

PROJECT CLEAR: SUMMARY

PROJECT**CLEAR**



INN**VEX**



Background

- In 2016, the second phase of the Tanzanian government's National Sanitation Campaign (NSC) was developed. Its objective was to end open defecation by 2025, increase access to improved sanitation and promote handwashing with soap, so that all Tanzanians have access to safely managed sanitation by 2030.
- Based on NSC Phase 1 experience, the government sought to strengthen local leadership and accountability and to use professionally designed concepts and activities to reach and engage with people across the country.
- In response to and on behalf of the Tanzanian government, DFID engaged a consortium of experts to serve as technical advisors on behaviour change.
- The CLEAR consortium supported the government in designing, delivering and adapting national sanitation campaign activities until 2021.

Structure

- The CLEAR Consortium consists of organisations with experience and talent in research, sanitation and hygiene, entertainment, media, marketing, monitoring and management.
- It is managed by the London School of Hygiene and Tropical Medicine, Project CLEAR Ltd and Innovex Development Consulting. Consortium partners are engaged to support and complement in-house activities.



MANAGEMENT, RESEARCH,
INSIGHT DEVELOPMENT,
STRATEGY



CREATIVE, PRODUCTION, DISTRIBUTION



MONITORING



KNOWLEDGE MANAGEMENT

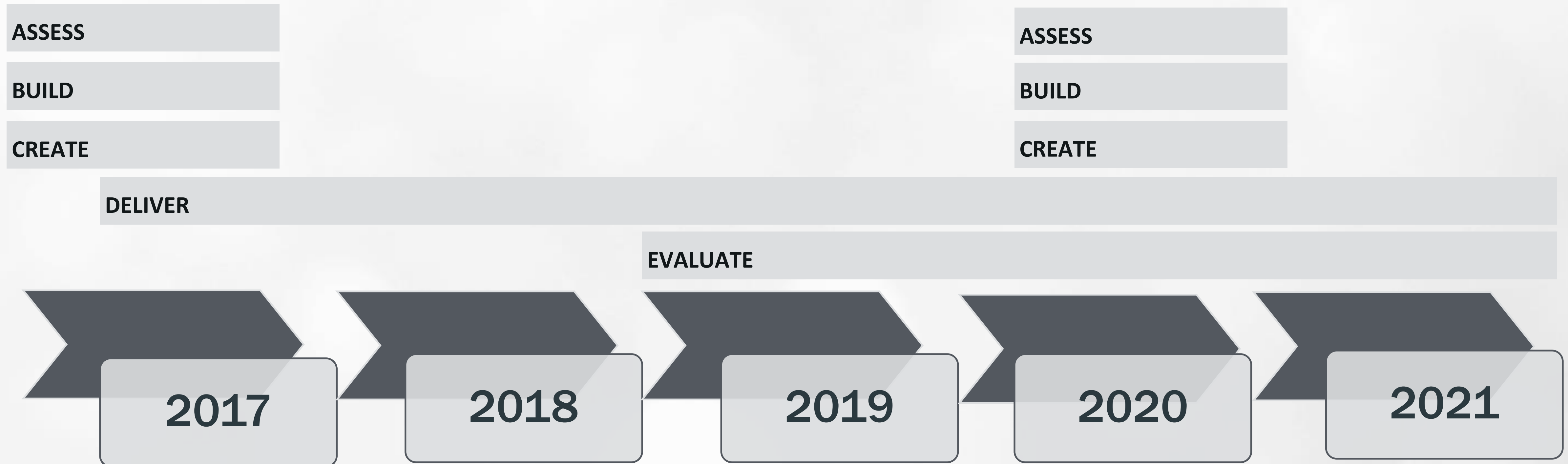
Objective

Lead the design and support the delivery of a nationwide behaviour change campaign to ensure adoption and sustainability of improved sanitation and hygiene practices in Tanzania using a Behaviour Centred Design approach.

Programme development phases

| | | |
|---|-----------------|--|
| A | <i>Assess</i> | Review what is already known about target behaviours; establish management structures and objectives |
| B | <i>Build</i> | Carry out formative research to address key knowledge gaps; mobilise leadership commitment |
| C | <i>Create</i> | Iterative process of creative design and production |
| D | <i>Deliver</i> | Production, distribution and establish reach |
| E | <i>Evaluate</i> | Monitoring and process evaluation (reception and behaviour) |

Timeline



- ✓ Leadership engagement campaign, *Nipo Tayari*

Assess, build, create

- ✓ Formative research
- ✓ Creative development
- ✓ Relaunch of NSC, *Nyumba Ni Choo*

- ✓ Launch of campaign implementation manual
- ✓ Prototyping activations in Morogoro
- ✓ Iterating and scaling activations
- ✓ Integrated mass media

- ✓ Continued scaling of activations including high neglected tropical disease burden areas
- ✓ Intensifying media
- ✓ Monitoring
- ✓ Adaptations and refinements

- ✓ COVID-19 and election pauses
- ✓ Integrating COVID-19 mitigating behaviours
- ✓ Resumption of activations

- ✓ Final activations
- ✓ Process evaluation
- ✓ Lessons, technical guide and dissemination

ASSESS Phase

Desk review

- Examined studies from 2015 to 2017 which showed that 55–65% of Tanzanians used unimproved sanitation facilities, with 10–15% using no facilities at all.
- Before the NSC the last large-scale intervention resulting in nationwide sanitation outcomes was the *Mtu ni afya* campaign (1973).
- The NSC made progress in delivering community events through the local government system, especially Community-Led Total Sanitation (CLTS).
- Technical level coordination and local government engagement were high in NSC.
- Unlike *Mtu ni afya*, senior government officials and political leaders had not been widely engaged.
- Communication channels outside of CLTS, such as radio, TV, mobile networks and marketing events, are increasingly accessed by households.

Leadership commitment with *Nipo Tayari*

- ‘Quick Win’ activities developed due to the government’s urgency to keep the campaign moving and increase support for a revived ground campaign.
- National public relations campaign focused on a call to action to prepare commitments and increase demand for improving sanitation.
- *Nipo Tayari* (‘I am ready’) was launched by the Minister of Health on 9th May 2017 in Dodoma, with national media coverage.
- Events, press engagements and media sponsorship through Clouds Media. *Nipo Tayari* saw thousands of leaders publicly commit to the campaign and to do their part to meet national sanitation goals.
- Continued until December 2017.



BUILD Phase

Field work

The project carried out in-depth field work in Morogoro and Mwanza in August 2017 to explore:

- drivers of change for handwashing and sanitation at household levels
- structures and drivers of change associated with programme implementation at the local government authority level
- the profiles of local commercial actors in the existing sanitation supply chain.

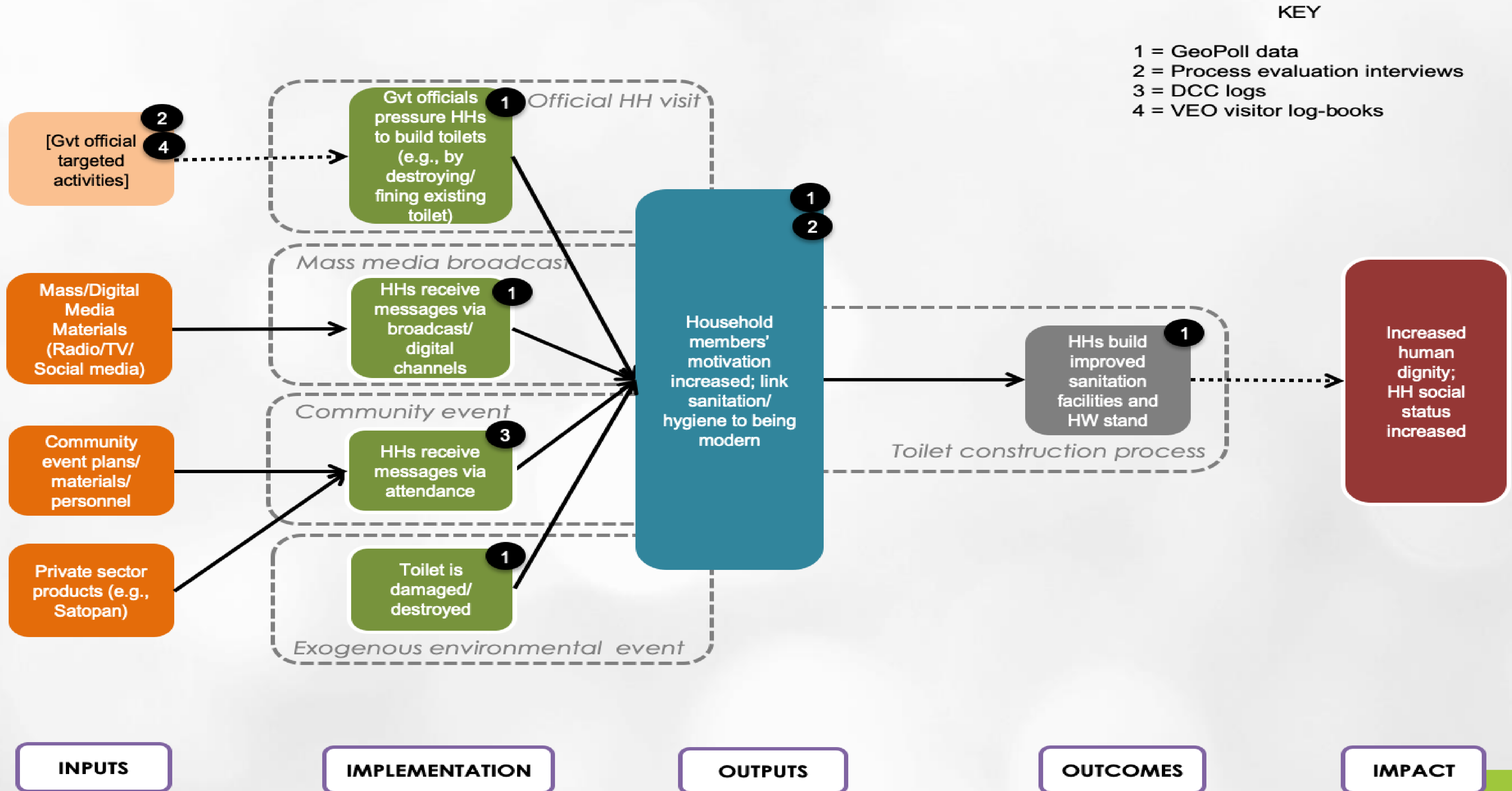


BUILD Phase

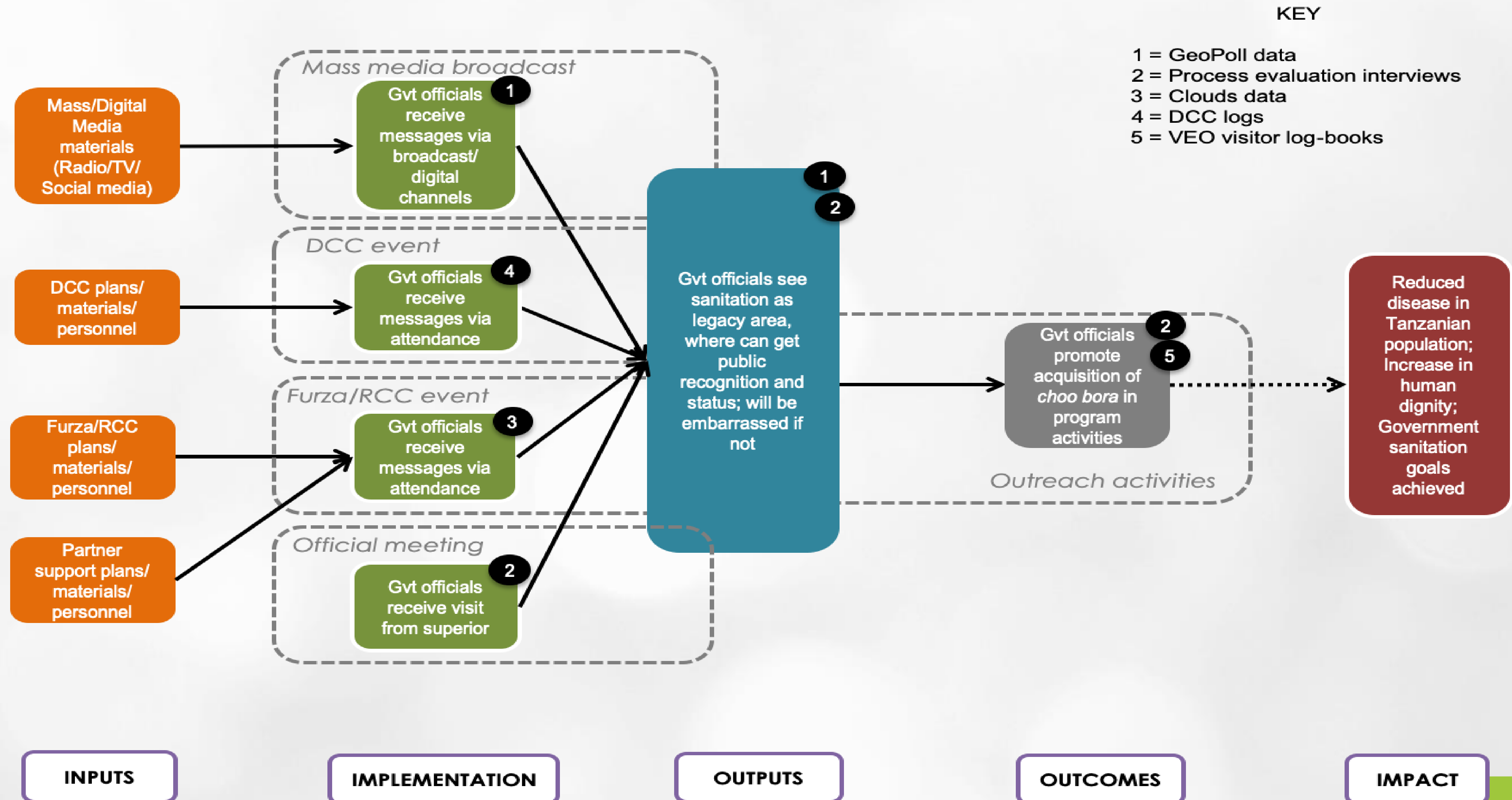
Formative research highlights

- In general, households in Tanzania **aspire to be more modern** and want to keep up with their neighbours. Specific aspirations depend on culture and income level, but people look to cities for trends.
- Prioritisation: **many rural households are making home improvements, but toilets are often left behind** and not upgraded while other parts of the house and compound are.
- Control: **people generally don't like their unimproved toilets, but feel they are good enough for now**. They may also overestimate the cost of improvement and sometimes think that 'they are not for us'.
- Limited resources: heads of households have competing demands for time and money with higher perceived value, such as tending to livestock, business needs, school fees and family needs.
- Perceived values: people see defecation as disgusting and 'hard to think about'.
- In **government interviews**, regional and local officials stressed the need to use all levels of government – national, district, ward and village – to influence households, budgets, improve coordination and motivation and support/improve the national campaign.

Theory of Change: household heads



Theory of Change: government officials



CREATE Phase

Identifying the core audience

- Young homemakers who are starting their own families.
- These are 15–39-year-old homemakers and heads of households.
- Approximately 37% of Tanzania's population.

Developing the motivation to act

Based on the Build Phase research, the motivation to act was expressed as: *'upgrading your toilet and washing hands with soap tells the world that you are a completely modern person'*. This was supported with the following reasons:

- A house without a *choo bora* (upgraded toilet) is incomplete.
- The quality of your *choo* should match the quality of your house.
- It's cleaner and more convenient to use an improved latrine.
- It secures a better future for you and your family.

Likewise, a modern life is impossible without handwashing with soap because:

- Modern people are modern in every way - sanitation included.
- Handwashing with soap is a sign of being modern.
- It secures a better future for you and your family.

CREATE Phase

Developing a campaign slogan

- Through interactions with creative partners and senior government representatives, the new NSC slogan was agreed: ***Usichukulie Poa, Nyumba Ni Choo.***
- This roughly translates as: ‘**Don’t take it lightly, a house is not complete without a [good] toilet**’. The Swahili formulation is informal and modern.
- The slogan seeks to convey that the heart of the house is the toilet. To live a completely modern life you need to improve your toilet now (and, by implication, a toilet is not completely improved without handwashing facilities).



USICHUKULIE POA
**NYUMBA
NI CHOO**

Toilet makeover television show



Furza events



Roadshows



Handwashing promotion



Private sector support



CREATE Phase

Adaptive programming and campaign phases

Nipo Tayari ('I am ready'), June–December 2017: Encouraging top government officials and political leaders to participate and support the campaign initiatives.

Usichukulie Poa, Nyumba ni Choo ('Don't take it lightly, a house is not complete without a modern toilet'), December 2017–Jan 2019: The main brand for the majority of the campaign, used for media and roadshow events.

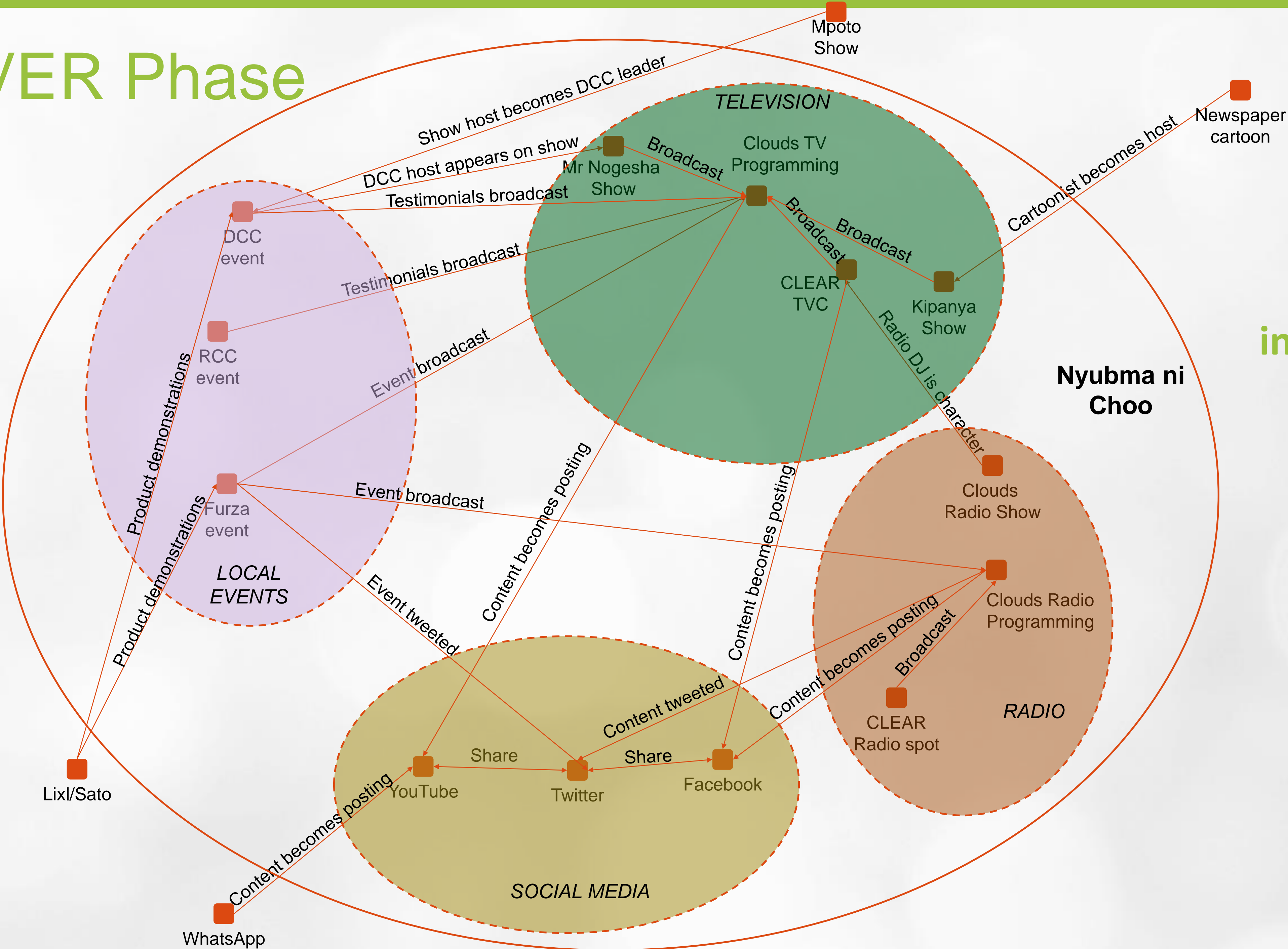
Tumetoka Mbali ('We have come far'), April 2019–December 2019: Reminding people of the progress from using unimproved toilets to improved toilets and handwashing with soap. This slogan called people to join hands with the campaign, insisting that they have succeeded in achieving a modern lifestyle.

Mikono Safi, Tanzania Salama ('Safe hands, clean Tanzania'), March–June 2020: This slogan was quickly developed in response to the COVID-19 pandemic. It encouraged hygiene to prevent COVID-19.

Unategemewa ('You are depended on'), July–December 2020: Recognising everyone's role in society, and hence their responsible to protect themselves and their loved ones from COVID-19.

Siri ya ushindi ni kubalansi ('The secret to victory is to maintain balance'), January–June 2021: This slogan came up as a COVID co-existence strategy, encouraging balance between safety and an active life.

DELIVER Phase



Media
integration

Nyubma ni
Choo

Activation production pillars

Talent

Mrisho Mpoto and team.



Event protocols and risk compliance

Protocols and compliance developed and reviewed with talent.

Implementation support

Project teams visit local government authorities in advance of activations to verify data, plan events, mobilise participation and receive commitments.



On-ground activations

| Regions | Events | People Reached Directly | Event Average |
|-----------|--------|-------------------------|---------------|
| Morogoro | 113 | 49283 | 436.13 |
| Tanga | 51 | 41282 | 809.45 |
| Dodoma | 37 | 30247 | 817.49 |
| Mbeya | 34 | 32145 | 945.44 |
| Songwe | 23 | 18924 | 822.78 |
| Kagera | 27 | 48,210 | 1785.56 |
| Geita | 33 | 33,283 | 1008.58 |
| Mwanza | 30 | 41,490 | 1383.00 |
| Simiyu | 26 | 46550 | 1790.38 |
| Shinyanga | 30 | 40470 | 1349.00 |
| Singida | 14 | 19012 | 1358.00 |
| Tabora | 16 | 44455 | 2778.44 |
| Kigoma | 16 | 51545 | 3221.56 |
| Katavi | 12 | 30670 | 2555.83 |
| Rukwa | 10 | 10280 | 1028.00 |
| Ruvuma | 14 | 68604 | 4900.29 |
| Mtwara | 18 | 79487 | 4415.94 |
| Lindi | 12 | 24454 | 2037.83 |
| Total | 516 | 710391 | 33443.71 |

KEY



Prototype



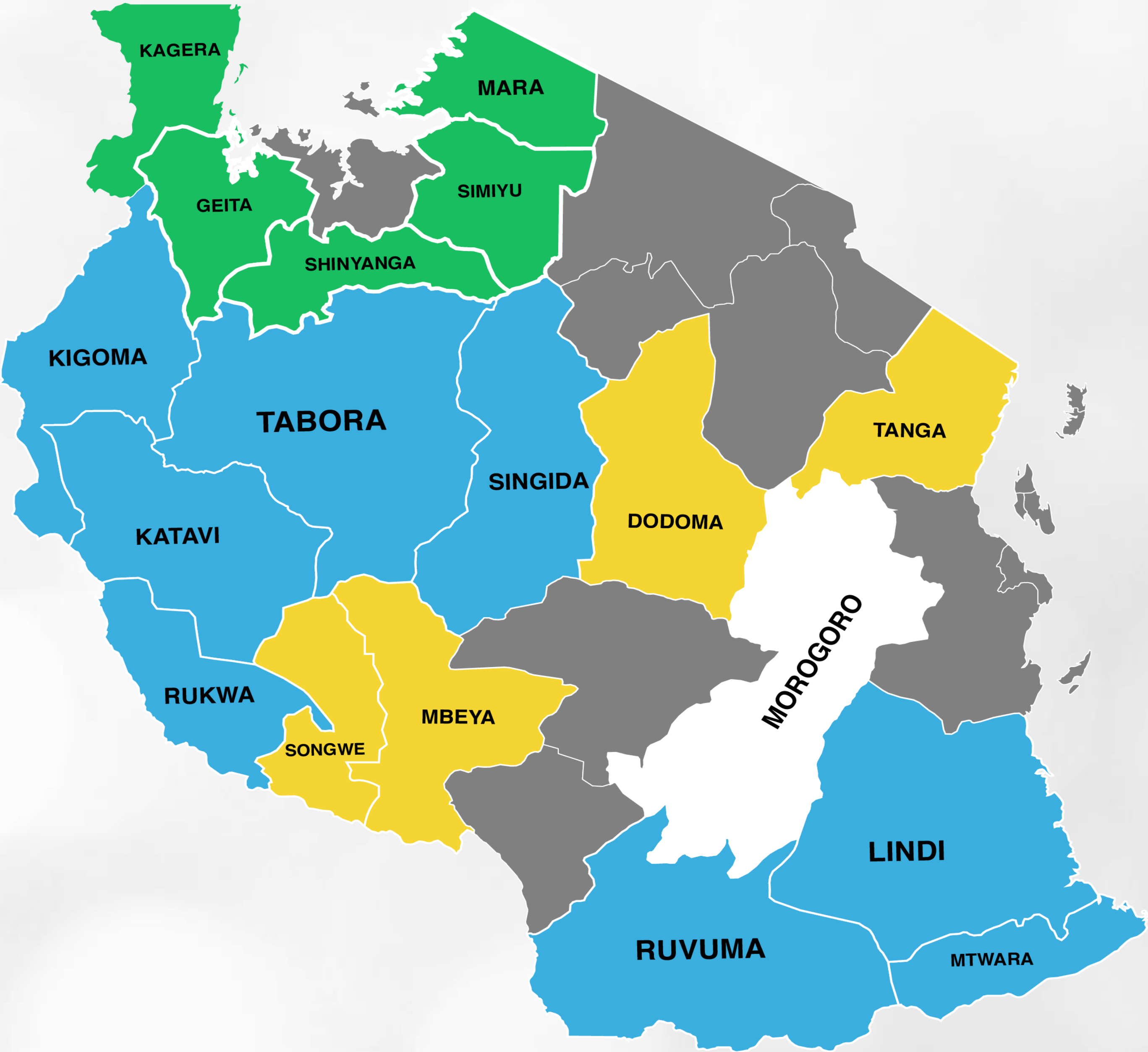
Tumetoka Mbali



Usichukulie Poa



Siri ya Ushindi



Media production and distribution

Radio

- 16,165 radio
- 892 mentions and testimonials
- 28,331 radio spots



Television

- 2,728 television spots
- 761 mentions
- 582 testimonials
- Original programming



Social media

- 14,581 posts
- 6 million people reached



Total reach: 18+ million people

EVALUATE Phase: audience reception

Polling suggests that *Nyumba Ni Choo*'s aim to link improving toilets with achieving a modern lifestyle gained ground with audiences during the project period:

- Formative research in 2017 suggested that although heads of households were highly motivated to achieve a modern life, they were not convinced that sanitation would help.
- In a 2021 survey by GeoPoll, 92% of heads of households agreed or strongly agreed that a *choo bora* and handwashing makes one a modern person.

EVALUATE Phase: audience reception

| Audience | Category | % | Statement |
|-----------------------------|-----------------------------|----|---|
| Heads of households | Male and female | 92 | There is high agreement that 'choo bora' and handwashing makes one a modern person. |
| Government officials | Ward Health Officer | 90 | Ward health officers largely agree that the 'choo bora' leads to completely modern lifestyles. |
| | | 80 | Ward health officers largely agree that 'choo boras' need to be prioritised in the MTEF development interventions. |
| | Village Executive Officer | 95 | Village executive officers largely agree that the 'choo bora' leads to completely modern lifestyles. |
| | | 89 | Village executive officers largely agree that the 'choo bora' needs to be prioritised in the MTEF development interventions. |
| Development partners | Development partners | 89 | Development partners largely agree that 'choo boras' should be a priority to the government. |
| | | 52 | However, a lower proportion agree that their support to the government will have impact if it is prioritised. |
| Influential people | Religious and youth leaders | 95 | Strongly agree that 'choo bora' leads to a modern lifestyle. |
| | | 91 | Strongly agree that handwashing with soap leads to a modern lifestyle. |
| Politicians | Councillors | 94 | Councillors outstandingly agree that 'choo bora' should be a priority for the government. |
| | | 90 | Councillors outstandingly agree that political leaders need to promote 'choo bora' to be popular. |
| Private sector | | 75 | About three out of four hardware store owners agree that businesses can profit from selling 'choo bora', and a similar proportion have stocked or sold it in their hardware stores. |

EVALUATE Phase: monitoring results

| Results chain | Indicator | Report and source | Notes |
|--------------------------|--|---|---|
| Access and behaviour | Latrines constructed or improved to <i>choo bora</i> benefitting 3 million people. | 7.2 million people gained access to improved sanitation according to NSMIS (June 2017–June 2019) and Tanzania’s trendline has changed showing an increase in recent JMP. | Data is a correlation. Coverage increase coincides with project scale up. The data has not been verified. |
| Motivation and reception | Audience comprehension and reaction. | Strong links between modernity and sanitation, reported intent and action among surveyed audiences (GeoPoll). | Newly appointed monitoring partner, GeoPoll, based on random phone surveys stratified by audience segments. Polling will continue as well as qualitative exploration. |
| Reach | Size of target audiences reached. | The project has reached at least 18 million people directly, or 50% of the media-consuming public in Tanzania (GeoPoll). | Represents estimate and recognised multiple hits by multiple channels. |
| Distribution | Number of communication materials distributed (airing TV/radio spots, mentions, testimonials, display materials, events, digital posts). | The project distributed over 20,000 communication materials across all channels, including 7,900 radio airings, 8,000 display pieces, 650 events and 2,000 digital media posts across different platforms (media, staff, Ipsos, GeoPoll). | Distribution and airing were integrated among and often coincided with activations. |
| Production | Number of communication materials produced across mass media, digital media, social media, display activations. | The project produced around 20,000 pieces of varied communication content for various channels. | Pieces were developed based on communication strategy and plans and checked for fidelity. |

Process evaluation study

- As this was a multi-year, evolving campaign that made heavy use of mass and social media across Tanzania, no experimental design was possible.
- Evaluation therefore sought to understand how the campaign worked, not whether it worked.
- It was thus designed to confirm or refute mechanisms identified by the campaign Theory of Change.
- Quantitative evidence: Geopoll survey (N=3,348)
- Qualitative evidence: heads of households interviews (N=21) and government official interviews (N=40)



Qualitative data collection: household interviews

The regions for data collection were selected based on the following criteria:

- Roadshow events had taken place in the region in 2019.
- Coverage of improved sanitation had increased (according to NSMIS data) in the region since the NSC activation.

Interview participants (17 women, 4 men) were randomly selected from the ward register of households that had an improved toilet.

Qualitative data collection: government official interviews

40 in-depth interviews with LGOs were conducted in May and June 2021.

| Job title | N |
|-----------------------------|---|
| Regional Commissioner | 1 |
| Regional Health Officer | 1 |
| Regional Health Secretary | 1 |
| District Commissioner | 1 |
| District Executive Director | 2 |
| District Medical Officer | 2 |
| District Health Officer | 2 |
| Ward Executive Officer | 4 |
| Ward Health Officer | 1 |
| Social Health Worker | 2 |
| Health Officer | 4 |
| Village Chairperson | 7 |
| Village Executive Officer | 7 |
| Community Health Worker | 2 |

Quantitative data collection: GeoPoll survey

GeoPoll SMS-based survey conducted in May–July 2021. GeoPoll continued inviting respondents randomly from their national database until quotas from each category below were fulfilled (total N = 4,080):

- *Group 1*: Households from wards in which DCC event took place (816 participants)
- *Group 2*: Households living in a district that received DCC but not in a ward where DCC took place (1,632 participants)
- *Group 3*: Households in non-DCC districts (i.e., only potentially exposed to the nationwide mass media campaign) (1,632 participants)

Campaign exposure within DCC Regions

| Type of exposure | % of respondents |
|---|------------------|
| Attended roadshow | 29 |
| Heard about local roadshow (WOM) | 15 |
| Heard about <i>Nyumba Ni Choo</i> via TV | 29 |
| Heard about <i>Nyumba Ni Choo</i> via radio | 29 |

Reasons for improving toilet

| Reason | % |
|---------------------------------|----|
| Reason associated with campaign | 38 |
| Visit by LGO | 29 |
| Unrelated cause | 38 |

Challenges faced by households to improve toilets

| Means | % of officials |
|-----------------------|----------------|
| Lack of finance | 52 |
| Weather (heavy rains) | 44 |
| Not priority | 30 |

Reported source of exposure to *Nyumba ni choo*

| Source | % |
|--------------------------------|----|
| Radio | 39 |
| Television | 30 |
| Friend/neighbour/family member | 6 |
| Social media | 10 |
| Newspaper | 1 |
| Local official | 10 |
| Roadshow event | 5 |
| Other | 1 |

Activities during household local government officer visit

| Activity | % of responses |
|---------------------------------------|----------------|
| Encouraged you to improve your toilet | 51 |
| Just talked | 36 |
| Threatened with fine | 7 |
| Asked to attend meeting | 6 |
| Had toilet destroyed | 0.3 |

Reasons to build improved toilet

| Reason | % of responses |
|--|----------------|
| I saw/heard a message about having a good toilet | 34 |
| I didn't have a toilet before | 22 |
| The old toilet was damaged/full | 22 |
| Other reason | 12 |
| Because a government official threatened me for not having a good toilet | 10 |
| Because a neighbour built a nice one | 1 |

Examples of improved toilets



District 1



District 2



Activation

“[Mpoto] told them that ‘I have been sent by the President’, and therefore if you are not cooperating, I will report to the President. That is why they all went trembling, so that even at the region level, they were lining up [to attend the event].” (District Health Official)

“[The campaign] helped me understand that this is a national campaign, and therefore strengthened Nyumba Ni Choo me to work hard. But also, as a community member, it made me love my job and work with more enthusiasm and courage...I was telling them that, in television, there is a certain entertainer talking about these things. Not only me, these are national campaigns. So these gave me motivation, and took it more seriously” (Village Health Worker)

“Yes, it [motivation] increased a lot, because everywhere you go people were discussing it [Nyumba Ni Choo].” (District Health Officer)

“Nyumba Ni Choo came when Mr Mpoto came around a year ago I think...I saw it helped a lot, first in the government the issue of sanitation was not given a priority until when disasters came but later through the campaigns it has made them also understand and see the importance of sanitation, hence awakens them, even when you share with other leaders like DC, RC, RAS, DED they now pay attention...and do follow up.” (Regional Health Officer)

(LGO interviews 2021)

Inspired officials

“...so after the road show we sat and discussed. As village government we sat and planned strategies for how to motivate the community to build improved toilets” (Village Executive Director)

“As for us, it was launched here by the regional commissioner himself, and on the day of launching, he summoned all his executive officers, the district executive directors, the district commissioners, the DAs, the RAs, the council chairpersons – everyone of us was there. So he did put a heavy weight to that matter.” (District Executive Director)

Strategies: promotion

“Before the campaign we were mostly enforcing laws and rules. But after the campaign of Nyumba ni Choo, many people were so motivated to visit those places where Mrisho Mpoto prompted. So people were going to his shows and the message provided at the occasions spread to other places ... Now you find the implementation of hand washing and sanitation as whole is now on the increase”. (District Health Officer, District 2)

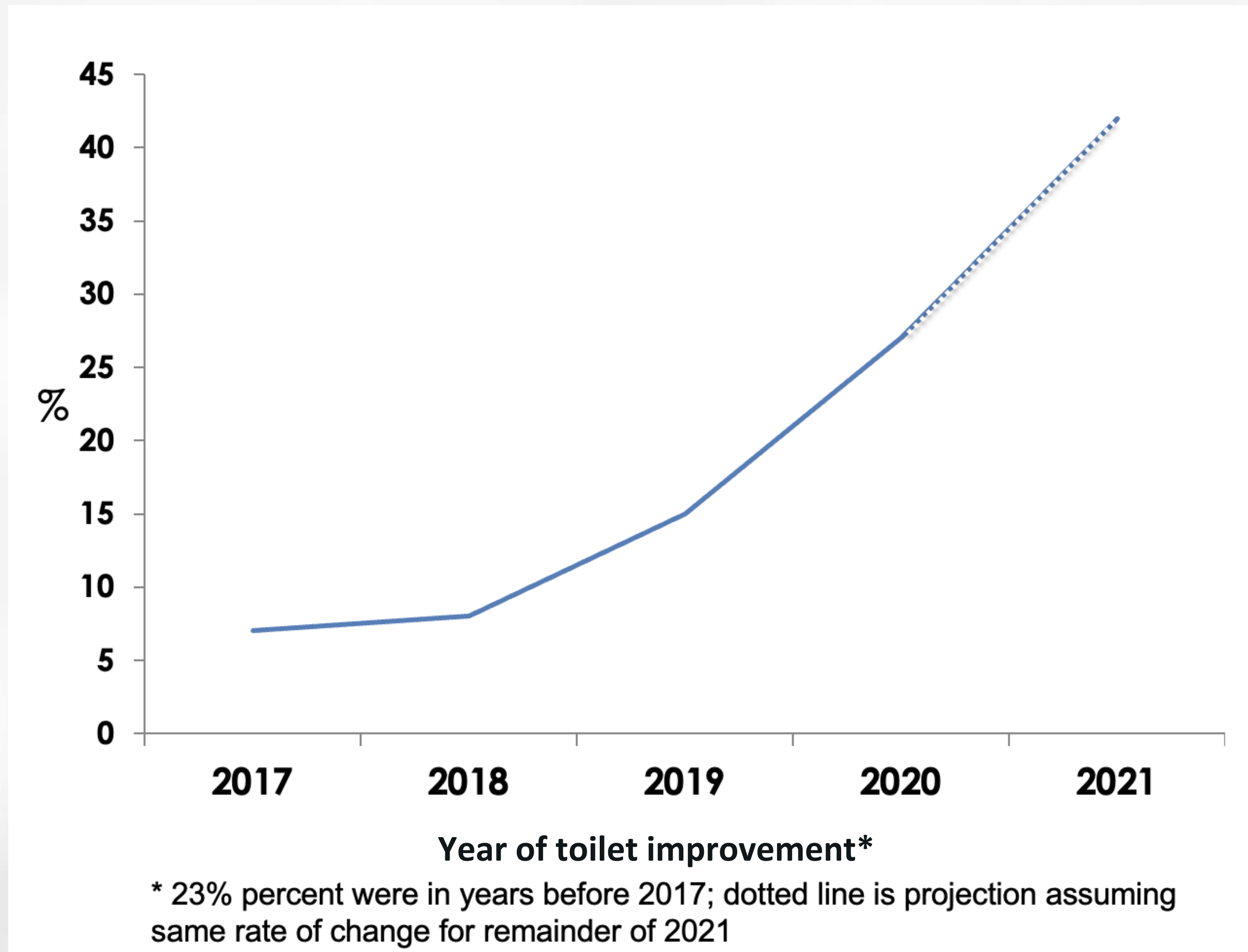
Strategies: enforcement

“Yes, in reality, money was needed, but because of the kind of environment we live in, we do have to volunteer. For example, if you want the work to continue . . . and because mostly we use the hamlet leaders, and they don’t have any salary, there other things you have to give them as an incentive, but when you just send them empty handed . . . just because we have relationship, but in most cases many things strand because of lack of funds. For example, if you give him an allowance . . . and they don’t take big allowances, even 10,000/- they get satisfied with it, or even 5,000, like that. So many things don’t go due to lack of money.” (Village Executive Officer)

“Since there are those who resist, I go to the chairman, and sometimes I do the visits with him, because when they see him, they know the issue is serious.” (Subvillage worker)

“First of all, we provide education, we tell them the importance of having the toilet, and we give them a deadline to accomplish the plan. When that deadline is over, we make a ‘follow up’ [visit], and when we find anyone without a toilet, we take legal actions against him, we arrest him, he pays fines, and then he builds his toilet. Furthermore, for those who have unimproved toilets, we give them time to improve the toilet. If they do, we are through with him. If they don’t, we also take legal actions...when we provide education, we get a small level of achievement, but when we use the laws, that is when we get rapid achievements [in terms of improved sanitation coverage].” (DHO)

Rate of increase in improved toilets



Roadshow outcome study

- *Objective:* to determine whether roadshow (DCC) events played a role in promoting toilet-building by households
- *Comparison:* between 'control' areas where no on-ground activity took place and 'treatment' areas where DCC events occurred
- *Levels of analysis:* ward and region



Sample of Wards

| Number of Wards | | |
|-----------------|---------------|---------------|
| Regions | Treated Wards | Control Wards |
| Songwe | 303 | 936 |
| Geita | 381 | 1182 |
| Shinyanga | 394 | 1334 |
| Tanga | 729 | 2711 |
| Mbeya | 340 | 1337 |
| Mara | 413 | 1642 |
| Simiyu | 335 | 1459 |
| Dodoma | 526 | 2475 |
| Mwanza | 410 | 2158 |
| <u>Kagera</u> | 358 | 4468 |
| Totals | 4189 | 19702 |

| Percentage of Wards | | |
|---------------------|---------------|---------------|
| Regions | Treated Wards | Control Wards |
| Songwe | 24% | 76% |
| Geita | 24% | 76% |
| Shinyanga | 23% | 77% |
| Tanga | 21% | 79% |
| Mbeya | 20% | 80% |
| Mara | 20% | 80% |
| Simiyu | 19% | 81% |
| Dodoma | 18% | 82% |
| Mwanza | 16% | 84% |
| <u>Kagera</u> | 7% | 93% |
| Totals | 18% | 82% |

Sample of regions

| # | Control | # | Treatment |
|----|---------------|----|-----------|
| 1 | Arusha | 1 | Dodoma |
| 2 | Dar es salaam | 2 | Geita |
| 3 | Iringa | 3 | Kagera |
| 4 | Katavi | 4 | Mara |
| 5 | Kigoma | 5 | Mbeya |
| 6 | Kilimanjaro | 6 | Mwanza |
| 7 | Lindi | 7 | Shinyanga |
| 8 | Manyara | 8 | Simiyu |
| 9 | Morogoro | 9 | Songwe |
| 10 | Mtwara | 10 | Tanga |
| 11 | Njombe | | |
| 12 | Pwani | | |
| 13 | Rukwa | | |
| 14 | Ruvuma | | |
| 15 | Singida | | |
| 16 | Tabora | | |

Statistical model

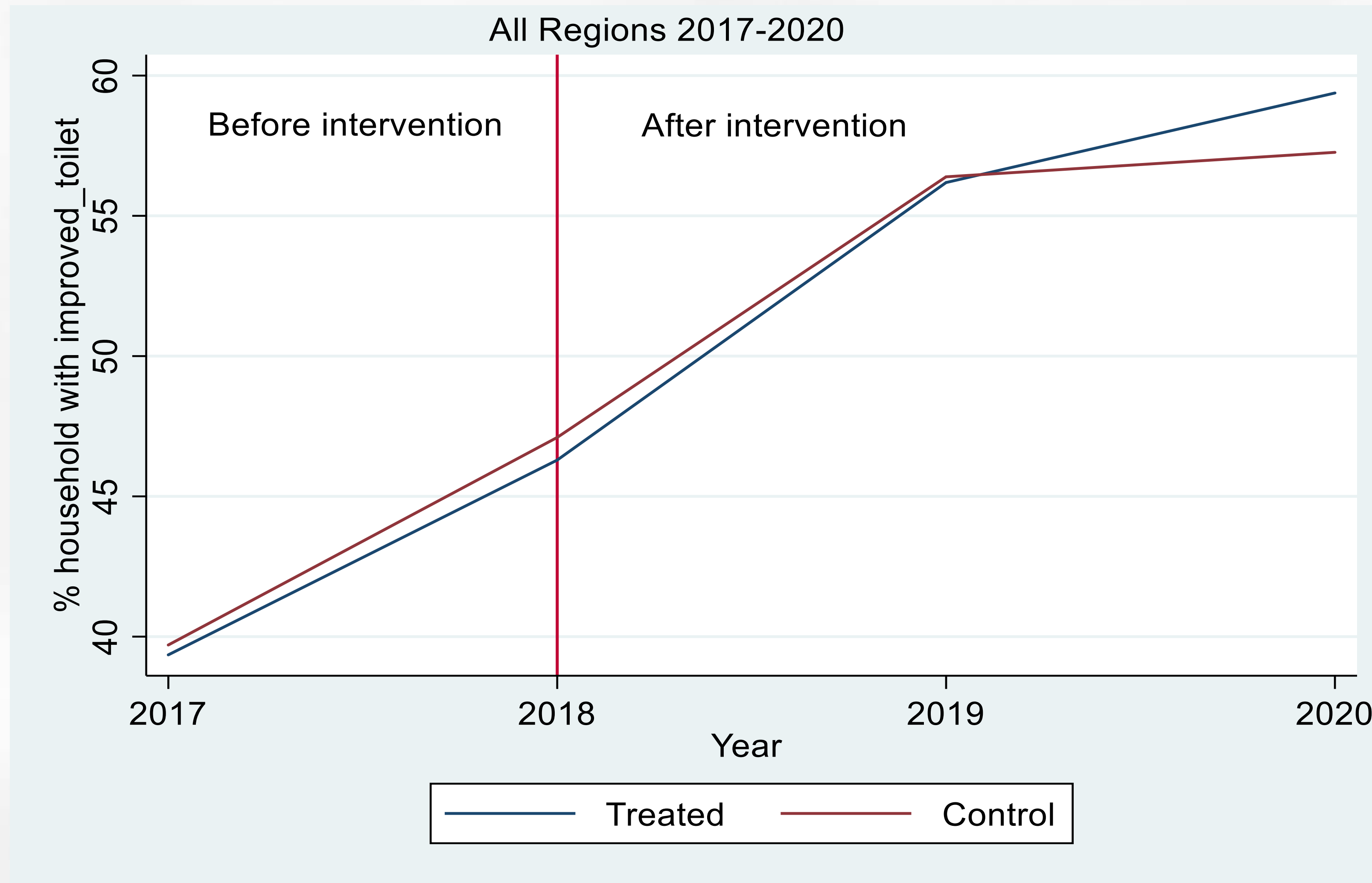
$$Y = \alpha + \beta_0 * \text{Treatment} + \beta_1 * \text{Visit} + e$$

Where:

- Y = % of households with improved toilet
- α = constant
- Treatment = 0 or 1 depending on whether a DCC event occurred in that ward or region in 2018–2020. So it is a placeholder variable indicating whether on-ground activities took place in that area during the project period. It *controls for any differences in the average level of toilet coverage between treatment and control areas*.
- Visit = 0 until the quarter of a year in which the DCC team moves into a ward or region, when it becomes 1. So this is *a measure of the effect of the campaign on the level of toilet coverage after the campaign has been in an area*.
- e = residual variation

Note: NSMIS is poor quality data overall, but the inclusion of many data points should still be able to detect ‘signals’ in the data – that is, be able to estimate trends associated with particular variables.

Average coverage among wards



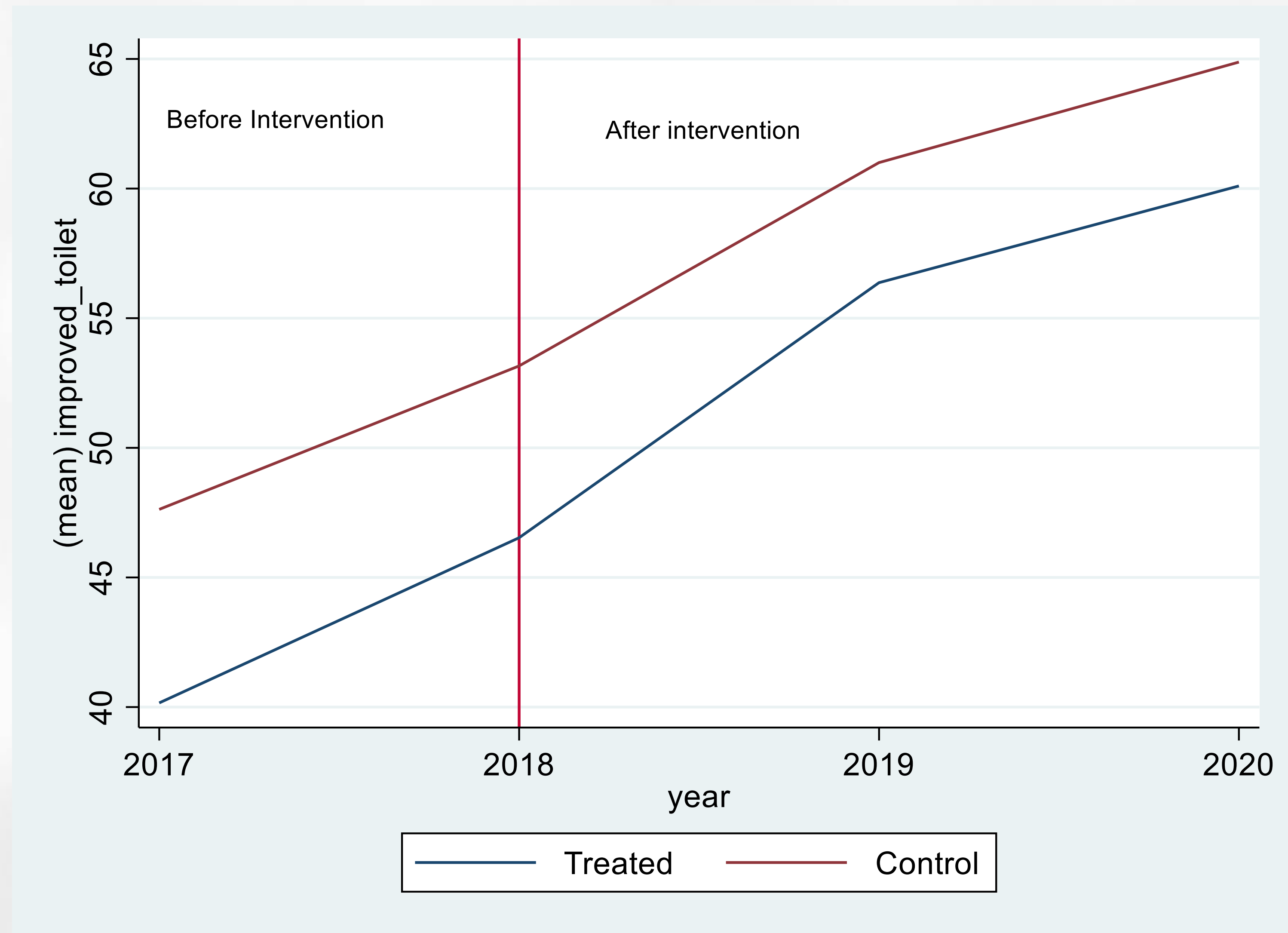
Ward-level model

| Variables | Values |
|--------------|---------------------|
| Treatment | 0.0782 (0.437) |
| Visit | 12.91*** (0.332) |
| Constant | 44.49*** (0.247) |
| Observations | 23,891 |
| R-squared | 0.059 |

Standard errors in parentheses

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

Average coverage among regions



Region-level model

| Variables | Values |
|--------------|----------------------|
| Treatment | -4.369*** (1.395) |
| Visit | 14.17*** (1.359) |
| Constant | 48.69*** (1.151) |
| Observations | 416 |
| R-squared | 0.235 |

Standard errors in parentheses

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

Roadshow study conclusion

At both small and large scales, the campaign's on-ground activities had a significant impact on the subsequent rate of increase in the coverage of improved sanitation among households.

This is quite surprising as less than 5% of the population in these areas directly attended the events.



Process evaluation: overall conclusions

- Media, roadshows and government activity all played significant roles in getting households to improve their toilets, in conformity with the campaign's Theory of Change.
- However, ranking their relative importance is confounded by cross-channel content and synergies between causal routes.
- The rate of toilet improvement increased during the programme, suggesting that although there is a long-term trend towards having an improved toilet, this trend was amplified by programme activities during the past few years.
- In particular, coverage increased at a greater rate in areas where roadshow events had taken place than in areas where they had not.

Achieving value for money

- Under-market prices paid for production and dissemination
- Prototyping and pre-testing ensured the effectiveness of communications
- Media integration allowed multiple uses of materials across channels
- Use of existing datasets (e.g., NSMIS) for monitoring and evaluation



Results: primary campaign outcomes

- 44% of households said they built an improved toilet because they heard or saw a campaign about improving toilets (direct effect), or were visited by officials (an indirect effect). (GeoPoll household survey 2021)
- The significant association of toilet construction with campaign influence is a good indicator of impact. (Roadshow outcome study)
- 76% of officials suggested that there had been an increase in toilet coverage as a consequence of the campaign. (LGO interviews 2021)



Evaluation: lessons learned

- The government can be an effective central coordinator of partners in national public health efforts when it leads from the top and filters down hierarchies, while also making use of bottom-up insights reflecting the needs, wants and incentives of the public and local officials.
- Building up a branded platform leverages partners and hence reach.
- Politicians and government officials making public-facing commitments and activities are more effective at behaviour change than working through training and workshops.
- Adaptive programming needs to be built into contracting (how milestones, jobs and outcomes are defined) and evaluation.

Other measures of success

- A Geopoll survey conducted in 2021 indicated that 97% of respondents in Tanzania had heard of *Nyumba Ni Choo*.
- The campaign has become a platform the government can use to promote other health behaviours, such as COVID-19 prevention and vaccination.
- Campaign outcomes probably helped Tanzania become a designated 'middle-income country'.



THANK YOU

PROJECT**CLEAR**

