

38th WEDC International Conference, Loughborough University, UK, 2015

**WATER, SANITATION AND HYGIENE SERVICES BEYOND 2015:
IMPROVING ACCESS AND SUSTAINABILITY**

Community participation in water and sanitation services role of Panchayati Raj in India

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BRIEFING PAPER 2138

It has now been a great challenge to the countries like India to provide each of her citizens, urban and rural, with adequate safe water for drinking, cooking and other domestic needs on a sustainable basis. This basic requirement should meet minimum water quality standards and be readily and conveniently accessible at all times and in all situations. Sanitation has also a direct relationship with health development of rural people at large. But sanitation is never perceived as a priority especially in rural India where open space is readily available until today in spite of the growth of population and urbanization. Panchayati Raj Institutions (PRIs) in India after the enactment of 73rd constitution Amendment Act have been taking active role in providing the two basic needs of rural people. Today, Gram (village) Panchayats (lowest tier of rural local government) execute water and sanitation projects by ensuring community participation through Village Water and Sanitation Committees (VWSC).

Introduction

Public health has now been described as the science that deals with art of preventing disease, prolonging life and promoting health through the organised efforts and informed choices of society, organizations, public and private communities and individuals. Needless to mention that without clean water and sanitation, public health cannot be achieved. A recent study conducted by a group of Experts titled Reclaiming Public Water Network (www.tni.org/books/publicwater.htm) identifies that Asia shows the highest number of people unserved by either water supply or sanitation. It has been estimated by WHO (2010) that in 2004 only 59% of the world population had access to any type of improved sanitation facility. In case of developing regions, only one out of two people has access to some sort of improved sanitation facility. The regions presenting the lowest coverage are sub-Saharan Africa (37%), southern Asia (38%) and eastern Asia (45%). In India, even after 66 years of independence, a large section of people particularly those who live in villages are not being served with two basic human rights –water and sanitation. The published report of recent baseline survey conducted by the Ministry of Drinking Water and Sanitation, Government of India (available at <http://www.indiasanitationportal.org/17295>) shows that in India 54.28% of household do not have any household toilet facilities.

In India, the Panchayati Raj Institutions (PRIs), a sub-division of rural local government, have been playing a vital role in the socio-economic development since independence and particularly in the post 1990s era when the concept of globalization was first introduced in our country. The role of such local governments was felt as an integral part of economic development of rural India and as a result, a concrete shape of decentralization of power was given constitutional recognition under the framework of 73rd Constitution Amendment Act, 1992. The Act makes it mandatory for every state government in India to constitute three-tier PRIs and members of these institutions are required to be elected, not nominated. Article 243G of the Act provides the legislature of a state for endow the PRIs with power and authority to implement “schemes for economic development and social justice”. The Act listed twenty-nine broad areas in the Eleventh Schedule where the PRIs have to play a crucial role in the economic development of rural India and one of the major areas that need to cover under Eleventh Schedules relates to water and sanitation (item Nos. 11 and 23).

In this paper an attempt has been made to examine how far the Panchayats facilitate and implement water and sanitation programmes in their villages (based on some case studies), lead sanitation programmes in the village, mobilise communities and ensure villages achieve and maintain parameters meant for central government programmes. At the end, some issues have been raised and if those are not been considered carefully by the government, it can be presumed that in next couple of years the programmes as undertaken by the government and being implemented by PRIs will be at stake and therefore be given utmost priority for providing uninterrupted hygiene services beyond 2015.

Community participation

It has now been one of the concerns of rural development to improve the life chances and well-being of individuals and households, particularly the mass of rural poor who have been left behind in the process of economic growth and development of a country (Singh, 2009, pp. 2-3). However, all of these individuals and households depend directly on common property resources like water and sanitation for their livelihood. In rural India, like other countries, all households rely on common sources of drinking and irrigation water, common forests and pastures. The well-being of these societies depends substantially on the availability, quality and sustainability of these resources. It has been a growing demand that the construction and maintenance of these common properties must be accomplished on a collective basis (Shepherd, 1998, pp. 58-9) and the people who get benefitted from the projects can perform significantly in the planning, organizing, staffing, controlling and directing of rural sustainable development process (Rashidpour, et al. 2010, p. 87). Beneficiaries' own participation in the financing of subprojects generates a sense of ownership and a willingness to share responsibility for the future operation and maintenance of investments. Beneficiary participation in the selection, execution, supervision, and financing of project investments ensures that investments respond to true, perceived needs, and generates cost savings and increased accountability at the local level. There is no denying the fact that investments have greater sustainability when the communities, and/or households contribute to financing in a cost sharing arrangement and when there is increased beneficiary participation. The role of PRIs in this regard is important. Panchayats should have to play the catalyst role to organise and motivate the beneficiaries towards total community participation in each step of selection, execution, supervision, and financing of project investments with the objective of providing better livelihood on sustainable basis. Some of the advantages of community management may be identified as below:

Since community management is often small scale, better transparency can be achieved;

It is flexible and can easily be adapted to local circumstances including poverty;

It ensures for self-monitoring and self-regulation and thus leads to better accountability and quicker feedback and learning;

Communities being the direct beneficiaries of projects so implemented can more effectively mobilise resources to pay for operation and maintenance cost of the projects.

Role of Panchayati Raj institutions in water and sanitation

As mentioned earlier, after the enactment of 73rd Constitution Amendment Act, the PRIs are now responsible for providing water and sanitation to the village people in India, particularly, to poor people. Item No. 11 and 23 of the Eleventh Schedule mentioned the developmental issues relating to drinking water and sanitation of village populace. As a result, the state governments have transferred, along with other subjects under the eleventh schedule, all line departments functionaries associated with sanitation and water. Even, new posts have been created [for example, in West Bengal *Nirman Sahayak* (construction aide) post was created at GP level to give support and assistance in technical matters] with the objective of implementing the developmental programmes successfully. Some of the success stories of PRIs across the country in the process of extending water and sanitation services by involving local community are cited below:

Telangana (erstwhile within Andhrapradesh in South India)

Gangadevipally village in Warangal district may be considered a model in developing a village as an institution. The Census Report of 2011 shows that, *Gangadevipalli* has achieved 100% literacy, 100% enrolment of children in schools, 100% tax collection, every house has an individual electricity connection, water connection and a toilet. But in the early nineties of last century, the situation was different, the village had a major drinking water problem. There was only one well in the entire village that too a kilometre away, and the

village women had to spend over three hours daily at the well, stand in the queue to collect drinking water. Finally, people from the village took the opportunity of building a sustainable water supply system by constructing a water tank in the village under the guidance of *Gram Sabha* and raised 15% own contribution towards cost of the project. The rest amount was given by a voluntary association. Later water filtration plant was also set up and all the families of the village are now using water paying a meagre amount as user charges. The Gram Panchayat (GP)¹ has involved the beneficiaries of the project to run the project effectively and efficiently (*Mishra*, 2010).

Madhya Pradesh (Central India)

Didakhedi is a small village with 30 families situated in *Sehore* block of *Sehore* district. Prior to intervention, the village womenfolk had to collect drinking water to travel a distance of about 3 kms and thus spend 4-5 hours each day. In 2009, by organizing a Gram Sabha, the villagers agreed to construct a water tank in the village which would be the source of drinking water. At the same time, they opted for construction of a low cost toilet for every family of the village. The tank was built with a storage capacity of 9,500 litres of water and was inaugurated during April 2010. This ensured the villagers an uninterrupted supply of drinking water and an open defecation free village. Later, running and maintenance cost of water supply was provided by the villagers on participatory basis and the success story of *Didakhedi* village has earned a unique identity and brought notice of external agencies who agreed to invest in other water and sanitation schemes of the locality. The positive intervention of Gram Sabha ensured people's participation in decision making and management of water supply and sanitation to the village (*Tiwari and Katiyar*, 2014).

Haryana (North India)

The *Kaluana* Gram Panchayat under *Dabawali* block in *Sirsa* district has won the state level award under State incentive Scheme on Sanitation during 2008-09 as it had the process of change. It implemented programmes to improve sanitation, solid waste management and rooftop rainwater harvesting, as well as used funds from the Mahatma Gandhi National Rural Employment Guarantee Scheme for tree plantation and watershed development. It is noteworthy to mention that the GP has channelized a complete community involvement in sanitation and other developmental activities (*Yadav*, 2010).

Maharashtra (West India)

Dhamner in the *Satara* District of Maharashtra, a village of 488 families, has transformed itself within five years into a model village. Here, the Panchayat has been managing their water scheme having community involvement. There are 71 community toilets for the poor and 325 households have their own toilets. The village has no dirty water flooding the streets – waste is collected in drains and processed in settling tanks at four locations. The processed water is used for horticulture. There are vermicompost sheds at different locations where solid organic waste is converted into manure. The panchayat also manages the village's water supply. *Asgaon* in *Ahmednagar* district has a piped water supply where households are supplied for an hour daily and store this water in covered concrete tanks on their premises (*Phansalkar*, 2010).

Tamil Nadu (Extreme South)

In *Tiruchirapally* district an NGO named *Gramalaya* is working with Panchayats in providing the village people with the basic human rights – water and sanitation. It is now working in 6 block area of the district and has formed community based organisation AWASH (Association for Water, Sanitation and Hygiene) in 400 villages. PRIs here play a facilitator role and the Panchayat president is an advisor of the AWASH committee and this comprises ward members, SHG members, youth groups, *Anganwadi* workers, school teachers and other volunteers. AWASH have monthly savings, subscription as well as internal lending. In case of any water or sanitation problems, the AWASH sends a request letter to the *panchayat* president to solve the issues. The President discusses the issue with the ward member concerned and solves the problems. PRIs provide household water connections to all households with the help of AWASH committees and remove street taps to avoid wastage of water and stagnant water. PRIs regularly monitor the cleaning of over-head tanks, chlorination, etc. (*Geetha*, 2010).

West Bengal (East India)

During the nineties of last Century the united *Medinipur* district (i.e. prior to 1 January 2000) was the largest district in the state and it launched a unique rural sanitation programme under the leadership of *Ramakrishna*

Mission Lokshiksha Parishad (RKMLP), an NGO. While the Panchayats played the exemplary role in creating awareness amongst the people about the need of adopting some basic minimum hygiene practices, the RKMLP set up an extremely efficient delivery mechanism. Within two years, more than 19000 households set up their own latrine in the district. The success of the *Medinipur* experimentation encouraged the state government to integrate the programme with the centrally sponsored one in 1993-94 and spread it across the state. Till 31.3.2009, a total of 72, 47,915 households in the rural Bengal have set up their own latrine with 332 sanitary marts (P&RD Annual Report, 2008-09, p.69).

School sanitation

School Sanitation is an integral part of Rural Sanitation Programme. Students using toilet facilities in schools convey the messages of sanitation and hygiene behaviour to their households. Absence of toilet facilities in schools is also one of the main factors for dropout of girl students. Access to sanitation facilities and safe drinking water are the two important components for universalisation of primary education and retention of particularly girl students in schools. The Ministry of Rural Development, Government of India, has allocated huge sums of money under their flagship programmes, namely, Total Sanitation Campaign (TSC) and National Rural Drinking Water Programme. School sanitation is a priority activity under TSC2. The programme includes provision of two units of toilets (one for girls and lady teachers and the other for boys and male teachers) for all educational centres. At present, at least one toilet block is available in about 95% of schools (P&RD AR, 2008-09).

Gram Unnayan Samity (GUS: Village Development Committee) and Public Health

The National Rural Health Mission has prescribed constitution of a Village Health and Sanitation Committee at the village level under the umbrella of the PRIs to address various community level issues relating to health and nutrition. In West Bengal, it has been decided that a functional Committee of the GUS shall act as the Village Health and Sanitation Committee.

Analysis of case studies

In the course of adopting devolution mode of vertical decentralisation, the 73rd Constitution Amendment Act, 1992 enshrined “the devolution of powers and responsibilities upon Panchayats at the appropriate level (Article 243W). Devolution is the strongest form of decentralisation where in full decision making powers are granted to the local authorities and allowing them to take full responsibility without reference back to the government. The authority to design and execute local development programmes and projects and financial power are given to the local bodies under the ideal condition of devolution. The effective decentralisation process requires a clear delegation of roles and responsibilities (Functions) at each level of government, backed by sufficient financial resources (Funds) and human resources (Functionaries) to carry out the assigned duties. But if any one of the three components is lacking, the programme may not be implemented adequately.

In analyzing the case studies as cited in earlier section, it may be pointed out that though the devolution of functions, funds and functionaries (popularly known as 3-Fs) have not been duly assigned with the PRIs at grass root level, yet the community as a whole has made some changes based on the participatory principles of planning, implementation, monitoring and even evaluation. Studies show that in *Gangadevipally* and *Dida khedi* village, the village people had come forward to solve their problems of water and sanitation. They raised the initial fund from among themselves, they decided where to set up the water tank and also formulated guidelines for successful operation of and distribution of water. In case of sanitation, the women took the larger share of interest in constructing the toilets as it was they who suffered the most from not having the facility. The PRIs and *Gram Sabha* played the catalyst role in exploring the avenues of getting government fund and also helped to organise the village community in the course of implementing the projects.

In other states, namely, Haryana, Maharashtra and Tamil Nadu the PRIs were instrumental in other sustainable programmes like solid waste management, rooftop rainwater harvesting, and conversion of solid organic waste into manure. The *Gram Sabha* played a critical role in all the cases by organizing village community in achieving a common goal. It may further be anticipated that had the upper tier government effectively been implemented the devolution of 3-Fs in its true sense, as envisaged in the Indian

Constitution, the role of PRIs, specially *Gram Sabhas* would be more positive and more real in the course of transforming the status of water and sanitation position prevailing in India. It may not be irrelevant to mention that recently, under *Nirmal Bharat Abhiyan* programme it has been proposed that the subsidy for toilets of individual household latrines would be enhanced from Rs. 10,000 (US dollar 163) to Rs.12,000 (US dollar 194) considering the price hikes. However, the amount is still meagre with respect to construction of a healthy sanitary toilet.

Lessons learnt

The case studies generate some specific learning with respect to the water and sanitation problems in India and how to combat with those problems in coming days. Some of them may be identified as follows:

1. **Determination to solve problem will explore possibilities for solutions:** when determination is there, one shall always achieve what one wants to achieve. The villagers of *Gangadevipalli* and *Didakhedi* have solved their problems by organizing themselves. They have built up necessary facilities of drinking water and sanitation without having any fund from Panchayat and administration. Later, when the successes have come, other organisations show their interest to implement their own schemes. Thus in a word it may be stated that confidence is the key to success and the village community as a whole achieved the success.
2. **Water and sanitation come side by side:** It has been found that almost in every case the prioritisation has been given on implementing drinking water project rather than solving sanitation problems. When, however, sufficient volume of water is available, the villagers have come forward to solve the sanitation problems. Needless to mention, at least one bucket of water is needed to use a healthy sanitary toilet. Lack of water, it may be presumed, compelled the villagers for open defecation and the women, in that system, are the worse sufferers. The villagers realized that when their primary need i.e. drinking water can be solved on their own, they tried to solve the sanitation problems and finally get successful.
3. **Catalyst role of Gram Sabha and PRIs:** It has been found that the Gram Sabha played a catalyst role in the process of implementation of water and sanitation projects by organizing village community to sit together and discuss their problems and how to solve those problems. Had the villagers who once had apathy for the Gram Sabha not made efforts to rely on and build their faith in their own Gram Sabha, the success stories of solving the problems of water and sanitation would never been possible. Gram Sabha today is considered by villagers as a forum for them to discuss their problems and taking collective decisions to solve those problems within the available resources.
4. **Women take initiatives for successful implementation of sanitation programme:** Provision of enclosed toilet and sanitation provides for safety and privacy to women and adolescent girls and it is they who gain the most from this intervention. Once the toilets were constructed in a few houses it is the women who took initiatives within their own families to convince others. In this way the rest of the community members are convinced and motivated and tried to bring attitudinal change by participating in this programme.

Conclusion

Economic growth and development obviously involve changes in the physical ecosystem. Every ecosystem everywhere cannot be preserved intact. But changes can be minimised in the given condition if priority is given on sustainable development. Like most of the countries across the world where the local governments play a very serious role in providing people with the two basic human rights – water and sanitation, the PRIs in our country have also been directly involved in extending these basic services among the village people, particularly the poor by way of implementing various schemes and programme funded by upper tier governments, both state and central. The various studies in different parts of India show that Panchayats have a tremendous potential to make a difference in service delivery of water and sanitation and have active role in ensuring community participation in the process of water supply improvements and hygiene promotion. It has now been considered that the most important challenge for effective implementation of the sanitation programme in rural India is that a large section of rural people are either poorly informed or not overtly aware of the linkage between sanitation and health. Thus creating awareness and sensitisation of rural people about the advantages of using sanitary toilet will be the priority. The role of PRIs and Gram Sabha is particularly important in this context as these grass root level organisations, it has been proved, can effectively combat such challenges.

Acknowledgements

The author being a member of Solution Exchange for the WES-Net Community in India, UNDP has access to some of the discussion papers contributed by various members. He acknowledges each of the discussion in preparing the paper and would like to extend thanks each of the contributors.

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Notes

- ¹ *Gram Panchayat* (GP) belongs to the lowest level(village) of three tier *Panchayati Raj* System (rural local government) having *Zilla Parishad* at apex and *Panchayat Samiti* in intermediary level.
- ² TSC was renamed as *Nirmal Bharat Abhiyan* (NBA) with effect from 2012-13 financial year and has been attached with *Mahatma Gandhi National Rural Employment Guarantee Scheme*. After launching of *Swachh Bharat Abhiyan* on 2 October 2014, NBA will be restructured into Swach Bharat Mission and for rural sector it will fall under the Ministry of Drinking Water and Sanitation.

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