ROLE OF INTERPERSONAL COMMUNICATION IN SANITATION CAMPAIGNS

¹Aswathi Mary Varghese, ²Dr. Anuradha Sharma

ABSTRACT--India's vast and diverse socio-cultural and economic composition ensures a heterogeneous populous living in both rural and urban settings. Considering the varied living conditions of people and their different realities, it makes it important to conceive this populous as a group with complex needs that can be met by one homogenous communication strategy or message. Mass media communication channels are typically used in campaigns geared for wide and public audiences, but often campaigns directed to local communities with specifically identified audiences are the most effective in involving citizens in problem-solving and planning decisions that affect their everyday lives clearly outlining the importance Interpersonal Communication (IPC) activities. This study is an attempt to understand the role and functions of Interpersonal Communication approaches adopted during the Awareness Building Phase in 'Swachh Bharat/Clean India' Campaign and thereby identify related prospects and problems. To do so, the first section focuses on the theoretical prospective understanding the importance of Interpersonal Communication and strong components of community outreach activities and ground level connect. Further it studies the use of IPC activities based on triggering of community action for provision of sanitation, safe water and hygiene access as part of the above mentioned campaign in two rural villages of India.

Keywords--communication campaign, communication channel, community, dialogue, Interpersonal Communication, mass communication, mass media, target audience.

I. INTRODUCTION

Communication campaigns are well designed methods of reaching large audiences with messages designed to produce explicit results.

Meanwhile, community level is a good place to start because it is the citizens or members of a community who best understand the problem inherent to the community in which they live and get involved in a coherent dialogue to initiate action towards improving the situation in a collective manner. And here the role of development communication and specifically IPC becomes extremely relevant as any intervention with the intention of achieving a real sustainable development in the living conditions of people will be a big failure unless the intended beneficiaries are actively involved in the process. Here it is important that people participate in all the phases of any campaign (here in discussion 'Swachh Bharat/Clean India' Campaign), from problem identification to research and implementation of solutions.

¹ Research Scholar, Amity School Of Communication, Amity University Noida Campus, Sector-125, Noida-201313 (U.P.), aswathiv45@gmail.com

² Research Scholar, Amity School of Communication, Amity University Noida Campus, Sector-125, Noida-201313 (U.P.)

Interpersonal Communication, an important constituent of Development Communication, is heavily oriented towards human aspects of development bringing conformity to one's own sense of right conduct. According to M.L. Knapp (1984):

'Interpersonal Communication (IPC) involves a direct face-to-face relationship between the sender and the receiver of the message, who are in an interdependent relationship'

Here, the main scope or function is not mere communication of information or messages but rather involvement of stakeholders as well as assessment of situation is a priority. This calls for an analytical role or so called a dialogical process intended to open public spaces where opinions, perceptions and knowledge are appraised and discussed. Here the reality of development is more complex, meaning calls for broader changes than specific individual behaviour changes.

II. ROLE OF MEDIA

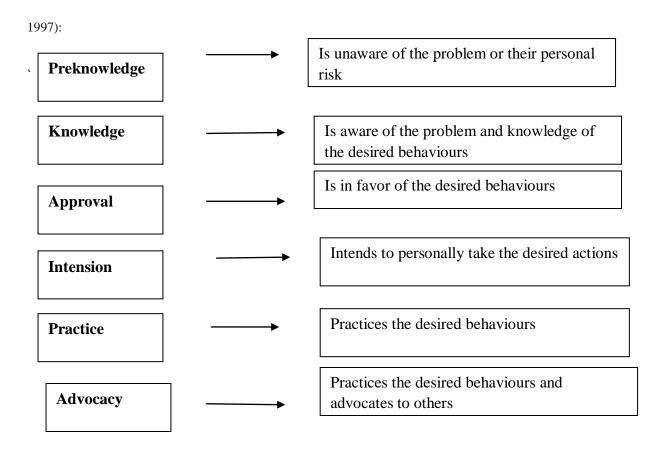
Interpersonal Communication (IPC) as a tool works predominantly in small and identified audiences/communities with whom the communicator of the message/messages has established a direct and personal contact. There are different channels identified for IPC which include Personal letters, Door-to-Door Communication, Face-to-Face interaction, speeches and presentation, Pamphlets/ Flyers/ Brochures to individual addresses, Meetings and workshops etc.

The two prime factors which makes IPC distinct is immediacy (meaning the communication is instant) and second being priority (the message becoming pre-eminent/important) for the identified audience which in turn support a strong feedback component. Another factor relevant is the relationship between the sender and the receiver which is further enhanced if this relationship is existent for a long period of time. This form of communication is not limited to sharing of message by itself but is dependent on various elements of non-verbal communication.

Personal letters offer a personal touch, recipients feel that they have been selected to participate and help with the campaign goals. Meanwhile, face-to-face interactions takes place physically between the message sender and the receiver and is considered to be the best among IPC channels as it serves two purposes both of verbal as well as non-verbal communications.

Moreover, non-verbal including facial expressions, gestures etc. have a greater impact on message delivery than the verbal messages. Campaign strategies involve campaign workers going from door-to-door communicating messages or strategies involve speeches/presentations for live audiences. Another benefit is the idea of instant feedback and the opportunity of having question/answer sessions can often help people to get involved to discuss the campaign issues and draft out solutions to drive the campaign in the right direction. Campaign materials to support campaign goals may include pamphlets, flyers and brochures. Flyers are one page announcements or suggestions while pamphlets usually consist of a two-page fold and brochure consists of two or more pages. The advantage of printed material is that people can have a physical printed document to hold, read and maybe take back home to save as a reminder of campaign goals.

'People usually move through seven intermediate steps in the awareness building and behaviour change process' (Piotrow et.al, 1997). The people at different stages constitute distinct audiences. Thus they usually need different approaches, whether through interpersonal channels, community channels or mass media. An audience group can be generally segmented based on the following stages (Piotrow et.al,



According to the Direct Effects Model of Mass Media Theory by Katz & Lazarsfeld (1955) also known as the Hypodermic Needle Theory or Magic Bullet Theory, mass media has a direct, immediate and powerful effect on their audiences. The mass media in particular is assumed to have a strong influence on the culture and it directly or indirectly influences individuals which is often considered as common knowledge to be passed down to others. On the other hand, this led to another sect of thinkers who felt that people's knowledge is unique and attention, perception and retention of messages varies among individuals.

Further studies found that not everyone was influenced by the mediated propaganda which led to the development of the Indirect Effects Model of Mass Media Theory, also known as the Selective and Limited Influences Theory or Conditional Effects Model. This theory closely looked at individuals who are not directly exposed to media content.

According to Seymour-Ure (1974, 22), "a primary [= direct] effect takes place when the person affected has himself been involved directly in the communication process. A secondary [= indirect] effect takes place when individuals or groups not involved in the communication process are affected by changes in individuals who are." It deliberated that mass media is relevant and it does convey information or message to the society but this message is interpreted selectively as per the habits and perceptions of the members of society. This is a result of

difference in beliefs, values and attitudes among the audiences which means messages from mass media cannot be seen as uniform or direct rather leads to selective responses.

Coming to idea of a 'campaign' and here in particular 'Sanitation Campaigns' one cannot forget the role of Interpersonal Influencers or policy makers, who are in a position to influence the influence the focal individuals. This stresses on a two-step flow model which means mass media message is channeled to the masses through opinion leadership who are considered to have more access to media, higher understanding of media content and moreover have the ability to explain and intercept the content to the public.

Diffusion of innovations is the product of the two step flow theory (Rogers, 2003).

'Mass media channels are more effective in creating knowledge of innovations, whereas interpersonal channels are more effective in forming and changing attitudes towards a new idea, and thus in influencing the decision to adopt or reject a new idea' (Rogers, 1995).

Interpersonal influencers can impact behaviour through activities such as dispensing positive and negative reinforcement, exercising control via rule-making and enforcement, facilitating behaviour with reminders at opportune moments, and serving as role models. The interpersonal communication provided a significant boost to the campaign where the mediated messages were supplemented by intensive face-to-face instruction and informal interpersonal influence. One key advantage of opinion leaders is that they can customize their messages to the unique needs and values of individuals in a more precise manner than mediated messages.

But here again one more factor to be considered is that any new idea presented by a campaign (here in specific 'Swachh Bharat/Clean India' Campaign, are not adopted by all individuals at the same time and it clearly depends on a specific time sequence as more appropriately elaborated by Diffusion of Innovations model known as the 'adopter categories' (Rogers, 1971) based on how long it takes them to start using this new idea. Meanwhile, adoption of any new idea is caused by human interaction through interpersonal networks. If the initial adopter of an innovation discusses it with two members of a given social system, and these two become adopters who pass the innovation along to two peers, and so on, the resulting distribution follows a binomial expansion. Expect adopter distributions to follow a bell-shaped curve over time.

Communication Campaigns are primarily designed keeping in mind the primary role of Informing the audiences and second Persuasion or in other words influencing the audiences to take timely action. The more complex instructional messages present "how to do it" information in campaigns to produce knowledge gain or skills acquisition. However, the central type of message in campaigns is persuasive appeal. Most campaigns present messages featuring persuasive reasons why the audience should adopt the advocated action or avoid the proscribed behaviour. In other words, it helps in attitude creation or change, usually via knowledge gain and belief formation. A nation-wide campaign like **Swachh Bharat/Clean India**' campaign which is a lengthy as well as elaborative campaign usually disseminates a wide array of persuasive messages to influence attitudes and behaviours.

Moreover, beyond message qualities and importance of messengers in the case of campaign, there are two more factors which have gained prominence overtime one being extensive volume of messages designed for the campaign to help attain adequate reach, recognition while creating a strong image of the campaign and the second being the frequency or amount of repetition to facilitate message comprehension and make the public understand the importance of certain behaviours recommended in the campaign.

Many successive communication campaigns like the HIV/AIDS campaign, Anti- Tobacco campaign etc. have shown that message distribution over continual periods by campaign-stimulated factors like interpersonal communication can help the campaign produce stronger impacts in future.

III. IMPACT OF MEDIA

The task of determining which communication approach is appropriate for a campaign depends on the identification of immediate needs of the people at the local level while taking necessary action by the planners and the implementers. The success of any media out rightly depends on its ability of translating information and complex messages into effective approaches to facilitate triggering of dialogue among the audiences.

Here in this case the most functional model seems to be the AIDA Model (E. St. Elmo Lewis, 1898) which follows four major stages being: Attention, Interest, Desire and finally Action. Coming to this campaign, **Swachh** Bharat/Clean India', the planners and the decision makers need to first of all understand the drivers that motivate people to improve their sanitation situation. Moreover, addressing barriers in the communication campaign is equally important and needs complementary measures. Apart from all of this, most importantly, there is a need for effective and efficient ways to leverage grass root platforms to engage the rural audience to the campaign goals and objectives.

In the past two decades the role of media and communication has become increasingly important and relevant in the field of rural development more popularly known as Development Communication (DC);

"The systematic utilisation of appropriate communication channels and techniques to Increase people's participation In development and to inform, motivate, and train rural populations, mainly at the grassroots level" (Coldevin, 1987, p. 4).

IV. INTERPERSONAL COMMUNICATION IN RURAL INDIA

The success of IPC activities in rural India is dependent on the identified community's curiosity to the new ideas and practices identified for the communication campaign. More importantly, this needs to be supported by necessary resources to enable people to apply available new information to find easy solutions to the problems outlined for the campaign (here in particular: Sanitation).

This is closely associated with the activities and awareness building tasks carried out by the motivators earmarked for the campaign which includes motivators, IEC (Information Education Communication) specialists, educated leaders, community leaders, village head, elders, ASHA (Accredited Social Health Activist) workers, political leaders, students, women etc whose role is work with the community and encourage them to positive development oriented objectives.

But one cannot dismiss the fact all these conditions work on the basis of certain factors like people must be the principal actors in defining and finding solutions to their problems, the people selected as leaders are easily identified by the local community and here it is important to specify the role of the leaders is to just define the problem to the community and not give the solution. Most importantly, community participation and social action is the goal therefore continuous feedback from the community will be the driver for change in any campaign working at a grassroots level.

V. RESEARCH OBJECTIVES

- 1. To identify the types of Interpersonal Communication approaches adopted for the campaign
- 2. To study the written, spoken and visual material used in Interpersonal Communication Approaches

VI. DATA COLLECTION

Type of Data- Primary and in some percentage secondary

VII. RESEARCH METHODOLOGY

To understand the role of IPC activities based on triggering of community action as part of the 'Swachh Bharat/Clean India' campaign, the researcher selected two rural villages of India: one in Rajasthan and the other in Chhattisgarh. The selection involved two villages in the same district of Rajasthan in which one is an Open Defection Free (ODF) village and second where the campaign activities are yet to begin and is a fresh village for the campaign officials. Similarly in Chhattisgarh the researcher selected two villages in the same district one an ODF village and second village where the campaign activities are yet to begin.

The researcher conducted focus group discussions with the village residents to get a fair idea of the awareness and reach of the campaign. The Government officials, Panchayat members, IEC Consultants, localized group members and village residents were also interviewed to know their roles and duties in the campaign as well as how did they support the campaign at different levels.

VIII. RAJASTHAN

In the first state that is Rajasthan, the researcher selected two villages:

- 1. Nimeda, which is an Open Defecation Free village (ODF) and a part of Jhotvada Panchayat Samiti
- **2. Bhambori**, again a part of Jhotvada Panchayat Samiti, a fresh village where 'Swachh Bharat/Clean India' campaign activities did not begin.

IX. GOALS AND OBJECTIVES OF OFFICIALS

The researcher had a one-to-one discussion with the planners and the implementers to understand the goals and objectives of the officials outlined for the campaign. The main objectives of the officials involved in the campaign was to ensure that the village masses arrive at an informed understanding about the objective of the campaign meanwhile also develop skills to trigger collective local action and gain training skills [knowledge/skills/attitude/motivation]. This will help the field level motivators in developing an action plan to scale up sanitation activities in the project area.

Similarly, the major goal of the trainers and the motivators is to ensure that the people are informed about the importance of sanitation in the process of total development that is it facilitates clean environment, reduction of disease burden and expenditure on health, reduction in waste generation, supports dignity and privacy etc.

They developed a poster in Nimeda village, which is now an ODF village, to show the people during household visits, an important IPC tool, which supports one-on-one interaction. The poster presented a society with values as the one which is free from the practice of open defectaion as this in turn is a marker of good health, end of poverty, self dependency, increase of self respect and lastly feeling of shame.

X. SANITATION LADDER METHOD

Moreover, one common parameter in both Rajasthan and Chhattisgarh is that both these states follow CLTS Approach (Community Led Total Sanitation Approach) in which the major focus is on behaviour change and sanitation is not considered to be an individual asset but is moreover a community asset which is driven by the community.

The community is united to facilitate collective behaviour change favouring collective community decision and total action. This kind of approach helps in emergence of natural leaders within the community to ensure social solidarity and cooperation and use 'trigger tools' for both informing and for igniting behaviour change. It follows a 'sanitation ladder' approach to promote community self monitoring, which means the key to this entire process is the 'facilitator' or the leader to ignite the community with IPC approaches.

XI. TRIGGER APPROACH

The most popular among all IPC approaches is the 'trigger approach', which means a story or an experience, which makes the people think and act. Triggering can take place both at an individual level as well as at the community level.

The conversation with Mr. Birendra Singh, IEC Consultant, working at both the above mentioned villages elaborated on the steps involved in the triggering approach. First of all, the entire community analyses their own sanitation situations till a sense of collective shame, disgust and helplessness creeps in the minds of the people. This forces the community to come together, think and act which will result in finding steps to eliminate Open Defecation. In the meanwhile, this process also leads to emergence of new leaders who help and initiate collective local action.

XII.

XIII. TOOLS SUPPORTING TRIGGER APPROACH

There are various tools involved in the trigger approach as elaborated by Pratibha Singh, Project Consultant working in the above mentioned villages in Rajasthan, which are the following: Walk of Shame, Defecation mapping, Calculation of faeces, Calculation of faeces ingested by a person, Cost of illness, Respect to occupation, Flow diagram for water contamination, Holy ignition, Open defecation and begging, Faeces to mouth transmission, Water quality testing, Begging of self respect, Respect of women, Respect to mother-Debt of milk, Respect to wife — Pledge of marriage, Respect to sister—Rakshabandhan, Social Pride

(Aaan,Baan,Shan), Respect of Deity, Respect of Pagdi (Turban), Difference between human and animal and lastly Social boycott. These tools are used very effectively keeping in mind the mindset and situations in and around the village.

Apart from the community triggering tools, there are some earmarked individual triggering approaches as mentioned by Mr. Rajendra Shekhar Makkar, IEC Consultant, which include Privacy, Peer group pressure, Fear, Economic reason, Demonstration effect and finally Reward/ Incentive. Moreover, these IPC approaches both individual and community are designed in a manner to facilitate and prompt self-mobilization while making the village people realize for themselves the importance of sanitation to trigger local action by handing over the campaign activities to local leaders.

XIV. INDIVIDUAL REGRESSIVE CAMPAIGN SUPPORTING PARENT CAMPAIGN

In support of the main parent campaign i.e. 'Swachh Bharat/Clean India' campaign, there was regressive individual campaign designed for 7 days in all the districts as well as the blocks every month which included rallies, debate, drama, live discussions etc. as mentioned by Moindudeen Khan, Panchayat Pradhan Officer. A Nigrani committee is appointed in very village inclusive of local leaders which played an important role in making the people constantly aware of the bad effects of open-defectation and they used dhols (drumbeats)/whistling to gather people's attention.

XV. LIVE SITUATIONS AND EXAMPLES

Moreover, a local leader working in Bhambori village, Kamlesh Bairba, mentioned that they substantiated their IPC activities with live discussions with village masses asking them questions like 'How do you eat excreta? If you dip one strand of your hair in excreta and then in water, will you be ready to consume it?

Similarly another example of a fly, asking the village community during a focus-group discussion to imagine a situation where this fly sits on the glass of water kept on the table and it has 6 legs how dirty is the water (6 milligrams)? How costly does it get when you get sick? And think if the same fly travels to 4 to 5 kilometers to the nearby villages? Such questions are used to stress on the importance of having a toilet at home.

Both IEC specialists and local leaders working in the above mentioned villages of Rajasthan believe that CLTS approach (Community Led Total Sanitation Approach) plays a predominant role which means there are no Swachhata Doots/Sanitation Messengers instead a District Resource Group is appointed which is inclusive of 50-60 members and here they employ the CLTS approach and stay in the village for 2 to 3 days. Field functionaries include school children, women and child development, Aanganwadi workers etc.

There is constant hammering of messages related to the campaign to widen the pressure and under the CLTS approach there is the formation of Ratri Chaupal (Night Group Discussion) to continuously monitor the change and activities of village residents.

The Project Consultant in Bhambori village, Pratibha Singh, emphasized the role of Panchayat Samiti which is to inform people about the importance of toilets and also consult the Village Head as part of

government machinery and their role is to gather maximum publics to construct toilets and the money is given only after the toilet is constructed.

There are regular meetings organized and thereafter a District Resource Group (DRG) is formed which included a Block Officer, 1 ASHA worker, one Active Youth/ Aged and their role is to go door to door and discuss about local sanitation. If there is no habit change there is morning follow up and evening follow up for 5 to 6 days and whistling to stop people from Open Defecation and there are some gaps given to this method followed by sudden visits to check the overall progress and change in mind-sets of people.

XVI. CHHATTISGARH

In the second state that is Chhattisgarh, the researcher selected two villages:

- 1. Doma, which is an Open Defecation Free village (ODF) in Dhamtari District
- 2. Deori village in Dhamtari District, which was a fresh village where 'Swachh Bharat/Clean India' campaign activities did not begin.

XVII. INTERVIEW WITH THE MISSION DIRECTOR

A brief interview with Dr. M. Geetha, IAS Officer and Mission Director, Chhattisgarh, elaborated on how IPC is a critical part of this campaign and it is way broader than IEC (Information, Education and Communication). It involves a lot of experimentation apart from mere use of government machinery. It entails natural leaders. 'In recent years, the impact of the Community led Total Sanitation (CLTS) approach has drawn significant attention. At the heart of this approach is a shift away of the focus of supporting toilet construction for individual households, to an approach that seeks to create 'open defectation free' villages through an emphasis on the behaviour change of the whole community. This is achieved through triggering the communities' recognition of the negative externalities to 'all' as a consequence of the sanitary practices of some. The CLTS approach effectively creates empowered communities who are motivated to take collective action, with the government and other agencies potentially playing a role in facilitating this movement,' (as said by Dr. M. Geetha, IAS Officer and Mission Director, Chhattisgarh.

An IPC Consultant working in the state for the past 7 years said that there are nine 'gems' (meaning people) selected from village to government level to carry everywhere the message based on sanitation.

People holding Padma Sri are coming forward and acting as Brand Ambassadors as it helps in easy identification and they become the face for people for change. Secondly, the success of the movement in the state is also because of the involvement of old people to improve the sanitation situation in the district.

XVIII. DELAYED INCENTIVE METHOD

Here another principle which is turning out to be favourable in the state as well as the above mentioned district is the Delayed Incentive method, which according to the implementers is the ability to resist the temptation for an immediate reward and wait for an enduring reward later. This method has linkages to Sigmund Freud's theory of psychoanalysis where he discussed the 'ego's role in balancing immediate pleasure-driven

desires of the instinct (*Id*) with the morality choices of the (*Super-Ego*) which plays the critical and moralizing role.

Mr.Yashwant Sahoo, Block Coordinator working in Dhamtari, said Prime Minister, Shri. Narendra Modi in an event touched the feet of an old lady (104 years) whose 8 sons had died and also was financially poor but she was so moved by the campaign activities that she decided to sell goats to get the money to construct the toilet. PM Modi said in his speech 'Desh badal raha hain' (The country is changing). A programme 'Call in Open Mind' by BBC presented 13 stories out of which 7 were from the state. All these examples stand out as they have no governmental support to achieve this and they are part of the powerful imagery- one to one personal stories.

Once the community is triggered, the local leaders and the implementers start working on the reinforcement and strengthening of the ignition moment. The frequency and intensity of the follow up will depend upon the nature/scale of triggering conducted in the community.

This ignition moment also begins with the formation and strengthening of the committee (named *Nigrani Samiti*) which empowers natural leaders to start *Nigrani* (Inspection) of defecation sites early morning/evening. Perhaps, if the community is not willing to do the inspection, it should be mobilized again using other trigger tool that was not applied during the first visit.

Project Manager, Chhattisgarh, Mr. Rupesh Rathore, elaborated on the trigger tools which need to be applied at regular intervals to instill among the minds of the village people the importance of sanitation and moreover the campaign goals and objectives. They were the following:

XIX. TRIGGER TOOLS- DRIVER OF CHANGE

- Follow open defecator to the defecation site.
- Faeces covered off by the defecator or committee members
- Whistling while people are watched to go out to defecate.
- Flagging of defecation spot by the open defecator.
- Garlanding/public applause of open defecators.
- Display of names of open defecators at public spots.
- Photography of open defecator and its display at public place.
- Visit to the open defecator house to create peer group pressure
- Mixed the group of nigrani committee: women to stop men and vice versa.
- Nigrani conducted by children.
- Mobilise the early initiator to dig the pit
- Force the open defecator to dig the pit
- Penalty: cash/kind
- Cross Subsidization

The learning from the field visits by the IPC specialists, leaders and other groups may lead to a discussion on different types of triggering outcomes and related strategies.

- 1. Where the community is fully ignited and all are prepared to start action
- ✓ Facilitate action plan and formation of 'Nigrani Samiti'

- ✓ Facilitate a process of initiation of community monitoring using the social map drawn by the community
- 2. Where the majority has agreed but a good number is still not decided
- 3. Where majority of people are not decided (fence sitters) to initiate collective local action but only a few have decided to go ahead
- ✓ At this stage identify those who have decided to initiate local action and stop open defecation and bring them up front
- ✓ It might happen that all the members of the community were not present during the main ignition and analysis process. If required fix up a date with the community for a second round of ignition PRA (Public Rural Appraisal) within a week

All these stages incorporate different strategies to move the campaign ahead at a required pace to achieve the ear-marked goals.

Adding on to the development as well as the campaign's reach, Dr. M. Geetha, IAS Officer and Mission Director, Chhattisgarh, said "I take the pride in stating that Chhattisgarh is the only state using the CLTS approach. Women involved in the campaign are more stable and once their village turns ODF they go to other nearby villages to facilitate shared learning. Moreover, there are some Muslim women who even said that they will not celebrate 'Eid al-Fitr' without getting ODF status for their village. They feel this campaign helps in building communities and binds them together."

XX. ANALYSIS AND DISCUSSION

The Community Led Total Sanitation Approach (CLTS) as understood by the researcher in both the states with the interaction with the Mission Directors, IPC and IEC Specialists, Field Instructors, Village leaders, Self Group Members, Aaganwadi members and the lastly the village masses that it is a rigorous process involving four major phases: Planning Phase, Triggering Phase, Follow-Up Phase and finally Sustainability Phase. Each Phase has its own relevant immediate steps and possible outcomes. The Planning Phase involves rapport building of the leaders with the local population. This is an important process as this helps in identifying influential leaders and getting involved in small groups to have meetings to look at the major issues. These steps will eventually lead to local triggers (at a small level). In the second phase, i.e. the Triggering Phase, the triggering happens for the community, schools, aaganwadis and the religious and the community places. The possible outcomes in this phase include the emergence of natural leaders, Nigrani and Sanitation committees are formed. The third phase, the Follow Up phase which usually takes place post three months of the second phase includes morning-evening follow up, strengthening of the Nigrani committee, Hygiene sessions in schools and anganwadis and weekly community monitoring. The possible outcome for this phase includes the village is either declared Open Defecation Free (ODF) or is on the verge of attaining this status and secondly the incentive money is also released. The last phase is the Sustainability phase which involves the continuation of the Morning and the Evening Follow ups and the hygiene sessions. It also includes the cross visits of natural leaders from other communities. The possible outcomes from this phase include Walk of Pride after a village is declared ODF and they receive their last installment of incentive money. The other nearby communities also learns and tries some of the steps in their own village to achieve the status.

XXI. CONCLUSION

A sound and effective communication campaign should be based on an overarching vision of what needs to be achieved to address a particular issue/ concern (here in particular is Sanitation for the above mentioned campaign). Addressing this concern using Interpersonal Communication, the strategies need to be integrated with other communication channels and needs a long-term focus, should be responsive to individual behaviour change needs, and should maximize the potential for change on a broader societal level. IPC is not merely concerned with providing information about the campaign goals and objectives. Several researchers in India have emphasized the importance of individual skills, ways of approaching the masses and using IEC (Information, Education and Communication) tools very efficaciously. This will help the communities in question to decide for themselves what objectives they want to aim for and what means they want to use. Meanwhile, this will also help the implementers help in knowing the needs of the target group and their channels of communication, stimulating the processes of community participation and decision-making. IPC is not merely concerned with providing information but also gives people ample opportunity to understand new ideas and on how they work and with what effect giving a fair understanding on how these ideas operate in real life situations. The ultimate goal of IPC is to catalyze local/grassroots communication to smoothen the process of development.

REFERENCES

- 1. Piotrow, P.T., Kincaid, D.L, Rimon J.G.I., & Rinehart, W. (1997), Health Communication: Lessons from Family Planning and Reproductive Health. Westport, CT: Praeger Publishers.
- 2. Piotrow, P.T., Kincaid, D.L. (2001), Strategic Communication for International Health Programs, In Rice and Atkin (Ed.), Public Communication Campaigns (3rd ed., pp. 251.) Sage Publications.
- 3. Althuser, L. (1971). "Ideology and Ideological State Apparatus", Lenin and Philosophy and other Essays. London: W. Left Books.
- 4. Beltran, Luis Ramiro. (1989). "Alternative Systems", International Encyclopedia of Communication. New York: Oxford University Press, Vol. 2.
- DeFluer, Melvin and Rokeach, Sandra. (1994), Mass Communication Theory. London: Sage Publications.
- 6. Gerbner, George. (1977). Mass Media Policies in Changing Cultures. New York: John Wiley and Sons, pp. 131-133.
- Habib, Jacques. (1993), Cultural Expression in Global Village. (ed.). David Nostbakken and Charles Morrow. Southbond Publishers.
- 8. Hartmann, Paul; Patil, B.R.; and Dighe, Amita. (1989). The Mass Media and Village Life, New Delhi: Sage Publications.
- 9. Hornik, Robert, C. (1989). "Projects", International Encyclopedia of Communication. New York: Oxford University Press.
- 10. Mcquail, Dennis. (1994). Mass Communication Theory. London: Sage Publications.
- 11. Mcquail, Dennis; Windahl, Sven. (1989). Communication Models. New York. Longman.

- 12. Melkote, Srinivas. (1991). Communication for Development in the Third World. New Delhi: Sage Publications, pp.90-92, 172-173, 225-227, 270-271.
- 13. Ramos, Hernandez and Schramm, Wilbur. (1989). "History and Theories", International Encyclopedia of Communication. New York: Oxford University Press, Vol.2.
- 14. Rosengren, K.E. (1981). "Mass Media and Social Changes, Some Current Approaches", in E.
- 15. Kaltz and T. Szesko (eds.). Mass Media and Social Change. London: Sage Publications.
- 16. Sarvaes, Jan. (1996). "Participatory Communication with Social Movements", in Participatory Communication for Social Change. (ed.).
- 17. Tehranian, Majid. (1996). "Communication, Participation and Development", Participatory Communication for Social Change. (ed.). Servaes, J. Jacobson, T. and White, S. London: Sage Publications.
- 18. Abroms, L.C., & Maibach, E.W. (2008). The effectiveness of mass communication to change public behaviour. Annual Review of Public Health, 29, 219-234.
- 19. Ajzen, I., Albarracin, D., & Hornik, R. C. (2007). Prediction and change of health behavior: Applying the reasoned action approach. Mahwah, NJ: Lawrence Erlbaum Associates.
- 20. Ajzen, I., & Fishbein, M. (1980). Understanding attitudes and predicting social behaviour. Englewood Cliffs, NJ: Prentice Hall.
- 21. Atkin, C. K. (2001). Theory and principles of media health campaigns. In R. E. Rice & C. K. Atkin (Eds.), Public Communication Campaigns (pp. 49-68). Thousand Oaks, CA: Sage.
- 22. Atkin, C. K., & Wallack, L. (1990). Mass Communication and public health: Complexities and conflicts, Newbury Park, CA: Sage.
- 23. Bauman, A., Bowles, M., Huhman, M., Heitzler, C., Owen, B., Smith, B. et al. (2008). Testing a hierarchy-of-effects model pathways from awareness to outcomes in the VERB campaign 2002-2003. American Journal of Preventive Medicine, 34(6), S249-S256.
- 24. Bracht, N. (2001). Community partnership strategies in health campaigns. In R. E. Rice & C. K. Atkin (Eds.), Public communication campaigns (pp. 323-342). Thousand Oaks, C. K. Sage.
- 25. Lieberman, D. (2006). Using interactive media in communication campaigns for children and adolescents. In R. E. Rice & Atkin (Eds.), Public Communication Campaigns (pp. 373-388). Thousand Oaks, CA: Sage.
- 26. Mertens, D. M. (2009). Research and evaluation in education and psychology: Integrating diversity with quantitative, qualitative and mixed methods. Thousand Oaks, CA: Sage.
- 27. O'Keefe, D. J. (2002). Persuasion: Theory and research. Thousand Oaks CA: Sage.
- 28. Salmon, C. (1989). Information campaigns: Balancing social values and social change. Newbury Park, CA: Sage.
- 29. Singhal, A., Cody, M., Rogers, E., & Sabido, M. (2004). Entertainment-education and social change: History, research, and practice. Mahwah, NJ: Lawrence Erlbaum Associates.
- 30. Andreason, A. R. (2005). Social Marketing in the 21st century. Thousand Oaks, CA: Sage.
- 31. Atkin, C. K., & Silk, K. (2009). Health Communication. In D. Stacks & M. Salwen (Eds.), An integrated approach to communication theory and research (2nd ed., pp. 489-503). Hillsdale, NJ: Lawrence Erlbaum Associates.

- 32. Bracht, N. (Ed.), (1999). Health promotion at the community level: New advances (2nd ed.). Newbury Park, CA: Sage.
- 33. Rogers, E. M. (2003). Diffusion of innovations (5th Ed.). New York. NY: Free Press.
- 34. Southwell, B. G., & Yzer, M. C. (2007). The roles of interpersonal communication in mass media campaigns. In C., S. Beck (Ed.), Communication yearbook 31 (pp. 419-460). Mahwah, NJ: Lawrence Erlbaum Associates.
- 35. Stephens, K.K., Rimal, R., N., & Flora, J. (2004). Expanding the reach of health campaigns: Community organizations as meta-channels for the dissemination of health information. Journal of Health Communication. 9, 97-111.
- 36. Stiff, J. B., & Mongeau, P. (2003). Persuasive communication (2nd Ed.) New York, NY: Guilford Press.
- 37. Thompson, T., Parrott, R., & Nussbaum, J. (Eds.). (2010). Handbook of health communication. (2nd ed.). London, UK: Routledge.