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Community Mobilization and Behavioural Change in Swachh Bharat Mission: Strategies, Outcomes, and Sustainability Challenges

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Abstract

The Swachh Bharat Mission (SBM), launched in 2014, marks a transformative shift in India's sanitation policy from infrastructure-driven provision to behaviour-centered, community-led mobilization. Recognizing that toilet construction alone does not guarantee sustained usage or improved public health outcomes, SBM integrated political leadership, behaviour change communication, and grassroots engagement to eliminate open defecation and institutionalize cleanliness as a social norm. This paper examines SBM as a large-scale case of state-led community mobilization and analyses its conceptual foundations, strategic design, outcomes, and sustainability challenges.

Drawing on social norms theory, Social and Behaviour Change Communication (SBCC) frameworks, community mobilization theory, and institutional governance perspectives, the paper situates SBM within contemporary debates in sanitation and public policy. It argues that SBM's distinctiveness lay in its integrated behavioural architecture: high-level political norm signalling; structured Information Education Communication (IEC) strategies; deployment of village-level mobilizers (Swachhagrahis); collective Open Defecation Free (ODF) targets; public verification mechanisms; recognition and ranking systems; school and youth engagement; civil society participation; and real-time digital monitoring dashboards. Together, these components aligned citizen behaviour change with bureaucratic incentives and administrative accountability.Evidence shows that SBM achieved unprecedented expansion in toilet coverage and significant reductions in open defecation across many regions. Beyond infrastructural gains, the campaign contributed to broader normative shifts by transforming sanitation from a private or stigmatized issue into a matter of civic responsibility and national development. Administrative systems also adapted, with sanitation becoming a performance-linked priority supported by monitoring and recognition mechanisms.

However, the paper highlights several sustainability challenges. Marginalized populations, informal settlements, and land-constrained households face structural barriers to access. Moreover, faecal sludge management and long-term service delivery systems require strengthening to ensure environmental and public health sustainability. The transition from campaign mode to institutionalized service provision remains critical to secure long-term gains.

Keywords: Swachh Bharat Mission, sanitation, behaviour change communication, community mobilization, public policy, sustainability, challenges, social norms,

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1. Introduction

Sanitation has long been recognized as a foundational determinant of public health, environmental sustainability, and human dignity. Yet for decades, sanitation coverage in many low- and middle-income countries expanded slowly despite infrastructure investments. Research increasingly demonstrated that sanitation adoption is not merely an engineering problem but a social and behaviour alone. Toilets may be constructed, but their consistent use depends on beliefs, norms, habits, affordability, convenience, and collective expectations. This recognition shifted global sanitation policy toward approaches that integrate infrastructure with behavioural and community-level interventions.

India historically accounted for a large share of the global population practicing open defecation. Earlier programs such as the Central Rural Sanitation Programme and the Total Sanitation Campaign made incremental progress but were widely critiqued for supply-driven approaches and weak community engagement. In this context, the Government of India launched the Swachh Bharat Mission (Clean India Mission) in October 2014 with a bold and time-bound goal: eliminate open defecation and achieve universal sanitation coverage.

What distinguished SBM from previous efforts was its explicit framing as a mass social movement (Jan Andolan) rather than only a subsidy program. Government guidelines and strategy documents emphasized Information-Education-Communication (IEC), behaviour change communication (BCC), community approaches to sanitation, and decentralized mobilization. Political leadership at the highest-level elevated sanitation into a national moral project linked to dignity, patriotism, and public responsibility. Celebrities, civil society, local governments, and citizens were mobilized through campaigns, competitions, and recognition platforms.

By 2019, official statistics reported near-universal rural toilet coverage and large-scale open defecation free (ODF) declarations. International agencies including the World Bank and UNICEF recognized the unprecedented scale and speed of sanitation expansion. At the same time, independent scholars and evaluators raised important questions regarding sustainability of toilet use, data reliability, equity of access, and sanitation service chains beyond toilet construction.

This paper focuses specifically on community mobilization and behavioural change within SBM. Rather than evaluating SBM only as an infrastructure program, it examines how social and behavioural strategies were designed and deployed, how they functioned in practice, and what evidence exists regarding their effectiveness and limitations. The analysis is especially relevant for development sociology, governance studies, and public policy, as SBM represents a rare example of a state-led behavioural transformation campaign operating at national scale.

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The central argument advanced here is that SBM demonstrates the power and limits of large-scale behaviour change campaigns: community mobilization and social norm strategies can accelerate adoption, but sustainability requires institutionalization, service quality, and equity-focused design.

2. Conceptual Framework: Community Mobilization and Behaviour Change in Sanitation

Sanitation behaviour has increasingly been understood in development and public health scholarship not merely as a matter of infrastructure access but as a deeply embedded social and behavioural practice shaped by norms, beliefs, incentives, and institutional environments. Early sanitation policies across many developing countries assumed that provision of toilets would automatically lead to their use. However, empirical research has repeatedly shown that the relationship between sanitation infrastructure and sanitation behaviour is neither automatic nor linear. Behavioural outcomes depend on how individuals and communities interpret sanitation in relation to dignity, status, purity, safety, gender norms, and social expectations. This recognition has led to a paradigm shift in sanitation policy toward behaviour-centered and community-driven approaches, particularly within the Water, Sanitation and Hygiene (WASH) sector.

Behaviour change theory provides a foundational lens for understanding sanitation adoption. Public health and social psychology models — including social norms theory, habit formation theory, and stages-of-change models — emphasize that sustained behaviour change requires more than awareness; it requires motivation, enabling conditions, repetition, and social reinforcement. Jenkins and Curtis (2005), in their influential study on latrine adoption behavior, demonstrated that households often adopt sanitation facilities not primarily because of disease prevention messaging but due to drivers such as social status, privacy, dignity, and convenience. Their work helped shift sanitation programming away from purely health-risk messaging toward more socially grounded motivational frameworks. Subsequent WASH behaviour changes frameworks built on this insight by emphasizing emotional and social drivers alongside informational drivers.

Within this broader shift, Social and Behaviour Change Communication (SBCC) emerged as a structured approach to influencing health and development behaviours through multi-channel communication and social engagement strategies. SBCC frameworks emphasize that behaviour change occurs through layered processes involving awareness generation, attitudinal shifts, social norm reinforcement, trial behaviors, and eventual habit formation. Government sanitation frameworks in India particularly under the Swachh Bharat Mission explicitly draw upon SBCC principles by recommending staged communication strategies, audience segmentation, and repeated exposure through mass media and interpersonal channels (Ministry of Housing and Urban Affairs, n.d.). The DMeO behaviour change review of central government schemes further affirms that large-scale public programs increasingly rely on

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behavioural frameworks that combine messaging, social influence, incentives, and environmental enablers to produce durable outcomes (DMeO, 2022).

Community mobilization theory adds a collective dimension to behaviour change by emphasizing that many public health and sanitation behaviors are socially interdependent rather than purely individual. Community mobilization approaches are grounded in the idea that collective awareness, peer influence, and shared commitments can accelerate norm change and compliance. In sanitation, this perspective was operationalized most visibly through Community-Led Total Sanitation (CLTS), which sought to trigger collective realization of sanitation risks and generate community-level commitments to end open defecation. CLTS approaches avoid heavy hardware subsidies and instead rely on participatory exercises, social mapping, and collective monitoring to build social pressure for behaviour change. While the Swachh Bharat Mission did not adopt CLTS in its pure form, official SBM guidelines incorporated several community mobilization principles, including collective ODF (Open Defecation Free) targets, community verification processes, and village-level mobilizers (DDWS, IEC Manual).

Social norms theory is particularly relevant in explaining sanitation behaviour change at scale. Social norms scholars distinguish between descriptive norms beliefs about what most people do and injunctive norms beliefs about what most people approve or disapprove. Behaviour change interventions are more effective when they shift both dimensions simultaneously. Sanitation campaigns that portray toilet use as common and socially expected while framing open defecation as undesirable create both descriptive and injunctive norm pressure. Large-scale sanitation campaigns supported by visible leadership, public recognition, and community-level verification processes operate partly by reshaping perceived norms. World Bank analytical work on sanitation scale-up programs notes that public commitments and recognition systems can significantly accelerate adoption by altering social expectations and reputational incentives (World Bank, 2019).

Another important conceptual strand comes from institutional and governance theory, which emphasizes that behaviour change is shaped by administrative systems and incentive environments as much as by individual motivations. Development programs increasingly recognize that frontline workers, local officials, and community leaders are themselves behaviour actors whose incentives and norms influence program outcomes. SBM documentation and World Bank evaluations highlight that sanitation behaviour change was supported not only by citizen mobilization but also by bureaucratic mobilization including performance dashboards, rankings, field verification requirements, and recognition awards for districts and cities (World Bank, 2020). From an institutional behaviour perspective, this represents an alignment of administrative incentives with citizen behaviour goals.

Behavioural economics also contributes to sanitation behaviour frameworks by highlighting the role of nudges, incentives, and cognitive biases. Recognition awards, public rankings, and

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certification systems widely used under SBM function as behavioural nudges that appeal to status motivation and loss aversion. The DMeO (2022) review of behaviour change strategies in Indian government programs identifies such non-monetary incentives as effective drivers in public behaviour campaigns when combined with social messaging and enabling infrastructure.

Gender and social inclusion perspectives further expand the conceptual framework. Sanitation behaviour is shaped by gendered needs for privacy and safety, caste and social hierarchy norms, and intra-household power relations. UNICEF and WASH sector analyses emphasize that behaviour change strategies must account for these social dimensions to be effective and equitable (UNICEF India, n.d.). Community mobilization approaches that engage women's groups, schoolchildren, and marginalized communities tend to produce more inclusive outcomes because they expand the base of change agents.

Taken together, contemporary sanitation behaviour theory integrates social norms, SBCC, community mobilization, institutional incentives, and behavioural economics. The Swachh Bharat Mission's design with its emphasis on mass communication, interpersonal outreach, community verification, leadership signalling, and incentive systems reflects this integrated conceptual foundation. Understanding SBM through this framework allows sanitation outcomes to be interpreted not simply as infrastructure achievements but as products of coordinated social and behavioural transformation processes.

3. Strategies: Community Mobilization and Behavioural Change Architecture in Swachh Bharat Mission

The Swachh Bharat Mission (SBM) was designed not merely as a sanitation infrastructure program but as a nationwide behaviour change and community mobilization campaign. Its strategic architecture reflects a deliberate shift from earlier subsidy-driven sanitation schemes toward a social and behavioural transformation model grounded in communication, participation, and institutional incentives. Official program frameworks for both Swachh Bharat Mission–Gramin (SBM-G) and Swachh Bharat Mission–Urban (SBM-U) explicitly positioned Information–Education–Communication (IEC) and Behaviour Change Communication (BCC) as core pillars rather than peripheral components. Government guidelines, multilateral evaluations, and independent behaviour change reviews consistently indicate that SBM's strategic distinctiveness lies in its integration of political leadership, structured communication frameworks, community mobilization mechanisms, decentralized engagement, and performance-linked incentives (Ministry of Housing and Urban Affairs, 2014; World Bank, 2019; DMeO, 2022).

A foundational strategic element of SBM was high-level political leadership and symbolic norm signalling. Sanitation was elevated to a national development priority through sustained advocacy by top political leadership, which reframed toilet use and cleanliness as matters of

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civic duty, dignity, and national pride. World Bank analyses of SBM emphasize that this visible and repeated leadership engagement created strong injunctive norms that legitimized sanitation action across administrative and community levels (World Bank, 2019). Political endorsement reduced long-standing social taboos around discussing sanitation and enabled local officials and frontline workers to engage communities more assertively. From a behaviour change perspective, such leadership signalling functions as a macro-level normative cue, altering perceptions of what behaviors are socially expected and institutionally supported. The DMeO review of behaviour change strategies in Indian government programs notes that visible leadership endorsement significantly increases program salience and citizen responsiveness in public campaigns (DMeO, 2022).

A second major strategic pillar was the institutionalization of structured IEC and behaviour change frameworks within program design. SBM guidelines mandated dedicated budget allocations for IEC activities and provided operational manuals for message design, audience segmentation, and channel selection. The National Behaviour Change Communication Framework for SBM-Urban articulates a staged behaviour change pathway from awareness and motivation to adoption, habit formation, and advocacy closely aligned with global SBCC models used in public health programming (MoHUA, 2014). Rather than relying solely on one-time publicity drives, the framework promotes continuous and layered communication combining national campaigns with localized engagement. Government IEC manuals under SBM-G similarly emphasize repeated exposure, culturally adapted messaging, and interpersonal communication as necessary for durable sanitation behaviour change (DDWS, 2021). Independent IEC assessment studies conducted with development partners found that exposure to multiple communication channels especially interpersonal communication was more strongly associated with toilet adoption and consistent use than mass media exposure alone.

Interpersonal and community-level mobilization formed a critical operational layer within SBM's strategy. The program deployed trained village-level mobilizers, commonly referred to as Swachhagrahis, to facilitate direct engagement with households and communities. These mobilizers conducted door-to-door visits, organized community meetings, addressed misconceptions about toilets, and encouraged collective commitments to eliminate open defecation. World Bank impact evaluations and learning notes highlight the Swachhagrahi model as a key differentiator from earlier sanitation programs, noting that districts with active mobilizer networks demonstrated stronger behaviour change outcomes (World Bank, 2020). From a sociological standpoint, these frontline actors functioned as norm translators and trust intermediaries, bridging the gap between policy messaging and household decision-making. Their repeated interactions with households supported habit formation and addressed context-specific barriers such as water access, cost concerns, and cultural resistance.

Community-level collective targeting was another strategic innovation that distinguished SBM's mobilization architecture. Rather than focusing exclusively on individual household

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toilet adoption, SBM promoted collective outcomes through village, ward, and district-level Open Defecation Free (ODF) targets. Community verification processes and public declarations created shared accountability and peer monitoring structures. Government guidelines describe ODF verification as a participatory process involving community representatives and local authorities (DDWS, 2021). This collective framing aligns with community mobilization theory, which holds that shared goals and peer accountability can accelerate behaviour adoption. World Bank documentation on SBM notes that collective ODF targets created social pressure mechanisms that complemented individual incentives, making sanitation behaviour a matter of community reputation rather than private choice (World Bank, 2019).

Recognition systems and competitive incentives were systematically embedded in SBM strategy to reinforce mobilization and behaviour change. National and state-level sanitation rankings, cleanliness surveys, and award schemes for cities, districts, and villages created reputational incentives for performance. Under SBM-Urban, annual cleanliness rankings of cities generated widespread media attention and inter-city competition. Behavioural insights literature and the DMeO behaviour change review indicate that such recognition-based incentives can function as effective behavioural nudges by appealing to status motivation and institutional pride (DMeO, 2022). In SBM, these mechanisms motivated not only citizens but also local administrations, encouraging bureaucratic behaviour change alongside community behaviour change.

School and youth engagement constituted another important mobilization strategy within SBM. Government and partner frameworks encouraged sanitation education programs in schools, student-led cleanliness drives, and child ambassador initiatives. UNICEF's WASH programming experience in India emphasizes that children can act as influential messengers within households and communities, particularly in hygiene and sanitation behaviour adoption **(UNICEF India, n.d.).** By involving schools, SBM extended behaviour change messaging into everyday socialization spaces, reinforcing norms among younger generations while indirectly influencing adult household members. This intergenerational pathway is recognized in SBCC literature as a multiplier effect in behaviour change campaigns.

Civil society organizations, community-based groups, and women's self-help groups were also mobilized as part of SBM's decentralized engagement strategy. Government guidelines encouraged partnerships with non-governmental organizations for community outreach and mobilization activities. Peer-reviewed SBM studies note that women's groups played important roles in promoting toilet adoption and sustained use in several regions, partly because women experience the most direct safety and dignity benefits from household sanitation (Behera et al., 2021). Community group engagement expanded the social base of mobilization and increased contextual sensitivity in messaging and follow-up.

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Digital monitoring and dashboard-based governance further supported SBM's mobilization architecture by increasing transparency and feedback loops. Real-time dashboards tracking toilet construction, ODF declarations, and verification status were publicly accessible. World Bank assessments note that digital monitoring systems increased administrative accountability and sustained bureaucratic engagement (World Bank, 2020). From a behavioural governance perspective, such feedback systems function as performance cues and reinforcement mechanisms, encouraging continued effort among implementing agencies.

Taken together, SBM's strategy combined macro-level norm signalling, structured SBCC frameworks, interpersonal mobilization, collective accountability mechanisms, recognition incentives, youth engagement, civil society participation, and digital monitoring. Authentic government frameworks and multilateral evaluations consistently show that this integrated mobilization and behaviour change architecture rather than infrastructure subsidy alone explains SBM's rapid sanitation gains. The strategy reflects a mature application of behaviourchange and community mobilization theory within a national public policy campaign.

4. Outcomes and Sustainability Challenges in Swachh Bharat Mission

The Swachh Bharat Mission (SBM) produced outcomes at multiple levels infrastructural, behavioral, administrative, and normative that distinguish it from earlier sanitation initiatives in India. At the same time, credible evaluations and peer-reviewed research identify significant sustainability challenges that complicate long-term impact. A balanced assessment of SBM therefore requires examining both its demonstrated achievements in sanitation expansion and behaviouralmobilization, and the structural constraints affecting sustained sanitation outcomes. Evidence from government monitoring systems, World Bank impact evaluations, UNICEF WASH documentation, and academic studies provide a convergent but nuanced picture: SBM achieved rapid gains and measurable behaviourshifts in many regions, but durability, equity, service quality, and full sanitation chain management remain ongoing challenges.

One of the most visible outcomes of SBM was the rapid expansion of household toilet coverage, particularly in rural areas under SBM-Gramin. Official government dashboards reported a sharp rise in rural toilet coverage between 2014 and 2019, with coverage levels moving from below half of rural households to near universal access according to administrative records. While administrative data must be interpreted with caution, independent evaluations support the conclusion that toilet construction increased at historically unprecedented speed during the SBM period. A major World Bank impact evaluation using a multi-arm, cluster-randomized design in rural India found that SBM interventions significantly increased toilet construction rates in program areas compared to control areas, confirming that the program generated real and measurable infrastructure expansion beyond baseline trends (World Bank, 2020). This scale of expansion reflects not

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only financing but also the mobilization architecture that activated local governments and communities around time-bound targets.

Closely linked to infrastructure expansion were reported reductions in open defecation. Multiple independent and multilateral assessments document meaningful declines in open defecation in intervention areas, although not always to zero levels. The World Bank's impact evaluation of SBM-Gramin found statistically significant reductions in open defecation practices in treated clusters relative to comparison clusters, indicating that behaviour change components contributed to measurable usage outcomes (World Bank, 2020). Peer-reviewed research examining sanitation change processes in states such as Jharkhand similarly reports substantial shifts away from open defecation in many villages, particularly where mobilization efforts were intensive and follow-up engagement occurred (Novotný, et.al., 2018). These findings are important because earlier sanitation programs often produced toilets without corresponding reductions in open defecation. SBM's integration of behaviour change communication and community mobilization appears to have narrowed though not eliminated the gap between construction and usage.

Beyond household behaviour, SBM generated broader normative and discursive outcomes. Sanitation, historically treated as a private or stigmatized topic, entered mainstream public discourse through mass campaigns, political speeches, media coverage, and community events. Government frameworks explicitly framed SBM as a Jan Andolan, or people's movement, and this framing was reinforced through repeated symbolic and communicative acts (MoHUA, 2022). From a sociological perspective, this represents a significant norm shift: sanitation became publicly discussable, morally valorised, and socially expected. The DMeO review of behaviour change strategies in Indian government programs notes that SBM is one of the strongest examples of norm-based public campaigning in recent policy history, demonstrating how repeated messaging, leadership endorsement, and social recognition can reshape public discourse and perceived social norms (DMeO, 2022). Such discursive transformation is itself an important behavioural precondition, as norm visibility influences individual compliance.

Administrative and institutional behaviour also changed under SBM, representing another layer of outcomes. World Bank implementation studies highlight that SBM altered bureaucratic engagement patterns through real-time dashboards, frequent progress reviews, verification protocols, and performance recognition systems (World Bank, 2019). District and municipal officials were more directly monitored and publicly ranked on sanitation performance than under previous programs. This created what governance scholars describe as "administrative norm change," in which sanitation became a high-priority performance domain rather than a routine welfare activity. The combination of monitoring technology and recognition incentives helped sustain administrative attention and field presence, which in turn supported community mobilization and follow-up.

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Urban sanitation outcomes under SBM-Urban were more heterogeneous but still significant in several respects. Progress included expansion of public and community toilet infrastructure, increased door-to-door solid waste collection in many cities, and the institutionalization of cleanliness rankings that generated competitive pressure among municipalities. Government and UNICEF documentation indicate that many cities improved visible sanitation services and citizen engagement around cleanliness drives **(UNICEF India, n.d.).** However, urban outcomes varied widely depending on municipal capacity, land tenure conditions, and population density, with informal settlements facing particular constraints.

Despite these substantial outcomes, sustainability challenges are widely documented across authentic sources and must be taken seriously in any scholarly assessment. A primary sustainability concern is the distinction between toilet ownership and sustained toilet use. Behaviour change theory predicts that initial adoption does not automatically translate into permanent habit formation, especially where enabling conditions are weak. Peer-reviewed SBM studies report that while many households adopted toilets, consistent and universal usage was not always achieved. Behera et al. (2021) note that usage gaps persisted in some regions due to factors such as poor construction quality, inadequate water supply, and entrenched habits. Field-based research in rural Jharkhand found that some households practiced partial adoption using toilets under certain conditions while continuing open defecation in others indicating that behaviour change remained incomplete in parts of the population (Novotný et.al, 2018). These findings suggest that campaign-driven behaviour change requires long-term reinforcement to become stable.

Infrastructure quality and functionality represent another sustainability challenge. Rapid scale-up created implementation pressures that sometimes-affected construction standards. Peer-reviewed and evaluation literature documents cases of incomplete or low-quality toilets, including issues with pit design, superstructure durability, and water connectivity (Behera et al., 2021). Poor user experience reduces the likelihood of sustained behaviour change because sanitation adoption is strongly influenced by convenience, comfort, and perceived safety. Government technical manuals specify standards, but local implementation capacity varied, producing uneven quality outcomes. Sustainability therefore depends not only on coverage but also on technical robustness.

Water availability is closely linked to sanitation sustainability. Many SBM-supported toilets are pour-flush systems requiring regular water access. Studies note that in water-scarce areas, households may find toilet use inconvenient relative to open defecation, particularly when water must be transported manually (Novotný, et. al., 2018). This reveals an important systems dependency: sanitation behaviour change is intertwined with water service provision. Without reliable water access, sanitation behaviour gains may erode over time.

Faecal sludge management (FSM) and sanitation service chain gaps pose further sustainability risks, especially in urban and peri-urban contexts. Global sanitation frameworks emphasize

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that safe sanitation requires not only containment but also safe emptying, transport, treatment, and disposal or reuse. Early SBM phases focused primarily on toilet construction and ODF outcomes, while FSM systems developed more slowly. World Bank and UNICEF sanitation analyses highlight FSM as a critical next frontier for sustainability, noting that unmanaged sludge can undermine environmental and public health gains (World Bank, 2019; **UNICEF India, n.d.).** Policy evolution toward ODF++ standards under SBM-Urban reflects growing recognition of this gap.

Equity and inclusion challenges also affect sustainability. Authentic program analyses consistently report that landless households, residents of informal urban settlements, migrant populations, and socially marginalized groups face structural barriers to sanitation access. In dense settlements, lack of space and insecure tenure limit household toilet construction, leading to reliance on shared or community facilities that often face maintenance problems. UNICEF documentation stresses that behaviour change messaging alone cannot overcome structural access constraints and that inclusive sanitation planning is necessary for sustained outcomes **(UNICEF India, n.d.).** Gender dimensions are also significant: while women benefit strongly from household sanitation, decision-making and resource control may lie elsewhere, requiring targeted mobilization approaches.

Monitoring and verification reliability represents an additional challenge. Large, target-driven programs can generate reporting pressures that affect data accuracy. World Bank evaluations note that while SBM's digital dashboards improved transparency relative to earlier programs, independent verification remains essential because self-reported ODF status may not always reflect ground realities (World Bank, 2020). Measuring sanitation behaviour is inherently difficult, as self-reports are vulnerable to social desirability bias, especially after strong normative campaigns. Sustainability assessment therefore requires periodic independent surveys and observational methods.

Finally, there is a structural sustainability challenge related to program modality. SBM's early success was driven in part by campaign-style urgency, high visibility, and intensive administrative focus. However, campaign modes are time-bound by nature. The DMeO (2022) behaviour change review cautions that without institutionalization stable budgets, routine monitoring, and embedded local capacity behaviour change gains risk gradual erosion after campaign intensity declines. Transitioning from campaign mode to institutional mode is therefore essential for durable sanitation outcomes.

Taken together, authentic evidence indicates that SBM achieved substantial sanitation and behaviour change outcomes but faces multidimensional sustainability challenges. These challenges do not negate the program's achievements; rather, they define the agenda for its next phase embedding behaviour change within long-term service systems, governance structures, and inclusive sanitation planning.

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Conclusion

The Swachh Bharat Mission (SBM) marks a transformative shift in sanitation governance by positioning community mobilization and behaviour change rather than infrastructure alone at the center of program design. Through the integration of political leadership, structured behaviour change communication, grassroots mobilizers, collective ODF targets, and recognition-based incentives, SBM reframed sanitation as a matter of dignity, citizenship, and collective responsibility. Evidence indicates that this integrated architecture generated substantial gains in toilet coverage, measurable reductions in open defecation, and important normative shifts that brought sanitation into mainstream public discourse. By combining interpersonal outreach, community verification processes, and administrative accountability mechanisms, SBM succeeded in aligning citizen and bureaucratic behaviour toward shared sanitation goals.

Yet the long-term sustainability of these gains depends on moving beyond campaign momentum toward institutional consolidation. Persistent challenges related to infrastructure quality, water access, faecal sludge management, and inclusion of marginalized populations underscore that behaviour change must be supported by reliable service systems and equity-sensitive planning. The next phase of sanitation reform must therefore prioritize continuous behaviour reinforcement, strengthened local governance capacity, and full sanitation service chain development. SBM demonstrates that large-scale social mobilization can catalyze rapid transformation, but enduring success will depend on embedding behavioural shifts within resilient, inclusive, and system-based sanitation frameworks.

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