household demand creation

Sanitation marketing is a new approach to creating demand for latrines that involves two separate strategies: product marketing of latrines by the private sector and social marketing of desired behaviour change by NGO and government sectors.

The 'Easy Latrine' has the tagline 'Easy to Buy, Easy to Build, Easy to Use'

Product marketing: Birth of the 'Easy Latrine'. The latrine core was branded the 'Easy Latrine' with the tagline 'Easy to Buy, Easy to Build, Easy to Use'. Though latrines have traditionally been unbranded products, it was important to name the latrine design to create prestige and facilitate awareness and word of mouth. If the product was not given a name it would become 'the new latrine with the cement box' – not very descriptive, memorable or attractive.

Additionally it was important to create a brand for the purpose of attracting new latrine producers to invest in sanitation as a business opportunity. Much like any commercial franchise, a brand allows entrepreneurs to leverage the work of others who have already generated awareness of the product, service and offering. It also generates solidarity and confidence in the entrepreneur through the fact that many others are working in a similar effort, rather than acting as a lone risk-taker in an unproven market.

In support of the entrepreneurial efforts and brand, simple marketing materials were designed that could be reproduced inexpensively by the concrete producers. Such materials included informational leaflets that could be given out at point of sale locations and in villages, installation instruction leaflets, a banner to be used on trucks and at retail locations, and a metal support stand for a demonstration model. These materials were provided free of charge during the training period and producers were encouraged to invest in marketing materials after training is completed.

Social marketing. Social marketing strategies focus on motivating people to stop open defecation and invest in sanitation. Inspired by CLTS initiatives and executed by programme field staff, marketing messages and tactics focus on balancing motivators of disgust, embarrassment and fear of open defecation with status, aspiration and the pride of latrine ownership. As research has shown, health is not a primary motivator in latrine adoption and it is not the focus of the social marketing activities.

The social marketing initiative is branded 'Have Latrine, Have Good Life'

The social marketing initiative is branded 'Have Latrine, Have Good Life' and marketing materials use a cartoon family to depict a difficult

life from open defecation and an aspirational life of latrine ownership. Latrine adoption is not motivated by simply providing information; it requires selling a behaviour. This behaviour is competing with other things requiring time and money. Thus messages are kept simple, relevant and practical so people are not overwhelmed with too much information or too many options.

Direct sales agents working for the supply chain attend village sanitation meetings to promote the Easy Latrine (and take sales orders) at a time when people are most motivated and charged about installing a latrine. The same sales agents go door to door in a village and follow up with households that do not have a latrine yet. This strategy is key to the success of the marketing approach because it facilitates the purchase process in ways that sanitation education and mass media approaches alone cannot. Without direct sales, people have to be motivated enough to leave their home and visit local suppliers, which is not likely to happen quickly. Combining direct sales with home delivery entirely removes the barrier of purchase process.

While mass media channels are also used, the direct approach is more effective, in part because:

- rural mass media penetration is limited;
- sanitation is a low purchasing priority and messages would be too easily drowned out by others;
- social pressure and status are important in promoting sanitation and targeted approaches are better at creating emotional responses.

Social marketing campaigns are executed through village level (meetings and home visits) and mass media level (radio) strategies. Direct links are made to the supply chain so people know where to go and what they need to build a latrine that fits their budget.

Government engagement

The Cambodian Government is supportive of the sanitation marketing programme

Committed to reaching sanitation millennium development targets, the Cambodian Government is supportive of the sanitation marketing programme. Government is also a strong influence in household latrine adoption. To leverage this, the programme employs a closely coordinated strategy to engage local government officials at the district, commune and village level meetings. Those meetings introduce the marketing concept as an opportunity for progress, and act to educate and inform. But more importantly, they create links between government officials and private enterprise by introducing government to concrete producers and their sales agents. Because of the influence government holds they themselves can support the marketing and sales of latrines to households and, on occasion, act as commissioned sales agents.

Results to date

In the first nine months 7,475 Easy Latrines were sold in over 200 villages

The Sanitation Marketing Pilot Programme has seen unprecedented results since launching full-scale in January 2010. In the first nine months 7,475 Easy Latrines were sold in over 200 villages. Thirteen latrine producers have been trained who work with a combined total of over 50 sales agents. In one of the programme target regions, latrine coverage has increased by 36 per cent in the past 9 months through this market-based intervention (the overall increase is 12 per cent). It has also been noted that approximately 25 per cent of new latrine installations recorded in target regions were purchased from suppliers not trained by the programme – a testament to the success of the behaviour change initiatives and the ripple effect of a blossoming competitive environment. The success of the Easy Latrine has not been limited to the programme target areas, with sales recorded in neighbouring provinces as well.

This success has aroused the interest of national and sub-national government who are preparing to integrate the approach into their national sanitation strategy.

Programme-trained producers have made significant investment into their sanitation business (beyond the investment in equipment and costs representing the cost of entry) upwards of an additional $5,000. On their own, they have made vast improvements to their businesses through product and business practice innovations. Such examples include bulk purchase promotion and pricing strategies, the subcontracting of local sales agents, outsourcing delivery of latrines, and even creating community savings groups to increase offerings to poorer areas.

Discussion

'Keeping up with the Joneses' also seems to work in sanitation marketing

With another 7 months still to go in the implementation phase, the pilot has already demonstrated much of what it set out to do. Affordable and desirable latrines are now available through the private supply chain, and – contrary to expectations – it is supply that is proving to be the constraint right now, not demand. Suppliers have learned that the moment they drop off a latrine to one household is the best time to make additional sales, as neighbours invariably come to have a look; 'keeping up with the Joneses' also works in sanitation marketing it seems.

We feel that a number of steps contributed to the success to date:

- *Understanding the issues*. Carrying out the supply and demand surveys was a very important step in the process, allowing us to identify the constraints on both sides, and to design a pilot to specifically address them.

- *Getting the design right*. The design step took a long time, but was crucial in refining our own understanding of what was needed in addition to allowing villagers to express clear opinions and preferences based on prototypes developed throughout the process (this for example led us to dropping the idea of developing a dry latrine, as well as the idea of developing 'dry-to-wet' upgrade options).
- *Monitor progress and act on findings*. Data is collected throughout the supply chain and all project activities, and findings are fed back into the programme. This allowed us to realize for example that sanitation promotion at a distance (through billboards, radio messages, etc.) was not successful, and that much more direct efforts were required. This is why the project now relies on direct sales agents; an example imitated by the suppliers when they hire their own sales agents on commission.
- *Intensive collaboration among stakeholders*. The WSP funded sanitation marketing pilot implemented by IDE is certainly no longer the only one. The World Toilet Organization, Lien Aid, the WaterSHED program, USAID, DAI and others are all engaged in marketing efforts, either as funders or implementers. All organizations involved meet periodically, carry out exposure visits to their respective implementation areas, share successes and failures and generally continue to refine their approaches in an effort to make implementation more effective. The learning and exchange, healthy debate, various models and ongoing adaptation has been beneficial to all stakeholders and has been a critical element of the success of the different programmes.

Sanitation promotion through billboards, radio messages, etc. is not successful, more direct efforts are required

A criticism of pilot projects is that: 'they never fail, and they never scale'. For this project to successfully outgrow its pilot status and go to scale, four areas need attention:

- *Affordability needs to improve further*. Given high rates of poverty (approximately 30 per cent) and low sanitation coverage figures, price is a prime concern. A $30 toilet is still out of reach of 50 per cent of the rural population. Improving the reach will probably involve a combination of the following: 1) further price reductions, possibly through development of lower-end options (perhaps combined with modular upgrades); 2) making available credit more effective – while some MFIs now offer 'toilet loans', demand is low, and we need to find out why; 3) tackling the issue of 'smart' subsidies for the poorest, and how to do this better than it has been done to date.
- *Creating demand in the absence of a programme paying for it*. In most countries this is seen as the role of government, but in Cambodia this cannot be the whole answer. Sales agents and promotion by suppliers hint at possibilities, but to work at scale, more may be needed.

- *Technical assistance and overall programme costs*. Depending on the number of latrines sold by the end of the pilot, the costs of implementation will amount to $45–70 per latrine. This includes the design phase, which will not need to be repeated. Nevertheless, a model needs to be designed that allows the learning, tools, products and processes that were developed to be leveraged in a scaling-up process. While we believe we can bring the costs of technical assistance down to $2 per latrine, this needs to be proven.
- *Ongoing supplier training*. There are no vocational training institutes, or supplier associations that could form the backbone of an ongoing training programme for suppliers. Further work is needed to determine how this aspect can be sustained.
- *Affordable options for challenging areas*. Substantial parts of Cambodia flood on a seasonal basis. Other areas have a high groundwater table. Entire communities live on houseboats on the water. No suitable sanitation options presently exist for these situations. Until they do, we will not solve Cambodia's sanitation crisis.

In June 2010, the Easy Latrine was awarded the prestigious International Design Excellence Award

In June 2010, the Easy Latrine was awarded the prestigious International Design Excellence Award from *Fast Company* Magazine. In awarding the prize, one of the judges wrote: 'Not beautiful, but a beautiful example of "design thinking" employed to harness local knowledge and expertise to solve the problem in an economically sustainable way'. In addition to the Easy Latrine being used far and wide throughout Cambodia, we hope the years ahead will demonstrate the impact of the Easy Latrine on communities as inspiration for creatively tackling problems they may encounter in the future.

Installed Easy Latrine with palm leaf superstructure

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