

LOMAS & HAMMERSLEY-MATHER

39th WEDC International Conference, Kumasi, Ghana, 2016**ENSURING AVAILABILITY AND SUSTAINABLE MANAGEMENT
OF WATER AND SANITATION FOR ALL****Shocking imagery and cultural sensitivity:
a CLTS case study from Madagascar***B. Lomas & R. Hammersley-Mather (UK)***BRIEFING PAPER 2424**

Approaches addressing widespread open defecation practices in southeast Madagascar must navigate strongly held cultural values, traditions and taboos. In the urban commune of Fort Dauphin, this has resulted in SEED Madagascar's adoption of a 'hybrid' approach to CLTS through Project Malio, a three-year urban sanitation project which seeks to instigate behaviour change by increasing access to improved sanitation in households and schools. Despite cultural taboos generally inhibiting discussion around defecation practices, the community has been accepting of the Malio approach, including campaigns using graphic Information, Education and Communication materials. However, plans to pilot a provocative signboard engaging a specific cultural taboo elicited such concern across the NGO's Malagasy staff that a town-wide study was conducted to determine 'how far is too far'. The Malio experience raises questions over the application of CLTS to evoke shock and shame and whether adapting the approach to fit cultural context removes its potency, and therefore its effectiveness.

Background

The 130-year lag in achieving the 2015 Millennium Development Goal to halve the number of people living without sanitation is clearly evidenced in Madagascar – rated the fourth least-developed country in the world for sanitation – where just 12% of its 22 million have access to improved toilets (WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation, 2014; WaterAid, 2015). Like elsewhere in the global South, widespread open defecation is reinforced by limited availability of sanitation facilities, lack of investment, traditional customs and poor hygiene awareness. Together, these issues greatly increase the risk of food and water contamination by faecal matter, contributing to high incidences of diarrhoeal diseases (WHO, 2016). In the remote and impoverished Anosy Region in the southeast of the country, more than half of the 83,000 people living in the urban centre of Fort Dauphin do not have access to any form of sanitation, while a further 33% of residents do not access improved sanitation (Urban Commune of Fort Dauphin, 2013; WaterAid, 2013). Although financial limitations are frequently cited as a barrier to improved sanitation, amongst Fort Dauphin residents with a high-socio-economic background, 33% do not use improved sanitation and 9% do not access any sanitation facilities (WaterAid, 2013). Having financial access to sanitation hardware is only one component of a very complex problem; open defecation can only be addressed through challenging traditional and cultural practices in order to influence sustained behaviour change.

In response, SEED Madagascar (SEED) collaborated with local organisation ONG Azafady to develop Project Malio (translating as 'clean' in the Anosy dialect of Malagasy), a three-year urban sanitation project that uses an adapted version of the Community Led Total Sanitation (CLTS) methodology to address open defecation. Commencing in May 2014, Malio works closely with households, schools, communities and local government across Fort Dauphin's 11 *fokontany* (suburbs) to improve sanitation infrastructure and promote behavioural change. At the time of writing in February 2016, Malio had facilitated improved sanitation hardware in 576 households which were being used by 6030 residents. In addition, Malio has provided construction support for improving latrines at 16 schools alongside hygiene and sanitation educational sessions. Over the last 18 years SEED has implemented a variety of community health,

education, conservation, livelihood and environmental projects, with Malio as the sixth hygiene and sanitation project. Its development was informed by learning from previous projects, including adapting a range of participatory approaches and increasing monitoring, especially in terms activities directed at sustained behavioural change. Capacity around CLTS methodology and general monitoring, evaluation and learning (MEL) is led by an International Specialist who collaborates with 12 Malagasy staff who largely focus on community liaison and project implementation.

Akin to most communities in Madagascar, life in Fort Dauphin is guided by strict notions of *fady* (taboos) and *fomba* (traditions); an intricate set of customs governing the correct manners and practices to which Malagasy people adhere. As such, notions of *fomba* and *fady* significantly impact development direction in the region, with *fady* in particular affecting the design and execution of Malio activities, as discussions around open defecation and faeces-related topics are viewed as disrespectful. As such, community meetings facilitated by Malio Community Liaison Officers (CLOs) always commence with an apology to community elders for the ‘dirty’ content of the ensuing discussion.

Background to CLTS

CLTS was established in 2000 in Bangladesh by Kamal Kar as a response to the low success rates of previous hardware centric sanitation projects; Kar and Chambers (2008) *Handbook on Community-Led Total Sanitation* provides a comprehensive overview of methodology. CLTS prescribes a collection of participatory exercises to ‘trigger’ awareness of detrimental sanitation and hygiene practices, and has been implemented by various organisations in 56 countries across the global South (Galvin, 2014). Traditional CLTS methodology states that the role of practitioners should be limited to facilitation, ensuring the onus is on the community to take ownership of building their own latrines without any technical advice or hardware subsidies. Kar (2005, p.2) explains that:

‘The CLTS approach ignites a sense of disgust and shame among the community. They collectively realise the terrible impact of open defecation: that they quite literally will be ingesting one another’s ‘shit’ so long [as] open defecation continues. This realisation mobilises them into initiating collective action to improve the sanitation situation in the community.’

In addition, it has been found that CLTS has been most effective in rural settings, with adaptations to urban environments proving complex and largely unsuccessful (Kar, 2008). These challenges may be the result of a number of factors; insufficient access to land and local construction materials, the sheer size of urban populations and the lack of definable borders between hamlets, which exist naturally in rural settings.

CLTS: The SEED approach

Project Malio takes a hybrid CLTS approach, combining triggering to mobilise communities into action with subsidies to support the construction of latrines to motivated beneficiaries; an approach also used in USAID’s Ghana WASH Project (USAID, n.d.) and the SaniFaso programme in Burkina Faso (Dubé and Carrasco, 2013). Community triggerings integrate CLTS activities designed to help the community reassess their sanitation conditions by using shock techniques to highlight the detrimental health implications of open defecation. These activities include graphic ‘faeces-to-food transmission’ demonstrations, ‘shit calculations’ measuring the amount of faeces produced by the community each year and defecation area mapping. (Kar’s (2005) *Practical Handbook to Triggering CLTS* details these activities in depth) Having only three years to operate in a large urban setting, Project Malio has condensed its triggering process to a single morning, resulting in the omission of several key activities. For example, while transect walks which identify open defecation areas and the evidence of faeces are highlighted by Kar (2005) as ‘the single most important motivating tool’, these are omitted from Malio’s triggering activities due to the large size of the *fokontany* and the lack of defined borders. Indeed, these factors become ready excuses for residents to blame other members of the large Fort Dauphin community for the filth in their own *fokontany*.

Additionally and contra to original CLTS methodology, the project provides a subsidised ventilated improved pit (VIP) latrine to beneficiaries, who contribute a small but meaningful financial investment and the majority of the labour in constructing the latrine. This adaptation is rationalised to support both latrine and behavioural sustainability; latrines built with technical support are likely to be of a higher standard and therefore last longer, in turn increasing the likelihood beneficiaries use, maintain and empty their latrines. Behavioural change is supported by comprehensive hygiene education and motivational household visits facilitated by CLOs and Malio’s voluntary community agents who take on the role of *natural leaders*; motivated individuals who support project activities from within each *fokontany*, (more information on the

role of natural leaders can be found in Milward et al., (2014)). CLOs regularly visit each of the latrine beneficiary households to provide one-to-one support and facilitate small focus groups, providing advice and encouragement to ensure all participants have both knowledge and enthusiasm to continue using and maintaining their latrines. Where evidence of open defecation is observed on beneficiaries' land, CLOs remind participants of their pledged commitment to the projects aims and organise for further follow-up visits to monitor behaviour. To reinforce 'good behaviour', beneficiaries partake in 'community participatory monitoring', which encourages neighbours to rate the cleanliness and maintenance of each other's latrines over a three-month period. Beneficiaries who have maintained a rating of 'very clean' in all three monitoring visits receive a gold star rating and are presented with a small incentive by SEED in an official ceremony. These activities are underpinned by CLTS methodology; by instilling pride in the recipients and shame in those neighbours who have been rated poorly, motivation is increased to either sustain habits or perform better in the following month. The three-month timescale was elected with the knowledge that behavioural habits require at least 66 days to form (Lally et al., 2010), allowing beneficiaries sufficient time to establish positive sanitation and hygiene habits.

A mass media campaign reinforces project activities by maximising access to sanitation and hygiene information across Fort Dauphin. Radio broadcasts disseminate hygiene messages, interviews with prominent members of society such as doctors or members of the water and health ministries, and a locally contextualised hygiene-related drama series. Messages are further supported through information, education and communication (IEC) materials promoting positive hygiene practices, including on billboards, concrete signboards and t-shirts. Although these materials were highly popular with many latrine beneficiaries, interviews with community members and Malio staff indicated that people felt the IEC materials were not provocative enough to drive actual behaviour change.

Pushing the boundaries with provocative images

In response to this feedback, a decision was made in November 2015 by the Malio team to pilot the use of provocative images on IEC materials in order to harness the shock and shame that should underpin CLTS triggering activities. With the hope of igniting more profound discussions concerning community sanitation practices and to instigate behaviour change, an image was chosen that compared a dog defecating to a human openly defecating, similar to one used in Madhya Pradesh, India (Arickal & Khanna, 2015). Comparable to the cultural taboos of India, this is a highly controversial comparison within the Anosy Region of Madagascar, where dogs are seen as supremely unhygienic and *fady*; the offence caused by this comparison cannot be overstated. Signboards hosting the image were to be strategically placed at known open defecation sites at each of the sub-divisions around Fort Dauphin. The image was selected by senior Malagasy team members, and approved by the regional WASH network (Diorano WASH), the Ministry of Water and the Mayor.

However, tensions and disagreements within the team and the wider staff of the NGO became immediately apparent, and it was contended that the signboards were so offensive that the campaign's association with SEED would compromise the organisation's integrity, and indeed the future of the organisation. As one senior member of the organisation argued, this image had the '*potential to put the livelihoods of the NGO's 65 Malagasy staff and their families at risk*'. Additional concerns held by local staff included that less educated members of society would not understand the projects aims, resulting in serious problems for the success of project objectives, and predicted that signboards would be torn down immediately out of offense - as was the case with the similar image used in Madhya Pradesh (Arickal & Khanna, 2015).

Lengthy meetings discussed the delicate and complex balance between the potential detrimental effects for the organisation caused by breaking this *fady*, in contrast to the benefits sought by the hybrid CLTS methodology adopted by Project Malio. Meetings including the whole organisation regarding methodology underpinning Project Malio (as well as other SEED health projects) were the first in the NGO's history; a reflection of the deep concern that this image had ignited. This substantiated that even though it is culturally disrespectful to discuss open defecation and faeces, it can be accepted by NGO staff and the local community to a certain extent under the guise of the campaign. However, comparisons of local sanitation practices – and specifically people – to a dog, proved simply too *fady* for many in the organisation, who were unable to accept this method despite its potential to invoke behavioural change.

Community consultation

Given the intra-organisational concerns, the team decided to complete wider community consultation prior to images being released. In-depth questionnaires were chosen as the means to capture community perceptions of this image and its potential impact, and the International Specialist developed a series of open questions which were presented to the Malio team to assess non-biased wording. Once the study design was finalised, participants were shown the image and asked to answer the anonymous written questionnaires in as much detail as possible. While written questionnaires were chosen to reduce interviewer bias and increase confidentiality, it is acknowledged that this format potentially limited discussion which may have been gained from semi-structured interviews, and excluded illiterate participants.

In total, 68 questionnaires were completed by a representative sample of Fort Dauphin, ranging from beneficiaries of SEED latrines, voluntary community agents, members of Malio partner associations and non-beneficiaries (including participants who had no previous experience of the Malio project). This research investigated individual reactions to the image and aimed to gauge whether people felt it could promote behavioural change in regards to open defecation. Reactions to this image were extremely varied, highlighting the complexity of the broader issue of marrying Malagasy traditional *fady* with CLTS best practice.

Many participants rejected the image outright, identifying it as culturally inappropriate even as a behavioural change campaign. Numerous participants stated that this image would be culturally appropriate if it was another animal, but was unacceptable because of the *fady* surrounding dogs. As one member of the community stipulated, *'This picture is not suitable here in the Anosy Region, because it is taboo for our tribe; it is impossible to compare dogs to human beings'*. Other reactions identified that, although the image was traditionally inappropriate, it was useful as a shock tactic. For example, one participant noted, *'In general, this is socially taboo because it compares people to dogs, but as it is a campaign, there is no problem.'* Additionally, some contributors welcomed such an innovative tactic, stating that it brings hope that the practice will cease: *'Having seen this picture, I immediately have hope that practicing open defecation will end, because it will touch people's consciousness, and they will feel worried, because it shows them that the spreading of faeces everywhere is bad.'* However, mirroring views from some of the Malagasy SEED staff, several responses included concerns for the reputation of both SEED and ONG Azafady, alongside fears of the potential for conflict within the community.

While research was ongoing, ONG Azafady's Board of Trustees were informed of the project's intention to use the dog and human imagery; they deemed the signboards too provocative for use and subsequently banned dissemination. Although this was a disappointing outcome for the Malio team, the research was still analysed and presented to the Regional Ministry of Water, which will inform whether the signboards will be erected without ONG Azafady or SEED's association, or changed; a process which is ongoing as of February 2016. A possible compromise would be removing the direct comparison between dog and human, using just an image of a defecating dog with the accompanying text, 'Think about it'.

Discussion

Identifying areas of conflict around the CLTS methodology – an approach underpinning several SEED's projects – the signboard process has been a catalyst for much learning and reflection not only within the project, but for the organisation as a whole. Additionally, it presented an opportunity to reflect on the methodology more generally and issues surrounding cultural sensitivity. Several pertinent questions arise from this process for Malio's adaptation of CLTS methodology. For a small NGO endorsing a participatory approach reliant on community support, is the guise of 'health promotion' sufficient to use highly offensive IEC materials to questions people's behaviour? As a hybrid CLTS project, should an approach be adapted to reflect cultural sensitivities even if it compromises the shock and shame emotions evoked by CLTS, therefore potentially lessening message impact? These questions open wider contestations of using shame to offend and inform cultural sensitivities.

Development literature has hosted broader discussion surrounding the ethics of shaming for behavioural change. Criticism has been levied on CLTS for its prescription of shaming which, having been applied to extreme levels in certain contexts, has unfortunately resulted in questions over human rights abuses. Chatterjee (2011) identifies examples of extreme CLTS tactics adopted by a community in Karnataka, India, where severe shaming – including throwing stones at, taunting and taking pictures of people openly defecating – was used to force behaviour change. Such cases have prompted some researchers to question

whether it is ever acceptable to infringe upon individual rights for the sake of the common good (Bartram et al., 2014). Further, Engel and Susilo's (2014) research on the World Bank's Water and Sanitation programme in Java, Indonesia argues that shaming and withholding individual rights is not only unethical but not necessarily effective in promoting sustained behaviour change. However, as Galvin (2015) notes, not unlike many development initiatives, problems with CLTS activities have surfaced in the scale-up as projects and communities have adapted the process with insufficient moderation or evaluation. This reflects Otieno's (2012) observations, which reason that it is not necessarily the CLTS tools but the lack of skills used within its facilitation which results in people feeling helplessly shamed. Furthermore, although shaming may cause people to experience a short-term loss of their right to dignity, the long-term benefits to improved sanitation and health through the eradication of open defecation outweighs this (Ibid). Moreover, the potential shame caused 'is not shame triggered by or necessarily felt in relation to outsiders, but rather an internal process and feeling that comes with the realisation of the implications of shitting in the open' (Bongartz, 2012).

It is this internal process which the controversial comparisons between humans and dogs aimed to capture, without applying any of the coercive tactics developed in some communities. Although the Malio Project in no way sanctions some of the more extreme tactics developed by a small minority of communities adapting CLTS, we must question that if people fear that the dog image has the potential to cause conflict within the community and bring the organisation into disrepute, is this particular method a step too far? If so, adapting the image to suit cultural sensitivities could lessen its potency, and therefore its impact. In addition, removal of this shock element may result in a loss of alignment to CLTS methodology, making the signboard just an additional IEC material.

The Malio experience also raises questions around whether shock and shame are actually the intention of CLTS, or rather by-products of its activities. Consideration must be given as to what kind of shame is produced and whether it is conducive to positive behaviour change. As Otieno (2012) states, CLTS methods have the potential to either produce 'good shame' – the kind which helps a person reflect on their behaviour and learn from their mistakes – or 'bad shame', which purely induces feelings of personal disgust that strengthen resistance to change. This, he notes, is highly dependent on the success of the facilitation. If the Malio methodology prescribes to this and the signboards have no facilitation process, they are simply placed for observers to draw their own conclusions; it must be conceded that the Project cannot drive the reactions to the shame caused, and therefore the reactions may be ineffective or even detrimental.

Conclusion

As Project Malio enters its third and final year, the team can reflect on its substantial achievements in providing sanitation hardware, igniting behavioural change to use these facilities, and leading community discussion on the detrimental impact of open defecation. However, the controversy caused by the IEC imagery highlights that the team and the organisation as a whole must reflect on its adopted project methodology, and the balance to strike between provoking behavioural change through eliciting shame and curtailing activities due to cultural sensitivities. Although the defecating dog may not have the opportunity to inspire the community of Fort Dauphin to reflect on its practices, it was the catalyst for unprecedented discussion within SEED, and will inform the potential shape of future practice and theoretical underpinnings.

Acknowledgements

The authors would like to extend thanks to SEED Madagascar's Director of Programmes & Operations, Lisa Bass, for her extensive feedback on the paper, alongside the wider Malio team's assistance during the community study.

References

- ARICKAL, B. and KHANNA, A., 2015. Principles and challenges in scaling up CLTS: experiences from Madhya Pradesh, India. *Briefing Paper 2109: 38th WEDC International Conference*. Loughborough, UK: WEDC, Loughborough University.
- BARTRAM, J., CHARLES, K., EVANS, B., O'HANLON, L. & PEDLEY, S., 2012. Commentary on community-led total sanitation and human rights: should the right to community-wide health be won at the cost of individual rights? *Journal of Water and Health*, **10**(4), 499-503.

- BONGARTZ, P., 2012. *Emotional Triggers: Shame? Or shock, disgust and dignity*. [online]. Institute of Development Studies. [viewed 26 January 2016]. Available from: <http://www.communityledtotalsanitation.org/blog/emotional-triggers-shame-or-shock-disgust-and-dignity>.
- CHATTERJEE, L., 2011. Time to acknowledge the dirty truth behind community-led sanitation. In: *The Guardian*. [online]. [viewed 1 February 2016]. Available from: <http://www.theguardian.com/global-development/poverty-matters/2011/jun/09/dirty-truth-behind-community-sanitation>.
- DUBÉ, A. & CARRASCO, M., 2013. From CLTS to sustainable sanitation services: contributions, gaps, ideas for improvement. *Background paper to the West African workshop "Towards Sustainable Total Sanitation."* The Hague, Netherlands: IRC International Water and Sanitation Centre. Available from: <http://www.irc.nl/page/80130>.
- ENGEL, S. and SUSILO, A., 2014. Shaming and Sanitation in Indonesia: A Return to Colonial Public Health Practices? *Development and Change*, **45**(1), 157–178.
- GALVIN, M., 2015. Talking shit: is Community-Led Total Sanitation a radical and revolutionary approach to sanitation?. *WIRES Water*, **2**(1), 9-20.
- KAR, K., 2005. Practical Guide to Triggering Community Led Total Sanitation (CLTS). *Institute of Development Studies*. Brighton, UK: University of Sussex.
- LALLY, P., VAN JAARSVELD, C. H. M., POTTS, H. W. W. & WARDLE, J., 2010. How are habits formed: Modelling habit formation in the real world. *European Journal of Social Psychology*, **40**(6), 998–1009.
- MILWARD, K., PRADHAN, S., & PASTEUR, K., 2014. *Promising Pathways: Innovations and Best Practices in CLTS at Scale in Madagascar*. Kolkata, India: CLTS Foundation.
- OTIENO, P., 2012. The shame question in CLTS. In: *CLTS Knowledge Hub*. [online]. [viewed 1 February 2016]. Available from: <http://communityledtotalsanitation.org/blog/shame-question-clts>.
- USAID, n.d. Improving Community Sanitation: Ghana WASH Project. [online]. *Ghana WASH Project*. [viewed on 26 January 2016]. Available from: <http://ghanawashproject.org/hygiene/community-sanitation/>.
- URBAN COMMUNE OF FORT DAUPHIN, 2013. *Information sur la population*. Tolagnaro, Madagascar: Statistics of Anosy. (French).
- WATERAID, 2015. It's No Joke: The State of the World's Toilets 2015. [online]. *WaterAid Madagascar*. [viewed 8 February 2016]. Available from: www.wateraid.org.
- WATERAID MADAGASCAR, 2013. *Synthèse des résultats de la recherche formative: Projet Latrines PIC Fort Dauphin*. Antananarivo, Madagascar: WaterAid Madagascar. (French).
- WORLD HEALTH ORGANISATION (WHO), 2016. Water-related diseases. [online]. *Water Sanitation Health*. [viewed 9 February 2016]. Available from: http://www.who.int/water_sanitation_health/diseases/diarrhoea/en/.
- WORLD HEALTH ORGANISATION (WHO)/UNITED NATIONS CHILDREN'S FUND (UNICEF) JOINT MONITORING PROGRAMME FOR WATER SUPPLY AND SANITATION, 2014. *Progress on Drinking Water and Sanitation – 2014 update*. Geneva, Switzerland: WHO. Available from: http://www.wssinfo.org/fileadmin/user_upload/resources/JMP_report_2014_webEng.pdf.

Contact details

Bethany Lomas is the International WASH Specialist on Project Malio at SEED Madagascar, with particular interest in adapting the CLTS methodology according to community contexts to enhance long-term sustainability. Also at SEED, Rachel Hammersley-Mather is the Head of Project Development (Community Health, WASH & Construction), and is especially interested in influencing behaviour change through working with Malagasy cultural nuances.

Bethany Lomas
 Villa Rabemanda, Ambinanikely, Tolagnaro,
 BP 318, Madagascar
 Email: bethany.lomas@seedmadagascar.org
 www: madagascar.co.uk

Rachel Hammersley-Mather
 Villa Rabemanda, Ambinanikely, Tolagnaro,
 BP 318, Madagascar
 Email: rachel.mather@seedmadagascar.org
 www: madagascar.co.uk
