

PRACTICAL IDEAS AND EXPERIENCES FOR SWACHH BHARAT MISSION (GRAMIN) CAMPAIGNS

A LIVING SOURCEBOOK

This Sourcebook is permanently a work in progress incorporating lessons, innovations and best practices happening across India and other countries. Please enrich it by emailing innovations, experiences, updates, and additions to Bhavna Thakur (bhavnathakur.25@gmail.com) and Vinod Mishra (vinodmishra2810@gmail.com).

The working document draws on contributions and experiences from many different sources in India and internationally. This includes contributions from District Collectors, Magistrates and others at workshops in Bhopal (*Getting to Swachh Bharat Gramin Faster Through Rapid Action Learning and Sharing*, 2015) and Nainital (*National Workshop on Community-Led Approach in the Context of Nirmal Bharat Abhiyan*, 2013).

These ideas and experiences can be used straight away. There is no need to wait. Anyone planning or leading a campaign at Block, District or State level can draw on them at once.

This checklist is an a la carte menu of dishes that can be cooked with different masalas. The first section is Practical Ideas for Activities and Actions, followed by Case Experiences. It is for champions who commit to the objectives of the SBM (G) – at State, District and Block levels, especially District Collectors, Magistrates and Zilla Parishad CEOs, CDOs and BDOs, and others in other Departments and organisations. All involved in campaigns can adopt, adapt, add to and improve on what follows, and will bring to campaigns their own experiences and creativity.

Practical Ideas for Activities and Actions

These are based on experiences and examples from India, and also draw on experiences from Bangladesh, Indonesia, Kenya and other countries. This document can be accessed at the CLTS Knowledge Hub website www.communityledtotalsanitation.org

To be clear and brief, the actions are in the imperative tense. But these are not instructions but options to review and choose from. They can be adopted, adapted or ignored, and creatively added to. There will be many variants and other activities in any campaign. Some of those here are common sense, and others less obvious. Those who have compiled them hope you will find them effective, enjoyable, and fun.

The headings are:

1. Be a champion: lead and inspire
2. Review, assess, don't wait, learn by doing
3. Get started with training, triggering and follow-up
4. Monitor, review and reflect
5. Anticipate and respond to demand
6. Try road shows, competition and queuing
7. Trigger, work with and support women's organisations and movements
8. Foster, find, encourage and support champions
9. Organise occasions for celebration and publicity
10. Adopt an inclusive team approach
11. Use many media
12. Involve children, teachers and schools
13. Be concerned about those less able
14. Select special community-level options
15. Foster horizontal learning and sharing, peer to peer
16. Beware of common traps: rewards, penalties and unrealism
17. Use RALUs for rapid action learning
18. Proactively promote and share innovations yourself
19. Assure continuity
20. A last word: do your own thing - adopt, adapt and invent

1. BE A CHAMPION: LEAD AND INSPIRE

- 1.1. *Lead and inspire*** There is no avoiding this. Again and again and again good things in sanitation and cleanliness have happened because a District Collector or Magistrate or Zilla Parishad, CEO, CDO, or BDO has been fired with passion and commitment. Will you make this your big thing, or a very big thing, during your time in post? There is evidence

enough that a committed Collector can make a huge and lasting difference.

The sanitation campaigns led passionately by district Collectors who are regarded as ‘Champions’ have been a huge success in rural Rajasthan. The Banka Bikano (brave and beautiful) campaign in Bikaner, and similarly Phutro (Beautiful) Pali, Chokho (Clean) Churu and Badlegi Bundi (Bundi will change) in Pali, Churu and Bundi districts in Rajasthan are all deeply rooted in the traditions and culture of these districts and have been spearheaded by inspirational leaders.

In Madhya Pradesh recent success stories have come from Harda and Indore districts where dedicated Collectors have been taking the lead.

Please refer to this link for more information on these campaigns in Rajasthan and from several other States:

<http://www.smart.ap.gov.in/myvillage/manuals/opendefacation.pdf>

- 1.2. ***Insist on using ‘owner’ rather than ‘beneficiary’.*** This change in phrasing should increase the sense of ownership with direct effects on use and sustainability.
- 1.3. ***Make Government set an example*** with good toilets, kept clean, free of smell, and accessible – toilets to be proud of - in offices, hospitals, other medical posts, schools, clinics, prisons, Anganwadi centres and other official buildings. (See SMS or call hotline, action 18.2. below)

2. REVIEW, ASSESS, DON’T WAIT, LEARN BY DOING

- 2.1. ***Review history.*** Have there been earlier campaigns? Who knows about them? Who were key actors, champions? What worked? What did not? What lessons can be learnt? What legacy have they left in terms of expectations and attitudes?

Useful places to start:

- Getting to Swachh Bharat Faster: workshop report - <http://www.communityledtotalsanitation.org/resource/getting-swachh-bharat-gramin-faster-through-rapid-action-learning-and-sharing-workshop>

- Pathways to Success: Compendium of Best Practice in Rural Sanitation in India - <http://www.wsp.org/sites/wsp.org/files/publications/WSP-Compendium-of-Best-Practices-Rural-Sanitation-India.pdf>
- Successful Approaches for Scaling Up Rural Sanitation in Rajasthan, India - <http://wedc.lboro.ac.uk/resources/conference/37/Mullackal-1982.pdf>
- Congratulations Nadia - <http://unicef.in/Story/1161/Congratulations-Nadia>
- Angul District - http://www.communityledtotalsanitation.org/sites/communityledtotalsanitation.org/files/Process_Documentation_Angul.pdf

2.2. Assess resources. What local opinion leaders, organisations (NGOs, private sector suppliers, media, professional associations, Self-Help Groups (SHGs), Swacchata Dhoots...), staff in Government departments, and training and research organisations, are potential resources and champions?

2.3. Find out more. What has worked elsewhere? Reflect on what you need to know and do not, and how to find out.

2.4. Formative research. Has there been any formative research about people's priorities in your district, or in similar neighbouring Districts? If so, study it. If not, should you sponsor it to find out people's preferences? And to find out whether appropriate materials and services are available in the market?

‘Formative research is the basis for developing effective strategies, including communication channels, for influencing behaviour change. It helps researchers and practitioners identify and understand the characteristics - interests, behaviours and needs - of target populations that influence their decisions and actions. It is usually recommended at the beginning of an intervention or program within a given area to define the needs and purpose of the program.

Formative research follows a process and includes a set of tools that can be used to help answer questions such as:

- What are current defecation practices and how satisfied are people with these?
- Under what circumstances is open defecation acceptable?
- Who is responsible for cleaning the toilet and how often does this happen?
- What are the most desirable features of a sanitation facility and how much are people pay willing to pay for these?

- Who are the major players in the supply chain? What are the opportunities to strengthen it? ¹

2.5. *From the start, learn by doing.* Don't delay. Engage and learn by doing with rapid feedback. Go to the field regularly to understand the realities on the ground. Rapid action learning activities can start at once. Look into setting up a Rapid Action Learning Unit (RALU) (see 17 below). No need to delay.

3. GET STARTED WITH TRAINING, TRIGGERING AND FOLLOW-UP

3.1. *Find good trainers and motivators.* This is a vital priority. Triggering communities for collective behaviour change, and follow up on triggering are critical. This needs people –facilitators, also called motivators, - who are passionate and well trained in participatory approaches, able to provoke and inspire. Some of the very best are seriously playful in their style- people who can act, joke, sing, dance. Good trainers who can pass on their enthusiasm and commitment to others, as well as their skills in facilitation, are scarce and worth their weight in gold. Find whoever you can, and make the best use of them to train and mentor others. Check if your state has a resource pool of trainers, see if there are trainers in neighbouring districts or blocks.

3.2. *Build up your own a cadre of master trainers, trainers and facilitators/motivators* able to trigger and (crucially) follow up on triggering.

Please refer to the following link describing the methods and rationale for selecting Motivators for triggering behaviour change used in Harda district of Madhya Pradesh:

<http://www.mdws.gov.in/sites/default/files/200001281412.pdf>

3.3. *Insist that training is hands-on and in real time in communities.* Minimise classroom training. At all costs avoid cascade training where trainers train others to train others. This was a disaster with Participatory Rural Appraisal and the National Watershed Programme. Ensure that much of the training takes place in real time with communities with whom there is then responsible follow up.

¹ Conducting Formative Research by WSP accessed through the website

<https://www.wsp.org/sites/wsp.org/files/userfiles/WSP-SMToolKit-Formative-Research.pdf>

- 3.4. *Select from trainees and motivators those with the best aptitudes.*** Often many of those trained, through no fault of their own, do not have the aptitudes needed for facilitation, and for working with communities. Pick those who do best.
- 3.5. *Consider focusing SBM first on communities with relatively favourable conditions.*** This is very much a judgment call, whether to gain experience and confidence before tackling more difficult conditions. Favourable conditions tend to be relatively small and homogeneous communities, without internal conflicts. Starting with them you may be able to build on success. Success can help motivate staff and demonstrate a good implementation model.

Please refer to the following link for more information on Factors Associated with Achieving Open Defecation Free Status based on *Lessons from East Java*: <http://www.wsp.org/sites/wsp.org/files/publications/WSP-Factors-Achieving-ODF-East-Java.pdf>

- 3.6. *Concentrate triggering and follow up at good times of the year,*** often after the monsoon and harvest, when people are better off and have more time. This may be a quite a narrow window of a few months. Plan for it and then act intensively. (Triggering during the monsoon has often simply not worked).
- 3.7. *Make collective behaviour change and ODF communities your target, not toilet construction.*** Focus your campaign on collective behaviour change and the new social norms that OD is anti-social and totally unacceptable in the Swachh Bharat of 21st century India. Toilets do not guarantee use, and in the absence of collective behaviour change, they are often either not used, or not used by all in a household, or not used all the time.
- 3.8. *Report communities ODF and progress towards them, not toilets constructed.*** You may be under pressure to achieve targets of collective behaviour change to become ODF, competing with other Districts. Recognise that changing social norms to achieve genuinely ODF behaviour can take time. Stress and show that what you are reporting is real, choosing to report slower, more participatory and sustainable progress, not more rapid (misleading and less sustainable) progress of constructing and counting toilets. Be proud of your solid progress.

- 3.9. Verify ODF (and other cleanliness) status and behaviour.** Verify thoroughly and credibly. This will require that those who verify are not the same ones that implement! Choose from the wide range of verifiers (third party, mixed team, departmental staff, neighbouring community leaders, civil society, local leaders, the media, students or various combinations) or invent your own.

Guidelines for ODF Verification in India

Sanitation is a State subject. After the launch of Swachh Bharat Mission, work of sanitation has accelerated in all the States. At the same time, in order to ensure quality of outcomes, two things have been emphasised. One, focus on behaviour change, and two, focus on making villages completely open defecation free (ODF) for health benefits to accrue (while continuing to respond to demand for individual toilets).

1. The process of ODF verification will start with a Gram Sabha resolution of self-declaration of achievement of ODF status. The resolution may be for the entire Gram Panchayat or even a village/habitation.
2. Since ODF is not a one-time process, at least two verifications may be carried out. The first verification may be carried out within three months of the declaration to verify the ODF status. Thereafter, in order to ensure sustainability of ODF, one more verification may be carried out after around six months of first verification.
3. The unit of verification may be a Gram Panchayat or even a village/habitation
4. The indicators for verification will be as per the definition of ODF given by the Government of India. The States are free to verify any more indicators, should they so desire.
5. The State will get verified every GP/village, that self declares itself as ODF
6. The State may choose through whom to verify - it can be through own teams or through third party. If own teams are used, there will be cross verification of villages/blocks/districts. Even in these teams, it will be useful to have non- governmental independent reputed people, including journalists. If third party is resorted to, there will be clear ToRs and standards. It may be better to have voluntary teams.
7. The block officials, community may be involved during the process of actual verification.
8. The State can design their own format for evaluation. However, the indicators defined in the definition of ODF must be captured in the survey. Typically, both village and household level questionnaires may be designed.

9. The States may use this format or evolve their own survey format. However, the indicators defined in the definition of ODF must be captured in the survey.
10. The verifying teams will have to be appropriately trained to understand ODF definition, including safe disposal of excreta. ²

3.10. *Make ODF verification a positive experience.* Keep the atmosphere positive, not critically judgemental. Let verification be a positive experience. Facilitate villages (habitations) who do not pass first time to discuss and analyse what they need to do, and to decide as date when they will be ready for a re-verification.

Challenges and Opportunities

Going to scale with verification poses many challenges:

1. Identifying and standardising good practices and processes for consistent application at scale
2. Determining who should conduct verifications. This is one key to the credibility of the process and becomes increasingly important as programs scale up
3. Making the verification process a positive experience for communities so that they learn, are empowered and improve their practices
4. Ensuring that verification and certification can keep up with communities' claims to be ODF without excessive waiting time
5. Maintaining verification standards at a high enough level
6. Managing to go to scale while still encouraging celebrations of ODF verification and certification
7. Ensuring resources and capacity to conduct verifications in a timely and effective fashion on a large and sometimes exponentially expanding scale. This critical challenge needs to be anticipated, confronted and planned for at the start of programmes. ³
8. Be wary of false verification and cases of corruption

3.11. *Celebrate.* Help villages and GPs that achieve ODF and cleanliness standards to organise big celebrations with wide political and media coverage, inviting other PRI leaders. Use ODF villages as examples to

² See: Guidelines for ODF Verification:

http://mdws.gov.in/sites/default/files/R_274_1441280478318.pdf

³

http://www.communityledtotalsanitation.org/sites/communityledtotalsanitation.org/files/3_Lukenya_Verification.pdf

show to other villages and GPs and to influential people.⁴

- 3.12. *Report on and share innovations and lessons learnt.*** Concentrate your reporting on what has worked, what has not worked or not worked so well, on adaptations, innovations and lessons learnt. Through Hike and WhatsApp, your RALU and in other ways share what other Collectors and BDOs will find interesting and useful, thus multiplying your impact through wider adoption of what you have found works.⁵

4. MONITOR, REVIEW AND REFLECT

- 4.1. *Facilitate communities to monitor their progress on maps and/or through other means.*** They can then be displayed in the community for all to see.
- 4.2. *Introduce regular reporting for monitoring progress.*** Gather continuous feedback from the ground. Ask questions from those working in the field, visit yourself, see where action is needed and respond appropriately. Encourage the sharing of obstacles through RALUs (see 17) and/or WhatsApp groups.
- 4.3. *Convene meetings at regular intervals and at different levels*** for sharing progress, experiences, reflection and learning, and for planning the next actions. This can include with staff and with the community.
- 4.4. *Strive for realism by recognising, applauding and rewarding those who report difficulties and slow progress.*** Document challenges – many will be the same as those being faced in other parts of the state and country.
- 4.5. *Innovate, do what makes sense for you and share your experiences***

5. ANTICIPATE AND RESPOND TO DEMAND

- 5.1. *Assess potential bottlenecks.*** A lack of masons, a lack of materials and the slow release of the incentive can all delay the process.

⁴ See: Congratulations Nadia - <http://unicef.in/Story/1161/Congratulations-Nadia>

⁵ See: Notes for Convening, Facilitating and Following Up on Rapid Action Learning and Sharing Workshops:

http://www.communityledtotalsanitation.org/sites/communityledtotalsanitation.org/files/Notes_for_RALS_workshops.pdf

- 5.2. ***Investigate the local market(s) and what is available at what cost and in what quantity, and likely demand (including by poor people)*** (see also formative research 1.4. above). Anticipate need and demand, work with vendors, and take steps to assure adequate suitable timely supply
- 5.3. ***Avoid standard designs, especially for superstructure and when costly.*** Focus choice on alternative toilets within the same moderate price range. If septic tanks are regarded as the aspirational norm, progress will be slowed as people will say they cannot afford one or cannot afford it yet. Make sure facilitators/motivators and community members know about alternative options.
- 5.4. ***Be concerned with stable and adequate substructure and simple slab,*** Superstructure can often be built at low cost with local materials and labour
- 5.5. ***Investigate potentials for by cooperatives*** e.g. of youths as in Panipat, to manufacture or retail materials, procurement committees

6. TRY ROADSHOWS, COMPETITION AND QUEUING

- 6.1. ***Organise travelling roadshows*** with champions like Natural Leaders, political leaders, films, theatre and displays and invite local government and community leaders. Go from Block to Block, or GP to GP, or village to village, to inform and inspire them, and to assess enthusiasm. *See case study 2 on Nirmal Bharat Yatra.*
- 6.2. ***Consider first come first serve queuing.*** For whatever you have on offer (triggering and follow up, marketing, material supply....) invite GPs to make written requests which include commitments or pledges on their part to take preliminary actions which you decide. Make it clear to all that you will operate on a first come (first deliver the written commitment) first served basis. Then take them steadily and systematically in sequence. Pressures to jump the queue will be positive indicators.
- 6.3. ***Use public meetings to drive the campaign.*** Use all public meetings for drive the campaign, and start special meetings for reporting progress, and encouraging competition between villages, between GPs, and between Blocks.

- 6.4. *Recognise and honour those who do well.*** And ask them to advise and help others who are slower or struggling.

Rewards and Recognition

The Ministry of Drinking Water and Sanitation (MoDWS), Government of India, honours rural sanitation champions across India with the launch of a coffee table book, *An Open Mind*. The book highlights the inspiring stories of these sanitation champions who have driven positive behavior change in their communities and helped their villages achieve Open Defecation Free status.⁶

Rewards and recognition played a major role in motivating PRIs and communities. For many, the very notion of becoming an ODF community and receiving the associated recognition was sufficient motivation to work hard towards the goal. Achieving ODF status is made mandatory by the DSM to issue sanction of funds up to 20 lakhs for SLWM projects under NBA. For the first batch of GPs, the check of 20 lakhs was presented as a reward for achieving ODF by the Chief Minister in a public function. This has become an effective motivating factor encouraging Sarpanchs to initiate and lead an ODF campaign. In addition, the District Collector awards certificates of recognition to the best performing Sarpanchs and nodal officers from time to time. Most notably, the Chief Minister of Rajasthan awarded the District Collector, on Independence Day in 2013, recognizing the remarkable results of the campaign.

7

7. TRIGGER, WORK WITH AND SUPPORT WOMEN'S ORGANISATIONS AND MOVEMENTS

- 7.1. *Consult Women's Organisations*,** especially the federations at different levels of the NRLM and seek their advice and support for the campaign. Invite them to share their views on sanitation, hygiene including menstrual hygiene, and toilet design and the roles they can play. *See case studies 6, 7 and 8.*
- 7.2. *Trigger them*,** if necessary, and dialogue and learn from them about approaches and tools they can use, and then encourage them to test and spread them. Involve them in training. Explore whether they can become prime drivers of the campaign. *See case studies 6, 7 and 8.*

⁶ <https://sagarmedianews.wordpress.com/2015/10/07/3581/>

⁷ <http://www.smart.ap.gov.in/myvillage/manuals/opendefacation.pdf>

- 7.3. *Ask their advice on men's behaviour.*** Check with them whether men's preference for OD is a problem. If it is, seek their advice about how to help men to change, what they can do, and what support they need.
- 7.4. *Encourage them to conduct their own campaign*** at all levels from household to village to GP to Block to District to State. Draw inspiration and support from their commitment and actions and celebrate their achievements.
- 7.5. *Don't ignore men.*** See case study 8.

8. FIND, FOSTER, ENCOURAGE AND SUPPORT CHAMPIONS

- 8.1. *Search for champions wherever they can be found.*** Natural Leaders in communities, and others in local governments, government departments, schools, NGOs, religious organisations, and local groups and organisations traditional leaders and politicians of all parties.
- 8.2. *Inspire other local influential people to become champions of the SBM(G).*** Use many ways to familiarise them including field visits and meeting Natural Leaders and successful communities. Being present at a good triggering and ODF celebration can be transformative.
- 8.3. *Prioritise religious leaders.*** Convene and encourage sadhus, sanyasis, gurus, imams. Priests, pastors and other influential and respected religious and spiritual leaders to preach and persuade their congregations and followers to abandon OD and adopt hygienic behaviour.
- 8.4. *Ensure a non-partisan campaign by enlisting the support of political leaders of all parties.*** Encourage them to support the campaign in all their meetings. Help them to recognise that there are women's, and men's, votes in safe and convenient sanitation, and in a clean and healthy environment, and that these are profoundly in the common public and national interest.
- 8.5. *Spread sideways.*** Explore whether you can encourage, catalyse and support Natural Leaders to become Community Consultants and spread the movement to other communities.

<p>Natural Leaders: are activists and enthusiasts who emerge and take the lead during the CLTS processes. They also play a critical role in the triggering</p>

process and support their communities to adopt new sanitation practices. Men, women, youth and children can all be Natural Leaders. Some then become community consultants, triggering and providing encouragement and support to communities other than their own. Likewise, CLTS empowers children to advocate for cleaning up within the community through slogans, songs and presentations.⁸

8.6. *Identify/Involve activist resource persons.* Consider whether in or through NGOs, religious or other organisations, there can be activist champions who can be committed and charismatic drivers and key actors in the campaign.

8.7. *Invite or in other ways make use of the high profile celebrities who have committed to Swachh Bharat* from sports, television, radio, movies, and so on. Invite them to engage with the grass roots, and to come and identify with, endorse, support and give additional glamour to your District campaign. *See case study 5 on Sachin Tendulkar.*

9. ORGANISE OCCASIONS FOR CELEBRATION AND PUBLICITY

9.1. *Make a big deal out of ODF celebrations.* Encourage and enable villages and GPs, and Blocks that become ODF to organise celebrations, invite the media and prominent people, and maximise publicity and awareness among others that they are behind the game, that ODF is the way things are going, and they are out of step.

9.2. *Make a splash on world days.* Organise occasions for Republic Day, Independence Day, Global Hand Washing Day (October 15th), Gandhi Jayanti and World Toilet Day (November 19th) involving schools, demonstrations, media coverage, and creative stunts that you or others can dream up.

10. ADOPT AN INCLUSIVE TEAM APPROACH

10.1. *Design messages and behaviour change communication.* Invite stakeholders - DCs, CEOs, Block, GP level actors, trainers, motivators - to help create the different sanitation promotion messages. These can differ block to block, GP to GP.

8

- 10.2. *Convene and energise task forces at different levels.*** Consider inviting diverse members across the spectrum of organisations. Seek out and involve any organisations (typically but not only NGOs) with a wide presence in the campaign area and a suitable capability and orientation, together with Government Departments.
- 10.3. *Bridge barriers.*** In the broadest sense make your campaign non-partisan throughout – with leaders and others of all political parties, all Government Departments, all religions and spiritual groups. Gain buy in that this is a campaign about human wellbeing that transcends all divisions, and around which whatever their other differences, can unite.
- 10.4. *Promote a team approach.*** Mobilise multi organisation teams for field visits – with people from different departments, NGOs, religions, political allegiances, professions.....sharing transport, to visit, encourage and inspire local action, and to support and learn from local activists and champions.
- 10.5. *Encourage the sharing of resources*** – finance, vehicles, materials, communication facilities....
- 10.6. *Train, mobilise, enthuse key workers at all levels*** - Swachchhata Doots, Anganwadi workers, Panchayat secretaries, health workers and others as an army of foot soldiers for the campaign
- 10.7. *Identify, motivate, nurture and recognise*** passionate and committed staff.

11. USE MANY MEDIA

- 11.1. *Inform, invite and inspire media stakeholders.*** Journalists, film makers, gurus, cartoonists, artists, broadcasters, disc jockeys, and actors can all take part and contribute
- 11.2. *Use local language media*** do not just rely on messages in Hindi or another language of the majority. Local media can report on the successes in different GPs, villages and blocks.
- 11.3. *Hold competitions for slogans, songs, verses, cartoons and posters and then publicising and using these.***

- 11.4. ***Foster competitions*** between Blocks, between schools, between GPs and between villages, with publicity and recognition to engender pride, and with appreciation to all who have been able to take part (there may be others or any who did not qualify)
- 11.5. ***Make and show videos*** recognising and honouring local champions and achievements, stressing commitment, pride and self-respect. See case-study 3.
- 11.6. ***Devise striking and shocking posters*** and plaster them around so that people keep on seeing them. Include messages on stunting, undernutrition and diarrhoea. Do the same with widely distributed one-pagers.
- 11.7. ***Find and engage existing street theatre groups*** to make open defecation, handwashing and clean environment themes for performances and to go on tour.
- 11.8. ***Promote, commission, support, popular theatre at the GP or village level.*** Encourage GPs and villages to create theatre for their own entertainment, and to tour other villages and GPs. Have a competition and prize for the most effective theatre, with village people as judges. Support the best theatre groups to go on wider tours.
- 11.9. ***Video theatre performances*** and screen them on television and in many venues
- 11.10. ***Persuade TV to include shit, OD and SBM (G)*** in TV serials and other content. Get the local shit words into the media and regularly used by presenters and actors.
- 11.11. ***Publicise competitions for poems, songs and slogans.*** Encourage and recognise wit and wisdom. Have competitions for children. Find poets and song-writers able to compose popular poems and songs with local wit and idiom
- 11.12. ***Promote performances and recitals*** at meetings, special occasions, celebrations, even weddings where a toilet has been part of the negotiation.
- 11.13. ***Start news sheets or letters,*** some by women, some by children, with cartoons, anecdotes, recognition of natural leaders and so on, and distribute widely

12. INVOLVE CHILDREN, TEACHERS, SCHOOLS AND ANGANWADIS

- 12.1. *Ensure at schools have enough toilets for girls and boys.*** Make sure there is access to water and handwashing facilities with soap. Girls menstrual hygiene management needs should also be considered when designing and building appropriate facilities
- 12.2. *Make sure toilets are clean and maintained.*** Set out clearly the roles and responsibilities of different institutions, including schools. Ensure there is a dedicated budget line for operations and maintenance.
- 12.3. *Involve children throughout.*** Trigger them in communities at the same time as adults, and let them then present to adults. See case-study 4.
- 12.4. *Recognise and support children in forming groups to stop OD in their communities.*** Supply them with materials (whistles, T shirts, caps have been used).
- 12.5. *Organise school competitions*** for clean toilets, songs and poems children have composed and essays they have written, and celebrate these with a special festival or event
- 12.6. *Organise special occasions for children.*** Through teachers and others, find the children Natural Leaders who will emerge, and invite them to their own special public meeting (as was done in Panipat District). Honour them. Give awards and if appropriate certificates. Encourage their further and enduring activism for Swachh Bharat and a clean home and community environment.

13. BE CONCERNED ABOUT THOSE LESS ABLE

- 13.1. *Repeatedly raise questions about the poorest and those least able to help themselves,*** asking how communities can help them, inducing and encouraging a sense of community responsibility
- 13.2. *Asking Natural Leaders to identify them,*** to ensure that they are indicated on community maps, and to find ways they can be helped

13.3. *Raise issues of the disabled.* See *Frontiers of CLTS 3 Disability: Making CLTS fully inclusive*⁹. Ask Natural Leaders to ask them what they need and what would help them. Encourage communities to invent and provide suitable and convenient amenities for them.

13.4. *Ensure technologies are accessible for all.* Adaptations will have to be made for some living with disabilities. See GoI and WaterAids *Handbook on Accessible Household Sanitation Facilities for Persons with Disabilities* for more information.¹⁰

13.5. *Find, publicise and honour those who have helped others,* setting an example to create a norm

14. SELECT SPECIAL COMMUNITY-LEVEL OPTIONS

14.1. *Stickers on houses.* Have different coloured stickers on houses, for instance for no latrine, latrine in construction, latrine complete (East Java, Indonesia)

14.2. *Participatory monitoring maps.* Facilitate communities to display names on a map showing progress by household, marking on those who need help

14.3. *Convene for pledging.* At a suitable stage, early in the process, soon after triggering, or on verification or celebration of the community being ODF, let local leaders (sarpanch, Pradhan...) convene all community members to sign a pledge not to do OD in the future (pioneered in India, in Namkhana Block, West Bengal). See case-study 1 for more details.

15. FOSTER HORIZONTAL SHARING AND LEARNING, PEER TO PEER

15.1. *Horizontal learning.* Work with the RALU to convene and facilitate peer-to-peer co-learning between pioneers and actors, using the approach of Horizontal Learning (**ref to follow**)

9

http://www.communityledtotalsanitation.org/sites/communityledtotalsanitation.org/files/Frontiers_of_CLTS_Issue3_Disabilities.pdf

¹⁰ <http://wateraidindia.in/wp-content/uploads/2016/01/WaterAid-ENGLISH-low-res.pdf>

- 15.2. *Promote and support cross-visits*** cross-visits between communities, sub-districts, districts and organisations for community members and government staff. Visits can be made by champions and those struggling.
- 15.3. *Invite ideas*** from all categories of committed actors (local government, government departments, traditional authorities, NGOs, religious leaders, teachers, journalists, theatre groups, community Natural Leaders....) about how they can inform, inspire and support their peers in other places. ***Support them in taking action***
- 15.4. *Catalyse and encourage Natural Leaders to form groups and organisations***, and to work in other communities, to combine to manufacture sanitary materials, etc.

16. CAUTIONARY NOTES: REWARDS, PENALTIES AND REALISM

- 16.1. *Be cautious with rewards***. Recognise rather than reward. Opinions differ about these: some see them as incentives; others see in them a danger of weakened or mixed motivation ('stopping eating each others' shit' should be enough). They have a record of opening the door to misleading reporting through temporary or dissembled ODF in order to obtain the reward, as with the NGP, most of the NGP villages never having been ODF in the first place.
- 16.2. *Reflect on ethical issues*** with penalties for OD. These are a continuum from reasonable persuasion to punitive abuse, as the sequence of this listing illustrates: individual triggering - household visits - social pressure - following people going to OD and talking to them, singing at them or whistle blowing – shaming them in public meetings - fining open defecators - identifying whose shit is whose - making the producer clean it up - public exposure - bullying and humiliation - photographing in the act and displaying the photograph - denial of rights (ration books, pensions, licences, services....), arresting and locking up. The human rights abuses of these latter actions have occurred in some campaigns.
- 16.3. *Do not marginalise minorities***. Sanctions should not be used to further exclude lower castes or those with low economic status. Sanctions should only be used by those who have the ability change but are refusing to for example those with functioning toilets who continue to openly defecate.
- 16.4. *Resist unrealistic targets for ODF***. Do not set unrealistic targets for early achievement of the collective behaviour change of ODF. Ambitious

targets energise, inspire and focus effort but shift monitoring from collective behaviour change to counting toilet construction. Ambitious targets bring the risk of hasty and shoddy construction, dissembling, inflated reports, lack of ownership, low use of toilets, lack of maintenance and poor sustainability. Remember that behaviour change takes time.

16.5. *Strive for honest feedback* about what is happening. Campaigns often generate myths – even whole districts have been declared ODF in matters of months! This does no one any good. Realism pays off in long-term sustainability.

16.6. *Recognise that improved sanitation is a long process*. Campaigns don't end at ODF. Post-ODF support is needed to reinforce collective behaviour change and should go on long after any intensive campaign. Think of innovative post-ODF behaviour change communication.

17. PRACTISE RAPID ACTION LEARNING AND SHARING

Rapid Action Learning Units:

Rapid action learning and sharing should be a key element in your campaign, affecting the orientation of all actors in the campaign. You have the option to set up a Rapid Action Learning Unit (RALU).. There will be a guidance note on RALUs. They are intended as small, nimble and versatile teams to help you by keeping in touch and up-to-date with on the ground realities, identifying bottlenecks, seeking out, accompanying and assessing innovations, conducting quick ad hoc inquiries and research, and sharing findings without delay. They are not for routine monitoring and reporting. The RALU should enable you to learn and adjust fast, abandon what does not work, adapt to change, and multiply success. It must also be in touch with and learn from other RALUs. Even without a RALU, or before one, you can at once commission innovations and investigations for your own rapid learning.

17.1. *Make it a priority to establish or commission a RALU* or a similar mechanism that can facilitate rapid feedback and learning. It may be one or more individuals reporting to you, a team of young researchers, a group in a local college or institute, or in an NGO or other organisation. Ensure mobility and independence, and *welcome and praise them when they bring bad news*. Recruit energetic innovative enthusiastic people with initiative and curiosity. No dead wood.

- 17.2. *Learn fast from feedback.*** Use your RALU, and those commissioned by it (or by you if you do not have a RALU as such or to start with) (students, consultants, researchers....) to provide quick information and feedback on what is happening, how people are reacting to elements in the campaign, what is working, what is not....and how performance can be improved.
- 17.3. *Seek innovations.*** Commission your RALU to be alert for, and to seek out and assess innovations in any or all of the activities of the campaign, whether technical (to do with marketing and construction), methodological (as with household self-reliance in construction, or IEC etc), or organisational (as with the involvement of SHGs, or engagement of the private sector...), and to feedback what can be learnt and incorporated in the campaign.
- 17.4. *Welcome mistakes and honest reporting*** and be wary of those only reporting success. Changing sanitation practices is very difficult problems and challenges should expected. .

18. PROACTIVELY PROMOTE AND SHARE INNOVATIONS YOURSELF

- 18.1. *Encourage innovations and innovate yourself.*** Here are some of the sort of ideas in addition to others above:
- ***SMS or call hotline.*** Set up a hotline for reporting dirty or non-functioning toilets in public buildings (offices, clinics, schools, anganwadi centres...) and in public places (market places, communal toilets etc)
 - ***Saturate with basic hardware.*** Unused sanplats from earlier programmes are often taken up immediately after triggering. Try saturation on a small scale.
 - ***Public pledging.*** Facilitate different ways of public pledging to stop OD – when in the process towards ODF, how –verbal, written, with all the village present, all signing including children etc – and find out what works best
 - ***Coupons for hardware for those least able*** (as in Pakistan). Those least able are identified in a participatory process. They receive coupons which can be used in local markets.

- **IEC for participatory quality assurance of substructure:** Teach villagers in detail, with handout diagrams, how masons should build the substructure of their toilet so that they can then collectively closely supervise the masons throughout their work.
- **Try new IEC approaches,** for instance informing people that open defecation stunts children whose cognitive development is impaired, who do worse in school, earn less later in life and with damaged immune systems are more vulnerable to sickness in later life. *Whose child will you be stunting today? Who will be stunting your child today?*

18.2. Ways of using incentives for collective behaviour change. Postpone incentive payments until villages are ODF, encouraging self help and mutual help. Within this frame try out various modalities for using funds to accelerate the process. [States will have their own policies. Within these maximise the degree to which people construct toilets for themselves, with incentive payment postponed]

18.3. Share what you have done and learnt with other Districts and the State through workshops¹¹, meetings, case-studies, process documents, telephone calls etc.

19. ASSURE CONTINUITY

Lack of continuity in post of champions who lead campaigns is a recurrent weakness. Repeatedly, there has been a District Collector or Magistrate or BDO who has mounted a campaign with passion and energy only to be posted, with sudden loss of leadership and of momentum, handing over to a successor who has other priorities. If you are a champion whether in Government at Block, District, State or National level, or in a training organisation, or in an NGO or other organisation, you can anticipate this and minimise the discontinuity and damage in several ways.

19.1. Negotiate continuity for yourself. Ensure that your campaign and its importance are known and appreciated at higher levels, especially among those who influence and decide postings including leaders at local and other levels

¹¹ See Notes of Convening, Facilitating and Following-Up on Rapid Action Learning and Sharing Workshops <http://www.communityledtotalsanitation.org/resource/notes-convening-facilitating-and-following-rapid-action-learning-and-sharing-workshops>

- 19.2. *Build capacity and commitment.*** Find, appoint, inspire and build the capacity and commitment of staff who have the ability to carry on when you have left
- 19.3. *Plan and act for long-term sustainability.*** Do this in all domains. Plan and act from the beginning for sustainability – in training, triggering, follow up, supply of materials and services, the spread of innovations, and in your RALU
- 19.4. *A like-minded successor.*** When you are posted, try to ensure that your successor is someone who shares your commitment to the SBM.
- 19.5. *Maximise the handover period to your successor*** so that you can fully brief her or him, including introductions to the principal local actors

20. ADOPT, ADAPT, INVENT

- 20.1. *Whether at State, District, Block or other level, and whatever your department or organisation, do your own thing.*** There is no silver bullet, and no one size fits all. Whatever you do will be distinct and unique. There will be innovators and innovations. Others can learn from you. Correct and add to, the ideas in this sourcebook. Please share what you do and learn. Note your methods and experiences and send case-studies, success stories, challenges and bottlenecks and practical lessons to the State and National Rapid Action Learning Units (RALUs) for wider dissemination and impact.

CASE EXPERIENCES

1. Public Pledging:

An innovation in 7 GPs of Namkhana Block of the Sundarbans in West Bengal has found that public pledging involving all adults was very successful and promoting the sustainable use of toilets. Namkhana Block was quite quickly declared open defecation free.

An official meeting was convened of all adults in the community. At the meeting, one by one, they pledged publicly to stop open defecation, and signed to this effect.

On subsequent visits to the block, people who had participated in a triggering session were keen to remain ODF and quite a few among them had improved on their pit latrines. Almost all latrines were clean and there was evidence of use including presence of soap in all latrines inspected. A sample study undertaken about 10 months after the Namkhana pledges showed that about 90 % of the people interviewed recollected their pledge. (The remaining 10 per cent were accounted for by a GP where,

to meet a target, the pledge signatures were forged but the pledging never took place). In other words there was 100 or almost 100 per cent recall. During a later visit, in 2013- about two and a half years after the pledge, he found that people still remembered their pledges and were intent on abiding by them. They considered it the responsibility of the elected representatives and the people's institutions to ensure that others kept their pledges.

1. Correctly mobilized, pledges can work. It is essential that the process is conducted without administrative or political bias. Public pledging by all members of a community is an intermediate milestone in achieving sustainable collective behaviour change. It should be planned for and be built-in and discussed during intervention rollout.

2. The sacrosanct nature of pledges should be strongly emphasized. This will reduce chances of people simply signing without real commitment.

3. Continuous follow up over a protracted period of time is required to ensure that all members of the community stick to their pledges.

4. The very poor and those vulnerable to natural hazards need a distinct mechanism, which assists them to make and stick to their pledges.¹²

2. Nirmal Bharat Yatra

An unlikely carnival has travelled over 1,000 miles across India, including children's games, workshops, cricket, Bollywood and... poo.

The carnival, known in India as The Nirmal Bharat Yatra, was organised by Indian development company Quicksand and WASH United, an organisation where sports stars stand with politicians, school children and citizens from around the world to fight for universal access to safe drinking water, sanitation and hygiene.

The travelling carnival, which reached 100,000 people across India during October and November 2012, aimed to spread simple messages that will save lives: the importance of hand-washing at proper times throughout the day, using a toilet and menstrual hygiene management.

However, the means of relaying these messages were particularly unique. It was not a dour, scaremongering campaign delivering uncomfortable truths, but instead a brightly-colored touring fair involving Bollywood-style performances, games of cricket, celebrities and lots of open, friendly discussion.

It is hoped that the carnival will break India's reluctance to address the economic, political, social and environmental issues related to sanitation and menstruation. Hundreds of news articles have been written in Indian newspapers about the travelling party. Nothing like this had ever been done before.

¹² Adapted from: <http://www.communityledtotalsanitation.org/resource/public-pledging-collective-behaviour-change>

3. Community-Led Video for Nutrition

Since 2012, SPRING (Strengthening Partnerships, Results, and Innovations in Nutrition Globally Project) and Digital Green have been adapting their “human-mediated digital learning approach” for the promotion of key maternal, infant, and young child nutrition (MIYCN) and hygiene-related behaviours. They have been using mobile video screenings and facilitated discussions.

A suite of 10 videos have been developed that showcase key nutrition and hygiene behaviours. They have been disseminated through local partner Voluntary Association for Rural Reconstruction and Appropriate Technology’s (VARRAT) agricultural-focused Self-Help Groups (SHGs) in 30 communities in Keonjhar District, Odisha.¹³

A video about the work that has been happening is available here: <https://www.spring-nutrition.org/media/videos/leveraging-community-led-video-nutrition>

4. Galli Galli Sim Sim

Galli Galli Sim Sim, the Indian adaptation of Sesame Street’s beloved characters for Sesame Workshop India’s very first global health campaign, ‘Cleaner, Healthier, Happier’ pilot was launched in Kolkata, India. This campaign aims to reduce the number of children under the age of five that contract preventable and treatable diseases by providing access to meaningful sanitation and hygiene education. Through a variety of videos and games, the important messages along behaviour change and practices related to hygienic living are imparted to children. Results showed that children who participated in this program were 48% more likely to use an improved latrines at home than before participating in the program, and showed an 11% greater improvement in using soap for hand washing compared to children who did not participate.

Please refer to the following link for more information: <http://www.sesameworkshopindia.org/our-initiatives/raho-swacchh-jiyo-mast/>

5. Celebrity endorsements:

Fondly called the “God of Cricket” or “Master Blaster,” Sachin Tendulkar is considered one of the greatest batsmen of all time in the sport that is considered a national institution in India, cricket. But Mr Tendulkar has many feathers to his cap. He is also a member of parliament and has been involved in promoting and supporting several social causes in India relating to health care and education.

Mr Tendulkar has been associated with UNICEF for more than a decade now and has supported various of the organization’s causes. In 2003, he put his weight behind an initiative to create awareness about polio and promote polio prevention in India. Since 2008, he has been significantly involved with UNICEF in creating and promoting hygiene and sanitation in communities. In 2013, he was appointed UNICEF Ambassador for South Asia to advocate this important cause all the region.

See more at: <http://unicef.in/Celebrity/6/Sachin-Tendulkar#sthash.ZJpoi8U2.dpuf>

¹³ <https://www.spring-nutrition.org/about-us/activities/digital-green-collaboration>

6. Self-Help Groups (SHGs) role in Achieving Total Sanitation: Case-Study of Sakhara GP in Maharashtra

The half an hour journey through dry terrains and bumpy roads to Sakhara village proves quite refreshing. It is more so, because of the local women whose determined efforts have changed the face of the village and brought an honor to it.

Remotely located Sakhara, with barely 72 households of adivasi Gond community, falls in Pandharkawada block in Yeotmal district, Maharashtra. Recently this village has earned recognition in the district, which even the more prosperous villages yearn for. In November 2005, Sakhara received an award as the first 'open defecation free' village in the block from the State Government of Maharashtra. This improved status and subsequent appreciation of the village is an outcome of ingenious efforts of Self-Help Groups (SHGs) of local women. Sakhara received an award as the first 'open defecation free' village in the block from the State Government of Maharashtra.

Sakhara had four active SHGs formed in 2001, when UNICEF began to work with the community. The village planning exercise initiated by UNICEF was able to equip women with knowledge on diverse and critical issues pertaining to their lives. The intervention, which is based on empowering communities, energized the women to bring about a dramatic and positive change in their lives. Today, each and every household is represented in these groups. The groups are not merely restricted to savings and credit activity, but have also become forums of women for learning and action. 'Our groups have changed us and made progress possible,' expresses Kusum Kumbare, one of the SHG members, on the meaningful existence of groups to women's lives.

The remarkable changes set off by these women present a wide range of concerns. There is no child in the village that remains out of school - these vigilant women ensure proper functioning of school and Aangan Wadi Centre. The SHGs have strived to impose total ban on liquor in the village. They have also contributed in improving the village approach road.

The latest achievement is attaining the total sanitation goal. Even the poor households have put up a makeshift toilet within their tiny budget.

The SHG women decided to take up the cause of clean and open-defecation free village in April 2005. They chalked out a plan of action. Initially each group contributed Rs. 500 and the total amount of Rs. 2000 was utilized as working capital to purchase basic materials to construct toilets. The group also provided speedy credit to its members willing to build toilets. Provision of funds, however, is only one aspect of building toilets in a rural community habituated to use open spaces. Achieving total sanitation called for a change in the mindset of people. Continuous interactions and personal visits by women helped to reinforce the wider benefits of the work they had taken up.

Another interesting fact in this village is that almost 60 households already had toilets which were constructed in the year 2000 under a government scheme. But most were inadequately constructed and used as storage or bathrooms. The villagers got these toilets repaired and brought them in proper use. Even the poor households have put up a makeshift toilet within their tiny budget. The expense for construction per toilet ranges from Rs. 300 to Rs. 1500.

The SHG women understand that any behavioral change is even more difficult to sustain than to initiate. Therefore they evolved a system of community monitoring to ensure that the toilets are being used and maintained well. The women frequently visited houses to ensure proper usage and maintenance of toilets. They also appointed a village senior for two months to watch and warn people against open defecation.

All these efforts, together with the determination and persistence of the steadfast SHGs, have led to make Sakhara a village free of open defecation.

See more at: <http://unicef.in/Story/523/Women-Lead-Total-Sanitation-Drive-in->

Maharashtra#sthash.z0mYX4Jb.dpuf

7. Household signs for those with toilets

Innovative ideas to encourage community participation, especially among women, have been key to the success of these campaigns. As Rohit Gupta, District Collector, Pali until recently, said, “The localised nature of the campaign caught the imagination of the communities. Every household that constructs a toilet gets a Phutro Ghar (beautiful home) nameplate for their home on which the name of the female family member is mentioned ahead the male member. This is a matter of great pride for the women. Through these community-driven campaigns, women have also found a way to voice their concerns. In Pali, for instance, a women-led community service group called Mission Poorn Shakti has been conducting door-to-door campaign to spread awareness.”¹⁴

8. Patriarchal messages in Sanitation Promotion

RICE (Research Institute for Compassionate Economics) Institute: In our empirical research on sanitation and health in rural India, we have become used to seeing patriarchal messages to promote the construction of toilets. Slogans like “Bahu betiyan bahar na jayein, Ghar mein hi shauchalay banvayein” [“Daughters and Daughters-in-law shouldn’t go outside, build a toilet inside your house”] are now painted across walls and toilets in rural India. Through these slogans, men are encouraged to build a toilet not because it will prevent the spread of disease and germs, but because their patriarchal values should not allow women to go outside the house. In the process, this message associates the use of toilets with women, endorses the practice of ghoonghat, and encourages the idea that the right place for women is the char-diwari of the ghar (four walls of the house).

However, another article on the same subject, argues that it has actually done the opposite and empowered women to be the change agents. In several districts like Churu, Pali, Bikaner and Bundi, women and children are seen forming human chains at five in the morning in the open fields to drive away people who go out in the open. This is a community-led total sanitation (CLTS) tool that has encouraged women to step out of their homes to fight for a common cause. Somya Sethuraman elaborates the role played by women to ensure open defecation free status in many villages across Rajasthan while acknowledging the need to ensure messages are more inclusive of various groups, especially of men including elderly and children.

For more information please refer to this article: <http://thewire.in/2015/06/12/debate-sanitation-campaigns-in-rural-rajasthan-do-not-promote-patriarchy-3730/>

¹⁴ <http://thewire.in/2015/05/19/heres-the-secret-behind-rajasthans-sanitation-revolution-2011/>