

No.W.11037/04/2011-CRSP
Government of India
Ministry of Drinking Water & Sanitation
CRSP Division

12thFloor, Paryavaran Bhawan,
Lodhi Road, CGO Complex
New Delhi-110003
Dated 7.10.2011

To,
The Principal Secretary /Secretary in charge of Rural Water
& Sanitation and Rural Development – All States and UTs

Sir,

A meeting of all State Secretaries in-charge of rural water supply & sanitation and District Collectors was held on 26th September, 2011 at Scope Complex, New Delhi to discuss new policy initiatives in rural water supply and sanitation for the 12th Five Year Plan.

Issues and way forward evolved in respect of rural sanitation as discussed at the meeting are annexed. You are requested kindly to go through the document and give your valuable suggestions for preparation of final policy paper.

Your valuable inputs are requested by 25th October, 2011.


(Vijay Mittal)
Director (CRSP)
Tele. No. 24364427

Encl : As above
Copy to:

All District Collectors as per list enclosed : For similar action as above

Copy also to :
Director/NIC: for putting on website

Policy Paper for New Rural Sanitation Initiatives in 12th Plan (2012-2017)

A meeting of all State Secretaries and District Collectors was held on 26th September 2011 to discuss the new policy initiatives for the 12th Five Year Plan, to review the Rural Water and Sanitation programme and issues of convergence with other schemes of Mo RD.

The conference brought together all the major stakeholders - administrative machinery, institutions and experts and international resource agencies (UNICEF, WSP, Water Aid), for redesigning programme implementation strategies to address the challenges that TSC faces and mainstreaming the rural sanitation agenda in the public domain during 12th plan period.

The brainstorming session was held at Scope Complex, which also included District Collectors from nine States who shared experiences and views to develop policy interventions and Plan of Action for up-scaling TSC. It emerged that community based approach by targeting on priority the GPs to attain full sanitation status rather than spreading it with tracking individual achievements should be the aim. Such a phased approach with an identified implementation agency and a conjoint approach with water supply mechanisms was needed. The issues in the policy which evolved after extensive consultation and deliberation on part of all stakeholders and policy makers are as follows:

1.1 VISION

Open defecation free, hygienic and clean environment in rural India where good sanitation practices lead to positive health outcomes, greater access to education especially for the girl child, and reduction in gender empowerment differentials providing a fillip to economic betterment and consequent improved quality of life of rural society.

1.2 GOAL

Gram Panchayats of the country should attain Open Defecation Free (ODF) status and all rural schools and Anganwadis provided with toilets by the year 2017 with interventions for adequate solid and liquid waste management

1.3 CONJOINT APPROACH TO SANITATION AND WATER

Conjoint approach to sanitation and water should be strengthened by conjoint measures to increase effective usage of sanitation facilities. Convergence between Total Sanitation Campaign and National Rural Drinking Water Programme should be imperative looking to the significance of water availability for achieving sustainable sanitation. Water is crucial for sanitation and without sanitation quality of potable water cannot be ensured. Hence, there is a need for comprehensive action for activities under NRDWP & TSC to complement each other.

The current approach of demand driven stand alone TSC should give way to the strategy of first creating demand through contact and motivation during the planning of the Water Supply Schemes and undertaking toilet construction parallel with the construction of water supply mechanisms. For institutional sanitation it should be ensured from the planning stage that running water availability is essentially provided in all school and Anganwadi toilets and Community Sanitary Complexes under National Rural Drinking Water Programme.

While selecting locations for new Piped Water Supply Schemes(PWSS), priority should be accorded to villages where TSC has reached milestone of higher coverage, including Nirmal Gram Panchayats for sustainability, In other villages with lesser TSC coverage, a public hand-pump should be provided within 100 metres of the households.

In all new PWSSs, TSC should be implemented simultaneously with the water supply scheme. Publicity, contact, motivation(IEC) should be undertaken during preparatory phase of PWSS. Steps should be taken to complete construction of toilets within 3-6 months of completion of construction of the PWSS.

In the coverage area of existing operational PWSSs, action should be taken under TSC to attain Open Defecation Free status on priority.

Adequate availability of water to maintain clean toilets and handwashing based on volumetric assessments should be ensured under NRDWP. Bacteriological testing of water sources should be made mandatory through water-testing kits provided under NRDWP.

1.4 PHASED APPROACH

A phased approach should be adopted for achievement of goals through focused implementation. Districts should be given flexibility for fund utilization so that fund flow is accelerated to incentivize Gram Panchayats (GPs) that have achieved identified milestones of sanitation coverage to achieve full sanitation objectives. This would ensure a dedicated approach for attaining community outcomes against the current methodology of monitoring individual achievements. Districts may also have flexibility to prioritize funding for Information, Education and Communication to Nirmal Gram Puraskar (NGP) awarded GPs for sustainability and to the identified GPs that need effective demand generation.

1.5 COMMUNICATION STRATEGY:

Comprehensive communication strategy to attain community outcomes must be formulated on an average specific basis. Success of TSC is dependent on behavior change of the community with a view to ushering in healthy and hygienic environment. Motivating the members of the community to adopt good sanitation practices is of critical importance. Appropriate strategies and tools of IEC will need to be applied to persuade people for behavioural change. Personal contact and motivation and peer

influences work best to attain this objective. Office bearers of the GP, members of Village Water and Sanitation Committees (VWSC), Block Resource Centre (BRC) personnel, Swachhata Doots (Messengers of Sanitation) should collaborate to bring about the desired changes. Space should be made for engaging NGOs and CSOs having requisite background, experience and acceptable repute. A countrywide Sanitation Week /Fortnight must be observed to prioritise sanitation. A National Communication Strategy should be developed and implemented taking into consideration the scenario of sanitation, experience and achievements over past decade.

The IEC component of the project cost may be proportionately divided for pre and post IEC activities for sustained sanitation. Key Resource Centers may be identified for training of State and District level functionaries (Training of Teachers- ToT) in addition to the National Level Key Resource Centres (KRCs).

1.6 FINANCIAL INCENTIVE FOR COMMUNITY OUTCOMES

Substantial enhancement of allocation during the XIIth Plan is necessary. Quality sanitation is not possible within the kind of funding that has so far been provided for TSC. APL/BPL divide needs to be bridged for community outcomes. APLs should therefore also be considered for appropriate incentives for community level outcomes. Alongwith SC/ST/OBC/landless/ small and marginal farmers, there are households that do not have the required surplus to invest in sanitation who need to be assisted for achieving total sanitation. Differential funding for needy groups like disabled, underprivileged and other notified groups should be provided to fulfill their specific sanitation needs.

Although the quantum of financial assistance to IHHLs has been revised from time to time, these should be examined and individual incentive component of TSC should be revised appropriately with an inclusive community based approach for sustained sanitation.

Incentive amount barely covers the cost of construction materials for a toilet and is disbursed after construction and putting into use of the toilet. The beneficiary is, therefore, required to arrange his own funds for taking up toilet construction. Need for funding may exceed allocation in some areas. This leads to the need for bank finance, particularly if the beneficiary wishes to construct a bath together with the toilet. Provision of bathing facility with a toilet encourages women in particular and is a significant trigger for better sanitation outcomes. It is, therefore, also necessary to make arrangements for bank finance for toilet. The revolving fund placed at the disposal of DWSMs has failed to attract APL families to borrow from it. Keeping this experience and the need for bank finance in view, efforts should be made at National and State levels to include bank financing of toilet construction as an activity of SHGs eligible for bank financing. The revolving fund may be converted into a credit guarantee fund for financing of toilet construction in order to provide a level of comfort to the banks in all GPs with Grade 'A' SHGs.

Another option for increased funding for quality sanitation facilities is effective convergence with Mahatma Gandhi National Rural Employment Guarantee Scheme (MNREGS) for permissible earthwork for all MNREGS job card holders that must be looked at.

Grass root level workers like Swachchhata Doot, Self Help Group (SHG) members, and members of VWSCs etc. should be considered for financial incentive for successful achievement of Open Defecation Free (ODF) and NGP status

1.7 IMPLEMENTATION MECHANISM

TSC will be implemented at the GP level through identified Village Water & Sanitation Committees (VWSCs)/NGOs/CBO etc. VWSC should mandatorily be a Standing Committee of GP to ensure community participation in planning, construction, operation and management. Activities under the TSC should be carried out under the supervision of VWSC. Members of VWSC should be engaged actively in contact and motivation of the community for moving towards the NGP status. The Gram Panchayat should provide overall guidance to the VWSCs falling within its territory. TSC incentive funds should be routed to the GPs through State Water and Sanitation Mission (SWSM) and District Water and Sanitation Mission (DWSM). The DWSM will be able to release funds to GPs based on following performance milestones so as to ensure incentives post construction and usage to the beneficiaries.

Installment	%	Stage
1 st	30%	Against passing of resolution to achieve ODF status
2 nd	30%	Achieving 50% of project objectives
3 rd	30%	Achieving 100% of project objectives
4 th	10%	On verification of 100% achievement of project objectives

The significance of management of funds and monitoring at the Block level must be considered. States may suggest possible mechanism for block level.

Administrative fund components under the campaign should be increased to 9% from existing 5% to strengthen the institutional mechanism especially in view of the fact that the annual out lay of TSC is relatively low.

1.8 OPERATION AND MAINTENANCE

While O&M of individual toilets should be the responsibility of the household, incentive should be provided for turning the old defunct/dysfunctional toilets into functional ones. For this purpose, identification of old dysfunctional toilets should be

done with the approval of Gram Sabha/VWSC. Funds should be made available to the GPs to repair defunct/dysfunctional toilets, maintain community toilets, O&M of waste water structures and other sanitation activities.

10% of TSC funds should be earmarked for O&M/repairs. Provision for special training to local daily wagers / SHG etc. for O&M and repair of defunct/damaged toilets should be made under TSC or in convergence with National Rural Livelihood Mission (NRLM).

Business models for Rural Sanitary Marts and Production Centres should be examined.

For mechanical cleaning of pits the Zila Parishad/ Panchayat should maintain a panel of private parties with the requisite suction equipment whose service could be hired by the VWSCs/ households. Necessary training for this purpose should be funded out of TSC funds.

1.9 INCLUSIVE APPROACH FOR VULNERABLE COMMUNITIES AND AREAS

In conformity with the thrust of Government of India for inclusive growth vulnerable communities like SCs, STs, PTGs, NTs, DNTs, Minorities in Minority Districts, Physically disabled, People affected with HIV should be brought under the ambit of financial assistance. Differential funding for needy groups may be provided to fulfill their specific sanitation needs. Disabled friendly toilets should be constructed in institutions and appropriate technology should be explored and provided in the households to suit the requirement of normal as well as differently abled. Focused social mobilization and IEC drive should be carried out for vulnerable areas like North Eastern States, Minority Districts, and LWE districts, BRGF districts etc. and separate data should be maintained for focused approach for each category. Provision for girl friendly toilets with suitable water facilities in all the existing schools is recommended. Facilities need to be developed in convergence with Ministry of Health and Family Welfare, especially in rural schools, so that girls can have sanitary napkin free of cost or at affordable price. Women should be included in all aspects of decision making with respect to planning, implementation, operation and maintenance of sanitation facilities. Proportionate funding and expenditure should be ensured for SCs/STs concentrated districts.

1.10 CAPACITY BUILDING

A State Resource Centre and Regional/ District Resource Centres may be set up that alongwith DWSMs should impart sanitation related training to the members of VWSC, Panchayati Raj Institutions, Block Resource Centre (BRC) personnel and Swachchata Doots. Local wage earners/SHGs should be trained in trades such as masonry work, brick-making, toilet pan making and plumbing so that households could hire their services as per their need for construction, O&M,

repairs, etc under National Rural Livelihood Mission. Setting up of 'Nirmiti Kendras' for development and manufacture of cost effective construction materials would ensure availability in localized areas for toilet construction. The Production Centres set up under TSC may also be revived on this model. To make up for lack of academic and practical expertise in the sanitation sector, University Grants Commission (UGC) and other appropriate bodies should introduce sanitation related Graduation and Post Graduation courses.

1.11 MONITORING & EVALUATION

Evidence based real time monitoring should be done by MoDWS through IMIS. The focus of monitoring will shift from tracking individual household toilet coverage to tracking communities for achievement of total sanitation outcomes. Thus, open defecation free communities would be an outcome of the revised TSC. DWSM will collect, compile, analyse and transfer data to MDWS through IMIS. Outcomes will also be assessed through tracking of water-borne diseases through ASHA workers and independent studies that should also track IMR, MMR, malnutrition etc. There will be mandatory independent evaluation of programme once in two years by all States and the result of the evaluation should be linked to fund releases.

1.12 GOVERNANCE STRUCTURE

NRDWP and TSC should be administered in the State by establishing a 3-tier Governance Structure as explained below:

- Government of India level : A dedicated Monitoring Directorate should be set up.
- State level: A multi disciplinary Rural Water & Sanitation Management Organisation (RWASMO) at the State level in the shape of a Society registered under the Societies Registration Act. It should be headed by an officer from All-India Services of 12-16 years of seniority. It should have personnel with suitable academic qualifications and experience to oversee work relating to water security planning, water conservation and recharge, solid and liquid waste management, sanitation, construction of civil and engineering works, financial planning & management, social and community mobilisation, accounting, mass communication, training, etc. The organization should be empowered to take financial and administrative decisions and should have flexibility to appoint personnel from open market on contractual basis or to take government servants on deputation.
- District level: Multi disciplinary District Water & Sanitation Mission (DWSM) for each district that would report to the RWASMO. A dedicated Group A level officer on deputation should head DWSM at District level to plan, co-ordinate & implement activities relating to domestic water supply and sanitation.
- Block level: Block Resource Centres with a Block Programme Officer for Sanitation that would report to the DWSM and work with the GPs/ Users Managing

Committees/ VWSCs for implementing water supply and sanitation schemes. Jalsurakshak (Water) and Swachchhata Doot (sanitation) at GP level should be encouraged.

1.13 INTEGRATED HABITAT DEVELOPMENT SCHEME

Rural housing schemes taken up under Indira Awas Yojna (IAY) will provide toilet and domestic water facilities within the houses. Provision for bathing facilities with toilets constructed should be considered under the scheme. Solid and Liquid Waste Management (SLWM) should also be an essential component of these habitats. State rural housing schemes should also be supported with NRDWP and TSC for provisioning toilets, SLWM and domestic water supply in houses to be constructed. Necessary funds for construction of toilets will be provided by MoDWS as a second stream under TSC and SLWM should be supported under MNREGS.

Possibility of bathing facilities to be provided should be explored in the model of integrated habitat development. It is recommended that a part of rural sanitation outlay (say 10%) be set apart for funding integrated projects with sanitation facilities included. Such projects should preferably be proposed in areas of concentration of SCs/STs/Minorities, as a parallel stream under Total Sanitation Campaign (TSC).

1.14 SCHOOL SANITATION:

SSHE is an important component to ensure universal sanitation coverage in rural areas of the country. There should be designed capacity building of school teachers, ASHA and anganwadi workers on hygiene and sanitation. Education Departments in States and Centre should include functionality and usage of toilets and hygiene practices including handwashing with soap, in all inspection reports and reviews of programmes. Moreover, sanitation must made be a part of the school curriculum. Ministries in charge of School Education and Anganwadis must be exhorted to ensure functional toilets in schools and anganwadis located in private premises. On full coverage of schools and anganwadis in government buildings, Government of India must take a view on coverage of remaining such Institutions housed in private buildings and particularly Government-aided schools.

1.15 INCREASED FOCUS AND EMPHASIS ON USAGES

One of the important policy changes to be implemented in XII Plan should be to shift focus from access to emphasis on usages to achieve expected outcome of ODF communities. TSC guidelines provide for evaluation of TSC implementation to assess usage of sanitation facilities along with quality of implementation for mid-course correction to achieve the intended results. While Government of India has made such

efforts successively, there are hardly any studies carried out by the States to independently assess their own sanitation situation in the rural areas. Independent study for each State through random sampling should be made mandatory atleast once in two years linked to the release of funds to assess the actual progress made and gainful utilization of funds released in the previous years.

1.16 BROADER MENU OF TECHNOLOGIES

Development of cost-effective models of low cost superstructures using hollow bricks, tin sheets, bamboo super-structure, plastic & dust wood made module door panel etc. should be widely propagated. A dedicated institutional mechanism for pursuing Research and Development works coupled with sufficient fund allocation may be created at national level for desired outcomes. Differential level of incentives for different technology options against evidences to promote broader menu of technology should be adopted. Technology options should be promoted based on region based appropriate plurality of models.

1.17 REGULATORY MECHANISM:

While strategy under TSC has been to incentivize creation and use of sanitation facilities, there is a need to introduce and support existing regulations for safe environment. The Ministry should consider showcasing case studies of various Panchayats on legal steps taken against open defecation in enabling Panchayat to build up social norms against open defecation. State governments should be encouraged to introduce regulations making it obligatory for PRIs to ensure that all households in the GP including public representatives use sanitation facilities. All Government employees should be required to build and use toilets at their residence even if it is rented.

1.18 PRIORITIZING SOLID AND LIQUID WASTE MANAGEMENT:

Solid Liquid Waste Management should be priorities by developing a clear roster of options and activities to be developed and disseminated through the best training institutions in India. A large number of Master Trainer Organizations should be developed within each state, which would in turn build capacities of functionaries and people's representatives at the GP level. For effective implementation of SLWM, it should be converged with MNREGA. Exhaustive capacity building of PRI representatives on SLWM should be taken up, followed by exposure visit to be arranged in other parts of state and outside the state. The Ministry should play a key role in coordination in arranging exposure visit in other states. In each block, one model GP village with SLWM should be targeted as pilot for replication. States should be encouraged to go for district specific tie-up with CSOs & corporate houses, after adopting "Outcome Based Community Centric" model. R & D on cost-effective models should be encouraged.