



Module 6: Deliver

Structure of the Module:

In the previous modules we have covered how to plan and design an innovating intervention. In this module we explain the things that we should consider and do in order for our intervention to be delivered in the way we intended. This module is broken into the following sections:

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Key learning points:

- Delivery is all about trying to minimise the difference between the ‘ideal intervention’ that we developed in our heads and the ‘actual intervention’ as implemented in real life.
- Since your intervention will be developed based on a theory of change, the main way we can plan for and monitor delivery is by ensuring all the critical activities along the theory of change actually take place.
- Key things to consider when planning the delivery of an intervention include: 1) how many people will your campaign need to reach? 2) how many times should they interact with the intervention? 3) how long do you have to deliver it? 4) what human resources, equipment and finances will you need? 5) what training and support will those delivering the intervention need? and 6) how might other programs or events effect yours?
- Some parts of your intervention are particularly important to get right as they have flow on implications to many other aspects of your delivery. These include the quality of the training for the staff who will be delivering the intervention, the quality of the intervention manual, the process of informing and engaging communities and the production of materials or purchasing of equipment.
- In the early stages of delivering an intervention it is often necessary to make small tweaks to the intervention design once you understand more about operating in the local context. However, it is important to establish a cut-off point – after which no further changes will be made. This will help your implementers to deliver the same intervention in each village.

Supporting Resources

- Tool for identifying make or break points

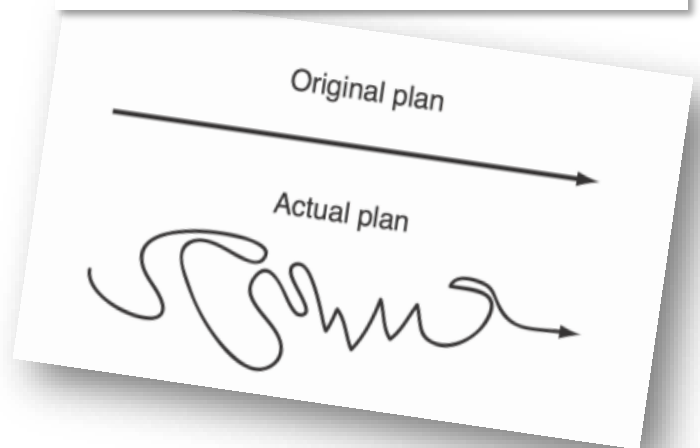
Why do we need to spend time thinking about delivery?

In previous modules we have discussed how to go about designing an effective, surprising, innovative behaviour change approach. Now we come to issue of how to deliver this type of intervention. This is where the theory and the 'ideal intervention' meet the real world of limitations and compromises. There are never enough resources available; funds are short, human capacity is limited, time is short and energy and motivation in the face of multiple activities limit what can be achieved.

Part of the solution to these problems is careful and realistic planning. It's important to be realistic as to what can be achieved with the resources available and to make sure that you convey this to the programme funder and your country program team. Setting up unrealistic expectations from the start is how to guarantee failure. Educate your donor, by taking them through the reality of what it will cost and how long it will take to deliver multiple contacts to most of your target population.

Much of what you will find in this module about delivering programmes is common to any development programme. They all require careful planning, professional management and constant supervision and monitoring to support staff and tweak the programme to make it more effective.

Figure 1: The deliver stage is all about trying to predict how your original campaign plan might differ from what you intended when it is implemented in the real world.



What does it meant to deliver an intervention well?

In the modules so far we explained that a good campaign should be based on a theory of change – a diagram which directly links your program activities, to changes in the physical and social environment which in turn influence the way people think and behave. Delivering an intervention well is therefore all about ensuring that the critical activities in the theory of change actually take place. If one aspect of your intervention is not delivered the way you had planned for it to be then this can have flow on effects. It will result in your theory of change not being achieved and therefore the target behaviour is not likely to change in the way you predicted.

Figure 2: Theory of change for a handwashing intervention



Let's take the example in Figure 1 which depicts a simplified theory of change for a handwashing intervention. The main activity in the intervention is the screening of a film in the target communities. The theory of change predicts that once people see the film then this will change their social environment and lead to changes in their behaviour. If, for example, when we went to one village there was a technology problem that meant that we couldn't show the film to the community, it would be reasonable to think that our intervention would not change the environment, the brain and ultimately behaviour in any of the ways predicted.

What to think about when planning the delivery of an intervention?

1. *How long will your intervention run?*

Think about:

- **The requirements of your donor.**
- **The amount of money you have.** Obviously longer interventions tend to cost more
- **The behaviour you are trying to change.** Is it something that is practiced every day (e.g. using a toilet or washing hands with soap), something that happens less frequently (e.g. menstrual hygiene management) or something that happens during a unique period of time (e.g. exclusive breastfeeding for 6 months)? Behaviours that happen less frequently or during a unique period of time are likely to require longer campaigns.
- **The capacity of your implementing partner.** Think about how the duration of the campaign might affect the quality of the delivery.

2. *What level of exposure to campaign activities do you need?*

Think about:

- **The number of people you need to reach.** Has your donor or your program committed itself to reaching a certain number of people with this intervention?
- **The proportion of the total population which is your target population.** Sometimes it is possible to deliver the campaign just to your target population (e.g. if they are known to congregate at a specific meeting point) but often your intervention may have to reach all of the population in order to also reach your target population (e.g. through a community event). If your target population is only a small percentage of the total population (e.g. new mothers) you may have to consider carefully how you will ensure enough of your target group are exposed to the intervention.
- **Where the exposure happens.** Ideally you want your population to be exposed to the intervention in the location where the behaviour also takes place, or at least reminded of the intervention in this location so that they are more likely to actually perform the behaviour.

3. *How intense should your intervention be (the number of times your target population interact with the campaign)?*

Think about:

- **The behavioural shift you are trying to make.** Compare the current behaviour in the community to your desired behaviour. How big is the change you are trying to affect? If the change is large it is reasonable to assume that you may need several opportunities to interact with your target population to reinforce the message.
- **The nature of the behaviour you are trying to change.** If the behaviour you are trying to change requires multiple actions, sustained support or the purchasing of products it is reasonable to assume that more interactions will be needed with your target population.
- **Whether the interactions are sufficiently surprising and memorable.** If you can design a campaign component that is genuinely unique and unforgettable then this will decrease the number of interactions you need to have with your target audience. For example in a rural community an innovative event which utilises technology or activities

that the population haven't seen before may create a lasting memory and lead to increased performance of the behaviour. In an urban population, where these kinds of events are likely to be more common, an event like this might not be surprising enough to be remembered.

- **Whether increasing the intensity will increase the intervention's complexity.** Adding more campaign components and interactions with your target audience can easily add complexity to your intervention which may mean that the quality of the campaign is compromised.

4. *Who will implement your intervention and how many people will you need?*

Think about:

- **The number of people you need to reach and the time period you have to reach them.** This should be the principle factor in deciding how many people should be part of your implementation team.
- **Particular skills that the implementation team need.** It is expected that you will have to train the implementation team on how to deliver the campaign. However there may be some skills which you wish them to have in advance. For example, these may include fluency in a local language, familiarity with the local context or past experience in delivering a campaign similar to yours.
- **The personal characteristics of the implementation team.** It is worth thinking about the characteristics of your implementing team and how this could affect how the community may respond to them. For example, it may be inappropriate to engage male campaign implementers if you were doing a campaign about menstrual hygiene. Religion, education-level, culture and age are also important to consider.
- **The management structure of the implementation team.** As the designers of the campaign should provide input into how the implementation team is managed and supported during the campaign delivery. This can be important for ensuring the campaign is delivered with quality.

5. *What resources will the implementing team need in order to implement the campaign?*

Think about:

- **Financial resources.** What expenses will there be at each stage of the campaign delivery? Are there consequences if the finances are delayed and if so how can this be mitigated?
- **Equipment and materials.** What equipment needs to be purchased/materials produced for the campaign? When do these items need to be procured? How will they be managed during the campaign? What are the consequences if there are problems with the equipment or materials and how can these be mitigated?
- **Transport and logistics.** How will the team move about in the communities? How will they keep in contact with each other? How will materials be distributed? Is there someone who will take responsibility for each of these things?

6. *How will you ensure your intervention is well accepted at a community level?*

Think about:

- **Working with local government and community structures.** Before you go ahead and implement the campaign, take time to go through the appropriate local processes to inform local government about what you intend to do. Ideally this process should be started early on with the government contributing to the ABC steps of the design process too. It can be beneficial to have local government actively involved in endorsing the campaign. This may involve inviting them to attend key campaign events or giving them a specific role in the intervention. Will other community structures also be

involved in the intervention directly or indirectly? This is normally preferable to creating entirely new structures. However it can have its downside too. For example, campaigns related to hygiene behaviour could drive up a demand for health care. In this case it is important to forward plan the potential flow on effects of your campaign and consider whether this will create undue pressure on local systems.

- **Legitimacy.** Branding can also be important for a campaigns legitimacy. The colours and imagery used will effect a community's perception of the campaign. Getting your implementing team to where campaign branded outfits or ID badges will enable them to be easily identified as being part of the campaign and will improve their legitimacy.

7. *How will you ensure fidelity (reducing how much your intervention varies between each village)?*

- **Campaign manual.** Develop a campaign manual. This should lay out the proposed theory of change and describe each of the campaign components. The manual should be as concise as possible and broken up into clearly labelled sections so that it is easy for implementers to refer back to in the field. There should be clear instructions on how to do each activity and the materials required for it.
- **Training.** For most campaigns it is necessary to provide a training that lasts at least one week. In the training it is important to cover the following things:
 - Explain the intention behind the campaign so that everyone has an understanding of the theory of change.
 - Explain the rationale behind each campaign component and how they are to be delivered.
 - Explain how to use any campaign materials or equipment.
 - Make the training as practical as possible by allowing time for classroom-based rehearsals of all campaign components.
 - Allow implementers with experience of the local context to provide some inputs on campaign management and logistics to ensure that the intervention is delivered as intended.
 - Do several mock campaign deliveries in actual communities.
 - Allow the implementing team to provide feedback to each other to improve the quality of the delivery.
- **Feedback and support.** What mechanisms will be put in place to monitor the quality of the intervention and ensure that it is being implemented as intended? This is likely to involve the development of monitoring forms to be completed after each key campaign event. There should also be a clear system for the implementing team to report challenges (or unexpected consequences) and for the team managing the intervention to provide constructive feedback. One of the best ways to do this is to arrange weekly meetings where implementers share their experiences and lessons learned. This should be done with the aim of ensuring the campaign is delivered as intended.

8. *How might other events or campaigns effect your campaign?*

Think about:

- **The season.** Will you be able to deliver your intervention as intended if it is the rainy season or if it is very hot/cold? How does the season effect the target behaviour?
- **Political, cultural or religious events.** What other major events coincide with your program and how might these effect the delivery of your intervention? For example if there is a political election you may be competing against political rallies or people going door to door to get political support. It's important to differentiate your campaign from these. Some religious or cultural festivals can also effect hygiene behaviour. For

example doing a food hygiene intervention during Ramdan or Christmas may be very different to delivering the intervention at a more normal time of the year.

- **Other government or non-government programs.** It is useful to understand what other programs are currently being implemented in this area, particularly if they target the same behaviours as your or are related to WASH. If there are other similar programs it is useful to find out what their key messages are, how their campaign was delivered and how it has been received by the community. Ideally your campaign should build on these campaigns but include components that clearly differentiate it so that you can better measure the effect your intervention alone. It is also worth understanding the nature of past campaigns and programs in the area. In particular find out how they have been delivered, the tone of the campaign and any penalties or consequences that were put in place for those who didn't adopt the targeted behaviour. This can be important for predicting how people may respond to your intervention and avoiding unintended consequences.

9. *How can you achieve sustained behaviour change through your campaign?*

Think about:

- **Campaign materials.** Does your campaign require that certain products or materials continue to be available in communities beyond the duration of your intervention in order for the behaviour to be maintained? If so consider whether you can create a local market for the products or share the designs for the materials with local government or community structures so that they can maintain these after the campaign finishes.
- **Skills transfer.** Is there someone in the local community who could be trained on the campaign components and who would be willing to continue these after the campaign has finished? For example you may want to identify some of the most effective components, adapt them slightly and train health workers to incorporate them into their normal work in clinics.
- **Support networks.** Will your campaign establish any ongoing mechanism that can provide support to individuals trying to change to and sustain a new behaviour?
- **Financial support.** One of the main obstacles to sustainability is how to actually achieve the things the campaign funds have been used up. Think about whether there are ways of budgeting in advance for some sustainability funding or whether you could work with government or other partners to get them to allocate funds to the continuation of the campaign.

Identifying 'Make or Break' points for your intervention's success

Some points during the campaign are more important than others to get right. **'Make or Break' points** are the campaign delivery moments which have the greatest ability to either enable your theory of change to be implemented as intended or on the other hand, if things don't go to plan, they could result no behaviour change. As shown in Figure 3 'Make or break' points tend to fall at the beginning of the campaign and include the following:

- Production of materials
- Staff recruitment
- Quality and delivery of training
- Quality and production of campaign manual
- Community engagement and sensitisation
- Key campaign events delivered
- Key materials delivered
- Formation of local clubs/committees

You can imagine that the impact of one or more of these things not taking place as intended would have a major effect on the campaign – much more so than a follow up visit or the distribution of complementary materials.

Figure 3: Make or Break points tend to fall at the beginning of the campaign and relate to key inputs or key campaign activities.



Make or Break points will be slightly different for every intervention. Good planning and good campaign management requires you to identify these ‘Make or Break’ points in advance. The tool in the Appendix can be used to help you do so.

Monitoring Delivery

In the next module we will talk in detail about how to monitor and evaluate your hygiene campaign. However there are elements of monitoring which are for programming purposes and are therefore worth raising in this module. In particular one of the purposes of monitoring (specifically the informal monitoring generated from the feedback and support mechanisms you put in place for implementers) is to learn what is not working well so that ideally this can be improved. This is what is called ‘**adaptive programming**’ – the idea that programs work better if they are continually improved to match the real world context. However doing this constantly can be confusing for the implementation team and often leads to people doing different things in each community. For WaterAid programs we recommend that you adjust your programs only at key stages of implementation.

Figure 4: A depiction of a typical hygiene campaign which shows the most important time points to make campaign changes.

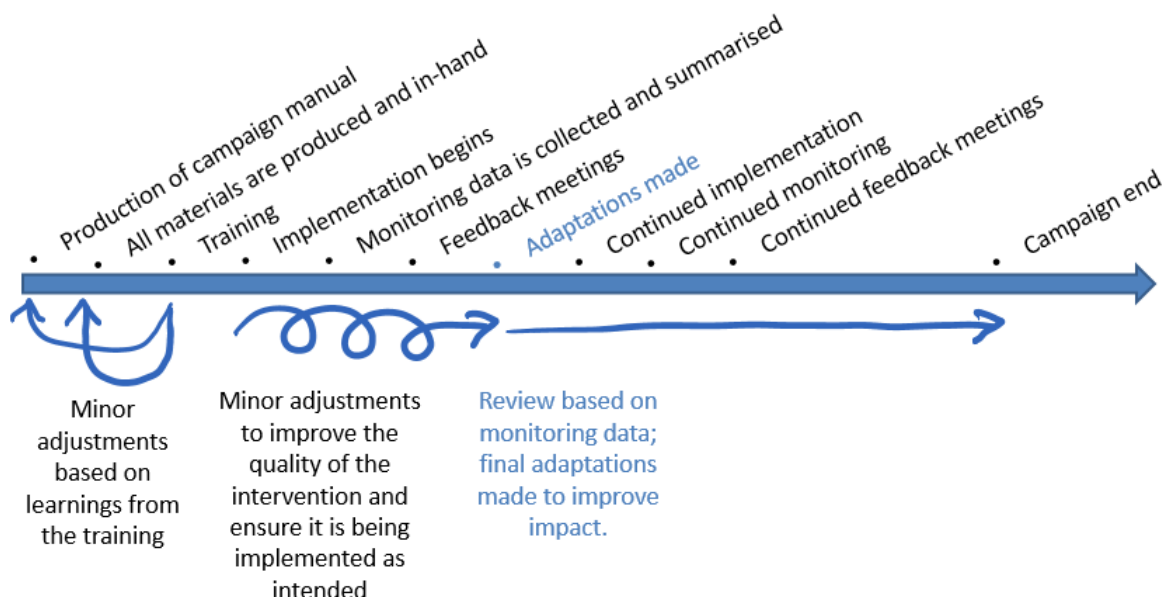


Figure 4 shows the course of a typical hygiene campaign. The diagram highlights when it is appropriate to make campaign changes. You will note that it is useful to make some changes during the training in response to ideas from your implementers who may have more practical experience in implementing in the specific context where you are working. Remember though, to reflect any changes that you have decided upon in the campaign manual. Sometimes the first few days or weeks

of rolling out a campaign can be a steep learning curve. In advance of the implementation it is good to decide on a time point at which you and your implementation team will re-group, share what has been working well or not so well and decide on any changes. Again these changes should be reflected in an updated campaign manual. At this point your campaign design and implementation should go into **'lock down'**. This means that that everyone should endeavor to implement the campaign in the same way as agreed upon.

Recommendations for WaterAid Programs

There are lots of things to think about during delivery and sometimes it's hard to make predictions about what will work best. That's why we have developed some recommendations for what WaterAid's hygiene campaigns should generally aspire to:

Duration	Should run as long as possible – ideally 1 year
Intensity	4-6 interactions with people. These should utilise different touch points. Ideally this should involve two larger events and some change to the behaviour setting (e.g. household)
Fidelity	Utilise touchpoints that reduce reliance on human capacity
Coverage	Reach more than 80% of people
Focus	Only on WaterAid's 5 targeted hygiene behaviours
Management	WaterAid staff should directly oversee the make or break points of the intervention and be involved in feedback and adaptations
Equipment	Plan for the long term so that equipment can be shared across programmes
Resources	Aim to spend less than USD\$2000 per village
Government	Involve at the early stages and try to align regional indicators with your work
Sustainability	Set up institutional mechanism for sustainability at an early stage
Feedback meetings	As often as possible but as a minimum these should be every 2 months.
Strategic input	Ask for support and share you theory of change, timeline of make or break points, campaign manuals and training plans with Technical Support Manager.