## Women Self Help Group Members Join Hands to Adopt Total Sanitation in Koraput District

## **Executive Summary**

## **Background**

Household toilet access in Odisha is amongst the lowest in the country. According to the Census 2011, only 14.1 per cent of the rural households have access to sanitation facilities. With 84.7 per cent households practicing open defecation, the Total Sanitation Campaign (TSC) implemented in 2004 in 30 districts, was confronted with a challenging task to eliminate the practice of open defecation. More than constructing toilets, the challenge was in switching to a demand-led approach that focused on changing behaviour.

Koraput is one of the districts with the least sanitation coverage. It was rated as one of the country's 250 most backward districts by the Ministry of Panchayati Raj in 2006. As per the Census 2011, only 8.2 per cent of the rural households in Koraput have access to toilets, which is well below the State average. A Knowledge Attitude and Practice (KAP) study commissioned by UNICEF in 2010 in Koraput revealed that even when toilets were constructed the majority were not being used. One of the reasons cited for not using toilets, was stated as "it is difficult to change cultural practices". This revealed the necessity for massive community mobilisation to change this mindset.

A women's empowerment initiative, Mission Shakti, was launched by the Government of Odisha in 2001. This initiative focused on education, and social and health sector reforms. It included promotion of Women's Self-Help Groups (WSHGs), as part of which women are united in groups to initiate various development initiatives. In 2005, 10,000 women in Koraput who were members of WSHGs, engaged in various socio-economic activities.



IHHL of Syam Sundar Pujari, BRG member of DWSM

#### The intervention

These WSHGs provided unique opportunity to combine women's empowerment with community mobilisation for sanitation promotion. The District Water and Sanitation Mission (DWSM) and Mission Shakti were brought together in a special programme to promote sanitation through WSHGs with the technical support of UNICEF. The programme aimed at empowering WSHGs to promote toilet use, by capacity building and providing revolving funds. This was supplemented by communication messages through community-based theatres, disseminating messages at local festivals and door-to-door campaigns.



SHG members of Bandaguda Mahila Mandal are preparing Water Quality Response Plan

# The approach

To ensure a good spread across the district, 3 WSHGs for each of the 14 blocks were selected, making a total of 42 WSHGs. Each WSHG was provided Rs. 50,000 through a revolving fund by DWSM towards construction of about 18-20 toilets. The WSHGs along with a team of masons received trainings on toilet construction. Several strategies were applied such as household visits,

village meetings and advocacy through multiple platforms, exposure events to promote toilet construction and use. Additionally, Anganwadi Workers (AWWs) were deputed to initiate discussions with community members during household visits; Block Resource Coordinators (BRCs) worked closely with the WSHGs, holding regular meetings to review progress and brought different stakeholders together; and the village *Sarpanch*, provided the overall guidance.

The implementation process was divided into three segments:

Preparatory

- Selecting WSHGs
- Equipping WSHG with skills and information to promote TSC
- •Identifying and training of masons
- •Funding support to WSHGs for promoting TSC

Rolling out TSC promotion

tasks

- Shortlisting households for toilet construction
- Undertaking toilet construction
- Monitoring visits by BRC and DWSM

Monitoring and Verification

- Verfying toilets constructed in the field
- Handing over signed forms by DWSM
- •Completing proof-of-verification and clearing toilet for use

#### **Results**



IHHL constructed by dividing the Kitchen room

The collaboration with DWSM and Mission Shakti contributed to the overall progress in construction. As of May 2014, 102,383 individual household latrines (IHL) have been constructed for BPL families, which is 46 per cent of the target. In addition almost 98 per cent of the schools and 90 per cent of the Anganwadi Centres (AWCs) have toilets.

This initiative supported the streamlining of the implementation process of TSC in Koraput district. It supported decentralisation, simplification of the fund disbursal process and better interface between the Gram Panchayat (GP) and the WSHGs. The active involvement of the WSHGs ensured that overall readiness was successfully created for improved sanitation practices and toilet construction and use. Out of the 42 project villages, Bandiguda village, achieved Open Defecation Free (ODF) status and 17 villages are on their way to achieving ODF status and completing targeted construction of toilets. In the remaining villages trained WSHGs are addressing some of the challenges and preparing the communities for the construction and use of toilets.

#### **Lessons learned**

The initiative provided a wealth of insights and learning, a few of which are highlighted below:

- The aim of a social programme to achieve ODF should be understood by all stakeholders, as some WSHGs approached the matter as income generating activity, others as toilet construction.
- Technical support and follow-up was found to be crucial. WSHGs that received regular followup and technical support performed better than those who did not receive this support frequently.
- Position sanitation promotion into the continuum of development. WSHG which had already achieved collective development results performed better in collective sanitation promotion than those with limited experience.
- Ensure a saturation approach to cover the entire village. The design only included one WSHG per village, while more than one WSHG can be found in a village. This resulted in exclusion of some of the WSHGs.

## Bandiguda village.

Bandiguda village, Khudi Gram Panchayat, Similiauda Block achieved Open Defecation Free status, by collectively (ODF) planning for ODF. The village realised that ODF could only be achieved by constructing toilets in all households. Since all families were not eligible for incentives, the funds allocated to BPL households, were distributed amongst the entire village. In this way all households were reached. Due to space constraints within the village, households innovated with toilet construction and toilets were even found in kitchen corners.

## **Potential for Replication**

This initiative can be recommended for scaling-up, as WSHGs have proven the ability to lead collective behavioural change. The state of Odisha has accommodated this approach in the state specific implementation of the Nirmal Bharat Abhiyan (NBA) - the Nirmal Odisha Abhiyan (NOA) Guidelines. Other states might consider doing the same and engage WSHGs in the NBA rollout process.

A factor that hugely worked in favour of toilet construction, included the right selection of WSHGs following a standardised criteria in the selection process, handpicking WSHGs, which had active membership and were respected in the



SHG members contributing their own labour of Pipalguda SHG

community, evaluating their capacities and providing them with specific training. These efforts can be further supplemented by setting up of rural sanitary marts equipped with a range of toilet construction materials to enable people to make choices independently and plan their toilet/sanitation requirements.