

# Nirmal Gram: Problems and Prospects

CHANDAN SENGUPTA

*Prioritizing the provision of safe drinking water and sanitation to its people sets a country on the path to achieving standards of human development indices such as reduced crude death rate, increased life expectancy at the time of birth, low infant mortality rate and low maternal mortality rate*

The quality of life of an individual is largely dependent on the availability of adequate safe drinking water and proper sanitation. A country interested in achieving decent standards of human development indices such as reduced crude death rate, increased life expectancy at the time of birth, low infant mortality rate (IMR) and low maternal mortality rate (MMR) gives priority to the provision of safe drinking water and sanitation to its people.

The lack of safe disposal of human excreta, improper environmental sanitation and poor personal hygiene have a direct correlation with many diseases in developing countries. The use of the Individual Household Latrines (IHHL) by a majority of the population is a good indicator of improved access to better sanitation facilities. Studies reveal that the IMR is low in states where the Total Sanitation Campaign (TSC) has a greater coverage. For example, Tamil Nadu has achieved 77 per cent of its IHHL target and has an IMR of 28. On the other hand, Bihar has covered only 31 per cent of its target and its IMR is 48. Because of the non-availability of IHHLs, the incidence of diarrhoeal and other gastro-intestinal diseases in India is rampant; this is why the present IMR or under-five ( $U_5$ ) mortality in India is high in comparison to the developed countries and even to neighbouring countries such as Sri Lanka and China.

The implementation of the Rural Sanitation Programme has never been a priority in India. It was only as recently as 1986 that the Central Rural Sanitation Programme (CRSP) was launched by the Government of India (GoI) as a Department in the Ministry of Urban Development. CRSP was a supply-driven programme, in which a latrine was provided to a rural family without creating a demand for it. Moreover, the financial allocation for the programme was very little. As a result, the few latrines that were provided to the rural households were not used. A study conducted in West Bengal during 1988–89 revealed that most of the latrines that were provided under the CRSP were used either for storing firewood or keeping domestic animals. As a result, even after five years of the implementation of the CRSP, there was no visible progress in providing rural families access to household latrines (as per the 1991 Census, access to household latrines in rural areas was 9.48 per cent).

To give an impetus to the programme, in 1999, the Gol converted the programme into a campaign with a new name—Total Sanitation Campaign. Subsequently, TSC was also included in the 'Bharat Nirman' campaign, as one of its flagship programmes. TSC was very different from the earlier strategies used to implement the sanitation programme. Many important issues such as personal hygiene, home sanitation, storage and handling of drinking water, garbage and waste water disposal were included in sanitation, in addition to the disposal of human excreta. The programme was modified and became a demand-driven one, by reducing the amount of subsidy, which is provided only to families that are Below the Poverty Line (BPL). The programme aims at providing universal access to household latrines and achieving the goal of total cleanliness in all the villages of the country within a specific time-frame.

As an encouragement, the union government introduced a unique award called 'Nirmal Gram Puraskar' (NGP). The award recognizes the achievements and efforts made to ensure full sanitation coverage and to develop healthy competition among *panchayat* bodies to implement the programme at different levels. Emphasis was also given to providing toilets in all educational institutions (separate toilet blocks for girls in co-educational schools) and in *anganwadi* centres. To encourage a sense of ownership, at the initial stages of the implementation of TSC, the amount of incentive for the provision of household latrines for BPL families was kept very low. This approach was found to be effective; subsequently, to encourage the construction of better toilets, the amount of subsidy was increased to Rs 3,200 per family.

*The report states that 59 per cent (626 million) Indians still do not have any access to toilets and practice open defecation, and that a majority of them live in rural areas. It was also found that there is a vast gap between the 2011 Census figures on sanitation and the reports provided by the states on their online portals.*

## STATUS OF THE IMPLEMENTATION OF TSC

The status of the implementation of TSC by all states and union territories is readily available on the portal of the Ministry of Drinking Water and Sanitation of the Gol. The reports show that remarkable progress has been made by most states and union territories, in providing IHHL and institutional toilet blocks. During the last 11 years, since the introduction of TSC,

access to household latrines in rural areas of the country has increased substantially (21.9 per cent as per Census 2001 and 70.45 per cent as per online reports). The availability of toilets in schools and *anganwadi* centres has also increased substantially (90.26 per cent schools and 78.14 per cent *anganwadis* have toilet facilities). Since the introduction of NGP in 2004, as many as 28,002 *gram panchayats* (GPs) have been awarded with this prestigious award.

## CRISIS OBSERVED IN IMPLEMENTING TSC

The online reports of implementing states show that the coverage of sanitation facilities has been quite widespread. However, evidence indicates that India is heading towards a major sanitation crisis. According to the 2011 Census, 53.1 per cent of the households in India do not have a toilet (63.6 per cent in the 2001 Census). In the rural areas of the country, only 30.7 per cent of the households had IHHL as against 21.9 per cent as per the 2001 Census. These facts have been reconfirmed by another report released on March 6, 2012, by WHO and UNICEF's Joint Monitoring Programme on Sanitation for Millennium Development Goals. The report states that 59 per cent (626 million) Indians still do not have any access to toilets and practice open defecation, and that

a majority of them live in rural areas. It was also found that there is a vast gap between the 2011 Census figures on sanitation and the reports provided by the states on their online portals.

It was also noticed that the criteria for the NGP did not exist in almost all the awarded GPs across the country. The NGP was intended to ensure an open defecation-free environment and also to create an opportunity for a rapid scale-up of TSC. It was a great challenge to ensure that the spirit of NGP was not diluted and that the quality of the award was maintained. In June 2008, a study was conducted by the UNICEF in 162 NGP-awarded GPs across six states of the country to assess whether or not the spirit, principles and quality of NGP had been maintained. The main findings of the study are:

- a) IHHLs
  - i. On an average, around 81 per cent of the households had access to the IHHLs. In 26 per cent of the GPs, 50 per cent of the households had no access to IHHLs and in 10 per cent of the GPs, less than 50 per cent of the families had IHHLs.
  - ii. Approximately 60 per cent of the households had reported the use of IHHLs. An additional five per cent households used community or shared latrines. The balance 35 per cent defecated in the open.
  - iii. All the members of the families were not using their IHHLs.
  - iv. The reasons for the latrines not being used were: poor/unfinished installation (31 per cent), the lack of behaviour change (17 per cent), the absence of a superstructure (14 per cent), a blockage/pan-choke (12 per cent), the lack of water (9 per cent), etc.

- v. Around 45 per cent of the households disposed their child's faeces in the open or along with their solid wastes or in the drain.
- b) Toilets at educational institutions:
  - i. Approximately 96 per cent of the schools had toilets.
  - ii. Only 42 per cent schools had separate toilets for girls.
  - iii. In the schools, 45 per cent of the boys and 19 per cent of the girls were found to defecate/urinate in the open.
- c) At *anganwadi* centres, 38 per cent had no toilets.
- d) Solid and liquid waste disposal was not initiated in almost all GPs.

#### LAUNCHING OF NIRMAL BHARAT ABHIYAN

The gap between the 2011 Census figures and the online reports of states was taken very seriously by the GoI. Also the major lapse in the implementation of the programme was the sustainability of NGP-awarded *panchayat* bodies. These major shortcomings of the programme could be due to:

- a) The lack of a demand-driven strategy in the implementation. In many cases, *Panchayati Raj* Institutions did not collect any contribution from the beneficiaries. Instead, *panchayats* provided the contribution for the beneficiaries. Often, the beneficiaries were compelled to construct latrines because of administrative pressure.
- b) The inferior quality of construction of latrines. In many cases, latrines were constructed up to the plinth level only without any superstructure. Even if the superstructure was provided, it was of inferior quality.

- c) The lack of motivation of the households to use the latrines.
  - d) The lack of supervision during implementation.
  - e) The withdrawal of the delivery mechanism after the receipt of NGP.
  - f) The lack of community participation during implementation as well as after the receipt of NGP: There was no sincere attempt to involve the local NGOs, CBOs and women's groups, including SHGs.
  - g) The lack of continued information, education, communication (IEC) activities: IEC activities were carried out in a ritualistic manner. No attempt was made to launch need-based, area-specific advocacy or introduce any awareness generation activities. As a matter of fact, no priority was given to this very important component of the programme although there was no dearth of funds for this activity (15 per cent of the total project cost was set aside for IEC activities). The expenditure incurred against the allocation under IEC was thus very low in almost all states.
2. To improve the quality of IHHLs, the cost of construction of one latrine with incentive has been increased to Rs 5,500. Of this, Rs 4,600 is provided as an incentive and the balance amount of Rs 900 is to be contributed by the beneficiary.
  3. Stress has been placed on integrating the programme with the MGNREGA, from which an additional amount of Rs 4,500 can be generated, and IHHLs constructed at a cost of Rs 10,000 (through the engagement of unskilled/skilled workers and the purchase of some material).
  4. Emphasis has been laid on the safe disposal of solid and liquid wastes so that rural areas become clean (*nirmal*) in the true sense. Substantial funds have now been earmarked for this purpose (Rs 20 lakhs per GP, which has more than 500 families).
  5. The criteria for awarding NGP have also been changed. More stress is now placed on the safe disposal of solid and liquid waste and the availability of water in the concerned families of the *panchayat* body.

All these factors led the Ministry of Rural Development, to drastically modify the strategies for implementing the programme. New guidelines were published in July 2012 and the programme is now implemented under the name Nirmal Bharat Abhiyan (NBA).

#### **IMPORTANT FEATURES OF NBA**

1. Instead of providing an incentive only to BPL families, the scope has now been extended to many other categories of needy, above-the-poverty-line (APL) families such as those belonging to the Scheduled Castes (SCs) and the Scheduled Tribes (STs), small and marginal farmers, landless farmers, women-headed families and physically handicapped-headed families.

#### **CHALLENGES TO BE ADDRESSED**

Following the report of the Joint Monitoring Programme (JMP), for Water and Sanitation released by UNICEF and WHO, which pointed out that India is lagging behind by around 11 years in meeting Millennium Development Goal targets, the government has resolved to deal with the situation. However, the Census report findings have complicated matters further and presented an alarming development with an 11 per cent decline in households that have toilets. The percentage has gone down to 53 from 64 in 2011. The officials from the Ministry of Drinking Water and Sanitation have admitted that although efforts are being made to tackle the problem of sanitation, much still remains to be done, considering the needs of the population. In response to

the situation, the budget for the sector has been more than doubled, from Rs 1,500 crores in 2011–12 to Rs 3,500 crores for the next fiscal year. A Steering Committee of the Planning Commission has proposed an allocation of Rs 44,116 crores in the 12<sup>th</sup> Plan (a hike of 675 per cent over the 11<sup>th</sup> Plan allocation for sanitation).

A detailed exercise is also being conducted to identify the shortcomings of the existing sanitation and drinking water efforts and to incorporate these into the 12<sup>th</sup> Five Year Plan. However, confusion exists in terms of the reliability of the available information from different sources (the Ministry of Drinking Water and Sanitation, the JMP and the Census reports). For example, in the case of rural sanitation, the Ministry claims that the coverage is 53 per cent whereas the JMP and the Census data keep the figure at 33 per cent and 30 per cent, respectively. At the state level, the Ministry of Drinking Water and Sanitation claims that in states such as Uttar Pradesh and Madhya Pradesh, only 31.7 per cent and 34.8 per cent of the population lacks sanitation facilities. However, according to the Census data, 78 per cent of the population in Uttar Pradesh and 86.9 per cent of the population in Madhya Pradesh do not have access to sanitation facilities. The Ministry claims that only 23.4 per cent of the people do not have sanitation coverage in Tamil Nadu whereas the Census data reports that the figure is 76.8 per cent.

In such a situation, there is need to develop a more accurate monitoring system by revamping the existing monitoring mechanism and evolving community-based monitoring

*The launching of NBA created opportunities for implementers to achieve the goal of a Nirmal Bharat. This can only be achieved by ensuring that each gram (village) is nirmal, each district is a nirmal district and all the states are nirmal.*

system. There is also need to introduce the GPS technology in this regard.

## **OPPORTUNITIES TO BE CAPTURED**

The launching of the NBA has created a tremendous opportunity for the implementers to address the shortcomings of the programme

and take remedial measures for the mistakes committed in the past. As per the new guidelines, a fresh baseline survey is to be conducted so that each state can identify the number of latrines that were provided but are now defunct or unfit for use. The gaps that have been noticed between the Census 2011 reports and the online reports of the states are to be kept in mind when formulating the new Project Implementation Plans (PIP). Care is also to be taken that the programme is really implemented as a demand-driven one and that durable and user-friendly latrines/toilet blocks are constructed for individual households as well as for institutions. Stress is to be laid on proper utilization of the huge IEC funds available under the *Abhiyan*, to educate the people about the proper use and maintenance of latrines, and to motivate them to use these by inculcating a desire for health and hygiene.

## **CONCLUSION**

The goal of the NBA is to make India clean. The launching of NBA created opportunities for implementers to achieve the goal of a *Nirmal Bharat*. This can only be achieved by ensuring that each *gram* (village) is *nirmal*, each district is a *nirmal* district and all the states are *nirmal*. If measures are taken to correct the earlier errors and sincere attempts made to implement this important programme, goal of a *Nirmal Bharat* will be achieved.

---

*The author was in charge of the Water and Environmental Section at UNICEF, Kolkata Field Office, and is currently involved in the sector in an advisory capacity.*

**Overview:** Nirmal Gram: Problems and Prospects