

P WOMEN AND POLITICAL EMPOWERMENT

2006

Women's Political Empowerment Day Celebrations

Panchayats, Water and Sanitation

Edited by
Bidyut Mohanty

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Dr. George Mathew

Women and Political Empowerment 2006

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The Women's Political Empowerment Day Celebrations 2006 in New Delhi, Bangalore, Bhubaneswar, Chennai, Hyderabad, as well as the publication of this report were made possible by a grant from the **UNICEF and WaterAid**.

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Women's Political Empowerment Day Celebrations

Theme: Panchayats, Water and Sanitation

Edited by:

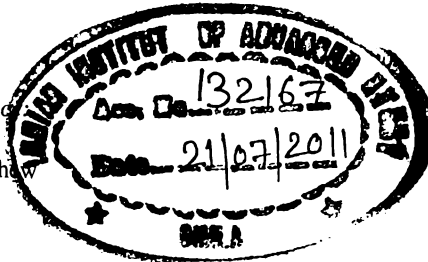
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First Published 2008

© 2006: Institute of Social Sciences, New Delhi

Layout: P. Nandakumar

Printed at Kalpana Printing House, L-4 Green Park Extn., New Delhi - 110 016, India.

Price Rs.150/ \$15

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KAMLA CHOWDHRY

"They (the women) don't want the Moon, but just a toilet".

THIS was the message echoed by the late Dr. Kamla Chowdhry, Trustee, Vikram Sarabhai Foundation, New Delhi. Kamlaji was extremely concerned about the basic problems women face in their daily lives. Their lack of privacy, self esteem and inability to access natural resources was her major concern.

Kamlaji used to visit the Institute and she encouraged us to document the narratives of women who had spearheaded the campaign for total sanitation. Several of these women activists were awarded the Nirmal Gram Puraskar for working with dedication in the remote corners of the country, especially Maharashtra.

In August 2005 the Institute of Social Sciences organized a two-day workshop for women struggling for this cause from various parts of India. Kamlaji sat through the two day programme and listened to these narratives of women who participated in the workshop. Of course, there were a few men as well. These were real stories of success and failure. These activists used every means and roped in everybody in the villages, through democratic process and panchayats to make their villages clean and tidy.

At the end of this meet along with Kamlaji we decided to take up this issue under the title 'Women, Panchayats, Water and Sanitation' for the 2006 celebrations of Women Political Empowerment Day.

The response to our invitation for a conference with this theme from elected women panchayat members and presidents was enormous. Women came from all-over India and we could see that most of them were ready for having clean environment back in villages, provided the sanitary facilities were made affordable.

It was a tragic setback for us that Kamlaji was not with us when the celebrations took place with 600 women and national leaders in Delhi. Kamlaji passed away on 4 January 2006. We dedicate this volume in memory of Dr. Kamla Chowdhry who dedicated her life to this noble cause.

May Kamlaji's dream come true very soon!

George Mathew

The World Toilet Summit has declared
2008 as World Sanitation Year.
Both government organisations and NGOs would
spread awareness among people.

INTRODUCTION

THE INSTITUTE OF SOCIAL SCIENCES (ISS) organized a two-day convention of elected women panchayat representatives on 24-25, April 2006 at Vishwa Yuvak Kendra, New Delhi as part of the annual celebrations of the Women's Political Empowerment Day. More than 500 delegates including 42 NGOs from 13 States and Union Territories participated in the convention. Inaugurating the convention, Hon'ble Union Minister for Water Resources, Mr. Saifuddin Soz, spoke of the scarcity of water resources the world over and indicated that the Third World War might start on the issue of water. In his opinion, the only way to overcome this is through rainwater harvesting.

Mr. Cecilio Adorna, Country Representative, UNICEF, said that the non-availability of safe drinking water leads to various diseases. For example 4,00,000 children die every year in India alone due to lack of sanitation and safe drinking water. He stressed on the empowerment of women to achieve peace, and security and sustained economic growth. Mr. Depinder S. Kapur, Country Representative, WaterAid, New Delhi, traced the underlying factors responsible for the abysmal low coverage of latrines in rural and urban areas. He was of the view that women panchayat leaders would be in a better position to understand the ground reality.

In the keynote address, 'the water man' and Magsaysay award winner Mr. Rajendra Singh, Secretary, Tarun Bharat Sangh, Rajasthan, observed that women in general and panchayats in particular should take charge of the management of ground water so that rational use of the scarce resource can be ensured. He also narrated the experiment which has been carried out in Rajasthan to solve the water problem wherein women played a pioneering role.

The theme for the plenary session was 'Water and Sanitation: An Overview'. It was chaired by Prof. Aparna Basu, former President of All India Women's Conference. Ms. Poornima Hegde, a gram panchayat member from Karnataka talked about her achievements in providing safe drinking water and universal sanitation through the synergy of civil society and panchayats. Whereas Mr. Sabir Ali from the Council for Social Development, New Delhi, spoke on the lack of sanitation facilities in the

mega cities and problems faced by migrant women; Mr. Shahir Hassan, President, All India Panchayat Parishad, underlined the importance of integrated approach to solve the problem of water and sanitation at the panchayat level. Ms. Kalpakam Yechuri from AIWC also spoke of women's problems. Prof. Marc Humbert, executive secretary of Political and Ethical Knowledge on Economic Activities (PEKEA), agreed that the functioning of the local government provides a framework for global challenges.

Ms. Mohini Giri, Director of Guild of Services, New Delhi chaired the valedictory session. She remarked that one-third reservation for women in panchayats has brought a social revolution in India. Ms. Kiran Walia, Chairperson, Delhi State Commission for Women raised issues on elected women representatives falling prey to corruption and use of money power. Ms. Lizette Burgers, Chief, Water and Sanitation Section, UNICEF presented visuals of the effects of the water-borne and lack of sanitation related diseases. The issue of achieving the Millennium Development Goals (MDGs) through panchayats was highlighted by Ms. Rita Sarin, Country Director, Hunger Project. Incidentally the 29 subjects given to panchayats coincide with some of the MDGs.

State-specific problems and solutions were the main focus during group discussions. One broad recommendation cutting across the states was formation of national level federation of panchayats to strengthen the local government system. Ms. Asha Ramesh, WaterAid, who chaired the presentation of group reports, observed that women and young girls face physical assaults including rape and molestation when they go to the public toilets or to the open field. She stressed the need for ensuring private toilets at the household level.

The following charter of demands was adopted by the delegates:

1. There is need for proper planning to ensure that the schemes are need-based and are implemented.
2. The technology to meet the need for pure drinking water and sanitation facilities should depend on the availability of local resources. Also, testing laboratories for drinking water need to be established.
3. Indiscriminate use of ground water must be stopped.
4. Water management should be entrusted to specific groups to be formed as 'pani-panchayat'.
5. Lastly, close coordination between panchayats at different levels and concerned authorities including the government is essential for proper water-toilet management.

Celebrations at the State Level

The Institute held similar celebrations in the states of Karnataka, Andhra Pradesh, Orissa and Tamil Nadu. In Hyderabad, Andhra Pradesh the convention was held on April 24, 2006 in cooperation with EKATRA. In Bangalore, Karnataka, on the other hand the celebrations were held on April 27, 2006. More than 150 women participated and it was inaugurated by Mr. C.M. Udasi, Minister for Rural Development and Panchayati Raj. Similar programme was held in Bhubaneswar, Orissa on June 1, 2006. Attended by more than 300 women, the event was inaugurated by Dr. Damodar Rout, former minister of Panchayati Raj, Orissa. The celebrations also took place on June 17, 2006 in Chennai, Tamil Nadu in collaboration with EKTA. On all these occasions, the discussions centered around the role of panchayats in water and sanitation reflecting regional perspective.

Response to the Celebrations

To gauge the impact of the deliberations during the celebrations, ISS sought feedback from the elected women representatives of panchayats from all over India through the NGO partners who had sponsored the delegates to the national and the regional programmes. Responses were received from various states such as Orissa, Jammu & Kashmir, Karnataka and Himachal Pradesh. Most of the respondents felt that disseminating information on quality of water and sanitation facilities was very necessary. Also, they requested information on support extended by the government for the same. The respondents from Karnataka said that after the panchayat members enlightened the villagers about the importance of having clean drinking water and clean sanitation facilities and after helping them build latrines and educating them to use them properly, the villagers have started to appreciate the role played by the panchayats. In the Kasoli District of Himachal Pradesh, the Tehri Gram Panchayat made proper drainage system to drain out the polluted water. Inspired by the learnings from the deliberations and discussions at the empowerment day celebrations, women took the lead role in this endeavour. Women from a backward district of Orissa started an awareness campaign against open defecation after listening to the ill effects of the same on health during the programme.

Bidyut Mohanty

National Coordinator

Women's Political Empowerment Day Celebrations

INAUGURAL SESSION

DR. GEORGE MATHEW, *Director*, Institute of Social Sciences, welcoming the chief guest and participants to the Twelfth Women's Empowerment Day Celebrations, 2006, highlighted the significance of 24th April in the process of social revolution of India. He recalled that on 24th April 1993 a landmark provision was added in the Constitution of India that not less than one-third of total seats must be reserved for women in all panchayats and municipalities. He said that India could move forward only if panchayats would be empowered, which in turn would empower the women. He pointed out that 8th March is observed as Women's Day all over the world.¹ However, India is the only country, which has been celebrating Women Political Empowerment Day since 1993. The initiative towards achieving the women's empowerment started in Karnataka with significant contribution by Mr. Abdul Nazir Sab, the then Minister for Panchayati Raj and Mr. Ramakrishna Hegde, the then chief minister of Karnataka. They were instrumental in making provisions for 25 per cent reservation to women in panchayats and municipalities in Karnataka in 1983, despite opposition. During election, not less than three women per seat contested in Karnataka and this set the trend. Dr. Mathew expressed his happiness at the fact that more than 10 lakh women get elected every five year to the panchayats and municipalities and also that women are heading one-third local bodies and government, according to the provision of the constitution.

Since 1994, the Institute has been celebrating the Women's Political Empowerment Day every year at the national level in Delhi and also at the state level. Dr. Mathew paid tributes to late Ms. Kamla Chowdhry, for her persuasion and dedication to this subject that it motivated ISS to select 'Panchayats and their role in water and sanitation' as the theme for the year 2006. Referring to a recent report that seven lakh people die every year due to water related diseases, he stressed that panchayats and municipalities could provide safe drinking water and best of sanitation to every citizen of this country. He also discussed about the flag which carried the message of "Women in Governance-50:50-set the balance right". He acknowledged and appreciated the efforts of all who contributed towards making this programme a great success.

Women in Water and Sanitation Sector

MR. CECILIO ADORNA, *Country Representative*, UNICEF, India, talked about the role of women in water and sanitation sector and women's empowerment. He explained that UNICEF in India is associated not only with sanitation, water and hygiene but also in other sectors such as health, education, nutrition, child protection, women empowerment and other related issues. Mr. Adorna complimented Indian people for taking rapid strides in empowering the grassroots level functionaries and decentralizing the decision making processes through the 73rd Amendment of the Constitution. He stressed on the role of Panchayati Raj institutions, particularly the women members, in ensuring safe drinking water, sustainable water resource management, proper sanitation and hygiene to all members of the communities, especially to the children.

At least 1.1 billion people lack access to safe drinking water and 2.6 billion lack access to basic sanitation resulting in death of 3900 children per day globally (Annexure I). The same scenario prevails in India also. As per the Census of India 2001, only 22 per cent of the rural households have access to sanitation and about 81 per cent households have access to drinking water supply (Annexure II & III). It is needless to say that in absence of adequate water and sanitation facilities, people suffer from various diseases. It is estimated that about 400,000 children die of diarrhea every year in India, which is a cause of serious concern. UNICEF's Child Environment Programme is working closely with the Government of India to improve the water and sanitation scenario in the rural areas of the country (MDL, 2005 & Census of India, 2001).^{2&3}

From his experience, Mr. Adorna feels that women are better leaders and more capable in implementing various social and economic development programmes. The movement of Self Help Groups (SHGs) initiated in India proves this point. As far as water and sanitation sector is concerned, women are playing lead role in many parts of the country. In Uttar Pradesh, two-thirds of the gram panchayats who received Nirmal Gram Puraskar (Annexure IV) this year, are headed by women.

Following are some achievements of women in the gram panchayats:

- ◆ In Jharkhand, women are able to solve drinking water problem through hand pump machines
- ◆ In Tamil Nadu, rainwater harvesting (RWH) is being largely done by women. Ms. Yesumary, a PRI member from Machchlipattinam, went to Washington in 2004 to receive the World Bank Market Place Award for completing 100 per cent RWH in all households under her jurisdiction

- ◆ In Medinipur district, West Bengal, community-based hand-pump maintenance through female caretakers and the achievement of full sanitation
- ◆ In Sangli district of Maharashtra, a woman panchayat leader – Ms. Madhuri Sawant – transformed her area into a fully sanitized place.

Similar experiences emerged in the process of implementation of the National Drinking Water Mission (NDWM) in the 1990s. The success of the NDWM was largely due to the adoption of the principles of PDS – the Total Costing and Reform Principles adopted by the Government of India in the water sector. Local communities were empowered to take up best suited water supply programmes. Mr. Adorna concluded his speech by placing trust on the women PRI representatives to provide access to water supply and toilets on a sustainable basis.

Sanitation : Challenges in India and Way Ahead

MR. DEPINDER S. KAPUR, *Country Representative, WaterAid, India*, extended the support of WaterAid India for the cause of universal sanitation. Though 95 per cent of the rural population has access to drinking water from hand pumps and pipe water, only a small portion of the population has access to safe drinking water. The rural sanitation in India stands at an alarmingly low level with only 48 per cent (2007) of the rural population having access to latrines. Urban sanitation in India is characterized by the poorest sections of the slum dwelling populations being deprived of individual toilets in all cities of India (WaterAid, 2005)⁴.

Mr. Kapur highlighted the issue regarding the slack in sanitation facilities in rural India. While we all know and accept that age old practice of open defecation has been the preferred norm in rural India, the reasons for this have never been explored or documented. It has been observed that this cultural norm and practice of open defecation died a natural death in states like Punjab and in urban areas. Hence in addition to the cultural and behaviour aspects, poverty and lack of assured livelihood, inability to secure regular water supply close to the toilet, destitute like conditions of malnutrition and migration form barriers to individual toilet construction and usage. Therefore it is necessary to address a combination of issues—economic, social and cultural—when addressing poor rural sanitation coverage in India.

In the West, sanitation was in a bad state as late as the end of the 19th century and became worse with the industrial revolution when the “Great Stink” emanating from river Thames in London forced the Parliament to adjourn its proceedings. London was considered one of the most poisonous

cities to live in by the middle of the 19th century. Improvements in sewerage and sanitation in London city were not simply a result of technical intervention or parliament deciding to do something about the problem.

Mass movements for change in these countries from feudal rule, based on reason and scientific temper, revolutionised social and economic change and also brought about a change in individual and social behaviour. A change in the social and economic structure led to a change in the behaviour of human beings and that was seen in the industrial and agricultural revolutions. The industrial revolution led to a significant increase in human productivity, which in turn led to increased productivity and increased productivity led to investment in urban infrastructure in England and the development of institutions of justice and rule of law. Individual behaviour change in favour of personal hygiene and health, happened as part of this historical change process that included rapid urbanization, and took a very long time to happen for the vast majority of the populations of these countries. It is only in countries where representative governments came to power through popular mass movements and revolutionary changes, as witnessed in USSR, Tanzania and China, that we see a speedy generational level changes taking place in essentially rural communities, for public and social welfare outcomes including improved investments in infrastructure for water and sewerage and individual sanitation behaviour practices.

Large parts of our urban settlements in India comprise unauthorized colonies and slums⁵. In such conditions a planned development for urban sanitation becomes difficult. Large urban water and sanitation projects financed by the Asian Development Bank and the World Bank are implemented without mapping of the slums and hence these are not covered in the upgraded urban infrastructure (ADB, 2006)⁷. Economic progress, as witnessed in under developed countries today, is not happening at the scale and pace as witnessed in 19th century Europe. If economic opportunities do not expand for the vast majority of Indian people, sanitation behaviour per se may not change at the desired pace.

In today's context of widening disparities and exclusion of the poor from economic growth and development of India, any policy change for improving sanitation in rural and urban areas that infringes upon the right to life and livelihoods of the poorest sections of the population, is not likely to be acceptable and enforceable on a sustainable long term basis. It can succeed only by getting rid of the poor, by shifting them from the centre to the periphery of the city. Large scale displacement of slum dwellers in large metros such as Delhi, Bangalore and Mumbai, cannot go on side by side with pro poor policy announcements, it makes the whole exercise a sham.

Since most of the delegates of this meeting being women sarpanches from rural India, it will be better if this house can deliberate on critical questions facing rural sanitation:

- If subsidy for toilet construction cannot induce improved sanitation then what else is needed to do this? Recently, the subsidy from Government of India was increased to Rs. 1500 per household for toilet construction.
- While it is agreed that behaviour change is a major reason for adoption of improved sanitation behaviour, WaterAid India baseline project study in Karnataka (Mysore district) showed that children showing improved knowledge of sanitation change do not translate it in practice.
- Is improvement in sanitation (increased latrine coverage) without improvement in water availability likely to lead to non usage? Will it also lead to increased burden on women for fetching water for the toilets?
- Can the SHGs promote sanitation coverage by prioritizing latrine construction?

Mr. Kapur concluded by offering all support from WaterAid India towards improving water and sanitation facilities in India, with a commitment for the rural and urban poor, socially and economically marginalized and their leadership and institutions.

Need of the Hour: Preservation of Ground Water

MR. RAJENDRA SINGH, *Secretary*, Tarun Bharat Sangh, Rajasthan, in his keynote speech expressed concern over the increasing barrenness of the cultivated land in India and observed that India is on the brink of an imminent danger; significant portion of its cultivated area is fast turning into a dry zone. There was a time when India was not self reliant in food production. Today, India has enough food reserves, but at the same time the nation should realize that prosperity at the cost of destroying its resources is not wise. The ground water resource is depleted and this is a great cause of concern. Mr. Singh admired the government's effort to bring out the Water Act to counter the situation. There are no laws in India against companies like Pepsi and Coca Cola who virtually loot India's water resources. He hoped that the honourable Minister Dr. Saifuddin Soz would be successful in bringing a more equitable Water Control Act into force, and the surface and sub surface water would be made available to agriculture, industry and people in an equitable manner.

Mr. Singh narrated an experience when his organization (Tarun Bharat Sangh) constructed wells and how the authorities created obstructions. He said that now, there were 377 cases against him on this issue. As ground water is a common asset of the people, government as well as of the nature, there must be a provision in the water bill for its judicious consumption. The deliberations around ground water Act should ensure that a proper resource mapping of ground water is carried out with details such as the capacity of water.

Mr. Singh praised Dr. Soz for his support for water harvesting and for his suggestion to initiate a nation wide debate on the issue. He said that water harvesting was more essential in cities and towns. In fact, in India the conservation of water is more important as a great quantity of water goes unused and drained out. In this context he referred to Maharashtra where big dams were constructed and still could not resolve the problems of irrigation. This country needs a *water literacy campaign* to better understand and manage water resources and this the government must undertake at its level.

Mr. Singh highlighted that women play a pivotal role in water harvesting. In this regard he gave examples of women like Kajori and Lachhma in Rajasthan who pioneered the replenishment of water resources. There are two methods to replenish the water resources. The first method is rainwater harvesting and the second is to reduce wastage of water through theft and leakages. He reminded the participants of the Aravari river incident, where women succeeded in restoring water to the river. Here the government officials had planned to invite bids for fishing. But women questioned the legitimacy of inviting bids and questioned the officials on the rights to do such a thing when they did not make any efforts in the restoration of the river. The 73rd and 74th Amendments to Constitution provide for the management of water bodies and resources⁸ by the people at local level. However, in the year 2002 the government did away with it and not a single panchayat raised an objection. This then came under Section 13 of the water policy that was declared by the government in 2002 (Government of India, 2002)¹⁰ which clearly gives away the rights of ownership, transportation and management of water resources to private companies. He recounted an episode when the former prime minister, late Shri. P.V. Narsimha Rao stated at the Rio De Janeiro convention on (1992)¹¹ that water is a social asset or capital and no government can take a decision to privatize this asset. He was against the proposal of water being included in the WTO. A decade later at the conference held at The Hague, Netherlands (2000), the Indian government reiterated that the proposal to privatize water resources was pending in the parliament and hence could not join WTO.

But at the Kyoto conference in Japan in 2003 Mr. Arjun Charan Sethi, the Minister of Water Resources, declared that the new water policy of India favoured the investors to develop and trade in water resources. Since then water has become more expensive than milk (UN convention on Climate Change, 1992).¹²

Water has become the largest instrument of exploitation of poor people all over the world. It is solely people's asset but is being sold at Rs. 10-12 per liter. Mr. Singh re-emphasized the fact that water does not belong to the multinationals. The government is planning to spend Rs. 25,000 crore on the betterment of water resources. It should be allocated to the Panchayats and the whole crisis of water will be managed within three years. He explained that right from Kanyakumari to Jaisalmer, the philosophy and vision of water resources are almost identical, however, the technique of conservation are distinctively different in every zone. All the eighty agro, ecological and climatic zones and geo-cultural regions in India have different techniques of conservation and usage of water resources. Women should play an active role towards this cause.

Solution to Water Scarcity Lie with Women in Panchayat

DR. SAIFUDDIN SOZ, *Hon'ble Union Minister of Water Resources*, Government of India, in his inaugural address emphasized that national politics should not be allowed to penetrate panchayat politics. He said that panchayats should not get embroiled in the matter of reservation. Women should achieve reservation through their competence and through politics. He was of the opinion that instead of reserving 50 per cent seats, women should be motivated to become independent and empowered.

He focused on the issues of water, wherein the UN has also stated that it must be settled by 2015. Taking the issues of water and sanitation to a large number of elected women representatives would meet the objectives of the UN. In 1947, when India became an independent nation, every person in India had a share of 2000 cubic meter water. The population of India was 40 crore (400 million), while that of the world stood at 3 billion or 3000 million. India contributed 13 per cent of the world population. Now this has increased by more than one billion. While India has not been able to add to its water resources, its' population is 16 per cent of the world's population which stands at six billion (International Data Base).¹³ As against this India possesses only four per cent of the global water resources. Thus it is clear that the situation is alarming as far as India is concerned and it makes for a strong case for a proper and judicious use of water. He feels that the third world war might be fought over water.

Referring to Dr. Mathew's and Mr. Adorna's speeches, Dr. Soz said that there is a dire need for a system in place for equitable distribution of water resources and also to make it fit for consumption. Till recently, Delhi had about 600 water bodies with at least 333 of them having wet beds. Unfortunately, the number has dwindled to 274. The Ministry for Water Resources has worked out plans to identify and conserve water bodies throughout the length and breadth of India. He emphasised that conserving rainwater is the only hope for India. Construction of small dams and wells can also be of considerable help.

He praised the role of '*Jholewali*' (social activist) and said that they were very organized. One can keep his/her spectacles, diary, pen and other things in that *Jhola*. It is actually a service to the society if a *jholewali* girl/boy takes interest in her/his surroundings and make people aware of the proper management of their assets. He again assured that the government would do its best to create awareness among people. He commented on the view of Dr. George Mathew that the most effective source of awareness is the mother although with a word of caution about giving too much responsibility to women.

Water conservation is a social responsibility irrespective of whether you are rich or poor and everyone has to take the initiative to put this into practice. He referred to Dr. Swaminathan¹⁴ who chaired the "Fourth Farmers Commission Report" wherein he talks of Pani Panchayat (Water Panchayat), which would be headed by a woman. Concluding his speech Dr. Soz once again encouraged the women representatives to take the initiative to find a solution to this grave situation.

Notes and References

1. International Women's Day (IWD) is marked on 8 March every year. It is a major day of global celebration for the economic, political and social achievements of Women. Started as a political event, the blended in the culture of many countries (primarily *Russia* and the countries of former Soviet bloc). In some celebrations, the day lost its political flavour, and became simply an occasion for men to express their sympathy and love to the women around them.
Source-http://en.wikipedia.org/wiki/International_Women%27s_Day.
2. For detail, see <http://shop.earthscan.co.uk> and *Millennium Development Library: "Health, Dignity and Development"*, June 2005.
3. <http://www.Census of India.net/2001 housing/500-019.html>.
4. WaterAid (2005), *Profile of Informal Slums of Delhi*, New Delhi, WaterAid.

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5. Even though this is said to be only 18% as per the 2001 Census, this figure hides the large number of people residing in slum like conditions in unauthorized colonies, JJ colonies, resettlement colonies and urban villages (WaterAid, 2006)⁶.
6. WaterAid (2006), *Water Policy based on a study of its urban projects in India*, New Delhi, WaterAid.
7. Asian Development Bank (2006), *ADB water for All: Poorest Communities Excluded from the Benefits*, <http://www.ire.nl/page/30167>.
8. Part IX, Eleventh Schedule (Article 243G) of the Constitution- Item No. 3-mentions about the power of the panchayats in regard to minor irrigation, water management and watershed development and Item No.11 discusses about the power of the panchayats in relation to drinking water. (73rd Constitution Amendment Act 1992)⁹
9. Government of India (1992) 73rd Constitution Amendment Act 1992.
10. Government of India, Ministry of Water Resources (2002), *National Water Policy*, New Delhi, April 11.
11. Section 13: Private Sector Participation should be encouraged in planning, development and management of water resources project for diverse uses, wherever feasible. Private sector participation may help in introducing innovative ideas, generating financial resources and introducing corporate management and improving service efficiency and accountability to users. Depending upon the specific situations, various combinations of private sector participation, in building, owning, operating, leasing and transferring of water resources facilities may be considered.
12. Rio De Janeiro convention on water was held in 1992 under the auspicious of UN Framework Convention on Climate Change, 1992.
Source: <http://faculty, Virginia.edu/setear/courses/globalwarm/Rio.html>.
13. <http://www.census.gov/ipc/www/idb/worldpopinfo.html>.
14. The 4th Report of National Commission on Farmers (NCF) submitted in April 2006 contains the draft of a National Policy for Farmers, titled "Jai Kisan," for widespread discussion. Among five-point plan, one is to promote water harvesting, conservation, and efficient and equitable use by empowering gram sabhas to function as "pani panchayats." Such "pani panchayats" should foster the establishment of community managed water banks and the recharge of the aquifer. A sustainable water security system should be put in place, particularly in rain fed areas lacking assured irrigation facility. This will be facilitated by mandatory water harvesting and greater attention to dry land farming. Swaminathan, M.S. (2006), 'Agriculture can't wait' *The Hindu* May 24, (Delhi edition).

- Every 15 seconds, a child somewhere in the world dies due to the lack of adequate sanitation infrastructure.
- In the past 10 years alone, diarrhoea has killed more children than all the people lost to armed conflict since World War II.
- At any one time, it is estimated that half the world's hospital beds are occupied by patients suffering from water borne diseases.

Source: Aga Khan Foundation India, 2005

PLENARY SESSION

Water and Sanitation: Experience from the field

Chairperson: Prof. Aparna Basu, Retd., *Professor of History*, University of Delhi.

Speakers: Ms. Purnima Hegde, *Member, Gram Panchayat*, Karnataka.
Dr. Sabir Ali, *Centre for Social Development*, New Delhi.

Prof. Aparna Basu highlighted the importance of such a conference where women from the panchayats across the country gather to share their experiences, problems and to seek a solution to these problems. She thereafter invited the speakers to this session.

Ms. Purnima M Hegde spoke about the Jal Nirmal Project (which was financed by the World Bank) implemented in Bellekere hamlet of Yadalli gram panchayat, Sirsi Taluk, Uttara Kannada District, Karnataka. The project started in Uttara Kannada district in July 2002 and was implemented in 244 villages of 47 Gram Panchayats. The Gram Panchayat is the focal point for the implementation of the Jal Nirmal Project and the Zilla Panchayat releases the required funds. The concerned village water supply and sanitation committee¹ decided that the work should be done by the committee members and not by a contractor. This will ensure that open well source, water tank, pipeline etc., are constructed maintaining good quality. Right from the inception, the villagers participated actively in the implementation of the project. The responsibility of the operation and maintenance of the water supply scheme rests with the committee and the villagers. Every household has a water meter and pay water tariff depending on the quantity of water consumed. All this ensured 100 per cent maintenance of the water supply and its quality. This is a great achievement for the village. To ensure proper sanitation also, every house has constructed latrines and has a biogas plant.

Social Aspects of Low Cost Sanitation System in Resettlement Colonies

DR. SABIR ALI, *Senior Fellow*, Centre for Social Development, New Delhi spoke on the social aspects of low cost sanitation in resettlement colonies.

Background

The nature and extent of access to primary pre-requisites of healthy living such as sanitation facilities and clean residential environment largely determine the level of societal development. Today a significant population in India does not have proper and clean sanitation facilities. This in turn leads to cholera, diarrhoea, gastroenteritis, etc. The problem assumes acute dimensions in light of the fact that nearly a third of the urban population of India live in slums. State intervention in the alleviation of the level of sanitation in India dates back to the outbreak of the epidemic of bubonic plague in Bombay in 1896. For the first time, serious thought was given to the issue of public health and hygiene, resulting in the enactment of the Bombay Improvement Act in 1898. Since then, many developments have been witnessed with little success. Notable amongst the success stories are those of the Urban Basic Services, Urban Community Development and Environmental Improvement of Slums Programmes. The least successful has been Delhi's Resettlement Programme.

The Resettlement Programme in Delhi was initiated in 1960, on the recommendation of the Advisory Committee appointed by the Government of India in 1958, as the Jhuggi-Jhomprai Removal Scheme (JJRS). At the time, there were about 50,000 families living in Jhuggis. During 1960-75, 18 resettlement colonies were developed comprising 52,864 plots (49,019 plots of 21 sqm. each and 3,845 plots of 67 sqm. each) and 4,504 tenements. During 1975-77, 16 resettlement colonies were developed providing, 1, 48,262 plots of 21 sqm. each. Presently there are 47 resettlement colonies in all, located largely on the periphery of the city². The socio-economic profiles of the households in resettlement colonies reveal a rapidly transforming rural way of living in an urban environment. Perhaps the most significant underlying factor that could be attributed to the prevailing living conditions of people in squatter areas and parts of resettlement colonies is the low level of income and the high level of illiteracy. Also, contrary to the much nurtured belief that resettling squatters in far-off locations would disrupt their employment patterns, a majority of these people continue to work at the previous place of employment, generally commuting long distances.

In planning resettlement colonies, a cluster of 500 plots (2500 population) with 5 m. wide brick paved lanes and community facilities, viz., nursery

school, park, etc. was the basic unit of physical planning. Successive orders of facilities were provided for two and four clusters combined. Initially, the JJRS had specified civic amenities as per the following standards:

- ◆ one latrine for 20 persons (4 to 5 families)
- ◆ one filtered water hydrant for 40 families or 1 hand pump for 20 families
- ◆ one bathing enclosure for 6 families
- ◆ approach road
- ◆ surface drains
- ◆ street lighting
- ◆ school, medical and community facilities

In the case of ineligible squatters, the standards specified for latrine, filtered water hydrants/hand pumps and bathing enclosures were half. The sanitation conditions in resettlement colonies can best be termed as unsatisfactory. The reasons for this are several. Firstly, the civic amenities were, at low standards. Secondly, they were of very poor quality, a deficiency compounded by the fact that they are, typically, poorly maintained. Thirdly, the provision of even these limited facilities has been far from perfect.

A recent survey by the CSD indicated that roads were dug in most of the colonies for laying water mains and sewer lines and as a consequence, during monsoon, pools of water are formed, particularly since the surface water drains in most of the colonies have not been functioning properly due to inadequate sections and improper slopes. Also, the level of most of the parks in these colonies is lower than the surrounding roads, with the result, that rain water stagnates, creating unhygienic conditions. The quantitative and qualitative deficiencies have become more acute on account of the emergence of squatter settlements within these planned settlements. According to a study (Ali, 1989)⁴ conducted by the Council for Social Development, New Delhi, 35 out of the 45 resettlement colonies have been affected by this phenomenon. This study indicates that most of such jhuggis have come up along road sides and parks within the resettlement colonies, and that their residents are largely availing the facilities in the resettlement colonies consequently compounding the inadequacy of sanitation facilities in them besides substantially adding to the quantity of garbage generated in the areas.

Objectives

In the context of the foregoing brief introduction to the deplorable sanitation conditions in Delhi's resettlement colonies, the objectives of the presentation are:

- ◆ To understand and appreciate the sanitation situation in selected resettlement colonies
- ◆ To evaluate the newly constructed community toilets built in the wake of the epidemics in selected resettlement colonies
- ◆ To identify the major problems and outline solutions for the improvements.

Selection of Case Studies

Of the 47 resettlement colonies in Delhi, two have been selected for the presentation—Trilokpuri (Phase I and II) and Himmatpuri. The choice of these settlements rests on a number of factors. First, six resettlement colonies were affected by cholera in the latter half of 1988. Second, both of the colonies witnessed government response in terms of construction of Toilet Complexes. There also exists an old community latrine. The emphasis of this research has been the study of toilet complexes existing in Trilokpuri and Himmatpuri. Only 4 complexes (two each in both the case study colonies) have been presented. The results of this research are therefore specific and cannot be extended to the situation in other areas. The evaluation of the new Community Toilet Complexes is based upon the following social parameters:

- ◆ location
- ◆ adequacy of capacity of community latrine seats as well as septic tanks/soak pits
- ◆ adequacy of support amenities
- ◆ level of hygiene
- ◆ possibility of soil and ground water pollution and other hazards related to sewage disposal
- ◆ durability and performance in extreme conditions
- ◆ social acceptability

Data in respect of the above mentioned parameters have been obtained from primary and secondary sources using the following schedules:

- a. Toilet Complex Schedule (covering physical details of latrines, users, amount of money collected and spent; and details of maintenance personnel, etc.)
- b. Household Survey Schedule (covering socio-economic data and level of literacy, structural condition of houses, and facilities available at the house level, preferences for particular types of latrines, problems encountered in using new community latrines).

Observations from the schedules/performa were supplemented with insights obtained through discussions with various people and field observations.

The Toilet Scheme

Technical Details and Quality of Construction

The new Community Toilets have three major components: (a) the community toilet building housing pour flush latrines (b) the septic tank, and (c) the soak pits. The Toilet Complexes constructed in Trilokpuri (Phase I and II) and Himmatpuri are of 84 seats capacity (40 for males, 40 for females and 4 for children). The complex buildings are pucca structures with RCC roof and brick walls in cement mortar and consist of an entrance lobby, caretakers' room, store room, bathing space, urinals, trough for washing and latrines. The latrines are arranged in parallel rows with a common passage in between. Each latrine is 3'0" x 4'0" in size and has a door and a ventilator. The flooring is of quality tiles and the side walls are treated with white glazed tile dado upto 6' height. Three water tanks, two of 8' x 5' and 3' depth and one of 8' x 3' and 3' depth have been installed. Heavy-duty nickel plated taps, tube lights and electric bulbs have been provided. The toilet complex is connected to a RCC septic tank approximately 50' x 30' and 10' deep. This tank is connected to 16 brick honey-comb soak pits of 7' diameter and 10' depth or sewer line.

Performance Evaluation

Social Acceptability

The people were, by and large, unanimous in their view that the new Community Toilets do not demonstrate problems like foul smell, broken seats, seats full of sewage, darkness in the cubical, lack of privacy, poor quality of construction, lack of cleanliness, etc. Nevertheless, of an estimated population of around 3,00,000 persons in the two case study colonies, only 4,875 persons use the new Community Toilets. The remaining use either the old community latrines or defecate in the open. The low usage can be attributed to various factors such as lack of civic sense and low income levels. Women use these toilets more than men as they do not have to pay. Also, discussion with staff and local people revealed that the presence of antisocial elements in the evenings defers the women folk and children from using the toilets during that time.

Location and other aspects

The location of the four new Community Toilet Complexes compared to 64 old community toilet complexes restricts people from using them. The adequacy of the new toilet complexes is indicated by the amount of waiting time for their use. In general, support amenities such as water for cleaning and electricity for lighting have been found to be adequate in the recently

built toilets. These are available from 5 am to 10 pm and arrangements can be made for their use round the clock. Maintenance personnel have also been found to be adequate for the number of hours for which the toilet is open. In fact, the only problem observed has been that of availability of adequate water mugs/cans needed for personal ablution as people have inhibitions carrying a can. The amount collected from the users which varies from Rs. 20/- to Rs. 100/- per day is used for the purchase of phenyle, brooms, etc. to keep the toilet clean. Subject to the availability of water, there is no problem in cleaning the toilets and a fair level of hygiene can be seen. The whole area comprising Trilokpuri (Phase I and II) and Himmatpuri is low-lying. During the rainy season, the water table rises and may even exceed the depth of the soak pits. The area surrounding the soak pits is very low compared to the street level in all the four cases and water logging would occur. Thus, the safe performance of the toilets in extreme conditions is highly suspect. In sharp contrast to the New Community Toilets, the old community latrines in Trilokpuri (Phase I and II) and Himmatpuri have been found to be in a deplorable condition. Technically also, the old toilet complexes have many faults.

Conclusion

Apart from new technologies, the involvement of the Government and the people and voluntary agencies are necessary for the success of any such project. The staff need to be trained to ensure the maintenance of cleanliness and proper hygiene.

Notes and References

1. Section 61A of the Panchayat Raj Act 1993 of the Government of Karnataka permits the forming of any such standing committees.
2. For further discussion and data regarding squatter settlement and resettlement colonies in Delhi, refer Mishra. G.K. and Gupta. Rakesh (1981).³
3. Mishra. G.K. and Gupta. Rakesh (1981), *Resettlement Policies in Delhi*, Indian Institute of Public Administration (IIPA), New Delhi 1981
4. Ali, Sabir (1989) *Slums within slums*, New Delhi, CSD.

GROUP DISCUSSIONS

GROUP-I: Government Policies and Schemes on Water and Sanitation

Chairpersons: Mr.U.V.K.V. Sastry, *Director-Programme Operations*, UNICEF and Ms. Shipra, *Programme Officer*, WaterAid

Rapporteur: Ms. Ruchi Jain, ISS, New Delhi.

Awareness of Government Policies

Representatives from *Uttar Pradesh* reported that there is a severe problem of water supply in the villages and the major reason was lack of finance. The problem of water is not just related to its supply but to its quality as well. With regard to the sanitation programme, they informed that there is no use of getting toilets constructed unless water supply is ensured. Delegates from Delhi highlighted the fact that the problem of water and sanitation in outer Delhi/slum areas is not different from the villages of Uttar Pradesh.

Representatives from *Madhya Pradesh* informed that panchayats are actively involved in the sanitation programme. In most of the villages, many Below Poverty Line (BPL) families got the toilets constructed under the Total Sanitation Campaign (TSC). An NGO representative from Navin Bharati Sanstha shared his experience and explained how they are generating awareness related to sanitation issues through training programmes. In Madhya Pradesh, the problem of water is mainly related to its quality and electricity. In some of the villages, though the water supply has been ensured under the government scheme, the content of fluoride is quite high in water. At some places, there is ample supply of water but there is shortage of electricity. One of the important point that came into picture as a result of the discussion was that the problems of water and sanitation are not to be treated exclusive from one another. They are inter-related. The schemes of sanitation will not be successful unless and until the problem of water is resolved. Thus, the government policies have to be multi-dimensional as the discussion revealed how sanitation and water, and water and electricity are inter-related. A zilla parishad member from Madhya Pradesh highlighted that punitive action can also facilitate better implementation of government schemes. In case of Sazhapur, 1500 panches were removed for not implementing TSC in their villages.

GROUP-II: Panchayats and Sanitation

Chairperson: Ms. Niti Diwan, *Journalist*, Bhopal

Rapporteur: Ms. Usha Gopinath, ISS, New Delhi

Sanitation problems in the States

The group consisted of 75 participants. They represented the states of Rajasthan, Goa, Karnataka, Jammu & Kashmir and Chhattisgarh. All the states shared their experiences and problems regarding water and sanitation.

Goa: In this state there is no problem of water and sanitation. All villages have pipelines and all the families Below Poverty Line (BPL) have free water supply. Toilets have been constructed and drains have been built. Drains are cleaned regularly. Panchayats are playing an active role in maintaining sanitation in their villages.

Rajasthan: The state is facing acute water shortage. In villages of Pali district, women have been elected but are unable to do anything as they are not well supported in their cause by the state government. Only one panchayat in Rajasthan found a solution to their water problem. All the villages falling under this panchayat had formed a group, collected around Rs. 70,000/- from the people and deposited with the Delhi Jal Board. In return they were given Rs.7 lakh to make arrangements to provide water to their respective villages. They were also able to construct roads, drains, toilets etc. Therefore, Riyali village has no problem of water and sanitation.

Chhattisgarh: Though underground water is available in plenty, there is acute water shortage in Chhattisgarh. This is mainly because water level is very low. At several places hand pumps have been dug, but at shallow depth. As a result, the wells dry up fast and the water that comes out of the hand pumps is very dirty and muddy and hence cannot be consumed. There are small water bodies in Chhattisgarh but they were snatched away from the panchayats and sold by the influential people of the villages. Women are the most adversely affected by the shortage of water. In Dhamtari district, panchayats have formed groups to create awareness on various issues such as cleanliness, health, domestic violence, drugs, etc.

Jammu & Kashmir: In this state due to militancy, women are not allowed to be elected as Sarpanch¹. However, women have formed groups and fought elections, but lost. In spite of several water bodies in Jammu & Kashmir nobody has taken the responsibility of maintaining it.

Maharashtra: In this state many Self Help Groups (SHGs) have been formed to collect money and start sanitation work in their villages. Some of the awardees of Nirmal Gram Puraskar are doing excellent work to get the universal sanitation work done.

Karnataka: In Belgam, Gadag and Bidar districts Swajal Dhara schemes have been very beneficial. This programme was launched in 2001 and completed in 2004. All the houses have piped water supply, gutters have been laid, there is cent per cent sanitation, concrete roads have been laid and water harvesting has been started. All the Below Poverty Line (BPL) families have benefited. However, some villages face problems due to politics playing its dirty games.

Recommendations made by the group:

1. The participants of Rajasthan felt that a deep bore should be dug near the hand pump. Dirty water from the hand pump can flow into this pit and from here the water will be drained and percolate downwards.
2. Water harvesting system should be started in all the villages.
3. Sharm Dan Yojana was started in a few villages with government support. Government gave Rs.3 lakhs and all the wells were recharged with water. Similar yojana should start in other places.

GROUP-III: Role of Schools in Ensuring Sanitation

Chairperson: Ms. P. Amudha, *Project Coordinator, UNICEF.*

Rapporteur: Ms. Jasmeet Bawa, *Research Assistant, ISS, New Delhi.*

Necessity of Water and Sanitation in Schools

As children spend a long time in schools, they can be trained on the subject of sanitation in the school itself. It is generally found that there are no more than two toilets in schools. There is a dire need for the number of toilets to be increased. Ms. Janaki Chauhan, a gram pradhan from Dehradun, *Uttarakhand* mentioned that very often toilets are locked and reserved for use by the staff. The chairperson suggested that to avoid such problems, the number of toilets for students should be increased and there should be enough breaks for the students to use these toilets properly. To ensure cleanliness, teachers should form committees amongst children and assign them various tasks to collect and store water and also to keep toilets clean in a rotation. Another major problem faced by girl students is the lack of proper sanitation facilities for them. Due to this there is a high rate of drop-outs amongst them. This can be solved to some extent with more lady teachers in the village schools.

The participants of this group also discussed the importance of hygiene. The chairperson presented the 'F-Chart' on how waste matter reaches us: through houseflies, dirty hands, dirty feet, rain water and contaminated food. She discussed various methods of maintaining hygiene, such as, washing hands after use of toilets, use of toilets only, wash smaller children after they defecate, regular cutting of nails, etc.

Having discussed the vital themes related to water and sanitation, the representatives gave a picture of the present situation in their respective states. A representative from Delhi highlighted the fact that there are no sanitation facilities in some schools and colleges of Delhi. Overall it was found that no hygiene training is imparted to the children in schools, and also at home.

Lastly, the chairperson briefly informed the representatives of the various government schemes under which such facilities can be made available in schools:

1. *Sarva Shiksha Abhiyaan* – Children will be educated up to class eighth and by March 2007 all schools will have water and toilet facilities. Under this scheme, the government has allotted Rs.5, 000 to each school for the repair and maintenance of existing toilets and water resources.
2. *Swajaldhara* – to ensure all villages have safe drinking water facility for which 90 per cent of the fund will be contributed by the government and 10 per cent by the village (Annexure V).
3. *Sampoorna Swachhhta Abhiyaan* – Under this scheme the government has allocated Rs.20,000 each for the construction of separate toilets for boys and girls in schools. Seventy per cent of the funds under the scheme from the government and the rest by the village.

The chairperson concluded the discussion by briefing on the major responsibilities of the gram panchayats. She raised the issue of caste discrimination practiced in schools vis-à-vis making such facilities as water and sanitation available to children and almost everyone responded that it was not practiced in schools.

Notes and References

- 1 It is interesting to note that the Panchayati Raj Act of Jammu and Kashmir has no provision for reserving functionary seats for women though recent amendment has allowed not less than 33 per cent quota for them out the membership level. (MPR GOI, 2006).² Yet the delegates who came from that state are not aware of this provision and kept on saying that it is the terrorists are responsible for not electing women as sarpanch.
2. Government of India, Ministry of Panchayati Raj (2006) *The State of the Panchayats A Mid-term Review and Appraisal*, 22 Novemebr Vol.II (New Delhi, Krishi Bhawan).

SPECIAL SESSION

Local Action for Global Challenges

DR. ASH NARAIN ROY, *Senior Fellow*, ISS, New Delhi, who chaired the session, said such conferences provide a platform for people from different parts of the country to share their experiences regarding water and sanitation and its impact on women. He brought in the concept of globalization in association with local issues. He then, invited the speakers to share their views with the participants.

MR. SHAHIR HASSAN, *President*, All India Panchayat Parishad, New Delhi, one of the main speakers, said that a large portion of the population in Delhi inhabiting the outskirts and the slums have no access to water. After visiting almost 35,000 Panchayats in India he felt compelled to approach the issue of sanitation and water from a different perspective. Mr. Hassan reiterated the fact that panchayat leaders should be given powers to take necessary decisions, to avoid any delays. There should be no discrimination between the rich and the poor, the haves and the have nots. Those in power should show regard and concern to those who have elected him/her and work towards solving issues of great concern such as lack of proper sanitation facilities. In his opinion women could play a great role in this and should take the initiative.

MS. KALPAKAM YECHURI, *Project Coordinator*, Rural Sanitation and Waste Management, All India Women Conference, New Delhi, was pleased to see a diverse gathering of women Panchayat leaders from different parts of India. She pointed out the purpose of such convention, was to discuss the difficulties that women representatives face trying to solve various problems. She said that the convention also provides a much-needed space to share experience and success stories.

The speaker explained that earlier nobody looked after women's problems. It is the woman who looks after her home and children. She has to bring water from long distances and take care of domestic needs. Water is so crucial to life, without which one cannot survive. Unfortunately it is the girl child and her mother who have the duty to arrange the drinking water. The present generation of women is lucky to have Panchayat Raj

Institutions where they can express their views and bring changes to people's lives. The members of the panchayat must ensure that the money allocated to them is spent judiciously. She specially referred to the women representatives to increase their awareness and knowledge about funding. There are various programmes available through UN agencies and other funding organizations that may help them to take their task ahead. Once they have direct access to such agencies they may chart out their own course of action. With such facilities at hand they may draw their own plans, rather than following others. In this age, they cannot resist globalization and WTO. Knowledge is crucial to development and such programmes can serve the same purpose. They have to think locally because their problems are local. As every one knows, India is facing the crucial problems of poverty and population. So its' difficulties are different from advanced countries. The customs and traditions of the country are different. So Ms. Yechuri suggested that one should see which customs or technologies are suitable for India and her villages in particular. One suggestion she made is of great significance to rural India. India has the potential to tap solar energy and bio waste to arrive at a solution for many of its issues.

PROF. MARC HUMBERT, *Executive Secretary*, Political and Ethical Knowledge on Economic Activities (PEKEA), France felt privileged to be a part of the conference of women empowerment and talked on "*Local action and Global challenge*". He said that the conference was really a main instrument to global challenges. He said that the responses must be global and challenges like water and sanitation have been analysed at the global level for very long time. He spoke on women's rights and the discrimination against women. Declarations were brought in 1948¹ on Human Rights and in 1979² at the Convention for Elimination of all forms of Discrimination Against Women; but they were not sufficient. There were also problems in access to water and sanitation. There have been decades of development since 1963 and the situation is still unacceptable with more than one billion people suffering from lack of access to water supply and 2.4 billion from lack of access to improved sanitation. The reality is that one out of five people are dying every day because they have not been able to tackle this problem. Twenty-five thousand people are dying because of water pollution and water borne diseases and 80 thousand people are dying because of insufficient food and water and diseases caused due to this insufficiency. This is a situation where everybody must say that the global response has been a failure. The global framework, in which these challenges have been described and analyzed, must be changed as there has been no proper understanding of the situation. He emphasized that it is the task of

the researchers to change this framework and the main task of his networking. Political, economic knowledge and ethical activities through which this challenge can be tackled, with political and ethical approaches being the priority. In the southern region many measures have been taken up and a lot of money has been spent. He said that experts from international and national institutions can help find a solution. To face the challenge, top central organizations must ensure information links and money. But on the whole, local action is required to solve these problems. The projects can be monitored by locals. A new framework of understanding is required at the global level and this need to be explained to experts at the top. If economics is put at the service of humanity and not humanity at the service of economics, it is necessary to rethink the framework in which we are working. For this, the preparation should be based on clear conviction of what is valuable to society and should not be left to the market. It is necessary to decide our priorities, viz., education, sanitation etc., and to make a choice. To conclude he said that to build the new framework there is a need to involve researchers from all the fields of human and social sciences.

Notes and References

- 1 On December 10, 1948 the General Assembly of the United Nations adopted and proclaimed the Universal Declaration of Human Rights—the following matters are discussed in the preamble about the rights of women. These are as follows: (1) Whereas recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world, (2) Whereas the peoples of the United Nations have in the Charter reaffirmed their faith in fundamental human rights, in the dignity and worth of the human person and in the equal rights of men and women and have determined to promote social progress and better standards of life in larger freedom (UN Charter, 1948). <http://www.un.org/Overview/rights.html>.
- 2 The Convention on the Elimination of All Forms of Discrimination Against Women (1979) calls on States Parties to take all appropriate measures to guarantee women “the exercise and enjoyment of human rights and fundamental freedoms on a basis of equality with men” (Freedom to Believe: Upholding the Standard of the Universal Declaration of Human Rights, *Bahá’í International Community’s Statement on the Freedom of Religion or Belief*, October 2005). <http://statements.bahai.org/05-1001.htm>

VALEDICTORY SESSION

Looking Forward: Strategies for Meeting Millennium Development Goals

Chairperson: Ms. Mohini Giri, *Director*, Guild of Services, New Delhi.

Speakers: Prof. Kiran Walia, *Chairperson*, Delhi Commission for Women, New Delhi; Ms. Lizettee Burgers, *Chief of the Child Environment Programme*, UNICEF, India; and Ms. Rita Sarin, *Country Director*, the Hunger Project, New Delhi.

MS. MOHINI GIRI extended a warm solidarity to all the women representatives present in the convention. She said that, the large gathering was a symbol of power. She introduced the speakers of this session and spoke about their contribution to society. She suggested that one should always remember that ultimately it is the sense of togetherness and unity that can help in the success of any project. The second point she made was that just being appointed into a panchayat was not enough. She was confident that the struggle and the process of empowerment would one day take those women representatives to the Parliament. Getting 33 per cent reservation at the higher level of politics should be their ultimate goal. She said that with all the training and the strong determination, it is not a far off dream to win.

Role of Women in Panchayat and Water & Sanitation

PROF. KIRAN WALIA, *Chairperson*, Delhi Commission for Women, saluted all the elected women representatives present in the convention for working hard in rural areas towards the overall development of the community. She pointed out that though Hauz Khas has been a rich constituency in the whole of Delhi, it does not have women in panchayats and this is applicable to all the villages and slum clusters in Delhi. There is no elected body as such to carry forward the mission of women empowerment in Delhi. Delhi has a lot of people who have migrated from other places in search of a livelihood. In such a situation they settle in slums and again it is the women who face the problems of survival.

She also pointed out that the government has been trying to empower women through forming self-help groups (SHGs) with support from Non-Governmental Organizations (NGOs). Though the theme of the convention was water and sanitation she talked about Women in Panchayat because it is a women related issue and can create awareness amongst women. In Delhi issues regarding water and sanitation are taken care of by the Municipal Corporation of Delhi (MCD) and New Delhi Municipal Corporation (NDMC). But the situation is dismal as far as availability of water and standard of sanitation are concerned.

Most of the slums lack the basic facilities of toilets. Apart from the inappropriate location of the toilet complexes, people also have to pay for using it which is a great burden on slum people. This problem gets magnified as one fourth of Delhi's population resides in slums where conditions of life are deplorably poor¹.

The Constitution provides for the right to life but sadly the right to defecate remains outside the purview of this right and here too it is women who face the brunt of things. Lots of girls in some schools prefer not to go as there is no toilet on the school campus. Obviously there is an urgent need to provide for such facilities in the schools.

Apathy on the part of government and corruption in the executive machinery have been responsible for the present situation.

Concluding the speech, Prof. Walia expressed her concern over corruption and misuse of funds resorted to win an election. She explained how corruption affects the existing water and sanitation schemes. She feels that a separate board should be constituted to look after the water supply.

Women can create a safe environment for children

MS. LIZZETTE BURGERS, *Chief of the Child Environment Programme*, UNICEF, India, expressed her pleasure to be with women and wanted to know how many amongst the audience had daughters and sent them to school. She also wanted to know how many could manage to find women engineers in the area of water and sanitation. The answers to her queries were not very satisfactory. Agreeing with Mr. Rajendra Singh, she said that women must become aware of their rights and keep themselves updated. A study shows that during the last 50 years there has been an increase in rural water supply but the quality of water is very poor. She also brought up the problems of guinea worms which has been eradicated with some success. In the 1960s one could find water at eight meter depth, but now one has to dig ninety meters deep in many places to find water. Women need to address the issue of water shortage as it is the children of the country who suffer.

She believed that the issue of water should be addressed by men, women and engineers. Ms. Burgers said that the ground water should be used judiciously. This will ensure supply to 750 million people, which in turn is good for agriculture and generates good income. But we tend to over exploit such a resource by pumping the water more than required. This results in water turning saline and polluted by arsenic and fluoride. About 66 million people are affected because of flurosis or fluoride in water. It is the responsibility of women to ensure that this does not happen. They are the caretakers in many villages and hence make a risk assessment. As the panchayats representatives/leaders, one should know about the risks of drinking dirty water and whether all the members in the community have sufficient water. She said that the problem can be solved by defining the risk like the issue of quality and quantity of water and find out the solution by sensitizing the issue of whether the scarcity is due to excessive usage or due to wastage. Likewise the problem of quality of water can be solved if the causes behind water pollution can be found out. She urged the women representatives to find out the causes of water pollution. Sometimes there is a hand pump or a well polluted with fluoride then find a better source. In some cases one has to explore new sources. Emphasis can be placed on conservation of water through various means including water harvesting.

Ms. Burger also touched upon the problem of sanitation. It is a well known fact that women need a place where they can relieve themselves in privacy. Proper sanitation facilities should be available to keep the environment clean. One gram of excreta contains a lot of pathogens, millions of bacteria, virus, pathogen cysts and eggs. If each of us produces two hundred grams per day and we have five members in a family we have one kg. excreta produced per day. If there is no safe place to dispose of this excreta, it gets into the environment and it is really a risk for the children. In conclusion she remarked that everybody should be aware of risks in their community and need to find out ways to protect children.

Women's Empowerment and Millennium Development Goals

MS. RITA SARIN, *Country Director*, The Hunger Project, New Delhi acknowledged the role of the movement for women's political empowerment which gets initiated through such mass scale convention. She also highlighted the activities of Hunger Project to empower elected women representatives. In the last five years, training programmes have been organized for six thousand women panchayat members by the Hunger Project. During this period one particular incident holds special significance. Responding to the programme a woman from Hoshangabad in Madhya Pradesh said, "I have

little belief in the efficacy of your workshop. We are too powerless to play a meaningful role in panchayats. We don't even have an identity of our own. People think us to be stupid and ignorant and you say that we can arrange for water, help build roads and run schools." She wanted to resign from the panchayat, but changed her mind with an assurance about the ability to do something constructive for the villagers.

She explained that flag ceremony is an important constituent of the training workshops. On the last day of such programme the women panchayat members are asked to collect for the flag hoisting ceremony where these members take oath much in the same fashion as members of parliament do. On one such occasion in Rajasthan a panchayat *Mukhiya* named Sarbati broke down and started crying. When she was asked what had happened she told that she had never got a chance to witness and be a part of such event. She also told that flag ceremony was something she inherently associated with Republic Day and Independence Day celebrations. Since she had never been to school, she had little idea about what it meant. The whole incident suddenly revealed as to how the flag ceremony does not have space for women. But in next Independence Day, Sarbati was a transformed woman. When the Block Development Officer (BDO) of the area rose to hoist the flag she stood up and took away the flag from him and said that she was the *Mukhiya* of the village panchayat and as such had the first right to hoist the flag.

This incident shows how women are now politically empowered. As Mr. Swami Rammurti says, political transformation of villages with women as the vehicle of change is perhaps the only way to take India forward. Ms. Sarin explained about the UN's role in this matter. She explained that UN had recently adopted a resolution that by 2015 AD underdeveloped countries will have no illiteracy and hunger (Annexure I). The resolution also proposes to eradicate malnutrition among children and ensure good health for women. The Millennium Development Goals (MDGs) set by the UN, include eradication of hunger. Women have formed Grain Banks in Madhya Pradesh, Rajasthan and UP to counter the situation. The second goal is to remove illiteracy. Girls are taken out of schools when families pass through bad time. This sets a chain of leaving a large number of women illiterate. On a priority basis many women panchayat members have established schools to promote female literacy.

The third goal is to put a check on 'female feticide' and Delhi has the largest number of such cases. It is a well known fact that many women who after having been to such workshops decided to change their mindset towards the girl child and resolved to treat them on an equal footing with

the male child. Panchayat members have a significant role to play in this regard.

The fourth goal is to remove malnutrition. According to statistics every fourth child in India suffers from malnutrition and here too the gender plays a big role. It is girl child who bears the brunt of it. Another important millennium goal is to ensure good health to the pregnant women. It is well known fact that expecting mothers generally suffer from deficiency of blood. A physically weak woman is not likely to give birth to a healthy child. Ms. Sarin quoted Dr. Amartya Sen's saying that in this chain of malnutrition the unborn foetus can be male too. UN frames policies and goals aiming at the eradication of poverty, illiteracy, and malnutrition but the real vector of change is the people themselves.

Ms. Sarin concluded emphatically that the six thousand women who were trained have changed their priorities. They desire to have more schools, better health and availability of water. Building a temple or mosque do not figure in their imagination, availability of food is their primary concern.

Closing the session, the Chairperson remarked that Rita Sarin put very clearly how the MDGs can be achieved. The most important thing is to achieve self-confidence and also to attend training programmes regularly. Such programmes should be held for both men and women. Various issues like water, sanitation and millennium goals discussed at the conference would give the participants a better perspective of problems that we face in a society. She also suggested to form an all India Federation of Women Panchayat members in order to keep the bond stronger among them.

Notes and References

- 1 The total percentage of slum population to total urban population in Delhi is 15.7% and the number of town /cities reporting slum is 16 (Census of India, 1991). "Census data-1991", *CRS Bulletin*, October 2000, Vol. 34. No.2.

STATE LEVEL CONVENTIONS

1. ANDHRA PRADESH

Hyderabad, April 24, 2006

In Hyderabad, the convention was organised in co-operation with Ekatra, a Delhi based NGO. There were about one hundred elected women representatives and NGO activists from various districts of Andhra Pradesh who participated in the one day convention.

Welcoming the participants to the celebration, Ms. Ghazala Khan, Regional Director (field), Ekatra, Hyderabad, gave a brief introduction to the objectives of the programme. She presented a very brief situational analysis on water and sanitation in India and how geographical inequalities with respect to availability of water affected the demographical growth. Poor utilization of toilet facilities is mainly due to lack of awareness, water scarcity, poor construction, emphasis on standardized design without attention to local specificities and lack of beneficiary involvement. As per the eleventh schedule, the water and sanitation services are devolved to Panchayats, along with minor irrigation, water management and water shed development, drinking water and 'health and sanitation.' But still panchayats are not involved in any of these issues.

Dr. B. Lakshmi, a practitioner of vedic biotherapy also addressed the gathering. She said that since a family's health depends on women, they need to understand the role of water and sanitation in life. She explained the process of water purification, which takes place naturally through specific plants and herbs. Water purification by scientific methods does not guarantee health since in the process of purification some natural elements are lost. Earlier people used peepal and banyan trees, immersion of certain herbs and clay idols in water to purify it. She advocated returning to such practices today for better health.

The second speaker, Ms. Noorjehan, co-ordinator, People's Union for Civic Action and Rights (PUCAAR), said that the organisation was set up in February 2004 during the process of releasing a People's Manifesto of the citizens of the old city of Hyderabad. It was formed as a rights-based group to campaign and represent their issues. Soon after the manifesto release, PUCAAR conducted programs on the eve of the general elections, 2004, to echo the demands of the residents of the old city. Besides voter

awareness programs, PUCAAR organized Open Forums to facilitate interaction between the electorate and the contesting candidates. Some of the success stories were shared by members of PUCAAR, who were courageous enough to fight for their rights and bring about necessary changes in their localities.

During the open session the elected women representatives were invited to share their experiences, achievements, and obstacles with the audience. Ms. B. Shusheela, the ex-sarpanch of Yashwanthpur panchayat district Warangal, stated that she was very active in the construction of a watershed in her village. During her tenure, a pharmacy college and an engineering college were set up and she had an active role to play in that. Moreover, she said that as a result of her initiative the panchayat now has a surplus of two lakh rupees. Now panchayat needs to protect water resources for the future. Ms. Sunitha of Prashant Nagar Panchayat, District Medak contested in the last election for the post of ward member but lost against a rich candidate. However, she is again planning to contest in June this year. She is keen to work for development of her area especially regarding the storage of drinking water as her panchayat faces water scarcity. Ms. Ratnamma, ward member of Aluriwari Palem panchayat, District Guntur, Ms. Narsamma a ward member of Rajipet panchayat, Ms. Gangamma panchayat member of Tuniki panchayat Medak district, described their achievements and problems they face in the villages. They expressed their helplessness due to lack of cooperation from the bureaucrats and other state functionaries for implementing developmental programmes.

Findings of the group discussion

GROUP -A

Theme: Government Policies and Schemes on Water and Sanitation

Chairperson: Mr.Satish, Consultant, Rural Water Management Agency, Hyderabad

- ◆ The number of hand pumps in the villages were not sufficient as per the requirement. Maintenance of these were very poor
- ◆ Government is shunning the responsibility of installing more hand pumps with the excuse that the level of groundwater is depleting.
- ◆ With regard to sanitation the group was of the opinion that funds were inadequate to construct toilets and maintain it
- ◆ Panchayats do not have schemes to take measures to eradicate mosquitoes, houseflies, etc., resulting from bad sanitation
- ◆ Due to lack of water, people bathe once in five days in certain areas

- ◆ Lack of proper information about the schemes to the panchayats/ local people/local NGOs who are involved in the development work.

GROUP-B

Theme: Poverty, Sanitation and Health

Chairperson: Dr. Laxmi, Practitioner, Vedic Bio-therapy.

- ◆ Children do not get proper education because of poverty and lack of toilet facilities in educational institutions particularly in rural areas.
- ◆ People are losing immunity and are falling prey to diseases due to polluted water.
- ◆ Nutritional food is becoming scarce in the villages because of lack of purchasing power and information on these aspects.

GROUP-C

Theme: Role of Schools in Ensuring Sanitation

Chairperson: Mr. Phillips, Director, Divya Disha, Hyderabad

- ◆ School children in hostels are getting food containing bacteria and worms. Toilets are not clean and many times children are made to clean them. Teachers do not teach cleanliness in schools. Drinking water problem in the school persists even today.

GROUP-D

Theme: Panchayats & Sanitation

Chairperson: Ms. Manorama, Member, Loksatta, Hyderabad

- ◆ Many panchayats do not have public toilets. People throw garbage on the roads. Discussion should be done in panchayats and the utility of schemes should be reviewed. SHGs should conduct awareness programmes regarding sanitation. Government should give them financial support for construction of toilets. Compound walls should be constructed around ponds to protect water from pollution.

Some of the issues raised by the interaction between panchayat members and other participants were:

- ◆ Panchayats, till date, work according to the administrative orders of the government. The Sarpanch is not free to undertake any development work in the panchayat on her/his own. Finance is also limited.
- ◆ All panchayats should have basic amenities such as proper drainage systems, drinking water, link roads and housing for all. Government

should give them financial support for construction of toilets, and for other development work.

- ◆ The panchayats should be given powers and authority as may be necessary to enable them to function as institutions of self-government. They should have powers and responsibilities for the preparation of plans for economic development and social justice, and also for the implementation of schemes for economic development.

Valedictory Session

Mr. N. S. Rao, Department of Census, Govt. of Andhra Pradesh gave a power point presentation prepared by Mr. G. Bapuji, Deputy Director, Census Operations, on the availability of water sources in Andhra Pradesh as per the census of 2001.

Table 1		
Drinking water provision from all sources in the state		
Area wise	1991 Census	2001 Census
Rural area	103 lakhs	127 lakhs
Urban area	33.68 lakhs	41.74 lakhs
Total	137 lakhs	169 lakhs

Table 2				
The location of drinking water source type as per 2001 Census				
Area	Within	Nearby	Far from	Total
Urban	24 Lakhs	12 Lakhs	05 Lakhs	40 Lakhs
Rural	29 Lakhs	70 Lakhs	28 Lakhs	127 Lakhs
Urban+ Rural	53 Lakhs	82 Lakhs	33 Lakhs	168 Lakhs

Here 'within' and 'nearby' indicate within the radius of 100 meters for urban area and 500 meters for rural areas. If it is located beyond 100 meters in urban areas and more than 500 meters in rural areas, it is defined as 'far from' the house according to 2001 Census. But this excludes institutional households.

Table 3 Tap source of Water as per the 2001 Census data		
Distance	Rural area	Urban area
Within	16 lakhs	18 lakhs
Nearby	28 lakhs	8.5 lakhs
Far from	6.6 lakhs	3 lakhs
Total	51 lakhs	31 lakhs

(The total population of Andhra Pradesh using tap water is 81 lakhs)

Table 4 Other sources of drinking water in rural area as per 2001 Census (in Lakh)				
Source	Within	Nearby	Far From	Total
Tube Well	1.57	3.4	2.25	7.27
Well	6.5	11	7.4	25
Hand Pump	4.5	26	8.7	15.8

The data shows that the second important source of drinking water in rural area is 'Well'.

Table 5 The percentage of house holds depending on Tap water and Well		
Source	% Of population as per 1991 Census	% Of population as per 2001 Census
Tap	24.39	48.11
Well	35.70	16.49

Source:

1. Government of Andhra Pradesh (1991). Census of Andhra Pradesh, *Village Directory*.
2. Government of Andhra Pradesh (2001). Census of Andhra Pradesh *H Series Tables* "Village Directory."

The Census data reveals that availability of drinking water for households through the source 'tap' is increasing day by day in the state and on the other side the dependence on well source is gradually decreasing.

Table 6 Distribution of households on the source of tap and hand pump/tube well in the districts of Andhra Pradesh		
District	Tap in %	Handpump/Tubewell in %
Hyderabad	91.57	4.85
West Godavari	67.54	16.61
Chittoor	66.64	-
Srikakulam	10.23	-
Vizianagaram	17.63	-
Adilabad	26.88	-
Khammam	-	44.93
Guntur	-	44.00
Mehboobnagar	-	42.83
Karimnagar	-	19.34

The speaker observed that the above table shows that the percentage distribution of households depending on tap drinking water is highest in Hyderabad district with 91.57 per cent and the percentage households depended on handpump/tubewell is highest in Khammam district in Andhra Pradesh. After that Ms. Ghazala Khan extended vote of thanks.

2. KARNATAKA

Bangalore, April 27, 2006

More than 150 women delegates from all over the state, including representatives from the three tiers of the Panchayat Raj Institutions, academicians, activists and NGO representatives attended the programme. Eminent personalities such as Mr. C.M. Udasi, the Hon'ble Minister for Rural Development and Panchayat Raj, Government of Karnataka, Jnanapeeth Awardee and ISS' Chairman, Prof. U.R. Ananthamurthy, Governing Body Member, Mr. C.Narayanaswamy, and Regional Coordinator, Dr. K.Subha, Bangalore attended the programme.

In his inaugural address, Mr. C.M.Udasi said that the Panchayat Raj system in Karnataka is a model for others and that women should play an important role in making them more effective. He stated that Mr. Abdul Nazir Sab, the then Panchayat Raj Minister in Mr. Ramakrishna Hegde's cabinet, started the new experiment with Panchayat Raj Institutions by establishing a two-tier system to fulfil the dream of *gram swaraj* by Mahatma

Gandhi. Mr. Nazir Sab dreamt of providing drinking water to all the villages in Karnataka. He further said that Karnataka gave 25 per cent reservation to women in 1983 itself and thereafter the then Prime Minister, Mr. Rajiv Gandhi, amended the constitution to include the 73rd and 74th Amendments to provide for the establishment of a three-tier Panchayat Raj system in India with 33 per cent reservation to women. However, due to technical reasons, the reservation works out to 43 per cent for women in Gram Panchayats in Karnataka. He also stated that water and sanitation are closely related to women. He gave details of budgetary provisions for providing clean drinking water and for sanitation in villages particularly for constructing toilets. He further said that corruption in the Panchayat Raj Institutions should be curbed if the system has to succeed. He justified the initiative of the Karnataka Government in bringing forward a bill to punish corrupt members and office bearers of the Panchayat Raj Institutions, as the present law empowers only punishment of the officers.

Addressing the audience, Prof. U.R. Ananthamurthy, said that women all along their life fight against dirt and dust cleaning their houses every day. They should now take the fight outside of their homes. Though in many western countries voting right was given to women after a long struggle, in India women got their voting rights immediately after independence. Now that they have been given reservation in panchayat raj institutions, they should prove that they could rule better. Mahatma Gandhi said that men and women were born equal even if they were different. He further said that four people had greatly contributed to the development of Karnataka. Mr. Shantaveri Gopalagowda fought for land reforms, Mr. Devaraj Urs struggled for the upliftment of the backward classes, Nazir Sab established Panchayat Raj system and provided drinking water to all the villages, and Mr. B. Basavalingappa ended the age old custom of human beings carrying night-soil on their heads. Today India has produced great women leaders like Medha Patkar whom women should emulate.

Mr. C. Narayanaswamy said that Gram Panchayats are very important in strengthening democracy in India. Smt. N.S. Suvarnini, President of Sullia Taluk Panchayat in South Canara District, also addressed the participants and said that funds are not properly released and received by the Panchayats for implementing the water and sanitation programmes due to corruption. She said that earlier the Government was giving a subsidy of Rs. 500 for the construction of toilets. Now the same has been increased to Rs. 1500. She called upon the participants to make use of these schemes and implement water and sanitation programmes in their villages.

The technical session was chaired by Dr. B.S.Bhargava, Senior Fellow, ISS and was addressed by Dr. Veershekharappa, Assistant Professor in Economics, Institute for Social and Economic Change (ISEC), Bangalore and Smt. Sathya, Communication Consultant of the Water and Sanitation Cell, Government of Karnataka.

Dr. Veerashekharappa emphasized that active village committees are needed to provide good water and better sanitation in the villages. He said that according to a study conducted in 1986 only 22 per cent of the population in the country was using sanitation facilities. In that year a Central Rural Sanitation Programme was launched to give subsidies for construction of toilets to those BPL. He said that at present the Government of Karnataka has three schemes, called 'Nirmal Karnataka', 'Swatccha Graama' and 'Sampoorna Swatcchata Andolana'.

Smt. Sathya, addressed the participants on the need for pure water and sanitation in the villages and the importance of toilets. She also used visuals to drive home her points. She said that women's involvement in the Panchayat Raj Institutions was necessary to keep the gender balance.

Women should be taught to use water properly since they are the ones who use water the most. She also explained how defecating in the open led to several diseases and also adversely affects the modesty of women. In the next ten years toilets should be constructed in every house hold in every village. No village from Karnataka has won the President's Award (Nirmal Gram Puraskar) but Panja village was trying to get the award. She said that now 'Swatcchata Doota' i.e., sanitary messengers were being appointed to carry forward the programmes on water and sanitation in the villages.

A short documentary film 'Ooru Neeru', in Kannada, meaning 'village and water' was screened by the Water and Sanitation Cell of the Department of Rural Development and Panchayat Raj, Government of Karnataka, for the benefit of the participants. The film focused on the need for pure water and sanitation in the villages to maintain good health of the villagers.

During the interactive session, Mr. Afroze Pasha from Swami Vivekananda Voluntary Organisation, Mysore shared his experiences in getting toilets constructed in the various schools and Anganawadis of Mysore District. Mrs. Shilpa from Harti Gram Panchayat in Kolar District complained that there was no water in the village and hence the toilets could not be used. To this, Smt. Shamala Uday Kumar, President, Channarayapatna Taluk Panchayat said that in Udhmalpet and Gandhigram of Tamil Nadu husk and ash are being successfully used in view of shortage of water. The seminar ended with a vote of thanks by Mr. Ishwarachandra Vidyasagar on behalf of Institute of Social Sciences.

3. ORISSA

Bhubaneswar, June 1, 2006

More than 300 elected women representatives of Panchayati Raj Institutions from different districts of the State along with NGOs, CBOs, SHGs and other guests participated in the convention at Jayadev Bhawan, Bhubaneswar. A wide range of topics covering Panchayats, Water and Sanitation, Government Policies, schemes for water and sanitation were discussed and debated.

Inaugural Session

DR. DAMODAR ROUT, *former Minister for Panchayati Raj*, Orissa, was the Chief Guest. Mr. Karunakar Patnaik, IAS, (Retd). & Regional Coordinator, Institute of Social Sciences, Bhubaneswar welcomed the guests and the participants. Inaugurating the convention, Dr. Rout stressed on how to eradicate corruption at the grassroots level through effective implementation of the Right to Information (RTI) Act. He emphasized the importance of water and sanitation to avoid any water borne diseases. Different dimensions of the government projects like Swajaldhara (Annexure IV), Hariyali, Total Sanitation Programmes etc. were analyzed by him during his speech. He informed the audience about his personal experiences regarding project implementation of Panchayati Raj Department and added that NGOs should have a greater involvement to create awareness.

Mr. Patnaik highlighted the trend of water and sanitation programme and people's participation in local self-government. The right to information was another key area of concern during his address. Ms. Sweta Patnaik began her speech by highlighting the criteria for the Nirmal Gram Puraskar scheme. She expressed her deep concern over Orissa's present low profile in the water and sanitation programme.

Dr. P.C. Rath, Retired Chief Engineer, Public Health, Government of Orissa highlighted the plans and programmes undertaken by the government on health and sanitation from first five-year plan till date. He interlinked health with water and sanitation and life expectancy period. He narrated how the rural people have been mortgaging their property to get better health care facilities. He also pointed out various constraints in implementing water and sanitation programme, coordination in duties and responsibilities at functionaries' levels and role of PRI members.

Ms. Padhi, Chairperson, State Commission for Women, emphasized the role of women representatives in the water and sanitation programme. Referring to the 73rd & 74th constitutional amendments, she said that though

the amendments encapsulate the concerns of the local representatives, there remains conflicting situations between bureaucracy and the peoples representatives. She underlined some of the obstacles in implementing the water and sanitation programme and correlation between duties and rights of the PRI members. Her clarion call was to generate awareness at every level of the society, which will create attitudinal change in people and involvement of women in mainstream of social life.

Plenary Session 1

Chairperson: Mr. Achyut Das, *Director, Agragamee.*

Speakers: Mr. Joe Mediath, *Director, Gram Vikas;* Mr. Arabinda Behera, *Secretary, Department of Rural Development, Government of Orissa;* Smt. Sabita Mohapatra, *President, Zilla Parishad Jagatsinghpur & Mr. S.K. Harichandan, Executive Engineer, RWS Division, Bhubaneswar.*

Mr. Mediath highlighted the disparity of water supply and sanitation in rural and urban areas. He was of view that being poor is not a factor in the selection of beneficiaries while implementing water and sanitation programme. The cost effective problem should be solved through active participation of villagers or beneficiaries.

Mr. Behera explained the policy initiatives of the government regarding water and sanitation programme. He correlated development with water and sanitation programme and its long-term impact for which the cooperation of village committee and NGOs is essential. He discussed the various phases of the programme implementation like panchayats initiative in micro plan on priority basis which ultimately facilitates the implementation of water and sanitation programmes.

Ms. Mohapatra shared her practical experiences during this session. The elected representatives are still ignorant about different plans and programmes regarding water and sanitation of the government and their role in it. Awareness campaigns are necessary for the success of water and sanitation projects. She also discussed the disparity of water supply in slums and non-slum households. On sanitation programme, she emphasized the need for proper planning, and a permanent structure for latrines. She described the reasons behind the failure of rural sanitation and total sanitation programme of the government.

Mr. Harichandan spoke about the importance of people's participation in water and sanitation programme of the government from his practical experiences. He also described various problems in providing safe drinking water.

Mr. Achyut Das in his presidential speech had posed some questions such as how water and sanitation facility for all is possible? Where it is possible? What has been done till now? What is to be done in future and role of Panchayati Raj in it?

Valedictory Session

Chairperson: Prof. Lopamudra Mohanty, *Former Chairperson*, State Mahila Commission, Orissa.

Speakers: Dr. Arun Kumar Tripathy, *Joint Director*, Planning and Development, Health Department; Mr. P.C. Rath, *Chief Engineer PH (Retd.)*, Government of Orissa; Mr. Prasant Jagdev, *President*, Orissa Panchayat Parishad; President, Khurda Zilla Parishad, Ms. Malati Guru, *President*, Nayagarh Zilla Parishad.

Dr. Tripathy was of the opinion that the local people themselves can solve many of the local problems. He discussed characteristics of many of the water borne diseases and their impact on the health and economy of the people. The role of government in the eradication of these problems and the proper utilization of domestic waste were also focused by him. He appealed to the audience to take the initiative to start water and sanitation programme in their own areas/locality.

Ms. Malati Guru was of the opinion that the government does not understand the problems at the grassroot level properly. Hence there are disturbances in water and sanitation programmes. The machinery problems and fund allocation problems were the main factors in the implementation of health and sanitation programmes. Mr. Jagdev reiterated the development of inner qualities like honesty, dignity and sincerity of PRI members in preparing, implementing and monitoring of the water and sanitation programme. He emphasized on the involvement of local people, representatives and officers in the implementation of the projects.

Prof. Lopamudra Mohanty, discussed the influence of local people especially women's groups on the success of water and sanitation programme. She described various dimensions for effective governance in relation to the water and sanitation programme. The involvement of women representative and their development in every aspect of social life is the key area of concern for the development of the society. Dr. Hrudananda Mohanty, Project Coordinator, ISS, Bhubaneswar office extended vote of thanks.

4. TAMIL NADU

Chennai, June 17, 2006

One day celebration of Women's Political Empowerment Day was observed in Chennai in cooperation with EKTA Resource Centre for Women. About 80 elected women representatives from 16 districts of Tamil Nadu, academics, activists and state level politicians came together and discussed various aspects of water, sanitation and panchayats from a woman's perspective. Both ISS and EKTA believe that the elected women representatives have a critical role to play in ensuring safe drinking water, sustainable water resource management, proper sanitation and hygiene within the reach of the community.

Session 1: Women and Governance

Ms. Bimla Chandrasekhar, Director, EKTA, stressed that the need for sanitation should be addressed from a feminist perspective, as women are the worst sufferers when there is lack of water and sanitation facilities. She mentioned about the plans by agencies to completely ban open defecation by 2010 which cannot be a success without intervention of the panchayats. Prof. G. Palanithurai, Head, Department of Political Science, Gandhigram Rural Institute (GRI), focused on women's participation in the Panchayati Raj Institutions. Drawing upon his experience of studying the elected women representatives at the grassroots level, he said that the need at present is to motivate and support women leadership using the framework of the 73rd Amendment to the Indian Constitution. He focused on the societal attitudes that obstruct a pro-active participation of women in governance at the grassroots. He felt that women leaders must take up the issues of malnutrition, safe drinking water and sanitation, as these are increasingly becoming the problem areas in villages. He also referred to issues such as caste discrimination and proxy candidature.

Mr. A. K. Venkatasubramanian, Director, Catalyst Trust, Chennai, focused on women in Tamil Nadu Panchayats and stated that the intrinsic patriarchal structure of the Indian society has kept women dependent and submissive. However, hard work and achievements by the women Panchayat leaders of Tamil Nadu have made them famous at the national level. He stated that women representatives must be aware of all these attitudes prevalent in the society against them and should also have the courage to fight against the same. He encouraged the women leaders to raise issues on safe drinking water and sanitation and assured that a number of groups would extend solidarity and support towards this cause.

Session 2: Panchayat in Education

This session was chaired by Ms. Ajitha (Advocate) and Ms. Renuka (CWDR, Chennai) was the speaker. Ms. Ajitha stated that the elected women representatives must aim at making the villages self-reliant. She focused on the panchayat's role in water management in schools, desilting of tanks and school buildings with proper sanitation facilities. The elected women representatives must be made aware of the rights granted to them by the constitution through the provision of writ. She also spoke about the panchayats not having enough finances to carry out the tasks that are very basic to the people and suggested that the President of India should look into this matter.

Ms. Renuka focused on the critical role that the panchayats must play in imparting education with regard to water and sanitation in schools especially towards the facilities for girls. She pointed that though India has higher number of women leaders in the sphere of governance than any other country, very few participate in governance matters. Attention was drawn towards the 2001 census which not only shows the increase in number of women in education but it also shows the high drop-out rate among girl children. She felt that women leaders at grassroots must focus on these issues. State should take the responsibility of giving society-oriented education that will lead to a reduction in violence against women. Panchayat presidents must take the initiative to improve schools both structurally and programmatically. The panchayat must ensure that all children below the age of fourteen go to school. Since the Panchayat president is the head of the village education committee (she hoped) that they can bring a lot of changes.

Session 3: Panchayats: Water, Sanitation and Waste Management

This session was chaired by Ms. Sheila Jayaprakash (Advocate), and Ms. Saraswati Devi (SAKTI, Pondicherry) spoke in the session. The chairperson advised requested the elected women representatives to be aware of the constitutional provisions and to learn to negotiate. She expressed the need for proper and continuous training inputs on rules and regulations. Ms. Devi stressed on the issue of proper waste management and focused on the importance of toilets and its usages. She hoped that the Panchayat leaders would take effective steps to construct toilets in schools and in all homes in the villages. She also requested the panchayat leaders to take up the leadership in giving awareness trainings with regard to the use of toilets to the villagers.

Session 4: Public Distribution System (PDS), health and sanitation

This session was chaired by Ms. Fatima Burnad (Tamil Nadu Women's Forum, Chennai). She pleaded that the elected women representatives should think independently and understand the root cause of the problems of the people. Criticizing the privatization policies, she felt that the need is to take the real problems and solve them. There is a need to understand how corporates are behaving like zamindaars, making farmers and the artisans feel like coolies. There are serious contradictions visible in so far as the functioning of public distribution system is concerned. On the one hand, there are starvation deaths occurring in different parts of India while on the other hand, there are tonnes of rice rotting in the godowns. The gap between people and the system is growing wider. Various sectors such as health and sanitation are being privatized as the state is failing to take up the responsibilities. It is in this context that the women leaders from the grassroots need to understand their role and should fight for the people and work for the fulfillment of the basic needs of the people.

Session 5: Total Sanitation Campaign (TSC)

Some presidents, ward members and district chairpersons shared their experiences of implementing TSC programme. Ms. Chandrika, President, Tuticorin District panchayat shared the strategies she had adopted to implement total sanitation programmes in her panchayats. She formed committees and had regular monitoring to ensure sanitation in the area. She stressed the need to involve people in the planning and implementation process. Ms. Dhanapackiam, President, Villupuram shared her experience as a hand pump mechanic and the struggle she had gone through before getting recognition at a wider level. She has motivated many families to have individual household toilets and created awareness about the need for toilets at the community level. Her panchayat was selected as the Best Panchayat from among 55 panchayats of Villupuram district and she had the recognition from the Chief Minister. Some of the ward members and the District chairpersons shared their experiences of working in tsunami affected villages.

Session 6: Issues and Challenges Relating to Water and Sanitation

The concluding session was chaired by Ms. Asha Ramesh (Development Consultant, Bangalore) and Ms. Sivakami, IAS (Chennai). Ms. Asha Ramesh concentrated on contemporary India. Citing the instance of Karnataka where reservation at the grassroots for women was there even before the 73rd amendment, she mentioned the names of enthusiastic leaders

such as Nazir Sab whose insistence has brought such changes. Recollecting the long struggle by women of India since 1974, she looked at the issue of political participation of women not as the result of a top-down but as a bottom-up process. Ms. Ramesh, who was working with WaterAid, encouraged the representatives to take up issues relating to water and sanitation as they are very basic to all and more so for the intimate needs of women in the rural communities. She stated that most cases of violence against women such as rape and molestation happen during times when they go to the open field to attend the call of the nature in the absence of sanitation facilities near home. These issues are rarely discussed by the policy-makers whose focus on women's issues are very peripheral. She also drew attention towards the issue of including the perspective of dalits who are often discriminated against in the process of installing toilets and water taps. She concluded with a demand that management of water and sanitation must be handed over to women's groups at all levels, as they will understand the needs in a much deeper manner.

Ms. Sivakami inspired women to remain as collectives at different levels and also to take up issues that have political dimensions. The need now is to build alternative forums where women's issues can get their due visibility. She stated that Indian women are taught to have only one world that is the home and is also asked to divert all her energies to maintain the family. We must recognize the gendered nature of these institutions including that of marriage where the woman has to be younger and less educated than the man. This helps the man to control the woman. The entire focus is to make the woman a dependent and submissive character. In the higher position it is men who have historically been there but the trend is gradually being challenged by women. She pointed out the low representation of women candidates in the State elections held recently in Tamil Nadu. She lauded the efforts of SWATI, a women's federation in Karur district that facilitated two of their women to contest in elections. She expressed the need to give trainings on social issue that will inspire women to take up leadership roles. She also felt that there is a need to bring more women into the political set up through building up women's collectives in the field of politics.

Ending the session, Prof. G. Palanithurai shared his thoughts on strategies that the elected women representatives should adopt:

- ◆ Be aware of all the constitutional rules and regulations
- ◆ Understand the implications of being leaders from the grassroots.
- ◆ Give attention to develop Common Property Resources (CPR)
- ◆ Make provisions for due participation of women in different spheres of village life

- ◆ Take up unconventional roles such as that of booth agents
- ◆ Attend substantive training programmes
- ◆ Using the Right to Information Act (RTI), try to accelerate the implementation process and also the follow-up process.

Resolutions Adopted by the Conference at the National Level

At the conclusion of the two-day conference the following resolutions were adopted:

1. The provisions of the 73rd Amendment of the Constitution was included in the Panchayat Acts of the state and the Regulations of the Union Territories. Suitable provisions were made in their Acts/Regulations delineating functions between them with regard to water and sanitation. In spite of this, the situation remains grim. Nearly 7 lakh persons die every year due to water borne diseases. Realizing the imperative need for pure drinking water and sanitation, the conference resolves that the central and the state governments take effective steps to ensure implementation of the relevant projects/schemes.
2. There is need for proper planning at different levels of the panchayats and at the government level to ensure that the schemes are need-based and implemented in a manner as may be suitable for a specific area.
3. As there are regional variations in the economic and social conditions in different states, uniform approach to meet the challenges of drinking water and sanitation may not work. The technology to be adopted in water harvesting or toilets should be cost effective. Testing laboratories for drinking water need to be established at suitable centres. The conference recommends that the government should take initiative for this.
4. Taking note of the depleting water level, the conference strongly recommends that indiscriminate use of ground water must be stopped. Serious threat is posed by the rich in the countryside and the corporate companies such as Coca Cola exploit water to an extent that the local people face acute scarcity of basic drinking water and the water available is detrimental to their health. The conference feels that there is a need for legal protection and a suitable central legislation in this regard soon.
5. Water management – including conservation, rainwater harvesting and balanced utilization – be entrusted to specific groups to be formed as ‘pani-panchayat’ under the gram panchayat and the gram sabha and be given due authority and fund to discharge their

responsibilities. It is being done in some states such as Karnataka. The conference felt that this device needs to be adopted all over the country. The committee in charge should have adequate representation of women as they face formidable problems and it is with their active support that wastage of water can be prevented and water conserved.

6. The conference felt there is need for very close coordination between panchayats at different levels and concerned authorities including the government for proper water-toilet management in the field. Regular review and monitoring by the state and central government may help. The conference recommends that suitable steps be taken by the state and central government for this urgently.
7. Importance of education and training cannot be overemphasized. Apart from panchayat functionaries and NGOs working in the area, village youth, both men and women, should get opportunity for education in this field. They may also be encouraged to have specific training in this respect in reputed institutions in the country. This will need appropriate funding. The conference recommends that the central and state governments should take appropriate step in this matter.
8. It is necessary that water and sanitation be included in the textbooks from standard V to XII. Pre-primary and primary schools should initiate training of children in hygiene and health. Suitable literature will be necessary for study and research.
9. There is need for adequate media support. The conference recommends that media should help in creating awareness among the people.
10. NGOs and others working in villages in the field of drinking water and sanitation – as also in others, should work according to the village plans and be made accountable to the panchayats/gram sabhas. This needs due legal support apart from guidelines and directions. The state governments should make suitable provisions for this in the Panchayat Acts.
11. The conference feels that it is not possible to achieve the goal of full sanitary conditions in a village and supply of adequate water for different purpose without full support of the people. The panchayats will take all steps for and create awareness among them through different methods – organizing *prabhat* services, holding meetings, etc.

What should be the Role of Local Governments: Delivery of Services or Governance of Service Delivery?

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[Paper presented at the state convention, Bangalore, 27 April 2006].

1. Introduction

In India, the local government has been conceived as an instrument for promoting conditions for holistic development at the grassroots levels, because of its closeness to the people. The local governance has also proved competitive in delivery of services like promotion of education, health care, and poverty elimination programmes etc (Slater and Watson 1993; Singh, 1999; Crook and Manor 1998). However, the governments have been considering greater roles for community, NGOs and private sector in the delivery of services, including water supply and sanitation services. This approach has been initiated considering the limitations of the government and the changing demand for the quality of services. This necessitated to re-draw the programmes to replace target based supply-driven approach by a participatory demand-responsive approach (DRA).

And this approach has been supported on the assumption that, it will provide a place for raising the voice and choice in choosing technology for the stakeholders (Rao and Veerashekharappa, 1989; Harmeyer and Mody, 1997; Pushpangadan and Murugan, 1998); in a way, it will minimize the role of bureaucrats in the allocation of funds and pave the way for a decentralized funds allocation and stakeholder participation (Saleth and Dinner, 1999). The results have shown a positive correlation between participation and effective delivery of services to the poor community (Prokopy, 2004) and studies appreciated the replacement of state's monopoly by community participation in service delivery. However, some scholars and practitioners are pessimistic on this approach considering ground realities. According to them, the community participation places unfair burden on the people, in general and in particular on poor (Oakley, 1991) and they are made to participate against their will (USAID, 1993). Community participation is skewed in favor of socially and economically well off households and in the process; it may yield for class and caste conflicts (Veerashekharappa, 2002a).

Nevertheless, in India, presently both the approaches are being practiced by central as well as state governments in programme implementation; the first approach is followed in regular programmes on schemes where funds are provided under budgetary allocation, etc. The latter approach is followed in the funded projects by bilateral and multilateral agencies and central

government sector reform programme¹. However, a review shows that both the approaches have limitations in the provision of services effectively and this has been attributed to poor functional specification. For instance, following the 73rd Constitutional Amendment, gram panchayats have been entrusted with the responsibility of operations and maintenance of assets. However, a responsibility in this context had been 'poorly defined' (World Bank, 1999) (Annexure VI). Second, the resources made available were inadequate. For instance, the grants provided for the maintenance of water supply schemes were not based on any scientific calculation particularly in the case of larger habitations, Further, under demand driven responsive approach the community should share part of capital cost and own responsibility of operation and maintenance cost by collection of user charges. But, in many villages community could not contribute its share to capital cost for project to create demand (Rajashekhar, 2003). In many villages the collection of user charges has not been enforced (GOK, 2002a). Subsequently the community participation model had shown mixed results in sharing capital cost as well as owning full responsibility of operation and maintenance of assets (Veerashekhara, 2006). In this context, this paper examines the current and potential role of local government in its governance in provision of essential services with the following objectives:

To identify the mandated functions of the local government in Rural Water and Sanitation Supply (RWSS) sector;

To assess the coverage of services, and processes that they are required to follow in delivering the services;

To identify constraints in the delivery of service at the level of local governments.

The information base for this paper has included published secondary data (annual reports, sectoral reports, etc), legislation and government orders, and studies carried out by the various scholars and practitioners.

2. Drinking Water Supply

2.1 Introduction

Providing potable drinking water and sanitation is a state subject. Yet, the central government is enhancing increasingly its role in policy direction and provision of services through extending grants and loans. As a consequence, Accelerated Rural Water Supply Programme (ARWS) was initiated in 1972-73 to cover entire nation and presently it is known as National Drinking Water Mission (GOK, 1998). In addition, Swajaladhara Programme (Annexure V) was introduced under sector reforms in the year 1999. The

state governments was integrated in this programme by offering suitable incentives. For instance, 20 per cent of the total outlay was earmarked to those states, which have implemented reforms. Despite of it many states were not coming forward to utilize funds earmarked for specific purpose, such as creating awareness and monitoring information system (MIS) under sector reforms (Veerashekhara, *et al* 2006). Similarly, for provision of sanitation services, the central government had introduced the Central Rural Sanitation Programme (CRSP) in 1986; and it was restructured as Total Sanitation Campaign (TSC) 1999. This the programme not only provides the individual household latrines, but also extended support for the construction of Community Sanitary Complexes in the habitations to overcome space constraint. In addition, service schemes such as washing platform, bathing rooms and multi-service complex were provided with a budget of Rs.2 lakh. The construction cost to be shared by Central, State Government and the communities in the ratio of 60:20:20. Thus, under TSC community contribution enforced to share the capital cost, and by creating a sense of ownership, the job of maintenance of the created assets was assigned to the community.

2.2 Situation in the state

The Karnataka State's vision was to provide accessibility of potable water to entire rural habitations (56,682) by 2010 in conformity with the national norms for rural water supply (GOK, 2000b), which was ahead of Millennium Development Goals (MDG). In this context, in addition to the Central government support, the State has been making all efforts to provide safe drinking water services in rural areas and towards this, Rs. 2,000 crores, have been spent exclusively on water supply in last 20 years under the scheme. Further, State has carried out mapping activity for the three tiers of panchayat raj institutions to provide for better service delivery. The funds required for investment was drawn, in addition to budgetary allocation from central, state and donor agencies in the form of grants-in-aid. All funds received have been classified into three viz., central government, state government and external aid (Box 2.1). The funds from external sources (bilateral and multilateral agencies) were channeled through the Rural Development and Panchayati Raj ministry, under separate directorate of Project Planning and Management Unit (PPMU).

Box 2.1		
Source of Finance for Water Supply and Sanitation Projects		
<i>Central government</i>	<i>State government</i>	<i>External aids</i>
Accelerated Rural Water Supply (ARWS) ² , National Drinking Water Mission (renamed as Rajiv Gandhi National Drinking Water Mission ³) Sector Reforms Programme ⁴ , Swajaldhara Total Sanitation campaign MP funds	Minimum Needs Program ⁵ (MNP) and other programmes ⁶ (Drought Relief Programme, MP and MLA Development Fund, etc), resources from panchayat (local tax and tariff) Nirmal Grama Yojana, Swacha Grama Yojana. Legislature Fund.	World Bank ⁷ , Danida ⁸ and Netherlands ⁹ etc.

2.2.1. Activity Mapping

As mentioned earlier, the three tiers do hold responsibility in providing potable water. Zilla Panchayat is the top-tier body of the PRI system in the state; members consist of three types viz., elected members, Taluk panchayat members and MPs, MLAs, and MLCs of the district. The ZP performs the functions specified in Schedule III, subject to funds provided by in central and state governments. It monitors programmes in its monthly review meetings attended by chairpersons of standing committees and District Officials. Further, the Education and Health Standing Committee does monitor the functions of health services, hospitals, water supply and sanitation (section 186). The Taluk Panchayat performs functions specified in schedule II, subject to provision of funds by the center and the state. It is anticipated that involvement of PRIs will help to correct the imbalance in emphasis on preventive and curative services by reflecting local priorities leading to equal if not higher emphasis on water and sanitation services.

Table 2.1
Activity mapping with regard to Drinking Water Supply

Activity	Distribution of functions		
	Zilla Panchayat	Taluk	Grama Panchayat
Development of water supply system	Formulating major water supply schemes. Technically appraising and approve schemes proposed by TPs and GPs. Awarding contracts for the execution of major schemes outside TP and GP plans. Establishing water-testing laboratories for the control of chemical and biogenic impurities.	Formulating projects and seeks technical approval from ZP. Construct schemes within the prescribed cost limits for TPs.	Identifying schemes and locations, estimates cost and formulate projects through the involvement of Gram Sabha. Constructing wells, tanks and village water supply schemes of its own or as assigned by the ZP or TP periodically chlorinating open wells and treat water. Ensure proper distribution of water to all households in its villages. Collecting water sample for testing.
Monitoring water supply schemes.	Monitor and supervise the progress, quality of work and target achievement.	Monitor and supervise progress and quality of works.	Monitoring scheme implementation and report progress.
Maintenance of water supply system.			Maintain drinking water schemes, collect water charges and appoint operators wherever necessary.

The Ministry of Rural Development and Panchayati Raj is assisted by principal secretary for day-to-day work. In turn, he is assisted by three senior executive viz., Director, Rural Water Supply and Sanitation (RWSS), Director, Project Planning Management Unit (PPMU) and Chief Engineer Rural Development Engineering Department (RDED). The Ministry gives direction to RDED in selecting habitation and the scheme to be implemented in those areas. The PPMU takes care of the sponsored bilateral and multilateral and sector reform projects, under the Karnataka Panchayati Raj Act 1993.

According to activity mapping, the major responsibility with Zilla Panchayat is development of overall water sources, formulating new water schemes, monitoring water quality and construction work. The Taluk Panchayat plays a supervisory role in augmentation of water sources. Under the new Act, the Grama Panchayats (GPs) have been assigned a comprehensive functions on sub jects enumerated in the 11th schedule.

The village panchayat in the rural sector have been endowed with certain specific responsibilities, most of which are civic in nature. The GP takes care of provision of adequate water and operation and maintenance of the scheme. Eventhough, these are statutory responsibilities, presently the central and state government share part of operation and maintenance cost. But in recent years, the government is proposing to gradually withdraw and make GPs to meet the cost. In demand driven projects, the operation and maintenance cost is met by community in addition to sharing the part of capital cost. For instance, an Integrated Water Supply and Sanitation (IRWSS) project, 30 per cent of capital cost has to be shared by community towards construction of sanitation services. Similarly, Government of India is considering to make it statutory in all externally funded projects. This approach is intended to reduce the budgetary expenditure on operation and maintenance; as of now 40 per cent of total allocations is spent on operation and maintenance (Veerashekhara, 2006). But, experience shows that sharing capital cost by the community has remained as a myth rather than reality in general and particularly in IRWSS programme (*ibid*) as the entire burden of maintenance of assets gets transferred to GPs. Eventhough, the central and state governments are allocating funds for operation maintenance to these schemes; the local governments are unable to mobilize resources.

2.2.2. Household coverage

In spite of investing huge funds under various programmes by governments, still 20 per cent of the households in rural Karnataka do not have access to potable drinking water (Table 2.2). Even the available accessibility indicates only to the capacity of the water supply works to deliver the service under optimum operating conditions and not to the actual quantity of water supply. To cover the uncovered and partially covered households, the schemes requirements are, 7,749 piped water supply systems (PWS), 8086 Mini water supply (MWS) systems 8,086 and 48,020 bore wells with hand pumps (BWH). Thus, the total number of schemes required is 63,855, which works out to be on an average more than one scheme per habitation (GOK, 2000) and meeting this demand by local or State government in short duration is considered to be very difficult.

Sources of drinking water	Karnataka			All India		
	Total	Rural	Urban	Total	Rural	Urban
Tap	58.89	48	78.43	36.7	24.3	68.7
Hand pump	17.11	23	6.19	35.7	43.2	16.2
Tube well	8.56	9	7.51	5.6	5.7	5.1
Well	12.40	16	6.48	18.2	22.2	7.7
Others	3.04	4	1.4	3.9	4.5	2.2
Percent of households with Safe Drinking Water Supply						
Potable sources	84.56	80.00	92.13	78.00	73.20	90.00

Note: Others include tank, pond, river canal, springs and any other.

Source: Government of Karnataka (2001), Census Report.

In addition to coverage of households with potable water another task is maintaining the quality of water. Presently, the government has identified 37 per cent of habitations facing the problem of chemical contamination in excess of prescribed limit, indicating the poor quality of drinking water (*ibid*) and the number of habitation covered under the submission to reduce chemical contamination is a small fraction of the total number of quality affected habitations. Further, studies by independent researchers and agencies have revealed that due to the lack of skilled persons and the resource crunch the GPs have become inefficient in delivery of services (Rajsekhar and Veerashekharapa, 2003), and this has compelled 20 per cent of households to depend on their old sources (Veerashekharappa, 1999). And lack of efficient maintenance system as many as 21 per cent of BWH,

7 per cent of MWS and 7 per cent of PWS schemes were found defunct at a given time (GOK, 1998). The High Power Committee reveals that 13 per cent of BWH, 15 per cent of MWS and 19 per cent of PWS schemes had irregular water supply. In fact these villages have exclusively depended on those sources (GOK, 2002b). In addition, the fully covered habitations that had been affected with quality problems were estimated to be 5,810 (GOK, 2000). This highlights the crux of the problem faced by the sector.

2.2.3. Operation and maintenance of sources

According to activity mapping, the provision of potable water to the village community becomes mandatory to the grama panchayat. But, the job of maintenance of sources has been assigned to two institutions. The operation and maintenance of PWS and MWS is assigned to GPs, whereas the maintenance of BWH is assigned to TP. The cost of operation and maintenance of the system depends largely on the type of systems established. Costs of a system is determined depending on the location, population covered, distance of water source and spread of the distribution network, etc. As for example, a piped water supply schemes costs between 10 to 15 lakhs of rupees. Similarly, a mini water supply scheme costs between Rs. 1 lakh and 2 lakhs and a bore well with a hand pump costs between Rs. 30,000 and Rs. 40,000. The annual maintenance cost of these schemes is between 5 and 10 per cent of their capital cost, but the government provides financial support for maintaining them at Rs. 8000 for each PWS, Rs. 3500 for MWS and Rs. 600 BWP scheme. This grant does not even match one-fourth of the total expenditure incurred in a year to maintain each scheme. To fill the gap, GPs are to generate own revenue to meet the operation and maintenance cost of PWS and MWS. The TP has also been depending for resources entirely on the government.

Table 2.3
Expected Cost in Provision of Different Services

Cost	PWS scheme	MWS scheme	BWH scheme
Per capita investment costs	10-15 lakh	1-2 lakh	30-40 thousand
Cost of operation and maintenance	5-10 per cent	5-10 percent	5-10 percent
Per annum maintenance cost in Rs (approx)	1-1.5 lakh	10 to 15 thousand	3 to 4 thousand
Amount provided by Government.	8000	3500	600

The GPs generate revenue through tax and non-tax sources; under non-tax, the user charges are collected against the provision of drinking water to the households. But, in fact, 20 per cent GPs do not levy any user charges, followed by 42 per cent of collection between Rs. 5 and 10, which is collected as part of property tax. Most of the households are reluctant to pay even this small amount as they still feel that GP should provide water free of cost and it is a statutory responsibility of local government. To overcome this problem, the Karnataka Government issued an order to all GPs fixing a minimum of Rs. 25 per private household connection (PHC) and Rs. 5 per household drawing water from stand post (SP), but, many GPs could not put it in practice due to a lack of political will, inefficiency in provision of services and plugging the loopholes, etc. Most of these activities have taken place with instigation of political leaders (Veerashekarappa, 1999). It was observed in one village that the GP president installed a Stand Post adjoining to his house and used it exclusively with nominal fee. Further, the assignment of BWH maintenance to TP caused enormous delay in maintenance, as the GPs could report the functional failure of BWH to TP but it could not pressurize them due to hierarchical issues. All these constraints and inefficiency have caused inadequate and untimely decrease in water supply.

3. Sanitation Services

3.1 Introduction

As mentioned earlier, the Government of India introduced reforms in Central Rural Sanitation Programme (CRSP) and restructured it as Total Sanitation Campaign (TSC) in 1999 which was a step towards realizing the suggested reforms in the sanitation sector. This approach was based on 'demand driven' intended to bring efficiency in the delivery system and integrate stake holders in implementation of the programme (GOI, 2002b). In fact, this new approach was based on the findings of a survey conducted by Indian Institute of Mass Communication (IIMC) (1996-97). A comprehensive Baseline Survey on Knowledge, Attitudes and Practices in rural water supply and sanitation showed that 55 per cent of those with private latrines were self-motivated. (The survey was conducted by IIMC in 1996-97).

3.2 Sanitation in the State

Since independence, the Karnataka state is having policy to provide sanitation and services to all the villages including construction of individual latrines. The 20-point CRSP programmes have facilitated to address the issue in a systematic and organized manner. However, the CRSP had the weakness

of ignoring the households Above Poverty Line (APL) and covered only Below Poverty Line (BPL) households for whom it was always a priority (GOK, 2000). The Mysore Zilla Parishad addressed this weakness by extending subsidy to all the households and named the programme 'Nirmal Grama Yojana (NGY). The outcome was very positive and encouraged by this; the state modified the scheme suitable and extended to the entire state on 2 October 1995.

3.2.1 Nirmal Grama Yojana (NGY)

As mentioned above, the programme was extended to the entire state and the required funds were allocated under the Minimum Needs Programme (MNP). Rs.2,000 and 1,200 were paid per latrine for households Below Poverty Line (BPL) and Above Poverty Line (APL) respectively. The programme was executed by NGY committee at village level, consisting of GP members, teachers and health workers. Of the total funds allocated under this, 10 per cent was earmarked to create awareness through various campaign modes. In order to popularize NGY latrines an amendment was made to the Karnataka Panchayat Raj Act 1993, in 1997. Accordingly, the elected member of the GP was required to construct an Individual Household Latrine (IHL) for the use of the family, failing which the member would forego the membership. Thus, construction of latrine becomes mandatory among elected members. The amendment helped to construct 45,000 latrines in two months time, but later this circular was withdrawn on a High Court order. Despite all these efforts, the set targets had not been achieved under NGY (GOK, 2001). Since this programme was not a success in villages, in addition to it a comprehensive Swachcha Grama Yojana programme was also introduced with the financial assistance from HUDCO. But it was based on demand driven approach.

3.2.2. Swachcha Grama Yojana

The Swachcha Grama Yojana (SGY), is an integrated approach, which consists of five important elements, viz., a) paving of internal roads and streets of the village, b) construction of sullage and storm water drains, c) removal of manure pits from residential areas to community compost yards, d) providing smokeless *chullas* and e) construction of household, community and school latrines (Table 3.1). Thus, the programme is considered a comprehensive package to keep the village clean. The capital cost is mobilized from HUDCO, State Government and Community in a ratio of 80:20:20 respectively. The grama panchayat will empower users groups through Village Water and Sanitation Committee (VWSC) to construct household latrine provided they have a minimum space for it. It is made mandatory among the households which are constructed with financial assistance of

the government such as *Ashraya* and other housing schemes to have household latrines.

Services provided	Amount (in lakhs)
Paving of internal roads and construction of efficient sullage and storm water drainage	10.0
Provision of community compost yards and removal of manure pits from dwelling area	1.25
Provision of smokeless <i>chulhas</i> for all the households	0.75
Construction of household latrines and community latrines	6.00
Construction of school toilets	2.00
Total	20.00

Source: GOK, RDPR 2002

3.2.3. *Integrated Rural Water Supply and Sanitation (IRWSS)*

This programme was implemented through stakeholders' participation, by forming committee, such as VWSC. To help the committee members a NGO was hired in each district to create sufficient awareness on the need of environmental sanitation by posting required staff at the village level including health facilitator. The 'health facilitator,' creates awareness for construction of latrines in general, particularly among women, by explaining the relation between sanitation and health profile of household members. In fact, approval provided a platform to empower women to interact with various persons and raise their voice and choice in the selection of technology. The by-laws of VWSC provide an opportunity in execution of water supply and sanitation services. The IRWSS integrated the construction of latrines along with water supply, habitation component and sanitation. The village community shares 30 per cent of capital cost for sanitation and participates in implementation.

According to the by laws of VWSC meetings have to be held at least bi-monthly to discuss the progress and follow up action. But, in practice only 43 per cent of the meetings were held as per schedule, Thus, the programme has given an opportunity to comment and to participate but in practice the villagers couldn't utilise the potential effectively.. The IRWSS programme

in 22 districts, expected to cover approximately 2,000 habitations, with the support of extended agencies such as World Bank, DANIDA and Netherlands (Table 3.2).

Table 3.2 Details of Programme under IRWSS			
Indicators	District and habitations covered under multilateral and bilateral assistance		
Districts	World Bank	DANIDA	Netherlands
	Villages covered	Bangalore Rural, Kolar Mandya Mysore Shimoga Hassan Dakshina Kannada Bidar, Gulbarga Raichur, Bellary and Tumkur	Kolar Bagalkot and Chitradurga
	1104	201	719*

Note: *Schemes

Source: GOK, 2002-03, Annual Report

However, the demand driven approach was defeated, as the upfront contribution was not mobilized in some villages before tendering of villages for the construction work. This had a subsequent negative effect on the provision of sanitation services in general, particularly construction of drainage services. The amount spent on creating awareness and mobilization of community contribution was more than what was collected as community contribution in couple of villages (Veerashekhara, 2006). If one compares the project and control village, the problems were the same or worse and not any better in project village. This was due to lack of accountability among the actors involved, while implementing the project.

3.3. Role of Panchayati Raj Institutions

Table 3.3 presents the extract from activity mapping. The zilla panchayat acts as planner and adviser in the promotion of the programme for the entire district; the Taluk panchayat was assigned the supervisory role with obligatory functions such as formulation of plans for assisting in the construction of sanitary latrines. The grama panchayat has been assigned various functions, including execution, supervision and assisting in implementation. From the table it can be observed that it is obligatory on the part of the gram panchayat to perform the above functions.

Empowerment - 2006

Table 3.3
s the three tier with respect to water and Sanitation

Activities
Approaches suggested (under section 184) Establishment of health centers including maternity centers to cover the entire population within five years Construction of underground water recharge structure to ensure availability of water in the wells Prevention of drilling of irrigation borewells in the vicinity of drinking water wells to ensure adequate supply of water.
Approaches suggested (under Section 145) Construction and augmentation of water supply works Facilities not less than 40 liters per capita Providing adequate water supply and promoting sanitation Maintenance of water supply and sanitation Acquiring land for locating manure pits away from dwelling houses Water supply works. Households and community latrine Progress of immunization. Strengthening of public health units. Establishment of sub centers. School health programmes equipment and linen supply promotion of health and family welfare health and sanitation at fairs and festivals
Approaches suggested (under sections 68, 69, 75, 77, 82, 85 to 92, 99 etc) Not less than ten per cent of the households to be covered by latrines in a year. Construction and maintenance of adequate number of community latrines for men and women. Notifies owners for improving the sanitary condition or keeping clean drainage or constructing of drainage if the place is unsanitary conditions affecting health. Carry out drainage, sewer, conduit, tunnel, culvert, pipe or water course. Maintaining, deepen or improving of the drainage Constructing of new drains. Inspection of drains Earmarking places for dumping waste and manure Facilitating activities that are likely to promote health, safety etc., .Prevention and remedial measures against epidemics Disposing of corpses by burning or burial, licensing of place for burial Inspecting the places where infectious disease is reported or suspected, cleansing or disinfecting building or premises Strict vigil and inspection of hotel, restaurant, eating house, sweet meat shop, bakery, slaughter houses for maintaining hygiene and cleanliness, impose penalty

3.4. Coverage

In spite of all the above policies and strategies, the coverage was not much encouraging in Karnataka. According to latest data only 22 per cent of rural households have access to latrines (GOI, 1999; GOI, 2001) thus, more than 78 per cent do not have access to safe and hygienic latrines. In Karnataka (Table 3.4) 82 per cent in rural households are not covered by any type of toilets. Thus, despite of several programmes being implemented by the Government of India, State and bilateral and multilateral agencies, the number of household covered by latrines has not been much impressive (World Bank, 1999).

Sanitation Services	Karnataka			All India		
	Total	Rural	Urban	Total	Rural	Urban
Types of latrine within the house						
Pit latrine	13.38	9.48	20.70	11.5	10.3	14.6
Water closet	18.64	4.67	44.86	18	7.1	46.1
Other latrine	5.48	3.25	9.67	6.9	4.5	13
No latrine	62.50	82.60	24.77	63.6	78.1	26.3
Type of connectivity for waste water outlet						
No drainage	48.77	64.61	19.03	53.6	65.8	22.1

Source: Government of Karnataka, 2001. Census Report.

The reasons attributed for low coverage were religious beliefs and culture. But one may not agree with the cited factors because the Indus River valley is known for sophisticated sewerage systems and toilets (Pathak, 2001). Perhaps in later centuries the attitude and practices concerning defecation and disposal of human waste got changed (Cooper, 1997). Thus, the accessibility of hygienic latrines is regarded as a matter of individual initiative (Veerashekarappa, 2002). However, some of the main constraints to fulfill universal sanitation have been:

- Lack of space because of closely built houses
- Non-affordability among poorest of the poor
- Non-suitability of the site due to rocky strata or water logging
- Reluctance of people to have latrines located next to or within their houses; and
- Low priority to the Individual Household Latrine (IHL).

Further it was observed that NGY (Nirmal Gram Yojana) was not much successful. People participation in yojana is relatively less because

of monetary contribution to meet partial capital cost. Since the IHL has a low priority the latrines are used as a store house. Nevertheless, villagers expressed dissatisfaction at the unhealthy tendency of creating parallel structure of governance for implementing/monitoring specific projects (such as forest user committees, irrigation water user committees), which were otherwise under the jurisdiction of the PRIs. In fact, this neglects the forum of community participation system under the Panchayat Raj, i.e., Gram Sabha or Ward meeting in which all the adult residents of the community participate.

4. Conclusions and Suggestions

The above analysis brings out two factors, what functions are to be undertaken by the PRIs with regard to potable drinking water and sanitation. Based on the experience, it can be stated that the GPs are unable to deliver services effectively due to non-availability of funds as well as required skilled manpower. The community participation approach through capital sharing neither helped state to save public expenditure under operation and maintenance cost nor weaker section exchange participation. Thus, both the approaches have shown their limitation in the effective delivery of services by local government as well as community.

The GP can take up the governance function rather than owning the burden of service delivery, as both the jobs are conflicting in nature. If the GP finds it difficult to govern the delivery of services on its own, the GP can outsource the function to VWSC or other civil societies under Section 100 and 106 of the gram panchayats. At the same time, anyone appointed by them is empowered to inspect any sewer, drain, privy, water closet, house-gully or cesspool. Considering this legal support, the GP can compel households to construct sanitary latrines through appointed agency. Thus, GP can become the local public health-enforcing agency with power to take penal action for contravention of laws. TP may be appellate authority against decision of the GP.

The grama panchayat can outsource the provision part to an NGO or any dedicated organization. Now in each village the Self Help Groups are coming forward to take social activities and they have been proved successful in managing sanitary complexes in Andhra Pradesh and Tamil Nadu. Such messages can be developed at the state level and can be propagated through national/state level media. However, local health promotional schemes should also be prepared by the district health agencies, as the type of water sources and, certain water problems (such as high fluoride content, etc) may vary across districts. Such plans should be put before ZP and approved by TPs and GPs. GPs using its quasi-judicial powers may make some local rules forbidding defecation in open places or near the sources of drinking water.

Notes

1. DANIDA. KFW, DFID. World Bank, UNICEF, UNDP and European Union and sector reforms programme introduced with Tenth Five Year Plan.
2. Under the ARWS, the grants and funds considered for schematic were provided to the state governments for provisioning safe drinking water.
3. Under this programme five sub-missions were constituted focusing on—water quality, drying up sources, construction of water conservation and recharge structures and other measures that can be state specific.
4. The programme was implemented in 64 district across country. In Karnataka it is implemented in Bellary, Mysore and Dakshina Kannada districts.
5. Government of Karnataka provides funds under budgetary allocation.
6. In order to maintain the assets, the GPs are provided with grants, in addition to the collection of its own revenue through water tariff, local tax property, etc.
7. Bangalore Rural, Kolar, Mandya, Mysore, Shimoga, Hassan, Dashina Kannada, Bidar, Gulbarga, Raichur, Bellary and Tumkur.
8. Kolar, Bijapur, Bagalkot and Chitradurga.
9. Dharwad, Haveri, Gadag, Bijapur and Bagalkot.
10. The Karnataka Panchayat Raj Act, 1993 lists “maintenance of general sanitation, cleaning of public roads, drains, tanks, wells and other public places, and construction and maintenance of public latrines” among the functions of the gram panchayat (section 58 and Schedule I, Entry XVIII). “Implementation of Rural Sanitation Schemes” and “Promotion of Drinking Water and Rural Sanitation programmes” are also listed among the functions of Taluk and Zilla panchayaths respectively (Schedule II, Entry IX and Schedule III Entry X) Under XVIII. Rural Sanitation: Maintenance and regulation of burning and burial grounds construction and maintenance of public latrines disposal of unclaimed corpses and carcasses. Management and control of washing and bathing ghats.

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Panchayats, Water and Sanitation

Annexure A
Percentage of Households covered by Toilets Across States

States	1991		2001	
	Total	Rural	Total	Rural
Andhra Pradesh	18.40	6.62	32.99	18.15
Assam	37.43	30.53	64.64	59.57
Bihar	11.75	4.96	19.19	13.91
Chhattisgarh	-	-	14.20	5.18
Delhi	63.38	29.60	77.96	62.89
Gujarat	30.69	11.16	44.60	21.65
Haryana	22.45	6.53	44.50	28.66
Jharkhand	-	-	19.67	6.57
Karnataka	24.13	6.85	37.50	17.40
Kerala	51.28	44.07	84.01	81.33
Madhya Pradesh	15.07	3.64	23.99	8.94
Maharashtra	29.56	6.64	35.09	18.21
Orissa	9.81	3.58	14.89	7.71
Punjab	33.18	15.79	56.84	40.91
Rajasthan	19.57	6.65	29.00	14.61
Tamil Nadu	23.13	7.17	35.16	14.36
Uttar Pradesh	18.02	6.44	31.43	19.23
Uttaranchal	-	-	45.20	31.60
West Bengal	31.51	12.31	43.71	26.93
India	23.70	9.48	36.41	21.92

Sources: Census of India 2001 Series 1, Tables on Houses, Household Census of India 1991 series I Part VII, Tables

Borban—A 'Hagandari Mukh Gaon'

Borban is a small community of about 185 households in Sangamner Taluka of Ahmednagar district in Maharashtra. This village ranked second at the district level competition in achieving universal sanitation. Every household has constructed a household toilet. Under the leadership of the village sarpanch, guarantee for the material was provided and the district administration made available low cost technology to them. In fact the village now imposes a fine if anyone is seen to continue the traditional practice. The community solidarity and status has become a model for the entire district.

Source: Notes from field visits by ISEC Team under the project on Restructuring Local Environment Management in Karnataka, January 2004.

Privatisation of Sanitation Services

The Rural Sanitary Marts Programme (RSMP), in Uttar Pradesh aimed specifically to shift from a subsidy-based programme to a privatized one. Over the years, it has been noted that offering a much lower subsidy actually increased the sanitation coverage. This idea was replicated in several other States. In Allahabad, the RSMs went further to 'no subsidy'. Between 1993 and 1998 they sold over 35,000 latrines sets. Under the traditional subsidy system, this would have cost the Government \$ 17.5 million. Under the new system, it only cost \$ 60,000 of external support plus managerial support for one and a half years.

Source: UNICEF, *Vision 21: Water supply & Sanitation Collaborative Council.*

BACKGROUND PAPER

Panchayats, Water and Sanitation

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Bidyut Mohanty

The period from 2005 to 2015 has been earmarked by the United Nations as the “International Decade for Action - Water for Life.” The goal of the Decade is “a greater focus on water-related issues, with emphasis on women as managers of water to help to achieve internationally agreed water-related goals”(Annan, 2005). During this period the international community is recommitted to meet the Millennium Development Goals of halving, by the year 2015, the number of people without sustainable access to safe drinking water and basic sanitation. What is equally significant is that this is the second time that the United Nations has given priority to water related issues as part of the UN Decade, the first decade being the period 1981-90 which was declared as the “International Drinking Water Supply and Sanitation Decade.” (Government of India, 1991).

A. Water and Sanitation – Situation Analysis (India)

India is a land richly endowed with water resources. But access to water, its quality and shortages continue to be major challenges that the country faces. Intense tensions and conflicts persist over this resource. The geographical inequalities with respect to water availability, rapid demographic growth and the ever increasing sector demands consonant with urbanization have all contributed to the water shortages.

The WHO-UNICEF sponsored Assessment Report of Water Supply and Sanitation in India, 2002, provides a fair over view of the water and sanitation situation in the country (Government of India, 2002). The report highlights that India with a population of less than 400 million and per capita water availability over 5000 cubic meters per year, at the time of independence, has a population that grew to over a billion over five decades, with a per capita water availability of hardly more than 2000 cubic meters per year and the actual usable quantity around 1122 cubic meters per year.

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The regional disparities is illustrated in the fact that Rajasthan with 8 per cent of the country's population has only 1 per cent of the country's water resources and Bihar with 10 per cent of population has just 5 per cent of the water resources.

Regarding the availability of safe drinking water, the report states that between 69 to 74 per cent of the rural population take their drinking water from protected sources leaving an unserved population of 26 to 31 per cent. With regard to the urban population, between 91 to 93 per cent of the population take their drinking water from protected sources, leaving an unserved population of 7 to 9 per cent. The Department of Drinking Water Supply estimates that of the total 1.42 million rural habitation in the country, 1.27 million are fully covered, 0.13 million are partially covered and 15,917 are not covered. The coverage across the country is also uneven. Of the 35 states in India, only 7 have achieved full coverage of rural habitations (Bihar, Chhatisgarh, Madhya Pradesh, Tamil Nadu, Uttar Pradesh, Daman & Diu, Delhi, Lakshadweep and Chandigrah). In the urban areas, of the 393 class I cities, only around 77 cities have 100 percent water supply coverage. Around 203 of the 401 class II towns have low per capita supplies of less than 100 lpcd.

The data available from state governments based on a survey in the year 2000 estimates that 2,16,968 habitations are affected due to a variety of water quality problems with the following break up: excess fluoride: 31,306, excess arsenic:5029, excess salinity:23,495, excess nitrate:13,958 and multiple quality problems:25,092 (www.bharatnirman.gov.in).

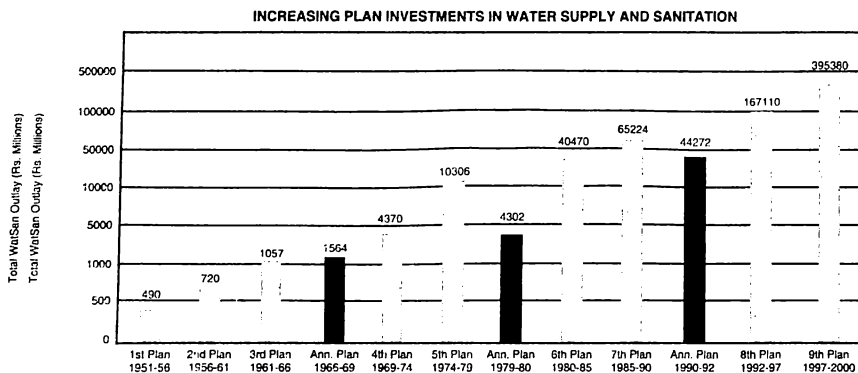
With regard to ground water availability, the Central Ground Water Board (CGWB), through surveys conducted for estimation of availability and status of ground water, has identified that out of 7414 identified units (blocks/talukas/watershed), 471 are "overexploited" (where exploitation is more than natural recharge of ground water) and 318 are "critical or dark" units (where draft is between 70% to 100% of the natural recharge of ground water). Thus less than 11% of the total units fall under the category of "over-exploited" and "critical". It has been assessed that ground water is still available for utilization in many parts of the country, particularly in the eastern parts of the country, Madhya Pradesh and Chhattisgarh and in specific pockets of Andhra Pradesh, Karnataka, Maharashtra and Jammu & Kashmir. In Punjab, Haryana, Rajasthan, Gujarat and Tamil Nadu, the mining of static reserves has started as the rechargeable quantum of ground water has been exceeded (*Ibid*).

On the sanitation front, only between 18 to 19 per cent of the rural households have a toilet and in the urban area between 75 to 81 per cent have toilets (Government of India, 2002). The WHO-UNICEF study points

out that the poor utilization of toilet facilities is mainly due to lack of awareness, water scarcity, poor construction standard, emphasis on standardized designs without attention to local specificities and lack of beneficiary involvement. The report also points out that with regard to the sewerage systems and treatment facilities, only about 70 of the total 300 Class-1 cities have a partial system. Also, only about 30 per cent of the total waste water generated in the metropolitan cities is treated before disposal. The data available from the National Family Health Survey (NFHS – II) shows that in large, highly populated and poor states, the proportion of households having access to toilet facilities is lower than the national average. Organized sewerage system coverage ranged from 35 per cent in class IV cities, to 75 per cent in class I cities. In general women are the worst sufferers in case of lack of sanitation and safe drinking water facilities. Due to this lack of facilities, many girls drop out of schools. Their health and dignity are at stake.

B. Financial Outlays/Budget

The national budget for 2006-07 specifies a non-recurring assistance of Rs. 213 crore to be provided for setting up district-level water testing laboratories and field-level water testing kits; provision for Rajiv Gandhi National Drinking Water Mission to be increased from Rs.3, 645 crore to Rs.4, 680 crore and for Rural Sanitation Campaign from Rs.630 crore to Rs.720 crore. About 56,270 habitations and 140,000 schools to be covered in the current year (Government of India, 2006).



S Source: Planning Commission
 N Notes Outlays shown Central plus State investments of current prices.

C. Challenges to fulfill Total Sanitation and Universal Drinking Water facilities.

- Failure to decentralize powers to and strengthen panchayats and urban local bodies.
- The adoption of supply driven approaches in central and state government schemes with focus given more to creation of infrastructure and little attention towards quantity and quality of water and toilet facilities as well as the management of those facilities.
- Rural water is considered a 'free good'. Tariff collection is as low as 5 to 10 per cent of requirements. Political resistance to user charges continues to be a serious problem. The urban poor, the rural areas and the ecosystems pay a much higher price, directly as well as indirectly for water than the rich and the middle class enjoy, especially from public sources (Gujja et.al., 2006).
- Increased tension and competition among different water users, with inequities in water resource prominent across castes in some regions.
- High fluoride concentration in ground water, beyond the permissible limit of 1.5 ppm. Industrial wastes and the municipal solid waste (MSW) are the main pollutants of surface and groundwater.
- Studies (*ibid*) have highlighted that the indiscriminate sand excavation from river beds negatively impacts upon on the ecological system with problems like bank erosion, deepening of river beds, subsurface intrusion of saline seawater in coastal areas, decreased availability of water for the local population for both domestic and irrigation purposes, wells near banks going dry etc.
- Depleting ground water table and declining ground water quality which in turn affects sustainability.
- Millions of poor people especially women and children suffer from preventable diseases due to inadequate water supply and sanitation services. Between 0.4 to 0.5 million children under five years still die due to diarrhea (UNICEF).
- There are at least 0.3 million rural primary and upper primary schools which still do not have any drinking water supply or sanitation facilities.

D. Role of Central and State Governments

The Department of Drinking Water Supply (DDWS) is the nodal Department in the Ministry of Rural Development (MoRD), Government of India, which provides scientific, technical, and financial assistance to the states in water

and sanitation sector. The Ministry of Urban Development (MoUD) is the nodal Ministry for policy formulation and guidance for the urban water supply and sanitation (UWSS) sector.

The two major water supply programmes administered by the Government of India with regard to rural drinking water supply are the Accelerated Rural Water Supply Programme (ARWSP) and the Sector Reform Project (presently transformed to Swajaldhara). The Accelerated Rural Water Supply Programme (ARWSP) started in 1972-73 for assisting States/ UTs to accelerate the coverage of drinking water supply, adopted a mission approach in 1986 with the launch of the Technology Mission on Drinking Water and Related Water Management, later renamed as Rajiv Gandhi National Drinking Water Mission (RGNDWM) in 1991-92. Swajaldhara is a community led participatory programme which aims to provide drinking water facilities in rural areas with minimum provision of 40 lpcd.

The major programme administered by the Government of India in rural sanitation is the Total Sanitation Campaign (TSC). This programme adopts a 'community led' and 'people centered and a demand driven approach with increased stress on awareness building and meeting the demand with alternate delivery mechanisms. The major components of this programme are Rural School Sanitation, technology improvisations according to customer preferences and location specific, intensive Information, Education and Communication (IEC) and involving Co-operatives, Women Groups, Self Help Groups, NGOs etc. The activities are purported to be area specific involving all sections of the rural population in a sustained manner so that the willingness of the people to construct latrines is translated/interpreted as demand generated. TSC provides a subsidy of Rs 500/- for the construction of individual household toilets (Rs 375/- from the Centre and Rs 125/- from the State Government) (Government of India, 2004).⁶ Central Rural Sanitation Programme, Total Sanitation Campaign, Department of Drinking Water, Ministry of Rural Development, Government of India, January 2004.

In the urban front, the Accelerated Urban Water Supply Programme (AUWSP) launched in 1993-94 provides water supply to the towns having population of less than 20,000 as per the 1991 Census. As on 8th December, 2004, 1051 towns, at an estimated cost of Rs.1, 423.47 crore, had been approved.

The Low Cost Sanitation Scheme was envisaged to convert the existing dry latrines into low cost pour flush latrines. The objective of the scheme, as far as the sanitation part is concerned, is to eliminate manual scavenging totally. Under the scheme, a loan and subsidy is extended simultaneously by the HUDCO.

E. Powers to Panchayats (Annexure VI)

As per the Eleventh Schedule, water and sanitation services devolved to Panchayats are: 'Minor irrigation, water management and watershed development', 'Drinking water' and 'Health and Sanitation'. The Twelfth Schedule provides for the following water and sanitation functions to urban local bodies: 'Water supply for domestic, industrial and commercial purposes' and 'public health, sanitation conservancy and solid waste management'.

Since the respective state governments are mandated to translate this into practice, the experience so far has been that of partial devolution with each state going at its own pace. Out of the 28 states only five have some information regarding the role of panchayats on the subjects of water and sanitation. The states are Andhra Pradesh, Gujarat, Maharashtra, Rajasthan and West Bengal. Karnataka has explicitly devolved some funds to panchayats for water supply (PRIA, 2004).

It is the RGNDWM (Rajiv Gandhi National Drinking Water Mission, Department of Drinking Water, Ministry of Rural Development, Government of India) that provides the administrative context for the decentralisation of RWSS services in India. The RGNDWM has a National Human Resources Development Programme, with the basic aim of training at least one grassroots level worker in a village through district level trainers. It also has in its agenda the empowerment of PRIs/local bodies so as to enable them to take up operation and maintenance activities related to rural water supply schemes.

Water Supply

The roles attributed to the PRIs in the accelerated Rural Water Supply Programme (ARWSP) guidelines include:

- The selection of the locations of stand post and spot sources
- Undertaking of operation and maintenance (including the fixation of water tariffs)
- The implementation of Sector Reform Project (SRP)/Swajaldhara in the identified pilot districts
- The implementation of individual village water supply schemes, and
- The transfer of drinking water supply assets to PRIs (and empowerment of PRIs) to undertake the operation and maintenance of drinking water systems.

The roles attributed to the PRIs in the Swajaldhara guidelines include:

- The convening of a gram sabha for the selection of scheme design/cost

- The gram panchayats managing the procurement of materials/ services and supervising the scheme execution
- The passing of a GP resolution calling for users/ beneficiaries to contribute 10 per cent of capital expenditure. The GP may remit towards community contribution from its tax revenue (not from Government grants) with the approval of the gram sabha
- The GP deciding whether it wants to execute the scheme on its own, or contract another agency to construct the scheme on its behalf
- The GP taking responsibility over the schemes for O&M
- The GP determining the user charges necessary to undertake adequate O&M
- The GP (as the ultimate body responsible for drinking water and sanitation at the village level) may designate the VWSC as its specialized executive arm.

Bharat Nirman Programme

For Drinking Water (Annexure VII and VIII)

This is a time bound plan for rural infrastructure by the Government of India in partnership with the State governments and the PRIs for a period of four years (2005-09) in the areas of roads, rural housing, rural water supply, rural electrification and rural telecommunication connectivity. The goal under the drinking water initiative that every habitation is to have a safe source of drinking water. In addition, all habitations which have slipped back from full coverage to partial coverage due to failure of source and habitations which have water quality problems have to be addressed. The MoRD, Department of Drinking Water Supply is responsible for meeting this goal along with the respective state government.

The norms for coverage include:

- 40 litres per capita per day (lpcd) of safe drinking water for human beings.
- 30 lpcd additional for cattle in the Desert Development Programme Areas
- one hand pump or stand post for every 250 persons
- the water source should exist within 1.6 kms in the plains and within 100 meters elevation in the hilly areas.

Sanitation

Under the TSC, Panchayats will carry out the social mobilization for construction of toilets and also maintain the clean environment by way of safe disposal of wastes (Planning Commission, 2002). Women Complexes

constructed under the TSC will be maintained by the Panchayats/Voluntary Organisations/ Charitable Trusts. Panchayats can also contribute from their own resources for School Sanitation over and above the prescribed amount. They will act as the custodian of the assets created under the TSC such as Women Complexes, Environmental components, Drainage etc. Panchayats can also open and operate the Production Centres/Rural Sanitary Marts.

The National Rural Health Mission Scheme (2005-12) advocates an important role for Panchayats in providing sanitation facilities in rural areas (Government of India, 2004-05). One of the core strategies for ensuring universal health and sanitation coverage would be to allow panchayats to play a key role in terms of ownership, control and management of public health services. As a first step towards this goal, it is envisaged that a health plan for each village will be formulated through the village health samiti of the panchayat. The district level health plan will have an inter-sectoral approach including drinking water, sanitation, hygiene and nutrition. A female community health activist (ASHA) will be given the task of being the interface between the community and the public health care system and will be accountable to the panchayat.

Nirmal Gram Puraskar

The Nirmal Gram Puraskar was initiated by the Government of India in June 2003 to further strengthen the TSC, for fully sanitized and open defecation free gram panchayats, blocks, and districts. The incentive pattern is based on population criteria as given below. The incentive provision is for PRIs as well as individuals and organizations that are the driving force for full sanitation coverage.

Incentive pattern under Nirmal Gram Puraskar						
(in Rs. Lakh)						
Particulars	Gram Panchayat		Block		District	
Population Criteria	Up to 5001 5000	and above	Up to 50001 50000	and above	Up to 10 lakh	Above 10 lakh
Cash Incentive Recommended	2.0	4.0	10.0	20.0	30.0	50.0
Incentive to Individuals	0.10		0.20		0.30	
Incentive to Organisation/s other than PRIs	0.20		0.35		0.50	

Source: Government of India, 2003 "Towards Total Sanitation and Hygiene: A challenges for India" paper presented in South Asian Conference on sanitation, Dhaka, Bangladesh, 21st to 23rd October.

F. Experiences of local governments - issues relating to panchayats

While inaugurating a two-day conference of State and Union Territory Ministers in charge of rural drinking water supply and rural sanitation, Prime Minister Manmohan Singh urged state ministers to take water and sanitation challenges in India “not just as a public health engineering issue, but as a challenge to our panchayats, for our educational institutions and campaigns for the empowerment of our women.” Putting forth a five pronged strategy, the Prime Minister emphasised the significant role panchayats and local governments can play in this regard (Hindu 2006).

Local governments however are yet to be strengthened with powers to have a positive and sustainable impact on the water and sanitation sectors. Following are few case studies where local governments have been successful in their initiative to provide safe drinking water and sanitation facilities and protect their environment.

(i) Kerala—Panchayat vs. MNCs (Annexure IX)

Two major soft drink manufacturing companies, the Hindustan Coca Cola Beverages (Pvt) Ltd and Pepsi Cola India Holdings (Pvt) Ltd. set up its plant and started operation in two panchayats—Plachimada and Pudukkottai, —respectively in Palakkad district in Kerala in mid 2000. Ever since, the two companies have been on a major tussle with the respective panchayats as they were accused of depleting the ground water resource creating acute water shortage, polluting its ground water and distributing toxic waste as fertilizers to the farmers. Farm labourers and others started developing rashes and skin problems with some of the women even having deep dark pigmentation on the outer surface of the palms and fore arms.

When a BBC journalist tested the sludge from the plant being used as manure in the laboratory of the University of Exeter (London) and found significantly higher levels of heavy metals such as lead, cadmium and chromium, it further vindicated the agitation by the neighbouring villagers. The Kerala State Pollution Control Board report of September 2003 also confirmed the Exeter University findings.

Following the Perumatty panchayat’s notice of cancellation of licence to the Coca Cola Company on 7 April 2003, the case landed up in the High Court of Kerala. Justice K. Balakrishnan Nair’s judgement further endorses panchayat’s autonomy. The judgement stated: “What can be the quantity of water the 2nd respondent [Coca Cola Company] can be permitted to use has to be decided by the panchayat.” The court ordered stoppage of the ground water use from 16 January this year. Again, when the company appealed, the Division Bench of the Kerala High Court (March 8) refused

to stay the government order prohibiting the Coca-Cola plant from drawing ground water from the wells at its plant till the onset of the south west monsoon. This has further enhanced the position of the panchayats.

In the case of the other cola giant, the matter rests with the court following Pudussery panchayat's cancellation of its license on 20 October 2003. This company is working in an area of 300 acres in Kinfra Park. It has, however, not stopped production. This panchayat has the highest annual income in the State — Rs.1.3 crores — and both Pudussery and Perumatty will forgo revenue worth several lakhs when these factories stop functioning. They consider it a lesser cost than the suffering of the people (Mathew, 2004).

(ii) Orissa—Sanitation total coverage: Golanthara and Kumarpani gram panchayats in Ganjam district of Orissa are shining examples of the success of a central sanitation programme under WATSON (Water and Sanitation). As on March 2004 all families in 105 villages of Ganjam district are using their toilets and bathing rooms. Village Health Committees comprising elected women and men monitor the health status in the villages on a periodic basis, with special focus on sanitation and timely intervene during the outbreak of diseases (Panchayati Raj Update, 2004).

(iii) Gujarat—Environmental Health Successes: Surat, one of the oldest municipality in India was accounting for nearly half of all diarrhea cases in Gujarat (2.2 million), in the early 1990s, even though it represented only 5 per cent of the state's population. Considered one of the dirtiest cities in India, it now boasts of a number of health gains mainly due to decentralization, improving efficiency, enhancing infrastructure performance standards, and strengthening health services. This was despite huge financial constraints. By 1977, Surat was declared the second cleanest city in India. The incidence of diarrhea dropped to just 10 per cent of the state total and 217 of the previously 253 unserved slum communities have been provided with proper sanitation and drainage facilities. Two sewerage treatment plants have been upgraded and solid waste management has improved with a collection efficiency of 98 per cent. The municipal corporation collects 85 per cent of its property tax which is the highest in India and has earned an investment credit rating (Government of India, 2002).

*(iv) Maharashtra—*Dwamner village in Satara district has 411 households and a population of 3000. Before 2001 it was among the dirtiest villages in the area. In 2001 the government turned down a request for financial aid on the grounds that it was extremely filthy and laid a condition that the

villagers first clean the village before asking for assistance. The villagers, including the sarpanch, Sangeeta Kshirsagar took it as a challenge. Some of them visited the neighbouring villages to gain a first hand experience of their success in achieving sanitation targets. Learning from the exposure visit, the panchayat initiated a programme to clean their village. Daily at 9 pm a siren would blow to announce 'shramdan' and people would stay awake a few hours to assist in the cleaning up. The Mahila gram sabha is very active in this village and it was here that the women were motivated to assist in the sanitation programme. Presently newly constructed houses will get a clearance certificate only if a toilet is built in the house (Khirasagar, 2005).

Need to strengthen local governments

The above assessment highlights that despite the efforts by central and state governments to improve the water and sanitation situation, the challenge particularly of rural sanitation continues to be great, including sustainability of the services. A major lacunae commonly identified is the lack of a sincere effort to involve all stakeholders, particularly the local governments. Jalanidhi, the rural water supply and sanitation programme of the Kerala state government is a good case of the range of benefits that accrue when state governments provide an enabling environment for local communities to partner with local governments to meet their development needs. But, generally, there are wide variations across states in devolving powers to panchayats and little focus has been given to the capacity and constraints of local governments with regard to handling those powers. The potential of local governments as key to sustainability is yet to be tapped. To achieve the target of the millennium declaration in water and sanitation the following points needs to be addressed:

- Given the federal character of our country, there needs to be a clear framework which specifies the roles and responsibilities of the central, state and local governments
- Local governments have to be empowered with financial and administrative resources to carry out their responsibilities
- There should be a mechanism which encourages coordination among the central, state and local governments so that it prevents the setting up of and operation of parallel bodies
- Local governments have to be strengthened with managerial skills which will enable them to implement government schemes that best suits their community needs and also to enable them to evolve locally appropriate mechanisms/solutions.

- Panchayats at all levels must have Standing Committees on Water and Sanitation.

Key questions for discussion

- ◆ How can local governments be empowered to address the challenge of providing sustainable access to water (both quality and quantity) and basic sanitation to the stakeholders?
- ◆ How can women be empowered through the local governments to become managers of water in realizing the internationally agreed water related goals as envisaged in the UN 'International Decade for Action – Water for Life'?
- ◆ How can the rights of the disadvantaged groups (women, SC/ST, children) to basic water and sanitation be protected?
- ◆ How can accessibility to basic services particularly water and sanitation be culturally sensitive and economically affordable?
- ◆ What is the link between water and sanitation sector and the health and education sectors?
- ◆ Water is a matter of conflict primarily based on socio-economic factors. Can Panchayats resolve these conflicts?

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Millenium Development Goals

The United Nations, at the dawn of the new millennium, declared some targets and goals to be achieved to reaffirm the faith in the organization and its charter as an indispensable foundation of a more peaceful, prosperous and just world. The millennium development goals are the worlds' time bound targets for overcoming extreme poverty and extending human freedom. Representing more than a quantitative benchmarks to be attained by 2015, they encapsulate a broad vision of shared development priorities. The vision is rooted in the simple idea that extreme poverty and gross disparities of opportunity are not inescapable features of the human condition but a curable affliction whose continuation diminishes us all and threatens on collective security and prosperity.

The multi faceted target sets under the millennium development goals cut across a vast array of interlinked dimensions of development, ranging from the reduction of extreme poverty to gender equality to health, education and the environment. Each dimension is linked through a complex web of interactions. Sustained progress in any one area depends critically on advances across all the other areas. A lack of progress in any area can hold back improvements across a broad front. Water and sanitation powerfully demonstrate the linkages without accelerated progress in these areas, many countries will miss the millennium development goals. Apart from consigning poor health and diminished opportunities, such an outcome would penetrate deep inequalities within and between countries. While there is more to human development than millennium development goals, the targets set provide a useful frame of reference for understanding the linkage between progress in different areas and critical importance of progress in water and sanitation.

Goals

The United Nations Millennium Declaration, signed in September 2000, commits the states to:

1. *Eradicate extreme poverty and hunger*
 - ◆ Reduce by half the proportion of people living on less than one U.S.dollar a day.
 - ◆ Reduce by half the proportion of people who suffer from hunger.
 - ◆ Increase the amount of food for those who suffer from hunger.
2. *Achieve universal primary education*
 - ◆ Ensure that all boys and girls complete a full course of primary schooling.

- ◆ Increased enrollment must be accompanied by efforts to ensure that all children remain in school and receive a high-quality education
3. *Promote gender equality and empower women*
- ◆ Eliminate genders disparity in primary and secondary education preferably by 2005, and at all levels by 2015.
4. *Reduce child mortality*
- ◆ Reduce the mortality rate among children under five by two thirds.
5. *Improve maternal health*
- ◆ Reduce by three quarters the maternal mortality ratio.
6. *Combat HIV/AIDS, malaria, and other diseases*
- ◆ Halt and begin to reverse the spread of HIV/AIDS.
 - ◆ Halt and begin to reverse the incidence of malaria and other major diseases.
7. *Ensure environmental sustainability*
- ◆ Integrate the principles of sustainable development into country policies and programmes; reverse loss of environmental resources.
 - ◆ Reduce by half the proportion of people without sustainable access to safe drinking water.
 - ◆ Achieve significant improvement in lives of at least 100 million slum dwellers, by 2020.
8. *Develop a global partnership for development*
- ◆ Develop further an open trading and financial system that is rule-based, predictable and non-discriminatory. Includes a commitment to good governance, development and poverty reduction—nationally and internationally.
 - ◆ Address the least developed countries' special needs. This includes tariff- and quota-free access for their exports; enhanced debt relief for heavily indebted poor countries; cancellation of official bilateral debt; and more generous official development assistance for countries committed to poverty reduction.
 - ◆ Address the special needs of landlocked and small island developing States.
 - ◆ Deal comprehensively with developing countries' debt problems through national and international measures to make debt sustainable in the long term.
 - ◆ In cooperation with the developing countries, develop decent and productive work for youth.
 - ◆ In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries.
 - ◆ In cooperation with the private sector, make available the benefits of new technologies—especially information and communications technologies.

Annexure - II

Distribution of Household by source of drinking water in India							
Location	Source of drinking water	Total	Per-centage	Rural	Per-centage	Urban	Per-centage
P.1 Total	Total	191,963,935	100.0	138,271,559	100.0	53,692,376	100.0
	Tap	70,448,827	36.7	33,583,755	24.3	36,865,072	68.7
	Hand Pump	68,456,319	35.7	59,736,874	43.2	8,719,445	16.2
	Tube Well	10,676,594	5.6	7,930,488	5.7	2,746,106	5.1
	Well	34,873,103	18.2	30,732,819	22.2	4,140,284	7.7
	Tank, Pond, Lake	1,936,671	1.0	1,769,496	1.3	167,175	0.3
	River, Canal	1,943,863	1.0	1,840,868	1.3	102,995	0.2
	Spring	1,415,997	0.7	1,283,098	0.9	132,899	0.2
	Any other	2,212,561	1.2	1,394,161	1.0	818,400	1.5

Source: Census of India 2001 and http://www.censusindia.net/2001_housing/S00-019.html

Annexure - III

Distribution of household by availability of latrines in India			
2001 Census	Total (Percentage)	Rural (Percentage)	Urban (Percentage)
Latrine available	36.4	21.9	73.7
Latrine not available	63.6	78.1	26.3

Source: Census of India 2001 and http://www.censusindia.net/2001_housing/S00-019.html

New Criteria for Nirmal Gram Puraskar

The Ministry of Rural Development has changed the criteria for awarding the Nirmal gram puruskar to Gram Panchayats. Under the revised criteria, gram panchayats having a population of less than 1000 will receive Rs 50,000 as award money. Gram panchayats with a population of 1000 or more but less than 2000 will receive Rs one lakh while those with a population of 2000 or more but less than 5000 will receive Rs 2 lakh as award money. Gram panchayats having a population of 5000 or more but less than 10,000 will be entitled to Rs four lakh while those having a population more than 10,000 would be given Rs five lakh. However, there is no change in award scheme for other Panchayati Raj Institutions and individual organizations who play a key role in the implementation of the practice of the open defecation and promote sanitation and hygiene.

The changes have been affected in view of the suggestions made at the conference of state ministers for drinking water and sanitation held early this year. Many state governments had suggested for change in the existing guidelines in respect of population classification of gram panchayats.

Source: Panchayati Raj Update, October 2006

Swajaldhara

Reforms in the drinking water sector were adopted in 1999 through Sector Reform Project (SRP) on the pilot basis and have been scaled up throughout the country in the form of Swajaldhara launched on 25th December 2002. The programme is a paradigm shift from supply driven to demand driven, centralized to decentralized implementation and government's role from service provider to facilitator. The fundamental reform principles in Swajaldhara are adhered to by the state governments and implementing agencies in terms of the adoption of a demand responsive approach with community participation. It is based on empowerment of villagers to ensure their full participation in the project through a decision-making role in the choice of drinking water scheme, planning, design, implementation, control of finances, management, arrangements including full ownership of drinking water assets. The community has to share partial capital cost either in cash or in kind or both, 100% responsibility of operation and maintenance (O&M). An integrated service delivery mechanism is also promoted which includes taking up conservation measures through water rain harvesting and ground water recharge systems for sustained drinking water supply.

Source: <http://gov.ua.nic.in/swajal/swajaldhara.htm>.

State-wise Devolution of responsibilities
Relating to Water and Sanitation
Programmes in the three tiers of panchayats
(Compiled from the Panchayati Raj Acts of different States)

Village Panchayat

No.	States	Functions related to Water and Sanitation	S C* related to Water and Sanitation	Women members in SC
1	Andhra Pradesh	a) Improve sanitary condition and cleaning of village surroundings. b) Provision of public latrine and arrangements to clean latrines whether public or private c) Maintenance of burning and burial grounds d) Maintenance of water works for supply of water for various purposes and protected water for drinking purposes.	-	-
2.	Arunachal Pradesh	a) Construction, repair and maintenance of drinking water wells, tanks and ponds. b) Prevention and control of water pollution. c) Maintenance of rural water supply scheme. d) Maintenance of general sanitation. e) Cleaning of village surroundings. f) Maintenance and regulation of burning and burial grounds. g) Construction and maintenance of public latrines. h) Management and control of washing and bathing ghats.	-	-
3.	Assam	Same as Arunachal Pradesh	Social welfare committee	-
4.	Bihar	Same as Arunachal Pradesh	Amenities committee	-
5.	Goa	a) Promotion of rural sanitation and improve the	Amenities committee	-

sanitary condition within the jurisdiction.

b) Supply of water pure and sufficient for public and private purposes.

c) Proper distribution of drinking water.

6.	Gujarat	a) Construction, repair and maintenance of drinking water wells, tanks & ponds. b) Prevention and control of water pollution and management and control of washing and bathing Ghats. c) Implementation of rural water supply schemes and rural sanitary scheme. d) Maintenance of general sanitation and regulation of burning and burial grounds. e) Construction and maintenance of public latrines. f) Disposal of unclaimed corpses and carcasses.	Public health committee	-
7.	Haryana	Same as Arunachal Pradesh	Amenities sub committee	
8.	Himachal Pradesh	Same as Arunachal Pradesh	General standing committee	
9.	Jammu and Kashmir	a) Provide better sanitation facilities. b) Supply of drinking water and plan for better water management.	-	-
10.	Jharkhand	Same as Arunachal Pradesh	Not specified	-
11.	Karnataka	a) To improve sanitary condition and impart awareness campaign for better sanitation. b) Provide pure and sufficient drinking water for public and private purposes	Amenities committee	-
12.	Kerala	a) Establishment of street or community water taps, public wells, public sanitation units. b) Maintenance and regulation of burning and burial grounds. c) Providing latrines. urinals	Standing committee for welfare	-

		for the public purpose. d) Prevention and Control of water pollution.		
13.	Madhya Pradesh	a) Regulation and use of miner water bodies. b) Improve sanitary condition and promote general awareness about sanitation. c) Provide sufficient drinking water and construction and maintenance of public properties like wells, tanks, latrines, urinals and etc.	Gram Nirman Samiti and Gram Vikas Samiti	-
14.	Maharashtra	a) Maintenance of piped water supply scheme b) General regulation of sanitation. c) Purification and protection of from pollution or all sources of water used for drinking purposes.	Water Conservation and drinking water supply committee	-
15.	Manipur	Same as Arunachal Pradesh	Amenities committee	-
16.	Orissa	a) Construction and maintenance of public sanitation. b) Supply of water for public and private purposes. c) Reclamation of unhealthy locality and the abatement of all nuisances.	Functional committee (iii)	-
17.	Punjab	a) Construction and maintenance of public sanitation, drains, wells, water pumps and etc b) Establishment, repair and maintenance of rural water supply schemes and prevention and control of water pollution. c) Implementation of rural sanitation schemes.	Amenities committee	-
18.	Rajasthan	Same as Arunachal Pradesh	Committee for social services and social justice	-

19. Sikkim	a) Sanitation, conservancy and drainage and the prevention of public nuisance. b) Supply of drinking water and cleaning and disinfecting the sources of supply and storage of water.	-	-
20. Tamil Nadu	a) Construction, maintenance and improvement of sanitary condition of the villages. b) Provision of public latrines and their maintenance in the villages c) Supply of drinking water and protection of water sources in the villages.	-	
21. Uttar Pradesh	a) Improvement of sanitation and maintaining cleanliness in the villages. b) Supply of drinking water facilities as well as maintaining public wells, tanks etc	Lokhita samiti	-
22. West Bengal	a) Sanitation, conservancy and drainage and prevention of public nuisances. b) Supply of drinking water and the cleansing and disinfecting the sources of supply and storage of water and protection of water from the pollution. c) The sinking of wells and excavation of ponds and tanks.		

* Standing Committee.

Panchayat Samiti

No.	States	Functions related to Water and Sanitation	S C* related to Water and Sanitation	Women
1.	Andhra Pradesh	a) Providing protected drinking water facilities. b) Providing drains and soakage pits for village and house drainage. c) Encouraging the use of sanitary type of latrines. d) Carrying environmental sanitation campaign.	-	-
2.	Arunachal Pradesh	a) Establishment, repair and maintenance of rural water supply scheme. b) Prevention and control of water pollution. c) Implementation of rural sanitation scheme.	-	-
3.	Assam	Same as Arunachal Pradesh	General committee	-
4.	Bihar	Same as Arunachal Pradesh	General Committee	-
5.	Goa	Promotion of drinking water and rural sanitation.	-	-
6.	Gujarat	Providing facilities for pure drinking water.	Not specified	-
7.	Haryana	Same as Arunachal Pradesh	General Committee	-
8.	Himachal Pradesh	a) Provision for rural sanitation. b) Provision of drinking water supply in rural area.	General Committee	-
9.	Jammu and Kashmir	-	-	-
10.	Jharkhand	a) Control and prevention of water pollution. b) Integrated management of drinking water. c) Integrated provision for	Not specified.	-

rural water supply scheme, their repair and maintenance.
d) Help and guide gram panchayats by making integrated plan for encouraging village sanitation, cleanliness of public street, ponds, wells and etc.

11.	Karnataka	Make reasonable provision for maintenance of water supply works. b) Construction of individual and community latrines.	General standing committee.	-
12.	Kerala	-	-	-
13.	Madhya Pradesh	Provide fund for rural sanitation	-	-
14.	Maharashtra	-	-	-
15.	Orissa	-	Functional committee	-
16.	Punjab	Same as Arunachal Pradesh	General committee	-
17.	Rajasthan	Same as Arunachal Pradesh	Not specified	-
18.	Tamil Nadu	-	-	-
19.	Uttar Pradesh	-	-	-
20.	West Bengal	a) Power to under take schemes or adopt measures including giving financial assistance related to water supply and public sanitation. b) Contribute towards the cost of water supply.	-	-

* Standing Committee.

Zilla Parishad

No.	States	Functions related to Water and Sanitation	S C* related to Water and Sanitation	Women members in SC
1.	Andhra Pradesh	Supervise generally the activities of mandal parishad (panchayat samiti)	1) Committee for Education and Medical Services. 2) Committee for works.	At least two women members in each standing committee.
2.	Arunachal Pradesh	Promotion of drinking water and rural sanitation schemes.	-	-
3.	Assam	Coordinate and integrate development scheme prepared by panchayats samities in the district.	1) Social justice committee. 2) Standing committee.	-
4.	Bihar	a) Construction, repair and maintenance of drinking water wells, tanks and ponds. b) Prevention and control of water pollution. c) Implementation of rural water Supply scheme. d) Implementation of rural sanitation scheme.	Education and Health Committee	-
5.	Goa	Guide for promotion of drinking water and rural sanitation to Taluk panchayats and village panchayats.	1) General committee 2) Education and health committee.	-
6.	Gujarat	Provision and maintenance of drinking water supply.	Public Health Committee	-
7.	Haryana	Coordinate and consolidate the developmental	General standing committee	-

plan of Panchayat Samiti.

8.	Himachal Pradesh	Preparation of plans and implementation of schemes for Economic Development.	1) General standing committee. 2) Education and Health committee.	-
9.	Jammu and Kashmir	-	-	-
10.	Jharkhand	a) Control and prevention of water pollution. b) Extension of water supply. c) Management of drinking water sources.	Not specified	-
11.	Karnataka	Construction of under ground water recharge structure to ensure availability of water in the drinking water wells	1) General standing committee. 2) Education and Health committee.	-
12.	Kerala	a) Implementation and management of water supply scheme b) Supply of drinking water during drought.	Public works Committee.	-
13.	Madhya Pradesh	-	-	-
14.	Maharashtra	Execution of piped water supply scheme.	Water conservation and drinking water supply committee.	-
15.	Manipur	a) Provision for supply of drinking water. b) Implementation of rural sanitation scheme.	Education and Health Committee	-
16.	Orissa	Power to under take scheme and adopt measures including giving of	Functional committee	-

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		assistance relating to development of water supply and sanitation.		
17.	Punjab	a) Take over maintenance and control of rural tanks, wells, channel or drain, belonging to private or any other authority. b) Implementation of water shed development programme. c) Installation of community pumps sets and water works.	1) General committee. 2) Education and Health committee.	
18.	Rajasthan	-	-	-
19.	Sikkim	Regulating the drinking water supply scheme of the Government and entrusted it for maintenance and repairs.	-	-
20.	Tamil Nadu	-	SC dealing with health, welfare including prohibition.	
21.	Uttar Pradesh	-	-	-
22.	West Bengal	Power to undertake schemes and giving financial assistance to the lower bodies relating to water supply.	-	-

* Standing Committee.

Bharat Nirman

Prime Minister Manmohan Singh launched an ambitious Bharat Nirman initiative on Friday December 16, 2005. Bharat Nirman is a four-year business plan aimed at strengthening the country's rural infrastructure including water supply, power, housing and roads and proposed a specific financing window for the Rs 1,74,000-crore programme.

The delivery model proposes to involve panchayats and the private sector as partners and in addition to that the Planning Commission was working on ways to enhance the management of rural infrastructure programmes by panchayats. State Governments are key implementing agencies and panchayats would need to activate the demand side without which service delivery would not be effective.

Components of Bharat Nirman and the agenda ahead.

- Bring additional one crore hectare of land under assured irrigation by 2009.
- Connect all the villages that have a population of 1000 (or 500 in hilly/tribal area) with an all weather road and the remaining 66,802 habitations are to be covered by the termination of this programme.
- Construct 60 lakh additional houses for the poor by 2009.
- Providing safe drinking water to all inhabitants. At least cover up 55,067 uncovered habitations, provide additional coverage to 2.8 lakh habitations that have slipped back from full coverage, provide potable water in 2,16,968 villages affected by poor water quality.
- Supply electricity to all villages and offer connection to 2.3 crore households. Hence, a total of 1,25,000 villages are to be covered by end of the programme.
- Give telephone connectivity to all villages. 66,822 villages are to be covered by November 2007, i.e. even two years before the specified period.

Above is the mandate to be fulfilled by the end of 2009. By the end of 2009, there will be no irrigation problems, all villages will be connected with all weather road, drinking water problems will be solved, each and every soul will have shelter, all villages will be electrified and all villages will be connected by telecom.

Bharat Nirman
Department of Drinking Water Supply,
Ministry of Rural development, Government of India
Status of Remaining Uncovered Habitations

S. No.	State/UT	Status of Habitations as on 1-4-2005		
		NC	PC	Total
1	Andhra Pradesh	0	0	0
2	Arunachal Pradesh	158	510	668
3	Assam	238	7137	7375
4	Bihar	0	0	0
5	Chhattisgarh	0	0	0
6	Goa	0	6	6
7	Gujarat	0	36	36
8	Haryana	0	0	0
9	Himachal Pradesh*	0	6891	6891
10	Jammu & Kashmir*	660	2551	3211
11	Jharkhand	0	0	0
12	Karnataka	0	5618	5618
13	Kerala*	0	7573	7573
14	M.P.	0	0	0
15	Maharashtra	327	17411	17738
16	Manipur	0	0	0
17	Meghalaya	12	239	251
18	Mizoram*	0	112	112
19	Nagaland*	41	690	731
20	Orissa	0	0	0
21	Punjab	803	1128	1931
22	Rajasthan	2300	0	2300
23	Sikkim	0	74	74
24	Tamil Nadu	0	0	0
25	Tripura	0	0	0
26	Uttar Pradesh	0	0	0
27	Uttaranchal	30	242	272
28	West Bengal	0	0	0
29	A & N Islands*	0	102	102
30	Dadra Nagar Haveli*	19	41	60
31	Daman & Diu	0	0	0
32	Delhi	0	0	0
33	Lakshadweep*	0	10	10
34	Pondicherry	0	108	108
35	Chandigarh	0	0	0
	Total	4588	50479	55067

Source: Department of Drinking Water Supply, M/o Rural Development

NC: Not Covered, PC: Partially Covered (Habitation which have a safe drinking water source point (either private or public) within 1.6 km plains and 100 hill areas but the capacity of the system ranges between 10 lpcd to 40 lpcd, are categorized as partially covered those having less than 10 lpcd are categorized as Not Covered).

Note: Only States/UTs marked with * have furnished figures for status of habitations as on 1-4-2005 For rest of the States/UTs the figures for status of habitations are as on 1-11-2004

Jalanidhi programme in Kerala

Inspired by the changes brought about in rural water supply and sanitation sector in Malappuram, Kozhikode, Thrissur and Palakkad, the Kerala Rural Water Supply and Sanitation Agency (KRWSA) is all set to implement the Jalanidhi project in the remaining districts of Kerala.

To start with, the project will be taken up in three grama panchayats each in the ten remaining districts. The launch of Jalanidhi in these districts is expected by mid-July 2004.

Jalanidhi, a Rs. 380-crore World Bank-funded project was initiated by the State Government in late 1999 bringing about a paradigm shift from the traditional supply-driven to demand-driven delivery of water and sanitation services in Kerala's rural sector. Besides water supply systems, the components of Jalanidhi includes construction of sanitary latrines for Below Poverty Line (BPL) households, conversion of unsanitary latrines in the Grama Panchayat (GP) into sanitary two-pit latrines, measures for efficient groundwater recharge in the project areas and initiatives for empowering women through formation of Self-Help Groups (SHGs) which are supported in establishing micro business enterprises.

As per the project-funding pattern, up to 75 per cent of the cost of a water supply scheme is funded by Jalanidhi and up to 10 per cent of the cost is borne by the grama panchayats, both being grants. The remaining 15 per cent is mobilised from the beneficiaries of the scheme. Up to Rs.10 lakhs is given to grama panchayats to procure assets such as computers and fax machines as part of steps for strengthening the grama panchayats. Seventy per cent of the funding is given to SHGs formed by women for setting up micro enterprises as part of women development initiatives. Panchayat- level activities of the project like the construction of drainage receive funding support to the extent of 70 per cent from Jalanidhi.

In Malappuram, Kozhikode, Thrissur and Palakkad, Jalanidhi is under way in about 85 grama panchayats. About 1,750 water supply schemes have been take up in these panchayats. Of these, around 750 schemes have been completed and are operational. The remaining are in various stages of completion. About 38,000 sanitary latrines have been constructed and over 26,000 unsanitary latrines have been converted into sanitary latrines as part of the Jalanidhi project besides construction of about 20,000 units of compost pits and soak pits. In all the panchayats taken together, drainage with a combined length of 20 km has been constructed.

The total spending on the project has been to the tune of about Rs. 90 crores so far. About one lakh people have so far been covered by Jalanidhi's water supply schemes. According to a recent evaluation undertaken by the KRWSA, more than 98 per cent of the water supply schemes commissioned under Jalanidhi are functioning satisfactorily. Demand for water supplied using tanker lorries had come down by five per cent in the project areas during the recent dry spell.

India along with UN launches International Year of Sanitation

The International Year of Sanitation, 2008, is a theme year set by the UN General Assembly in December 2006 to help put this global crisis at the forefront of the international agenda.

Secretary-General Ban Ki-moon said: "Access to sanitation is deeply connected to virtually all the Millennium Development Goals, in particular those involving the environment, education, gender equality and the reduction of child mortality and poverty." "An estimated 42,000 people die every week from diseases related to low water quality and an absence of adequate sanitation. This situation is unacceptable."

India has been investing tremendously in water and sanitation since Independence. This sector has received increased investment under the 11th Five Year Plan period. Today 90 percent of India's rural population has access to safe drinking water and 48 percent of the rural population has access to toilets and sanitation services.

The year will include major regional conferences on sanitation as part of capacity building initiatives, including one that will focus on school sanitation. It will also encourage public and private partnerships, to help tap into the comparative strengths of each sector to accelerate progress, advocate and raise awareness on sanitation, leverage additional funding, and develop country-level road maps.

India's national sanitation programme, Total Sanitation Campaign (TSC) is operational in 578 out of 600 rural districts with an outlay of Rs. 13423.97 crore (US\$ 3.35 billion) in which the central share is 60%, the state share as well as the community contributions are approximately 20% each.

The Government of India has sanctioned TSC projects in almost all districts of the country so as to achieve full sanitation coverage by 2012. It has planned to provide all rural schools and Anganwadis with safe drinking water and sanitation during the 11th Plan.

Due to TSC and Nirmal Gram Puraskar (NGP), a revolution in the sanitation sector is sweeping across the country which has increased coverage from 1 percent in 1981 to 48 percent coverage in 2007 making it possible for India to achieve the MDG in sanitation ahead of schedule."

Progress requires broad cooperation through public and private partnerships, community involvement and public awareness. Investing approximately \$10 billion per year can halve the proportion of people without basic sanitation by 2015. If sustained, the same investment could achieve basic sanitation for the entire world within one or two decades. While the funding needed for sanitation is not overwhelmingly large, the return on that investment is potentially great.



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