



Viewing Behavior Change Through Another Lens

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As is well known and well covered in the media, there is a sanitation crisis in India, with over half the population (roughly 600 million people) forced to *open-defecate* every day due to a lack of adequate facilities, infrastructure, and even a basic understanding of the importance of healthy sanitation habits. This makes India the world's biggest culprit in terms of open-defecation, with more than double the amount of the next 11 countries combined.

Additionally, the country loses over US\$50 billion dollars per year (roughly 6% of GDP) due to sanitation-related illnesses, one child under the age of 5 dies every 20-seconds from diarrhea stemming from water-borne illnesses, safety of women and girls remains one of the primary concerns in settings where they are forced into the fields due to lack of access to toilets, generations of Indians have *stunted* mental and physical development from nutrient deficiency stemming from persistent diarrhea related to inadequate sanitation, and on and on; there is no degree of hyperbole to overstate the dire state of sanitation in India, and the impact this has on the country.

Presently, there is cause for at least mild optimism in the sector. Prime Minister Narendra Modi's *Swachh Bharat* (Clean India) Mission

seeks to completely eradicate open defecation in India by 2019, and has committed thousands of crores in support of it. Efforts have also been made to free up tens of thousands of crores in additional funding through CSR initiatives, an estimated half of which will go directly towards sanitation programs. Perhaps most encouraging, though, is the shift in focus on how the effectiveness of the

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campaign is gauged: in tracking actual toilet use rather than simply by the number of toilets purportedly built. (The latter metric is particularly flawed given the unfortunate reality that what is reported is oftentimes not reflective of ground realities.)

There is clearly a demand for improvements in the sanitation space, an understanding of this reality in the public and private sectors, and an appreciation for the complex challenge that solving this crisis presents. The announcement of such a massive infusion of capital in addressing the sanitation crisis through infrastructural interventions, even if actual toilet use is closely monitored, has rightfully caused concern amongst sanitation practitioners in India and beyond. Without addressing the perceptions and attitudes that drive people away from using toilets, adding more toilets will simply not move the needle. Collectively, then, there is push for “behavior change” activities to accompany the Swachh Bharat mission.

Behavior change is certainly not a new concept, and is a key component in the Community Led Total Sanitation approach popularized by Kolkata-based consultant Kamal Kar, and currently employed in over 60 countries worldwide. The issue that arises when

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talking about such a change is the lens in which it is viewed through: it is far too often that behavior change is looked at only as the responsibility of the end-users that are forced to open-defecate due to inadequate, dysfunctional or simply nonexistent sanitation options.

Disturbingly, a popular view is that those open-defecating are doing so purely as a function of preference, that they willfully snub their noses at available facilities. While there is certainly a portion of the more than half-billion people in India open-defecating that do cite OD as a preference, they are a minority. Further to this, opting to open defecate versus using a toilet is oftentimes driven by the quality of the facility available. The belief that there are pristine,

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well-maintained facilities being ignored and unused because people prefer using fields, train tracks, and other open spaces to answer nature's call is not only fallacious, it's dangerous: people do not empathize with the plight of so many because they discount their struggle as "it's their choice".



This is especially true when taken to the halls of the various national, state, and local government agencies tasked with providing adequate, safe, and sustainable sanitation to all of India's citizenry. And no group benefits more from the focus of behavior change on the end-user than these government officials.

Over the past three years, we have worked to holistically reimagine the community sanitation experience for India's urban slums, beginning in Bhubaneswar and Cuttack. The intent is to improve the infrastructural design, operations and maintenance approach, pricing models, community outreach and education, end-mile waste management, and other aspects of the ecosystem to provide a sustainable solution that community members value, and use. The plan is to build over 100 of these facilities, then rigorously evaluate the impact they have on increasing toilet usage and, by extension, reducing instances of open-defecation. By all estimates, over 60,000 people would directly benefit from the project.

A huge issue that we have fought diligently to push through is the need for innovation in the sanitation space to solve the problem, and save lives. The inability to innovate within government systems that only seem to want to cater to tried-and-tested methods, albeit unsuccessful ones, is an unfortunate reality. The possible downside of taking a risk on a new innovation and have it fail even partially, is way higher than the problems that a government official would face if an old model fails, as is bound to happen in the current ecosystem of community sanitation. Waste management is a case in point example, with government officials obstinately unwilling to even entertain the thought of new systems without extensive official stamps of approval. The sort of approval that new systems require within the government tend to be a long-drawn process and often fails to address the actual need in time.

Beyond this, an omnipresent challenge is just getting in to meet with our government partners. Interactions with them are rarely done over the phone, never via email, and we oftentimes have to resort to communicate via letters in hopes that such dialogues make their way into our project file and, therefore, part of some permanent record. Any visitor to a government office here can attest that there are literally rooms with files stacked floor-to-ceiling, so whether or not anyone will ever give our initiative some ex post facto review is a longshot. No matter, though, it is certainly much better than doing nothing, and being reactive with the government will only lead to greater delays.

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Following years of effort, we successfully established enough of a rapport to ensure that some of our meeting requests are granted, but if I'm being honest, the meetings we do get are on an ad hoc basis and are largely contingent upon our willingness to wait, for hours at times, outside an official's office in hopes of getting a few minutes of their time. Oftentimes, weeks can go by between meetings, irrespective of our daily attempts at scheduling meetings. To further reinforce how challenging this is, our project has a dedicated company solely responsible for interacting with the government. In spite of this, we have absolutely no leverage when it comes to government interactions.

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These challenges are when the officials are actually at work, which is certainly not a regularity. Government truancy is so endemic that Prime Minister Modi launched a website to track attendance of officials in various offices. It is truly an incredible challenge, and one not easily overcome. How do you accomplish something when you require the active participation of individuals that are either unavailable outright, or unwilling to so much as speak to you even if they are in their offices?

One incident that on the surface is seemingly innocuous, but stands out as a prime example of the shift in perceptions needed to adequately address India's sanitation crisis, stems from the delays we have faced over the past nine months in getting the Administrative Approval granted for the Community Toilet facilities in Bhubaneswar. During the innumerable conversations that we had with various officials regarding this pending approval, it came to light that sanitation facilities, such as ours, are considered and classified as "non-essential" and therefore given low-priority when under review; our file kept being moved to the bottom of the pile as other, more "essential" projects were prioritized. (What exactly is considered more essential than sanitation infrastructure in a country where half the population is forced to open-defecate due to a lack of viable alternatives, was not shared with us.)

As long as this attitude, and the environment that fosters it, persists, no amount of infrastructure or behavioral change achieved by end-users will make a bit of difference.

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