Swachh Bharat Abhiyan
WHAT, WHY AND HOW OF SANITATION PROMOTION
What is Swachh Bharat Abhiyan?
Mission objectives

- Elimination of open defecation
- Eradication of Manual Scavenging
- Modern and Scientific Municipal Solid Waste Management
- To effect behavioral change regarding healthy sanitation practices
- Generate awareness about sanitation and its linkage with public health
- Capacity Augmentation for ULB’s
- To create an enabling environment for private sector participation in Capex (capital expenditure) and Opex (operation and maintenance)
Sanitation for All Toilet First

Everyone must be his own scavenger.

M. K. Gandhi

Toilet first, temple later
Poor Sanitation Endemic in India

Stunted Child Growth direct result of poor sanitation where India only competes with African nations

Source: WHO2011

www.merabharosa.com
Check your state status...
TSC assessment - WSP report 2011

Key: Performance Band
- Red: <25 Below Average
- Orange: 26-49 Average
- Yellow: 50-74 Above Average
- Blue: >75 Superior
Why? Criticality of sanitation

- **Health**
  - High disease burden - 4.5 lakhs people die due to sanitation related illnesses, Stunting, and poor cognitive development

- **Poverty**
  - Affects livelihood and productivity - higher out of pocket expenses

- **Gender**
  - Safety, security, dignity, mobility, and education

- **Malnutrition**
  - Child growth and cognitive development

- **Tourism**
  - Unclean environment and health hazard

- **Human right**
  - Dignity and Safety of sanitary workers

- **Economic losses**
  - 6.8% of the GDP
History of sanitation campaigns in India

Central Rural sanitation programme (1986)
Target driven and subsidy oriented construction programme.

Total Sanitation Campaign (1999)
Approach: People centred, Demand Driven, community led and incentive based
- Focus: Information, Education and Communication (IEC)
  - Individual Household Latrine (IHHL)
  - School Sanitation and Hygiene Education (SSHE)
  - Community Sanitary Complex (CSC)
  - Rural Sanitary Mart / Production Centres (RSM/PC)

Nirmal Gram Puraskar (NGP) 2004
- To reward those local governments that has achieved full sanitation coverage.

Nirmal Bharat Abhiyan (2011)
- Strong awareness campaign
- Improved incentive
- Convergence with MGNREGA
Sanitation ... scope of the problem

- Huge Population
- Unfelt need – lack of popular demand
- Lack of financial resources with local bodies
- No interdepartmental coordination
- Non availability of water
- Lack of capacity

- Rural and urban
- APL and BPL
- Men and Women
- Drought prone Vs flooded areas
- Individual Vs institutional
Issues – Social and cultural

- Caste based occupation still continues in many rural areas
- Shame and disgust to discuss sanitation issues
- Low priority for sanitation and lack of popular demand
- Felt need and perceptible demand among women.. Still
- Caste and class bias in service provision- pollution ? !
- Community driven…Panchayat..?
Issues .... Policy and Implementation

- Sanitation programmes..No policy ?
- Water is a priority...sanitation add on
- Target driven...construction oriented... allocation based
- Lack of support and ownership to National prog
- No state sanitation policy
- No high level political support
- Nodal department...state level.. Who ?
- Organisation structure and coordination mechanism
- Subsidy
  - Who BPL? BPL + APL ?
  - How much...National ? state ?
- Disinterested implementation by field functionaries
<table>
<thead>
<tr>
<th>Sl. No</th>
<th>Name of the state</th>
<th>District Nodal Agency</th>
<th>Implementing agency</th>
<th>Rating (WSP study 2011)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Andhra Pradesh</td>
<td>RWSS</td>
<td>RWSS</td>
<td>Above Average</td>
</tr>
<tr>
<td>2</td>
<td>Assam</td>
<td>PHED</td>
<td>others</td>
<td>Average</td>
</tr>
<tr>
<td>4</td>
<td>Bihar</td>
<td>PHED</td>
<td>NGOs</td>
<td>Average</td>
</tr>
<tr>
<td>5</td>
<td>Chhattisgarh</td>
<td>PHED</td>
<td>NGOs</td>
<td>Average</td>
</tr>
<tr>
<td>6</td>
<td>Gujarat</td>
<td>RDD</td>
<td>GP</td>
<td>Above Average</td>
</tr>
<tr>
<td>7</td>
<td>Haryana</td>
<td>RD &amp; PR</td>
<td>RD (Block Panchayat)</td>
<td>Above Average</td>
</tr>
<tr>
<td>8</td>
<td>Himachal Pradesh</td>
<td>RDD</td>
<td>GP</td>
<td>Above Average</td>
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<td>9</td>
<td>Jharkhand</td>
<td>PHED</td>
<td>NGOs</td>
<td>Average</td>
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<tr>
<td>10</td>
<td>Karnataka</td>
<td>RD &amp; PR</td>
<td>GP</td>
<td>Above Average</td>
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<tr>
<td>11</td>
<td>Kerala</td>
<td>Local Self government</td>
<td>State Sanitation mission</td>
<td>Superior</td>
</tr>
<tr>
<td>12</td>
<td>Madhya Pradesh</td>
<td>ZP</td>
<td>GP</td>
<td>Above average</td>
</tr>
<tr>
<td>13</td>
<td>Maharashtra</td>
<td>ZP</td>
<td>GP</td>
<td>Superior</td>
</tr>
<tr>
<td>14</td>
<td>Manipur</td>
<td>PHED</td>
<td>NGOs</td>
<td>Below Average</td>
</tr>
<tr>
<td>15</td>
<td>Odisha</td>
<td>RDD</td>
<td>NGOs, GP and SHGs</td>
<td>Average</td>
</tr>
<tr>
<td>16</td>
<td>Punjab</td>
<td>RWSS</td>
<td>RWSS</td>
<td>Average</td>
</tr>
<tr>
<td>17</td>
<td>Rajasthan</td>
<td>RDD</td>
<td>Others</td>
<td>Average</td>
</tr>
<tr>
<td>18</td>
<td>Sikkim</td>
<td>Rural Management and Dev Deptt</td>
<td>GP</td>
<td>Above average</td>
</tr>
<tr>
<td>19</td>
<td>Tamil Nadu</td>
<td>RD&amp;PRD</td>
<td>BP and GP</td>
<td>Above Average</td>
</tr>
<tr>
<td>20</td>
<td>Tripura</td>
<td>DWS</td>
<td></td>
<td>Average</td>
</tr>
<tr>
<td>21</td>
<td>Uttar Pradesh</td>
<td>PRD</td>
<td>GP</td>
<td>Average</td>
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<tr>
<td>22</td>
<td>Uttara Khand</td>
<td>PMU ( world bank assisted Project)</td>
<td>DPMU</td>
<td>Average</td>
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<tr>
<td>23</td>
<td>West Bengal</td>
<td>PR &amp; RD</td>
<td>Rural sanitary mart</td>
<td>Superior</td>
</tr>
</tbody>
</table>
Swachh Bharat …Strategy

Key Challenges

- Mindset - People habituated to open defaecation
- Convergence - MGNREGA and NBA
- No Availability of water for toilets
- Dysfunctional toilets
- Inadequate field staff

Way forward

- Mass media / AV communication through icons and IPC through govt field staff
- Prioritisation of toilets under MGNREGA
- Conjoint approach through Bottoms up planning
- IEC and support through micro-finance
- Merging water and sanitation staff- dedicated block coordinator
Swachh Bharat by 2019 ... Action plan

Delivery Mechanism

- MOU between centre and State
- Unified structure and implementation of both water and sanitation
- Interchangeability of funds between water and sanitation
- Special purpose Vehicle – CSR funds and PPP projects and also IEC
- Microfinance for toilets
- Block level coordinators
- Swachhata Dhoths
- Intensive monitoring of IHHL
- Annual sanitation survey
- NBP ....SBP
Swachh Bharat by 2019 ... Action plan

**Convergence with other schemes and ministries**
- MGNREGA, IAY BRGF, NRDWP
- MPLAD/MLACDS
- WCD for CSC and Anganwadi toilets

**IEC Plan**
- National reach out campaign 26th Sept – 2nd October
- 15% Funds for Interpersonal communication
- Mass media, social media, print media
- Community mobilization - Involvement of school children
- Training of masons
- Capacity building of stakeholders through Key resource persons
SBA - Programme Implementation Framework

Planning

- Annual implementation plan
- Open defecation elimination plan
- Human resource forecasting

- GP identification
- Financial resource planning
- Design implementation approach
- Staff / consultant recruitment
- Training / orientation
SBA - Programme Implementation Frame work

Sustainability Phase

Hygiene promotion
- VHSNC, SHGs, MHM
- Schools, Anganwadis, Health

Follow-Up
- Hand holding community for sustainability
- Spot checks / Audits /Community monitoring
- Third party evaluations

Monitoring and evaluation
No funds

Lack of awareness

No water

Enjoy Open defecation

No demand

Not a priority

Who will clean?

BIAS of implementing officials
## Devaluation of sanitation work

<table>
<thead>
<tr>
<th>Skills</th>
<th>Mason trained to construct houses. Toilets ..??</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Physical Effort</strong></td>
<td>Driving and painting - more valuable</td>
</tr>
<tr>
<td></td>
<td>Sweeping &amp; cleaning - less valuable</td>
</tr>
<tr>
<td><strong>Responsibility</strong></td>
<td>Use and forget. Clean and maintenance ?</td>
</tr>
<tr>
<td><strong>Working condition</strong></td>
<td>Manual scavengers, sewerage cleaners</td>
</tr>
</tbody>
</table>
### Tamil Nadu: Household Assets possessed by rural and urban population (Census 2011)

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Houselist Item</th>
<th>Absolute number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>Rural</td>
</tr>
<tr>
<td>W.1</td>
<td>Total number of households</td>
<td>1,84,93,003</td>
<td>95,63,899</td>
</tr>
<tr>
<td>W.2</td>
<td>Radio/ Transistor</td>
<td>41,92,387</td>
<td>17,90,749</td>
</tr>
<tr>
<td>W.3</td>
<td>Television</td>
<td>1,00,00,180</td>
<td>01,59,853</td>
</tr>
<tr>
<td>W.4</td>
<td>Computer/Laptop - With Internet</td>
<td>7,72,257</td>
<td>98,006</td>
</tr>
<tr>
<td>W.5</td>
<td>Computer/Laptop - Without Internet</td>
<td>11,84,373</td>
<td>3,58,383</td>
</tr>
<tr>
<td>W.6</td>
<td>Telephone</td>
<td>1,38,50,821</td>
<td>63,41,589</td>
</tr>
<tr>
<td>W.7</td>
<td>Telephone/ Mobile Phone - Landline only</td>
<td>10,52,287</td>
<td>4,70,756</td>
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<tr>
<td>W.8</td>
<td>Telephone/ Mobile Phone - Mobile only</td>
<td>1,14,82,800</td>
<td>54,77,155</td>
</tr>
<tr>
<td>W.9</td>
<td>Telephone/ Mobile Phone - Both</td>
<td>13,15,734</td>
<td>3,93,678</td>
</tr>
<tr>
<td>W.10</td>
<td>Bicycle</td>
<td>83,65,803</td>
<td>44,11,137</td>
</tr>
<tr>
<td>W.11</td>
<td>Scooter/ Motorcycle/ Moped</td>
<td>59,77,406</td>
<td>24,35,181</td>
</tr>
<tr>
<td>W.12</td>
<td>Car/ Jeep/ Van</td>
<td>7,94,957</td>
<td>1,74,695</td>
</tr>
<tr>
<td>W.13</td>
<td>None of the specified assets</td>
<td>9,38,947</td>
<td>6,18,628</td>
</tr>
</tbody>
</table>
Strategies for Sustainable sanitation

- Awareness creation
- Planning and budgeting
- Technology and designs
- Capacity building
- Scaling up Construction with quality
- Operation and maintenance
- Monitoring
- Recognition and awards
IEC Campaign
Barriers to construct and use toilets

- Not to be seen using a toilet
- Caste and social hierarchy

Social standing

- Men and women cannot use same toilet
  Toilets pollute

Culture

- Men decide on household matters

Gender

- Not to see excreta or talk about it
  - Not to keep excreta stored in the house
- Disgust
Study shows - Reasons for Constructing Toilets

- Health: 82.5%
- Privacy: 61.6%
- Convenience: 58.3%
- Others: 31.5%

Legend:
- Convenience
- Dignity
- Privacy
- Health
- Subsidy
- Others
GRAPH 4: Toilet coverage across APL, BPL categories

Source: Department of Drinking Water Supply, Government of India, 2009
Girls can't do it in the street! YOU MUST WAIT!
Influencers of sanitation behavior and toilet construction - (Local communities)

- PRI/VWSC Members: 53%
- SHG Member: 12%
- Self Motivated: 10%
- Government Officials: 14%
- School Teachers/AWW, NGOs & Others: 11%
Motivation for toilet construction

- Safety and security for women/adolescent girls, 53%
- No open space for defecation, 5%
- Peer Pressure by PRI members/Govt officials, SHGs/NGOs, 28%
- Awareness about health benefits of toilet use, 14%
Leaders of the social mobilization process

- PRI/ VWSC Members, 53%
- SHG Member, 12%
- Self Motivated, 10%
- Government Officials, 14%
- School Teachers/ AWW, NGOs & Others, 11%
Awareness creation and behaviour change through Social marketing

- Complexity of the product
  - Concept Vs Product
  - Behaviour change and service delivery
- Fragmented Distribution
  - Ceramic Pans, bricks, cement rings, masons and labourers
- Environmental constraints
  - Institutional arrangements decentralized
  - Private sector at cross roads with government approach
  - No dedicated cadre trained in sanitation technology
  - Low status of sanitation
<table>
<thead>
<tr>
<th>Focus</th>
<th>Opportunity</th>
<th>Ability</th>
<th>Motivation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target Population</td>
<td>Access/Availability</td>
<td>Knowledge</td>
<td>Attitudes &amp; Beliefs</td>
</tr>
<tr>
<td>Desired Behavior</td>
<td>Product Attributes</td>
<td>Skills &amp; Self-Efficacy</td>
<td>Values</td>
</tr>
<tr>
<td></td>
<td>Social Norms</td>
<td>Social Support</td>
<td>Emotional/Physical/Social Drivers</td>
</tr>
<tr>
<td></td>
<td>Sanctions/Enforcement</td>
<td>Roles &amp; Decisions</td>
<td>Competing Priorities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Affordability</td>
<td>Intention</td>
</tr>
</tbody>
</table>

**Easy to Convert**

- 6-8% Can afford a toilet
- 10-12% May need financing to purchase toilet
- 40-45% May need part-subsidy (NBA) to purchase toilet
- 35-40% May need full subsidy (NBA + NREGS) to purchase toilet

**Hard to Convert**
Technology: Principles to dispose human excreta

- Flush and discharge
- Drop and store
- Sanitize and reuse
Twin pit pour flush toilet with rural pan

Squatting pan and trap for pour flush latrine

**Two-pit Model**

**Features**
- When one pit fills up, excreta is diverted to the other, allowing the sludge in the unused pit to turn into fertilizer
- Enables continuous, uninterrupted use of toilet
- Observed in West Bengal

**Barriers**
- Higher cost than one-pit model at INR 8,000 – 10,000 (USD 160-200), inclusive of materials and labor
  - Doubles the required substructure material and construction effort
- Requires larger real estate
Eco friendly design - Less water...
No pollution
Reasons for poor usage of toilets constructed under various programmes

- Blockage, Pan choked, poor disposable arrangement, 26%
- Lack of behaviour change, 18%
- Wrong location, 5%
- Lack of water, 9%
- Destroyed by Flood, 3%
- Poor/ Unfinished installation, 31%
- No Super Structure, 14%
Toilet Designs........Adequate and attractive
Designing for women: Special needs
Delivering sanitation: Collective action

- Even if one person defecates in the open, the oral faecal cycle continues. Saturation approach is the only way to end the same.

- Collective construction is easier for villagers than individual efforts due to ease in supply chain management and collective distribution of duties.

- Sense of mission and sustenance of motivation is possible only in community approach, and not in scattered individual efforts. We have a team of teams.
Delivering sanitation: Women SHG and Social entrepreneurship

HUMAN SOCIALITY...tendency among humans to associate and behave as groups...influences decision making and behaviour.
Delivering sanitation: SHG women in the forefront in toilet construction
PROCESS OF DELIVERING THE PRODUCT...
Be the change you want to see in the world

-Mahatma Gandhi