Identity, Resistance, and Desire for Discourse: An Ethnography of Open Defecation in India

Abstract

Drawing from classical contributions that place communication at the center of cultural activity, this ethnography reports on the symbolic aspects of identity, resistance and desire for discourse related to the mundane matter of excretion. The study was conducted in two communities in India, Kumbhdaura and Chowka, and addressed cultural practices surrounding open defecation. Findings from field observations and nine focus group interviews/dialogues indicate that communication plays a crucial role in explaining why open defecation persists in spite of health issues, harassment, and serious hardships. In short, open defecation acted as a performance of male identity, a refuge through conversation for female sociality, and a form of resistance for both men and women in terms of (post)colonial and patriarchal issues.

Global challenges are rarely framed as reflections of the centrality of communication in culture. That is, communication may be at the heart of choices or behaviors that are often framed as biological, psychological, environmental, or technological issues. For example, the U.N. dictate that sanitation and poor hygiene in developing countries is a biological or technological problem places communication in the role of a tool that can be used to create campaigns for cultural change but does not allow for the possibility that communication is at the core of cultural practices. Subsequently, the notion that communication might be a fundamental essence of culture is marginalized and discourse is given a secondary status. Drawing on the classic works of Langer (1942/1951), Burke (1966) and Hymes (1962, 1964; Gumperz and Hymes 1964), as well as contemporary ideological contributions in the area of communication and rhetorical ethnographies, we explore identity, resistance, and desire, through ethnographic practices, related to the global challenge of understanding open defecation.

Open defecation (OD)—defecating or urinating in public, whether in fields or on roadsides, is widespread in developing countries (WHO 2015) and has been defined as a health problem as it is linked to serious diseases (WASH 2013, 2015). Illnesses such as tuberculosis, helminthes, diarrheal diseases, and stunting have been associated with OD, which persists despite well-meaning efforts by scientists, researchers, policy advocates, and community health activists (e.g., Coffey 2014; Coffey et al. 2014; Doron and Jeffrey 2014; Hammer and Spears 2013). Although gains are being made in some countries, India has not only demonstrated a persistence of OD but has actually evidenced a rise in OD (Coffey et al.).

Diarrheal diseases are the second leading cause of death in India (WorldLifeExpectancy 2009) where over 60 percent of the population defecate in the open, leaving people, especially children, susceptible to its effects (Lalwani 2014). Annually, more than 6 million children under the age of five succumb to diarrheal diseases due in large part to a lack of effective sanitation and hygiene (WHO 2015) and even more suffer from stunting and cognitive impairment (Spears, Ghosh, and Cumming 2013). All of these problems persist in spite of government efforts initiated over fifteen years ago to curb OD. Researchers are puzzled by the recalcitrance of this problem, yet none have focused on the specific cultural aspects related to communication.

Speech Communities as the Backdrop to Global Challenges

Alessandro Duranti (2003) provided a paradigmatical framework by which to navigate the basic developments and influences of language as a cultural phenomenon in U.S. anthropology. Duranti used Franz Boas’ work to illustrate the first paradigm with its focus on language and linguistic relativity (also see Whorf 1956). Hymes’ (1964) work illustrated the second paradigm or the speech community approach with a classic emphasis on identity, events, and performance (also see Goffman 1956). The third paradigm extended the second school of thought and drew heavily from the ideological influences of the postmodern, postcolonial and feminist movements which were exploring discourse as reality and shifting subject positions (see Foucault 1966/1973, 1976/1990; Said 1978; de Beauvoir 1949/1961) and which were translated and applied to anthropology (e.g., Clifford and Marcus 1986; Spivak 1988; Wolf 1992). Other influences to the second and third paradigms include such notables as Langer (1942/1951) from philosophy and Burke (1935, 1966) from rhetoric who in turn influenced Hymes (Jordan 2005). Duranti allowed for overlaps across the paradigms and pointed out the important similarity between them as the study of the symbolic through linguistic anthropology, that is, the study of communication “among human beings concerned with their daily affairs” (333).

Employing Duranti’s (2003) framework, we situate our work within the second and third paradigms. We are especially interested in how a daily practice such as excretion may speak to identity, resistance and desire. These subjects—identity, resistance and desire—are representative of ethnographies of communication, perhaps even before such a label had been placed on such studies by Hymes. For instance, Whyte’s (1955) famous study of a street corner society produced evidence of linguistic import that defined male identity. Later, following Hymes, Philipsen (1975) incorporated the rhetorical approach as he studied how men talked in “Teamsterville” and which positioned the participants in their male hierarchical roles. Willis (1977) provided one of the most extensive contributions as he embarked on a study of working class lads in Great Britain. Later, Conquergood (1994) studied male members of urban street gangs in order to understand their culture (in terms of identity) through graffiti, language, rituals, and performance. These male-dominated studies did not go unchallenged for their patriarchal focus (see Ardener 1975; McRobbie 1981; also see Author 1998) and their modernistic heteronormative acceptance of a single identity (Butler 1990). Scholars thus encouraged the study of marginalized groups with a continuing emphasis on language and performance, such as the case of “tombois” in Indonesia (Blackwood 2009) or the plural and shifting subject (Author 1998, 2012). In these more recent cases, resistance is coupled with desire for a different identity than the ‘normalized’ one. Resistance and desire are inextricable linked with identity/ies. And although Foucault set the stage for discussions of resistance, it may be de Certeau’s (1984) work which best exemplifies what Duranti (2003) called “daily affairs” (333).

Excreting human waste might not bring the most pleasant picture to mind, but it definitely constitutes a “daily affair” or as de Certeau (1984) put it, “an everyday practice.” Everyday practices are generally thought of as local and emic (Geertz 1973, 1977). Likely the members of the community give little thought to these kinds of practices until they are questioned or interrupted in some fashion or another. Most people likely do not even think of urinating and defecating as cultural. However, it should be noted that Herodotus was the first to point out that how one defecates or urinates varies across cultures and this observation was repeated by Bernard Romans in the 18th century (Author 2003) and as such has the possibility of being symbolic; and thus, expressive of identity, resistance, desire (for an interesting example see Thomas 2003). Indeed this mundane practice is not only cultural but may be discursive and symbolic at various levels, yet no scholars have explored OD from such a perspective.

Previously Applied Perspectives on Open Defecation

Instead, current scholarship on OD seems to explore every avenue but the discursive. Most of these studies have followed in the wake of the 1999 Indian government initiated *Total Sanitation Campaign* (TSC) (2015) which was designed to provide toilets and hygiene education and called for community involvement in the plans. The program showed middling results based on assessment studies. Although researchers provided a wide range of reasons for the failure to curb OD, from structural design of facilities to socio-economic considerations (Barnard et al. 2013), they did not consider the role of communication nor undertake a study guided by linguistic anthropology; instead, communication was generally relegated to the position of campaign development.

Researchers found that even if latrines were built and campaigns initiated, the use-rate was middling. In Tamil Nadu, toilet ownership increased from 15 to 47%, but almost 40% of adults and 52% of children with toilets continued to defecate in the open. In addition, a randomized study of the 25 villages reported no change at all was found in levels of stunting or amount of diarrhea due to toilet intervention over a five year period for children under the age of five (Arnold et al. 2010).

Barnard et al. (2013) undertook a study in Orissa in east India, where OD and diarrheal diseases were prevalent, to assess the impact of TSC on communities where it had been implemented, ranging from 3-8 years prior to the study. They studied 20 randomly selected villages of the 35 that had implemented TSC. The findings showed that “Latrine coverage …ranged from 38%-95% with a median of 75%” and one “village was certified as open defecation free” (p. 3), meaning the village had latrines for everyone. Inspections found that 47% of the toilets met basic requirements (e.g., covered entry, wall height specifications, etc.) and only a relatively few failed to have a functional pan (11%) or functional pit connection (7%). Nevertheless, of the households that had a latrine, 62% had at least one family member still defecating in the open, 47% did not use them on a regular basis, and 39% were not being used by any member of the household, although 66% of the people suggested there might be a health benefit as well as privacy benefits to having the latrine. “No associations were found between the perceived benefits of having a latrine and latrine use” (5). The most common reason given for not using the latrine was preference--people prefer to go outside. No questions were asked about communication.

Barnard et al. (2013) reminded readers that building latrines is a subsidized activity (i.e., financially rewarded) whereas using latrines is neither rewarded with money, nor is it monitored. They called for action in these two areas. In addition, they pointed out that usage was higher for individuals who had the better latrine designs as opposed to those with problems (e.g., 47% of latrines did not have door closures or did not meet the specified wall height). Thus, they encouraged design improvements and economic incentives. The authors also added that they do not promote building more expensive toilets as this would likely draw “opportunist implementers” (8).

Pattanayak et al. (2009) proposed the poverty hypothesis to explain the continuation of OD. Many individuals simply cannot afford the latrine or they face higher priorities. This was evident in the case of the community that received clean, sanitary, air-tight port-o-potties, but chose to use them to store grain in the rainy season (Gale 2009). However, as suggested earlier, Coffey (2014) disagreed that poverty in India is the cause and reported that far poorer countries have taken up the use of latrines. Furthermore, she argued that Indians have received subsidies for latrine construction installment, yet many still do not use toilets. Coffey suggested looking at religious practices while Srivastav (2014) suggested exploring caste discrimination.

Researchers had previously taken up the issue of caste. Specifically, Banda et al. (2007) studied the village of Nelvoy in India, which is demarcated by caste, and compared higher caste people of the “Main village” to lower caste people of the “Harijan colony.” They learned that though the higher caste had a smaller population, they received a larger water allotment of clean drinking water from the government. Literacy rates were also higher among the upper castes. Yet, there was no significant difference between the two groups with respect to actual toilet use. Some of the reasons given for not using toilets included that it was “‘contrary to custom’ ‘smell [bad]’ and stagnation during the rainy season” (1127).

Srivastav (2014) suggested that latrine use is more about mindset and unrelated to wealth, education, or caste. Srivastav reported that a well-educated and wealthy Indian man, head of his household explained why he put in a latrine but rarely uses it: latrines are for “people who are old and cannot walk…the kids who are unable to go out…or if someone catches dysentery at night, one can use the latrine quickly in the house…How would one go out in the open in such a situation” (p. 3). Other men mentioned that the latrines were for girls, brides, and women. This finding suggests a link with identity for the men. However, and although a macho attitude pervades the discourse, it does not explain why so many women and girls also seem to prefer OD.

In one of the most expansive and recent studies to explore the reasons why OD persists with such tenacity in rural India, Coffey et al. (2014) asked 22,787 people in 3,235 rural households across five different states what their preferences are in terms of places to defecate. The study revealed a decided preference for outdoor defecation. The authors pointed out that they did not focus on the cultural, religious, historical forces driving such decisions. Instead, they were most interested in demographics of latrine use (e.g., males of all ages are more likely to defecate in the open, with the exception of the very elderly, whereas, young adult females are slightly more likely to use a latrine). Style of latrine also made a difference with government built latrines being the least used and privately built latrines more likely to be used (see Figure 1 and 2 of a courtyard and government subsidized latrine).

With respect to the differences between government and privately built latrines, the pit size seems to be one of the determining factors, according to the authors. The larger pits allow for a longer time period between cleanings. The authors also reported that Indians prefer defecating in the open as it is “pleasurable, comfortable or convenient” and different choices have little to do with health (53). Although the government-constructed latrines are used less and the people, in general, report a decided preference for OD, the authors concluded that this does not “excuse the government from its responsibility. India needs a large-scale campaign to change sanitation preferences and promote latrine use” (54). Thus, these studies primarily framed the problem-solution as biological-technological.

In a different study, Coffey (2014) pointed to the missing ‘middle rung’ theory as crucial to explaining the continuing persistent ‘resistance’ to ending OD. The WHO, UNICEF, and JMP (Joint Monitoring Program) described latrine use on a ladder from OD to varied forms of pit latrines moving eventually to the highest rung of “improved sanitation” (i.e., defined as flush toilets, covered sewers and sewage treatment plants). According to the study, only 16% of India is on the middle rung whereas in Bangladesh and sub-Sahara Africa the percentages are 40% and 45%, respectively. This theory presupposes a proper means of moving from the lowest to the middle rung before scaling up to flush sewers. Today, the Rachel Carson National Life Refuge in Maine has moved to a “middle rung” for the sake of the environment by providing eco-friendly, composting toilets within the preserve. To think of water-based, enclosed sewage systems as the highest rung may be to promote the elitism of the ‘western’ nations.

Postcolonial concerns must be taken into consideration or researchers are likely to repeat mistakes of the colonial past (Said 1978; Spivak 1988) and contribute to ecological damage as well. Indeed, researchers might need to rethink the lower, middle, and higher rungs entirely as in our study no one from the most rural village was familiar with such a higher-rung system, so it is not that they are turning down the middle rung sanitation in hopes for the top tier. Srivastav (2014) reported stories in which people said defecating in the open allowed them to go for a walk and get exercise, and one person explained that latrines are beyond disgusting, “Latrines have a bad smell [that] enters one’s body and makes them sick” (n.p.). In short, going in the open is considered the more pleasant and healthier approach

In spite of knowing the people’s discomfort concerning latrines and preference for OD, researchers continued to suggest that policy and programs must be directed at changing people’s attitudes toward latrines. For instance, Hammer and Spears (2013) undertook a study of the effectiveness of the TSC program in Maharashtra, India, which was initiated in 2004. Using a field experiment design, the authors reported on treatment and control group villages. The researchers focused on stunting (a physical measure of height and indicator of health) as an outcome variable. Children living in treatment villages gained, on average, 1.3 centimeters in height for four year olds whether they used toilets or not. This is a small gain that does not come close to the WHO reference mean, according to the authors. Nevertheless, the authors recommended the continuation of the program and an increased emphasis on local government involvement in promoting the policy through communication campaigns.

Coffey (2014) argued that not enough change has taken place and called for new policies that focus on changing the minds of Hindu Indians (in contrast to Muslim and Christian Indians) who seek prohibitively expensive latrines because they do not want to clean them too often due to a religious history of purity and dirt. She argued policies must address the Hindu belief that OD is related to a healthy lifestyle and conquer the attitude that latrines are bad.

Doron and Jeffrey (2014) responded to such positions with concern that Indians were being portrayed as practicing primitive rituals based on their religion, when the reasons for OD are far more complex. Earlier Chapman (1999) pointed out that the heavy hand of corporations and government promoted technological alternatives grounded in civil engineering, rather than exploring the complexity of the situation. Doron and Jeffrey added that the current situation has resulted in inadequate policies. They suggested grappling with the complexities of OD in India which would include exploring class, caste, sociability, urban lifestyle, rural lifestyle, diversity, topography, technology (including technological imagination), gender, education, and crisis. Due to space constraints we cannot elaborate on all of these, which for the most part are very well developed, but a couple should be discussed in order to be clarified.

Doron and Jeffrey (2014) noted that sociability is considered a proper and pleasurable part of OD, going to the field in groups, bringing others along. It likely should be viewed as integrated with class, caste and gender. For instance, Banda et al. (2007) found that the lower caste Harijan group was far more likely to defecate in a group than the higher caste from the *Main Village* group even when both were going to the fields. The *Main Villagers* went alone. Violence against Dalits, in general, has not been discussed in most of the OD literature and should be. For instance, and as previously mentioned, two rural Indian girls were raped and murdered in the summer of 2014 as they went to the fields to defecate. The perpetrators were from an upper caste and one was a police officer (Shah Singh and Karimi 2014). Some researchers pointed to latrines as the solution to end such violence, but this forces the victims of violence to change their behavior rather than the perpetrators. Sociability is one thing; gathering groups for protection is another. Social protection (safety in numbers) is common for both males and females, but for females it is even more common. For men, it is more common among the Dalits. This might suggest that private latrines would be used in greater numbers by the Dalits, especially women and girls, but study results are mixed.

Some researchers have called for campaigns to change defecation behavior based on the rationale that it will help keep women safer. But Srivastav and Gupta (2015) wrote a critique against patronizing any forms of patriarchy arguing that men should be held accountable for helping to end OD, and no campaigns should promote patriarchy or the making of the issue into one of privacy for women rather than health of all people. Their argument is well taken, but we must also note that this returns the issue to one of biology—health, which has consistently placed discourse and culture in the background, which we believe needs to be explored as a central feature. Thus we undertook an ethnography of communication to explore the discursive and ideological side of OD in rural India. In short, we asked, how do mundane practices evidence the nature of communication as central to human cultural experience, especially in terms of identity, resistance, and desire. As Chaudhuri and Biswas (2014) suggested, true benefits will likely arise when India is given careful cultural attention. In order to do that anthropologists must consider the discursive symbolic side of these practices. We propose to do just that as we explore the discursive side of OD. In order to do so, we first provide a historical-cultural backdrop of India related to OD.

India has a complicated history of struggling with the inequities of labor and the distribution of resources across a caste-based society (Chapman 1999; Chaudhuri and Biswas 2014), which has been further complicated by colonization (Spivak 1988). India also has a rich history in attempting to end such injustice especially through the peaceful actions of Gandhi as well as the revolutionary tactics of the Dalits (formerly known as the “untouchables”) (Zelliot 2010). These social movements toward change have a relationship to OD. First, Gandhi called for an end to the forced labor of the Dalits who once had to remove other people’s feces by hand. Second, the U.N. called for sanitation improvement for all in the late 1980s (Alok 2010; “Mahatma” 2015). Third, and finally, the Dalits themselves demanded equality in areas of education, economics, and political equity (Zelliot). Although the government has taken up this cause, violence in multiple forms (e.g. physical, economic, political, and gendered) against the Dalits continues. Their struggle deserves further explanation in relation to the issue at hand.

During the 1970s and 80s the Dalit fashioned themselves in the image of the Black Panthers and called themselves the Dalit Panthers (Zelliot 2010). Their lives were filled with poverty and oppression, but their agency was vibrant; their manifesto echoed Marxist principles (Satyanarayana and Tharu 2013). Toilets, it can be argued, were the least of their concerns as they suffered intense discrimination and still do. The statistics of violence against the Dalits for the decade 1990–2000 is alarming with a total of 285,871 cases of various crimes including 553 cases of murder and 919 rapes(Shah et al. 2006; 134-5). Shah et al. (2006) studied violence in over 550 rural villages/cities within 11 states and confirmed the social injustices committed against the Dalit. Dalit women and girls suffer the additional oppression associated with gender discrimination within their own group and outside.

In short, OD has a historical, political, material and patriarchal history which is rarely discussed in depth in the literature. Furthermore, it has a cultural and religious history which has received some attention, but mostly in the form of negative commentary.

Although it may at first seem absurd to say that how one ‘relieves’ one’s self is a form of expression, Indian history suggests that wealthier or more elite Indians of the upper castes may have been persuaded in higher numbers, even if hegemonically, to take up British styles of defecation by way of toilets. This might be considered a western expression of colonization (e.g., sitting on the ‘throne’), albeit most Indians who use toilets do not use a western style toilet but rather a squat style, we are referring then to indoor defecation. Nevertheless, the practice, whether of choice, persuasion, or coercion, is to express a personal and cultural position which in this case may be grounded in earlier caste practices or colonial practices (see Said 1978). The same can be said of practices enacted when choice is not available (e.g., whether due to economics, caste privilege, geographical constraints or gender), which speaks of a history of a people in terms of oppression and resistance, both an internal history of caste and gender privilege and an external history of colonization. These postcolonial concerns can be coupled with feminist concerns (Spivak 1988).

Postcolonial feminists, such as Spivak (1988) encouraged researchers to dig deeper, to excavate the stories which had been buried under a pile of patriarchy by collecting women’s stories. Thus, we bear in mind the postmodern, postcolonial, and feminist and postcolonial feminist concerns as we move forward. Yet, we also wish to return to Langer’s (1942/1951) slightly less political orientation which posits that discourse is fundamental to life itself, that we live to express ourselves.

Field Study in Rural India

Data collection, specifically the focus groups, took place in Kumbhdaura and Chowka, in rural Uttar Pradesh, India from December 27, 2014 to January 7, 2015. Nine focus group meetings were held across the two cities. Questions were developed prior to the meeting by the interdisciplinary team of researchers. The meetings were tape recorded, translated from Hindi into English and transcribed by the second author, who is from Uttar Pradesh and speaks fluent Hindi and fluent English, resulting in 119 pages of single spaced text (See Figure 3 of field researcher and respondents). The text was assessed via Owen’s (1984) thematic analysis before applying theoretically grounded interpretive analysis. In this case, OD and toilet use were discussed from positive and negative perspectives which allowed for cross-over comments (e.g., OD smells bad and toilets smell bad). Probes were used to elicit more information and the number of comments per theme was coded. Early assessment included coder training by the first author which continued until an acceptable reliability score was achieved between the first and third author, specifically 87.88% agreement and the respective adjusted Kappa was 0.7696 (standard error=0.1483; Z=5.19; Prob>Z=0.0000) which is considered “substantially” acceptable. The fourth author ran the statistics and revealed areas for improvement. Implementing focus groups allowed for discussion, stories, and positions to be shared. Following the thematic analyses, the texts and observations were then addressed in light of postmodern, postcolonial, and patriarchal concerns, specifically identity, resistance and desire.

From Themes to Interpretations

The findings from the thematic analysis were organized into four major areas: (1) OD is negative, (2) OD is positive, (3) toilets are negative, (4) toilets are positive. Major themes were explored within the four areas and further divided into subthemes.Probes were used to elicit more detailed explanations and local stories, but leading questions were avoided so as to allow the relevance of communication to surface in a way that was significant to the respondents.Eventually, leading questions were added to elicit agreement, dissension, or stories (e.g. But don’t you think for religious reasons toilets should be far from homes?)

Negative Expressions of Open Defecation

The first major theme related to the negative side of OD is ***Roadside/Field Issues.*** Defecating by the roadside demonstrated several subthemes including, the act of ***Getting Up and Down*** which brought sixteen comments or stories (16), the experience of feeling ***Shame*** from being viewed publically while ‘doing one’s business’ (14 comments),dealing with ***Ruffians***(16) that is, men who bully or harass women, and fending off***Crooks*** (i.e., thieves who steal from men and women) (4). The second major negative theme—***Other Hardships***—was not necessarily restricted to the roadside and could occur on the roadside, in wooded areas, in a field, or near railroad tracks. ***Other Hardships*** was further divided into two sub-categories: ***Personally-related hardships*** and ***Other-oriented hardships***. ***Personally-related hardships*** included walking or falling in feces (6), struggling in the dark of night (4), finding someone to go with you (4), being afraid of animals (4), and being attacked by insects –flies and mosquitos (5 and 4, respectively), as well as eating less so that one would not have to go at night (5 in total, one in disagreement of the others), long walk to defecate (5), limited areas (1), cold in the rainy season (2), wastes times (1), inconvenient when sick (1), and seasonal problems (1). ***Other-oriented Hardships*** included people mentioning that young brides and daughters have a problem (6), as do women without family (1) and farmers don’t like it when people defecate in their fields (1). An additional subtheme dealt with ***Health Issues*** (8 comments in all). People mentioned germs (1), inhaling contaminated air (1), shortening one’s life span (1), promotion of contagious disease (1), bad for you mood (1) and so on with slightly different individual answers. Finally, an ***Aesthetics*** theme emerged. However, there were few comments on the negative side of aesthetics of OD (e.g., 2 comments on stench). Examples of some of the stories about the negative themes associated with OD follow.

When “doing one’s business” by the roadside one must get up if a lorry drives by or if a person is approaching. This is especially true for women. At times **getting up and down** is described only as an “inconvenience” and other times as “shameful.” One woman expressed distress saying that you could even “shit your clothes” trying to get up and down repeatedly. Both men and women suffer the embarrassment of getting up and down, but when one man mentioned the embarrassment another chided him, calling him “a woman” in a derogatory fashion. Thus, it is likely that fewer men mentioned the embarrassment. Men recognized that getting up and down is a problem for women, as one man commented:

M#2, FG# 3: It is also a problem of social repute. That’s the thing. If a woman is sitting [squatting] on the streets and someone is passing by she will have to get up every time due to social respect. They have a lot of problems. Let’s say three or four people are passing by, they have to keep standing for 15 or 20 minutes in total. Going outside is not a good thing.

There is definite overlap between **getting up and down** and **shame**, but shame seemed most related to gender.

***Shame*** went beyond embarrassment for the defecator. Defecating in the open was

considered too shameful to be done in another village by some women (3) who demanded their daughters or nieces put in a toilet so they could use it when they visit (this will be mentioned under good things about toilets as well). Women, who often cover their faces and heads when a man or someone of a higher caste/class is nearby, have trouble covering their faces while holding their sari and the possibility of a man seeing their bare body during defecation is beyond embarrassment it makes one feel “ashamed.” If a woman is seen, she might also be called “shameful.” One young man mentioned that if he were coming down the road and saw his mother squatting, this would be shameful.

***Ruffians*** (miscreants or hooligans) are linked with sexual abuse, ranging from ogling and verbal abuse to sexual assault; whereas ***Crooks*** are associated with being robbed and this may happen to either gender. One can see them being mentioned together and yet described slightly differently in the story that follows. At first, the woman is speaking of leering men but moves to discuss thieves; a second woman responds:

W#3, FG #5: For example, there are some beautiful girls. They caste an evil eye on them. They caste an evil eye on women. We also have fear of being robbed and chain snatching. However, we do not have valuable jewelry. They are too costly. If we wear artificial jewelry, they are attracted. They feel jealous.

W#4, FG#5: Some men are really bastards.

More to the point of sexual harassment or verbal abuse, a girl remarked:

G#2, FG#4: If you go out, there are possibilities that some hooligans; men and boys may trouble you. They may not leave you alone there. They may hover around the place. We have to face lots of problems.

A woman from a different focus group made the following comment:

W#3, FG#1: Well sometimes sir, there are these ruffians who will ask us questions about where we’re going, why we’re going there, and we have to put up with all this. …or there’s risk of defamation.

Another woman told the following story:

W#3, FG#1: Let me tell you something sister, I came back last night from a nearby town, I have my sister’s daughter there … She was vomiting and also had diarrhea. She had gone to the forest [(euphemism for OD)] caught cold and thus had the problems. One morning she asked me that ‘Auntie, let’s go [(in the open)].’ And I said, ‘No’ I would not ‘When you have a toilet constructed at home, then what is that for?! Why do you not go here?’ She says, ‘Well, I cannot sit there,’ she said that in her in-laws’ place no one goes inside toilets because there is no toilet, so she doesn’t feel comfortable going in there. So I asked her to go alone and it so happened that there were some miscreants who were watching for her and whistled at her going. There I got really angry and shouted abuses at them and then brought the girl home.

Another woman relayed:

W#1, FG#5: My elder daughter is partially physically challenged. She used to go outside because the toilet was too old to use. Once she witnessed a narrow escape on the road when she went for defecation. She was crossing the road [when] suddenly a lorry came. The driver stopped the lorry completely, then she crossed the road. She came and told me, “Even if I die, I will not go out for toilet.” She was crying when she said all these things. After this incident I repaired the toilet in such a way that at least she can use the toilet.

Yet another woman reported:

W#5, FG#8: I tell you what happened last night *Didi*. I returned home from Haridwar where my daughter lives. My sister’s daughter had caught cold that caused her loose motions [diarrhea]. She asked me to accompany her for the open excretion. I refused to go, saying, ‘There is no need to go out if we have a toilet at home. What is it for?’ ‘I cannot sit in toilet and nobody uses toilet in my in-laws home, neither do we have a toilet built at home,’ she said. I said, ‘You go all alone. And there were hidden rogues there, they whistled at her to chase her away. I thought her life was at risk, I then took her home.

Positive Expressions of Open Defecation

In contrast, when discussing the positive side of OD there were many comments regarding ***Social Aspects***, ***Aesthetics Aspects,*** and as an ***Important Part of* *Daily Life***. Occasional comments about ***Health*** were raised in the way that having a daily walk to the field to defecate is healthy. But health comments surfaced more commonly under later themes about toilets (being unhealthy for the most part).

With respect to ***Social Aspects,*** communication appears to be key. For females, being able to talk with one’s friends emerged as an important theme. Young women reported using the excuse of defecation to be allowed to leave the house (4) and to talk with friends (4). Older women explained that men do not like them to talk and so meeting friends allowed them to socialize and talk all they wanted (7). Only one person mentioned that they could find other ways to socialize without using OD as an excuse (1). Protecting each other was also mentioned, whether from leering men or from wild animals—hogs or pigs that eat feces. Several stories surfaced regarding having an aunt or mother go with a girl. OD was also linked to the importance of socializing new brides into the community and allowing them to leave the house (4). This included mentioning the importance of making sure the bride was being treated with care, one man told us (1). There were well over 20 comments or detailed stories linking communication with OD—more than any other theme, and conversation was described as “joyful.” Following are some examples of comments on the positive communication association:

W#2, FG#1: Well let’s see, if let’s say it is summer time, they would say, let’s go get some good fresh air to go around - take a little walk at the excuse of doing the business, otherwise new brides don’t often get a chance to meet other people, this way they get some fresh air and also a chance to chitchat.

Older or married women also commented on the social communicative aspect of OD allowing for people to have light conversation, joyful talk, and share their feelings (7) as the following conversation of women demonstrates (FG#5).

W4: If we have a group of women, we have an opportunity to have conversation. Sometimes we gossip as well. We feel relaxed.

W3: We do not have any opportunity otherwise. This is the time when we have conversations. We have a lot of household chores to do.

W2: There are some women who are troubled by their mother-in-law or sister-in-law or other members of their families. Sometimes, women are not allowed to talk to anyone. This is an opportunity for …

W3: Then no one can stops us [from talking] (laughs).

Ws: (laugh)

W2: We are told, ‘Why are you talking? You are talking a lot.’ But when we go out for defecation, we have a group to talk and share ours issues.

***Aesthetic Aspects*** drew a close second with 18-19 comments. Aesthetically pleasing aspects of OD included: the pleasure of ***Getting fresh air or a breeze*** (coder #1 counted 18 comments and coder #2 counted 19 comments with a 78.26% agreement and a Kappa of 0.3611) and getting ***Cool Air*** (3). Walking with friends and **eating berries** (1) was also included as an aesthetic aspect. Overlap was seen in ***Daily Life*** and **Aesthetics** with ***Taking a morning walk*** (10) mentioned as a part of daily routines but also a pleasure and occasionally as a ***healthy*** activity so people don’t get lazy (2) or so they do keep their knees strong (1), ***Checking on the fields*,** and ***Defecating in the field for fertilization*** purposes (4) also addressed the cultural routine.

Positive Expressions of Toilets

Several themes emerged denoting the positive side of having toilets. They included ***Convenience***, ***Privacy for Brides and Girls, Curtailing Negative Talk, Sanitation and Health*** and ***Prestige. Convenience*** drew 19 comments, specifically because they would save time (4), the elderly could go whenever they wanted (4), people could use them during emergencies (2) or when ill, having “loose motions” or diarrhea (3). With respect to ***Privacy for Brides and Girls*** (7), having a toilet would keep brides from going out and hearing negative comments in general (4) or about the mother-in-law more specifically (1-previously mentioned). Having a toilet would mean that the girl could “go alone” (1) (in other words, she would not have to get a group of women together) and defecate without being verbally abused by farmers (1). Having a toilet would cut down on ***Negative Talk*** like gossip (4 comments).

***Sanitation and Health*** are related to having toilets (4) because toilets have drains (1), no germs (1), and less dysentery (1). In addition one man said the toilet could be the “cleanest room in the house” if maintained well (It should be noted that this man builds toilets for a living in another city) (1). Finally, two comments were made equating toilets with prestige (2). Stories of health and convenience overlapped, as the following story demonstrates:

W#2, FG#5: No one knows when our body will betray us; we cannot predict about illness. Right now I am fine but no one knows what will happen after one hour.

Three women told detailed stories of demanding their daughters or nieces in other villages put in toilets for them to use when they visit (3), yet they are unlikely to use toilets at home in their own village. This may be a matter of communication, convenience, shame, and or safety—for the women may not know a safe place to go when visiting a different city or know enough other women to form a group (in the usual manner) to go outside, nor would they want to be shamed in front of their daughter’s in-laws, but at home they very much desire going out as a group in order to converse. Another convenience is that a good toilet facility will have a hook on which to hang your clothes and a tap for washing (1) whereas being outside possibly would not provide these things, but this does not mean that all toilets provide the hook and water for washing either. Finally, one could avoid the cold weather in the winter, if one had a toilet (2).

Negative Expressions of Toilets

Comments indicating that toilets are negative were numerous and fell into four categories: ***Aesthetic Aspects, Expense, Impracticality,*** and ***Social Aspects.*** The first and most often repeated complaint about toilets related to ***Aesthetic Aspects****.* The bad smell with stench most often mentioned (Coder #1 marked 14 negative comments about smell of toilets but Coder #2 flagged 26 negative comments about stench and toilets. This is because Coder #1 did not mark ‘if, then’ statements as negative whereas Coder #2 did mark these as negative –if you clean it, it will not smell bad). Following the assessment of this category by additional search terms (i.e., smell, smelling, smelly, stench and suffocating), another search term was added--stink(y). Coder #1 found 8 additional comments under this category and they were equally filled with positive, negative and ‘if, then’ statements. Dirtiness was also associated with latrines (15) and flies (2). They were considered so foul by some that they could make you “pukish.”

Toilets were also described as ***Expensive***(5) and ***Impractical*** (6) in terms of design and function: respondents said the toilet rooms are too small (often the size of an outhouse or port-a-potty) (2), but toilets also take up too much space (1), they use too much water (2), and they break down (1). Toilets also have a negative side regarding ***Social Aspects.***  They will keep brides from being able to leave the house (1) and they are impractical if a family is holding a large event like a wedding (3) as some people will have to go out to defecate anyway. Visiting other towns was especially problematic as the following story indicates:

M#1, FG#2: Yes, when we go to a place like our relatives’ and can’t go in the open, we have to go in those little rooms that are generally dirty, unclean and also smelly; we don’t want to go there, we don’t feel like going in them.

Public city toilets were described as the worst by several people:

W#4 & W#5, FG#1: Stench! You can go to the toilet and you would not be able to do your business because it is so dirty! We start feeling pukish. The toilets that we have here are very clean and we are very comfortable going in them… Sir, I tell you when I go out of town I even pay to use the toilets rather than go into public toilets that are very dirty.

Preference: Open Defecation or Toilets?

OD certainly has negatives associated with it, but when asked to choose between an impeccable toilet and going outside the responses were illuminating. First, the negative is summarized in the following story:

W#4 & W#5, FG#9: You see, sir, we are nothing, but there is also pain and sadness associated with it (OD). There are problems even though we’re laughing about them. You can fall in the pit if you don’t go far enough, if you go far, there are miscreants and thieves. If we have latrines in our homes, we wouldn’t have to go through so much.

These women specifically asked for “taps” and “toilets.” However, whether they would regularly use them is questionable based on their follow up answers. When specifically asked if given an impeccable toilet with all your needs met, would you use the toilet, the majority of respondents said, “no.” Only a few agreed to use the toilet if they had it, but all seemed to want one to be installed. Men demonstrated equal reluctance to use the cleanest toilets when offered, as the following story demonstrates:

M#0, FG#5: Once I had been admitted in a hospital in Delhi for two months. I had some problem in my eyes. The toilet was very clean; however, it was very difficult for me to defecate in the toilet… Finally I searched for a jungle that was about three kilometers away from the hospital. I used to go to the jungle early in the morning by a lorry and come back on foot. It was a good walk for me. Before sunset I used to come back to the hospital.

This man walked nearly three miles in order to defecate in the open rather than use a toilet at the hospital.

Although one person said that people prefer OD because they do not want to clean the pit and three people did comment that one pit is not enough, these explanations do not explain the preference of the man who would not use the hospital loo and preferred the three kilometer walk. Emptying the pit had nothing to do with this case. Some said it made sense based on their lifestyle, but the following comment suggests both are at play, a dislike of cleaning the feces-filled pits and a desire to keep the daily routine intact:

W#2, FG#9: Why would we go anywhere else, when in the evening or in the morning we have to go to the farms to take our rounds then we can easily go there and come… We would obviously try that the pits get filled as late as possible so that we can use them for the longest period of time; if it is to be filled in 1 year, it can last till 2 years… It is not a --- set in stone that we have to go inside, when it is fine we can certainly go outside … If you have time on your hands, then you can go however far you want, if you don’t, then you have to go somewhere close by, there’s not much of a say here.

All group members agreed that they preferred OD except for one. Turning to a quiet woman, the facilitator asked the question of whether there is something good about OD and found the opposite perspective in her answer:

W#8, FG#9; No, I don’t think so. Overall latrines are much better. There are a lot of problems in going outside. For example, these girls are adolescents, so they face problems in going outside. There’s all kinds of men roaming around. Some are passing by. Even us, when we are going and someone is passing, we have to get up, this is especially a problem because in the village everyone knows each other.

Another woman explained that her husband’s preference is to go in the toilet. He uses the latrine every day before going to check on his field. Even still, several young women told us that it is their preference to go out.

YW/G, FG#1: Like in the morning. We get fresh air. In the summer, we get cool air. In the morning there's a nice breeze; we don't feel hot, and sometimes when a lot of girls go as some of them, just go to chitchat and hang out instead of doing the business too, that's also a cool thing.

And a man said:

M#2, FG#2: They basically think that they should go outside so that feels good and also they can have a look at their fields. It works very well with their daily routines. Both modes are good actually…. Sometimes people just like going outside, that’s it.

When one man was asked about the germs associated with OD, he said that he has “not observed such diseases,” and another man added, that he “didn’t care.” Disease is not always associated with OD and even if it is, as one man pointed out everyone must die of something. A dialogue follows:

M#2, FG#6: What I was saying is, death is certain; everyone has to go one day. Whatever precaution you take, you will have to die.

One man pointed out that it is not always a choice to be had. Not everyone can afford toilets. And those who have been supplied toilets by the government are in agreement that the government toilets are far from desirable. What would improve the toilets, we were told: 1. proper roofs, 2. better water tank/water storage system, 3. more taps, 4. larger “seats,” 5. more spacious latrines, 6. flushing that uses less water, 7. teaching-making people keep them clean, 8. better ventilation, 9. adding a bathing-facility, 10. most agreed, but not all, that toilets should be adjacent to the house not in the house—you don’t want it near where you make food, 11. one toilet is not enough for 10 people, and finally, 12. consider making a roof-top toilet.

As helpful as these suggestions might be, when asked if they were to be given “an impeccable toilet, fulfilling their desires, would people use it,” the majority still said no, although some focus groups provided mixed responses as the following two contradictory statements, from people sharing in the same focus group, illustrate:

W#1, FG#2: Why would we go out then?!

W#2 & M#2, FG#2: No, that can never match up to the farm experience; folks will still go outside.

Discussion

This study gathered the opinions and stories of rural Indians to assess the importance of communication in a mundane cultural practice, specifically OD. After briefly summarizing the findings from the thematic analysis we turn to the matter of interpretation of the various comments and stories. The varied responses allow for further discussion of postmodern, postcolonial and feminist concerns surrounding identity, resistance and desire.

Although no issue was without an alternative view, we can summarize the general findings from the thematic analysis in the following way: the negatives themes of OD include the issues associated with 1) **roadside or field defecation** (e.g., getting up and down, shame, dealing with ruffians and crooks, 2) **personal hardships** (e.g., stepping in feces or mud, having to go at night, eating less to reduce going at night), 3) **projected hardships for others** (e.g., young brides, women without family,) 4) **health-related aspects** (e.g., germs, bad mood) and 5) **negative aesthetic aspects** which were few in number (e.g., muddy or dirty in the rainy season and two comments about the bad smell.) The most common themes associated with the positive side of OD are 1) **social aspects** **associated with communication** (e.g., friendships for girls, socializing of brides, conversations for women and girls, protecting each other) and 2) the **aesthetic aspects** (e.g., fresh air, morning walking) and **daily habit** (e.g., fits with going to field to check on one’s crops). The major negative themes associated with toilets are: 1) **aesthetic aspects** (e.g., smelly, dirty), 2) **expense** (e.g., they are not affordable), 3) **impracticality** (e.g., they use too much water, they breakdown, the rooms are too small), 4) **social aspects** (e.g., they keep brides from going out, there are not enough for a wedding party). Finally the positive themes associated with latrines include 1) c**onvenience** (e.g., especially when one is sick), 2) **privacy for brides and girls**, 3) **curtailing negative talk,** 4) **sanitation and health** (e.g., germs), and 5) **prestige**(only mentioned by two people).

Identity, resistance and desire are relevant in a number of ways for both men and women. First, most men associated OD with masculinity and health. Stories and responses indicated that men felt toilets were for women and children, the infirmed and the elderly. Only on rare occasions when a man is sick would latrine-use make sense. Thus the male identity was built in contrast to Others (women, children, and less able-bodied) and the only exception was in cases of temporary identity shift from able-bodied to ill. In addition the men had a health identity as did the women, most felt OD capability meant one is living a healthy life (getting fresh air, going for a walk). There were few exceptions to this health identity. Even the elderly reported preferring OD as more comfortable than latrines and healthier. Men also associated OD with their work, it made sense to defecate openly on their way to the fields. Although OD was seen as part of the masculine, health and work identities of men it was also part of the health and work identity of the women. Both groups saw the latrine as a convenience when people were sick. And both reported the fresh air and morning walk as important to one’s pleasure and health. But the women had added constraints that were associated with their female identity. The men generally demonstrated empathy for the women who had more serious problems with OD. While women wanted to engage in OD for health and aesthetic reasons they had to face the shame of being seen engaging in this healthy activity and they had to deal with numerous hardships associated with their desired form of excretion. Clearly a double standard was at work. OD held paradoxical meanings for the women. It was a symbol of health and a symbol of possible sexual/gender shame. Also women were constrained by the fear of ruffians who might sexually harass or terrorize them as they engaged in OD. The existence of such violence (symbolic, verbal, and physical) supported or reinforced the two identities (masculine and feminine) with females in a role of subjection. But the women also demonstrated agency. They resisted forms of domination to keep them from meeting and conversing with one another. And they did so through bricolage (de Certeau, 1984), by making use of the very fears that had been instigated by men in order to overcome the oppression of men. That is, they made use of the logic of group protection in order to “do their business” in a group which in turn gave them license to talk with friends. This simultaneous expression of oppression and resistance by the women demonstrates an additional reason why OD persists in India (see Author 1994, 1998 on the simultaneous opposites of oppression and resistance).

For the women, OD meant freedom from masculine oppression, for both men and women OD meant freedom from cultural oppression. Both men and women reminded the facilitator that having latrines did not mean they had to use them. Resistance to colonial and upper-caste toilet practices was made quite clear when almost all respondents chose OD over the most impeccable of toilets, even young girls who had called for privacy still preferred OD. There were stories of some who had been so frightened or hurt that they would only use the latrine, but these stories were few. And when the final choice was made, OD was generally preferred.

For women and girls, OD offers a justification for leaving the house and an opportunity for conversational communication. Indeed, it was reported by some to be the only justification for brides and young girls to go outside and see and talk with their friends. Furthermore, it provides a means for checking on the new bride as well as socializing her into the community. However, one woman feared that allowing the bride to go out would expose her to negative talk about her mother-in-law. But one man explained that this was also a means for women to check on the bride and inform their husbands if things were not going well. Brides (and daughters) were one of the few groups that people mentioned without prompting who need to be considered concerning OD and toilets. Their life roles depend on communication and communication in this case depended on OD. Brides and daughters need both the privacy of a household toilet facility and the excuse to go outside. For women and girls the desire for friendship and conversation far outweighed the fears and hardships. For men, the privilege of having a latrine was certainly expressed as a positive, but its actual use would jeopardize the masculine identity; for both men and women, the use of latrines also jeopardized a cultural freedom.

Without this knowledge of the symbolic side of OD, researchers may never have understood why women and girls, who complain vociferously about the sexual harassment surrounding OD, would continue to participate in OD even after receiving a toilet. Now ample evidence for the cultural and communicative/social reasons explains this phenomenon. These social aspects far outweighed any health concerns with diarrheal diseases, which is the usual justification for toilets and the underlying strategy upon which many policy and programs (e.g., WHO, UNICEF, JMP) base their persuasive campaigns. More importantly, for many girls and women, OD meant both “friendship” and “freedom.” This is not a matter to be taken lightly as they even placed this communicative practice above the threats of violence. For men, OD became a part of their masculine identity with most seeing toilets as for the aged, infirmed or for women, girls, and children. They expressed their masculinity through specific defecation practices. In addition, they expressed their status as healthy by being able to do their business in the open. Again, the WHO, UNICEF, and JMP have placed emphasis on health (this is logical as it is after all their *raison d’etre*); however, the acceptance of illness and death were mentioned several times. And the argument that OD was a major factor in death was dismissed by those who said, “We have been doing it this way since the beginning!”

To summarize the main findings, communication is crucially important to cultural practices in at least three ways. First, the cultural practice under study was defined as choice. As some argued, there was nothing written in stone saying that if they had a toilet they would have to use it. Focus group members freely debated the benefits and shortcomings of each-- OD and toilet use, demonstrating the fundamental freedom of communication to create, alter or reinforce cultural practices. Second, the men’s answers especially focused on their gender identity as related to defecation. That is, men defined themselves in contrast to those who they perceived needed a toilet—the infirmed, children, women, brides, etc. Strong healthy males defecate out of doors according to most of the males. Third, the importance of communication was demonstrated in the desire by women and girls to have the ability to socialize through conversation within their own, even more specific, identity group. This desire for discourse was so strong as to override fears of violence, harassment, hardships and inconvenience. The women resisted via ‘making use’ of the oppression they suffered—they used group protection in the practice of OD to reclaim their ability to freedom through social exchange and conversation.

Conclusion

In summary, this study found additional cultural reasons, especially in the area of communication, for the continuing practice of OD that previous research had not fully discussed. The communication aspects associated with OD, for most females, generally appear to be the main reason why they, even when subjected to harassment, robbers, cold, rain, feces, animals, insects and other hardships, refuse to change their lifestyle. Toilets in the home will keep them from OD and being able to socialize and communicate with each other, which was described as “joy.” For men, using a latrine or toilet indicated a loss of identity as healthy and masculine. Even when men needed help they preferred to be ridden on a bicycle to the edge of town so that they might be able to defecate in the open. And for all participants communication was used to debate the cultural practice and consider it from various angles.

Aesthetics were also important to the participants, both men and women. OD was reported as being far more pleasurable than toilet use--from having a clear sky to a refreshing breeze and a nice walk. An elderly man said that the confinement of the toilet kept him from easing his old knees into a comfortable position and another man who had access to a clean working toilet walked several kilometers for OD. Toilets are generally perceived of as dirty, smelly and bad for one’s health, expensive, impractical, and require cleaning pits. But even when they are clean and one does not have to empty the pit they are often rejected. OD is generally seen as healthier, easier, more pleasurable and more practical than toilets.

As researchers and policymakers move forward they should bear in mind the communication and aesthetic aspects of OD and the severe deterrents to toilets (structural, aesthetic, communicative, etc.) as well as the possibilities associated with proposed intermittent use. For one woman, defecating in the woods had been “freedom.” She lost this freedom when farmers built fences to safe guard crops. Finding safe ways to maintain a traditional cultural life-style, while reducing disease, and without impinging upon the “joys” and “freedom” of the people should be given serious consideration. This is of course easier said than done and will likely require further investigation as this study is not enough upon which to base sole future solutions.

Our study is not without limitations. One major weakness of this study is that we had only one field ethnographer, who is a male. Although we learned much about women’s issues, they were not explored in full detail. In addition, status differences should be considered when collecting data in rural areas as some residents, especially Dalits, may feel less than forthcoming either in the presence of higher status residents or researchers. For instance, in one focus group a man said, “We all have toilets.” The man sitting next to him spoke up, saying, “I don’t have a toilet.” This second man was forthcoming about his situation, but others may not have been. The current study was also limited in that we did not ask about hygiene beliefs or religion in the original questions, but it is telling in some ways, that no individual raised religion as a reason for pursuing OD. And when pressed about the belief that toilets should be far from home for religious reasons, none agreed. Instead they said latrines should be far from where the food is prepared, but never mentioned alters or temples.

With respect to theory, this study has provided support for Langer’s (1942/1951) thesis that human beings are symbol-using animals with an innate desire to communicate. This is a concept that Burke (1966) later built upon and that Hymes (1964) developed into a focus on speech communities. Beyond the speech community focus, this study suggests that we live for and through communication. The women’s stories of joy and freedom found in conversation speak volumes to this issue, and this is testament to the significance of communication in culture. The men may not have mentioned conversation as an innate desire but they expressed their identities via the discursive presentational form of OD. For instance, it might also be noted that some men may have expressed their privilege via the harassing of women related to OD, thus using the practice again to indirectly lay claim to positions of authority. These insights should be further explored. But even as is, this study suggests that communication should not be relegated to the role of solution only (i.e. campaigns), but should be considered in the fundamental ontological motivations which drive people’s actions, that is in the co-construction of culture. Future studies should consider placing communication in the central role, rather than peripheral position, especially concerning grand challenges. Discourse (verbal and presentational) should be considered in all capacities—theoretically, ontologically, epistemologically and methodologically (from formulation to interpretation, from interpretation to programs and policies). Making communication central may provide greater insights into the grand global challenges that cross cultures.

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Figure 1: Courtyard and house with latrine in rural Uttar Pradesh



Figure 2: Detailed view of government subsidized latrine



Figure 3: Field Researcher facilitates focus group meeting



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