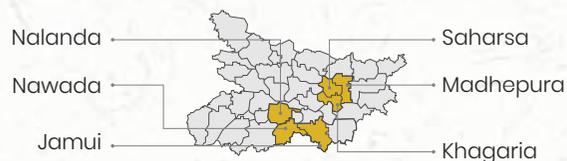


Improving H.A.B.I.T.

Households' Attitudes and Behaviours to Increase Toilet use

Oxford Policy Management (OPM) India, along with World Vision India and ideas42, recently conducted a study evaluating behavioural interventions to increase toilet use in rural Bihar in the context of overarching Swachh Bharat Mission (SBM). The study also provides insights on some areas that the Phase-2 of the SBM could focus on, to ensure the public health gains of the SBM are sustainably realised.



Study was conducted in six districts of Bihar, targeting nearly

2,300 households



over a period of six months. The study was funded by the International Initiative for Impact Evaluation (3ie).

Targetted behavioural barriers

- Lack of habit despite having the intention, habituated to open defecation (OD)



- Lack of intention to use the toilet due to fears about pit filling up and anxiety about pit emptying



Interventions included

- Simple aids to help convert the positive intent to habitual use



Card games: people are asked to guess the time taken for the pit to fill up

French drain model: plastic bucket with holes to demonstrate seepage of liquid in a pit toilet

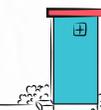


- Influencing social norms to increase toilet use, through messaging at household visits and community meetings



Soan khaad: demonstrating and handling decomposed faecal matter

Pledge to stop OD and start regular use of the toilet



Use of calendars to promote habit of toilet use

The interventions were carried out through community meetings and household visits.

External influences

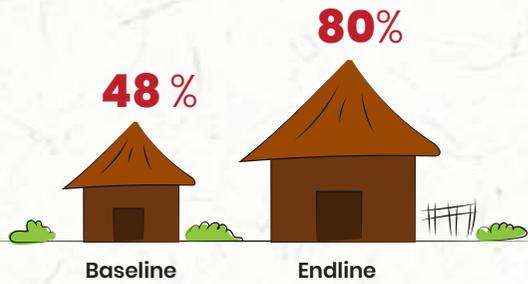
- o Sanitation messaging from the government under Swachh Bharat Mission, and work of local self-help groups to convince village residents to construct and use toilets
- o Information dissemination by JEEViKA groups who also employ sanctions on households to disincentive open defecation including fining open defecators
- o Large-scale interventions on sanitation by several NGOs and development agencies

Findings

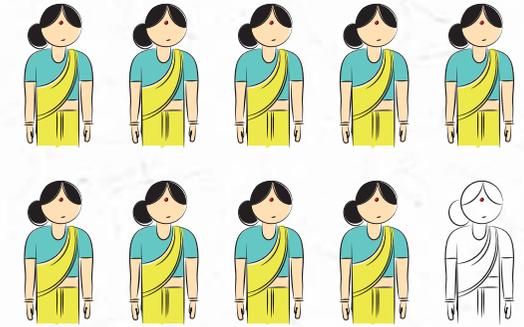
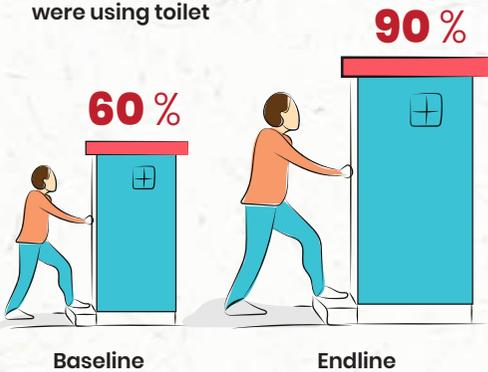
We found a comparable and significant increase in toilet use across both treatment and control areas

Increase in toilet use

Households who were open defecation free



Individuals who were using toilet



90%

of all the households reported that females over the age of five were using the toilet.

Only around

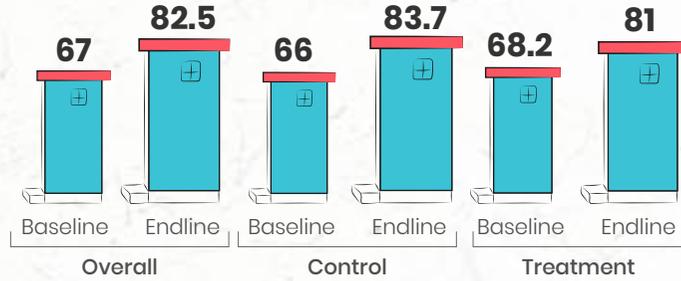
3-4%



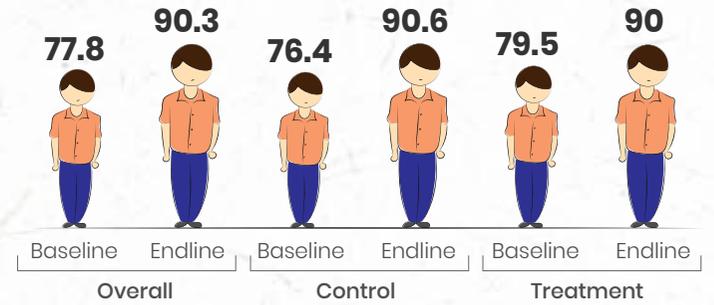
of households responded that a family member would clean the household pit if the need arose. This indicates a lack of understanding of the self-emptying design of the twin pit toilets; and suggests that notions of purity and pollution persist.

Toilet use

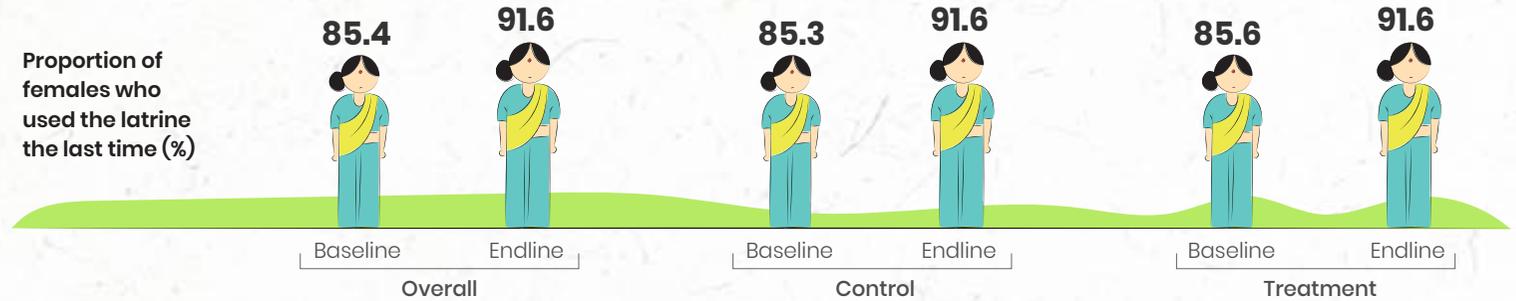
Households – latrine used the last time for defecation (%)



Proportion of males who used the latrine the last time (%)

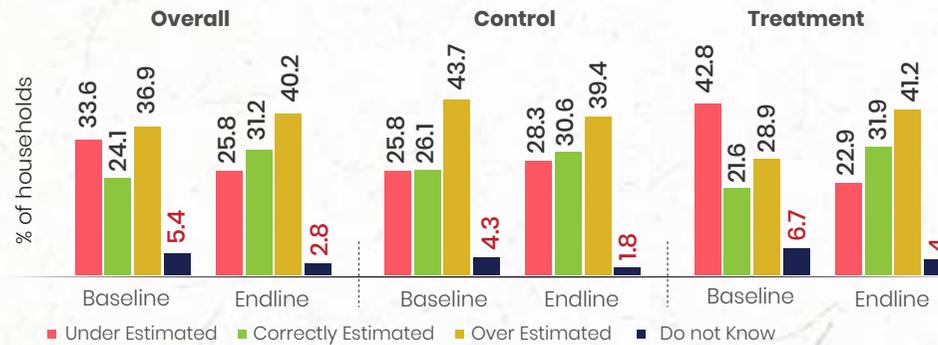


Proportion of females who used the latrine the last time (%)



Estimating pit filling

Households properly estimating pit filling



Reasons for wrongly estimating pit filling

- Low recall of details of the pit filling rate
- Blanket messaging from other sources
- Varying degrees of pit sizes

Consequences of incorrect pit emptying

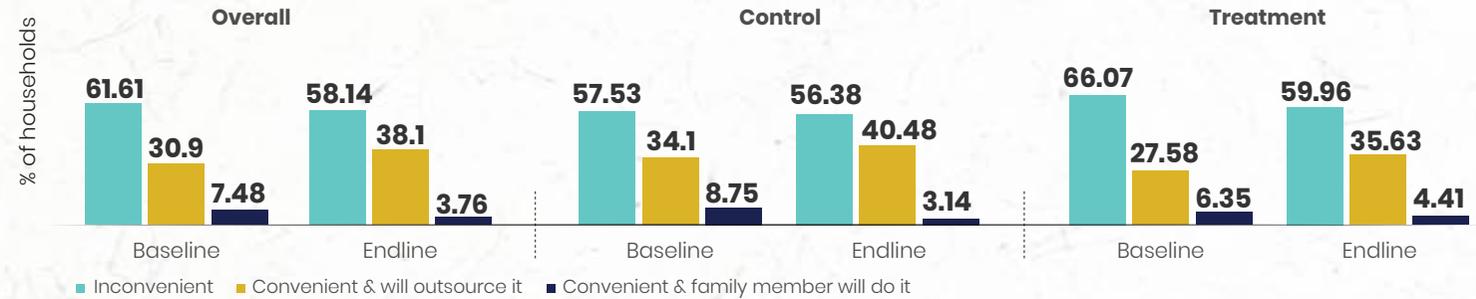
In many instances, pits with undecomposed matter are emptied and the pathogenic faecal matter is disposed in an open field. Undecomposed faecal matter poses public health risks; and is akin to the risks posed by practising open defecation.



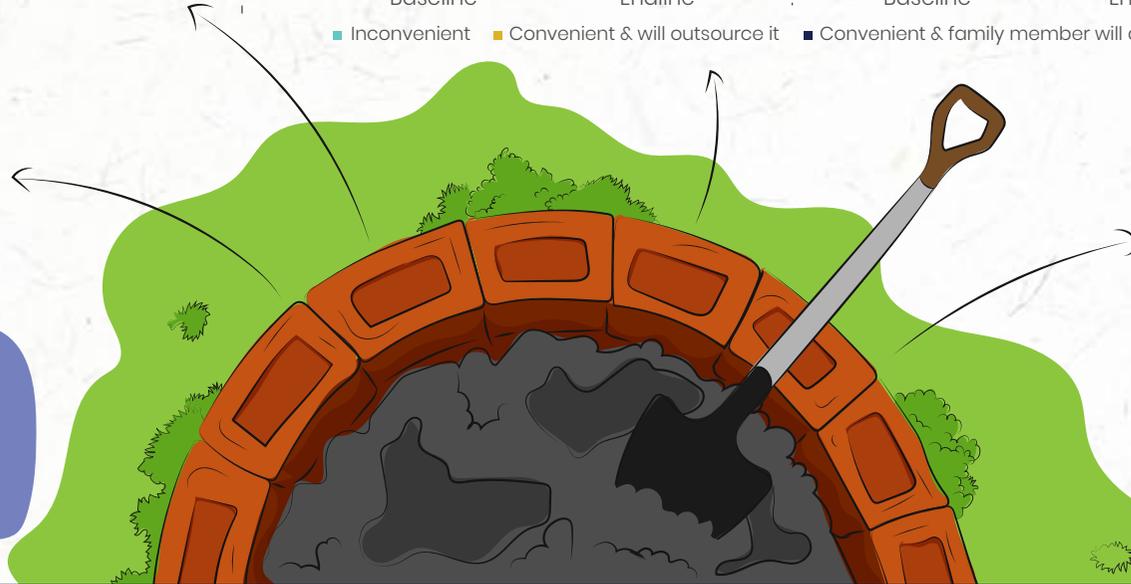
Pit emptying attitudes

- Positive change in terms of perceived ease of pit emptying but not significant
- Higher knowledge of decomposition rates in treatment areas

Self-emptying still perceived as inconvenient



Pit emptying is outsourced to specific castes which furthers social discrimination



“ We do not want to touch the matter with our bare hands... it is disgusting ”

Conclusion and policy implications

Despite our findings, sustainability of toilet remains a concern, given the persisting underlying misconceptions around pit filling, and a lack of awareness about the process of decomposition. Based on our study, we recommend in the second phase of SBM:

- An increased focus on knowledge and attitudes related to pit filling, time taken for decomposition, and self-emptying. This could greatly contribute to sustainability of toilet use and enhance public health gains without unintentionally increasing caste based emptying.
- Increase in the emphasis of programme implementers and government on standardised construction of toilet pits, minimising inconsistency in type and size. The vastly varying size and quality of pits makes it difficult to tailor standardised messaging around pit filling, resulting in conflicting and potentially incorrect messages.