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

Sabar Shouchagar: an emerging and inspiring district level model for eliminating open defecation in India

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“Sabar Shouchagar”, meaning “toilets for all” a thought that was later actualized by the district leadership collectively overcoming challenges such as correct situation analysis, information management, participatory planning to enable implementing a convergent social engineering program for providing access to latrine for all families in the district, within the given financial, technical and human resource constraints of a low priority development programme in India. The experience from two years of implementation informs that by involving and motivating key stakeholders, use of innovative communication approaches for mass mobilization of communities, making them aware of the health hazards of the Open Defecation; developing systems for improving service delivery of sanitary toilets, triggering the collective behavior change for stopping open defecation, have transformed the environment in the district, whereby it has become possible achieving an Open Defecation free district.

Context and background

Wide spread open defecation in rural India is a unique human development emergency as India shares the largest proportion (60%) nearly six hundred million people defecating in open out of 1.20 billion people defecating in open globally(JMP-2014) . Recognizing the urgency, Government of India have recently revamped the national sanitation programme guidelines for sanitation and hygiene promotion i.e. Swachh Bharat Mission (Gramin) with a mission to eliminate open defecation nationally. Government of West Bengal have also made the highest level commitment taking a pledge on World Toilet Day 2013 to make sanitation a public movement and eliminate open defecation by 2019.

District Administration in Nadia took an early note of the poor sanitation and hygiene situation in Nadia district as a priority in a mission mode, as over 27% population defecating in open (census 2011), while in adjoining country Bangladesh with similar socio-cultural situation, the open defecation levels have reduced to 4% (JMP, 2014). The issue was raised in public forums with elected peoples representatives and stakeholders to trigger the conscious for action to change the situation.

The rural sanitation programme in West Bengal state is led by the Panchayat and Rural Development Department, Government of West Bengal and implemented in decentralized manner by the Panchayat Raj Institutions (PRIs) at the District, Block and Gram Panchayat level. The district of Nadia is situated in the heart of the Bengal delta held within the arms of the river Ganga, namely, the Bhagirathi on the West. On the south-east and east it is bounded by the Republic of Bangladesh. The district has an area of 3927 sq kms, with a population of 51,68,488 as per Census 2011. The population density is 1316/Square kilometer, higher than the state average. The proportion of population living in urban areas is 27.84% and rural areas is 72.16%. The Scheduled Cast and Scheduled Tribe population constitutes 29.66% and 2.47% respectively. The sex ratio is 950 females as against 1000 males, the average percentage of literacy is 85.35. The district is culturally rich, all major faith organizations including people from all the major religion i.e. Hindus (70%), Muslims (27%) and Christians (3%) resides in Nadia.

Strategies

Nadia district conceptualized and developed its strategy and action plan using the 'Theory of Change' framework that includes, start big, government should lead, be flexible, use external support when needed, create demand, strengthen supply chain, enabling environment detailed as under:

- 1) Situation analysis using primary and secondary information;
- 2) Strategy formulation through stakeholder consultations;
- 3) Innovative behaviour change communication campaign for community mobilization;
- 4) Involvement of women Self Help Groups for demand and supply management,
- 5) Involvement of children as change agents;
- 6) Effective convergence between programmes for improved coordination and resource mobilization,
- 7) Capacity building of key stakeholders, frontline workers and masons;
- 8) Partnerships with faith based organizations, corporate organizations and civil society organizations;
- 9) Use of technology for programme monitoring.

The Sabar Shochagar programme is being implemented in the district in a mission mode approach, led and coordinated by the District Magistrate. The funds were mobilized primarily from the national flagship programme resources under Nirmal Bharat Abhiyan (NBA), Mahata Gandhi National Rural Employment Guarantee Programme (MGNREGA). The Sabar Shouchagar have promoted two pit pour flush leach pit type technology option for improving access to sanitation in the district, the families were mobilised to deposit INR 900.00 as their contribution to confirm their willingness to adopt the toilet, that was reciprocated by the national programme through construction of toilet with a unit cost of INR 10,900.00 for each household. However the above poverty line families have paid the entire cost of the toilet.

Key activities

Various activities have been conducted to ensure project's progress and sustenance. They are mentioned below:

- **Mobilization of elected representatives:** Regular meetings, consultations, orientations on sanitation and hygiene were held to inform the urgency and importance of the mission and actively involved elected Panchayat Raj Institutions (PRI) representatives. Their involvement enabled decentralized planning and implementation of the programme, increased ownership and outreach to the communities for disseminating key programme messages that contributed in creating an enabling environment
- **Mobilization of school children :** Sensitization of school teachers and head masters on wash in school interventions, strategic incentives for schools to acknowledge their contributions and results against key wash indicators, formation of child cabinets and their involvement as change agents for sanitation and hygiene promotion in school and community helped generating demand for toilet at home. The engaging activities included school rally, drawing competition, weekly pledge taking by all children for improved behaviour for sanitation and hygiene practices especially use of toilet.
- **Mobilization of Women:** Strategic partnership with organized women groups, sensitization of women through village level meeting, awareness workshops and involvement of networks (Self Help Groups) for home contact drive through inter personal communication towards stopping open defecation. This helped educating and generating awareness and demand for toilets and later its use
- **Mobilization of Community:** Developed innovative approaches and communication tools to reach the community at large and inform them about the programme, the community dialogues were held using all forums such as local festival, wall painting, banners and hoardings. Strategic partnerships with faith based organizations that included all major religion and faiths (Hindu, Muslims and Christine), their network promoted sense of pride for collective behaviour change, encouraged developing new social norm for stopping open defecation
- **Convergence:** Sensitized and engaged all development programme officials to join hands, assigned additional responsibilities to report on how they can contribute towards the mission for elimination of open defecation, resource mobilization for existing national flagship programmes especially the national rural employment guarantee programme, national rural livelihood programmes. The human resource was mobilized through involvement of ICDS workers, ASHA (Health workers), school teachers for influencing the communities in their respective catchment areas
- **Service delivery:** The programme did a bottleneck analysis, oriented NGO partners, established a training center for masons training, developed technical skills of women SHGs leaders, established new sanitary marts for decentralized service delivery at Gram Panchayat level. This was one of the most

strategic investment that enabled effective and timely supply of toilets (Leach pit, pour flush technology) on demand that increased the confidence among key stakeholders

- **Monitoring and studies:** Regular review meetings were held at all levels to assess the programme implementation, quality of construction. The institutions and officials that spearheaded the process were Village Health and Sanitation Nutrition Committees (VHSNC) at GP level, Block Development Officers at block level, Sub Divisional Magistrate and Additional District Magistrate at Sub Division and district level. Use of technology such as mobile phones for SMS based information sharing, use of GIS platform for mapping toilet density, improved reporting system. A rapid assessment (random sample study) was also conducted with the help of UNICEF in mid-2014 to assess the status of toilet use and understand the collective behaviour change towards stopping open defecation. The findings were encouraging as it reported that over 85% families are using the toilets and the level of open defecation is reduced. (*Refer-5: Toilet use study-2014*)

Results

The Sabar Shouchagar programme implementation have become a people's movement, led by community and elected peoples representatives, summary of results after two years of implementation are as under:

- Over 302,622 families not having toilets have access to sanitary toilets (*Refer table-1*)
- All families (5.10 million population) reached through innovative IEC with key programme messages that improved awareness on toilet usage (*Refer: photo-1*)
- Increased and accelerated sanitation coverage from 69% to 99% (*Refer table-1*)
- Increased use of toilets from 50% to 85% (*Refer-Nadia Toilet study-5*)
- Significant reduction in open defecation (*Refer-Nadia Toilet study-5*)
- All schools have WASH facilities

Impacts:

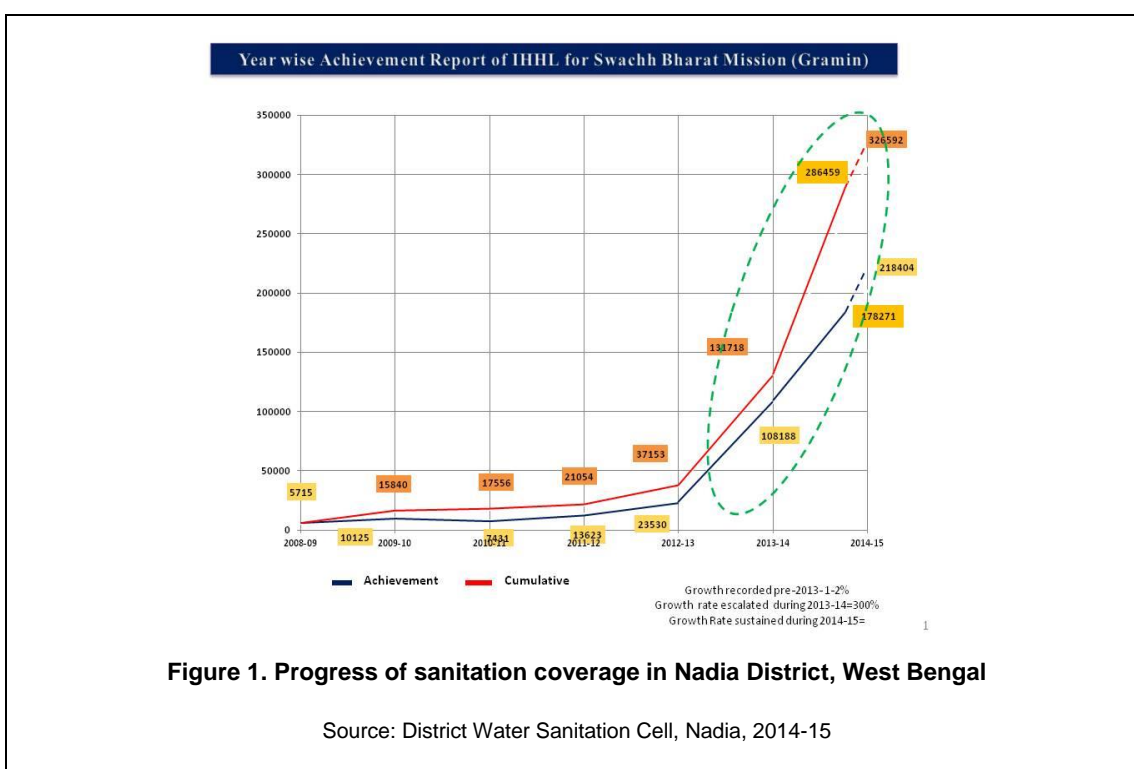
- Improved health indices as per health centers reports (*Refer: figure-3*)
- Women empowerment - greater participation of women, increased livelihood opportunities
- Collective behavior change among communities towards toilet use (*Refer-Nadia Toilet study-5*)
- Decentralized institutional capacity for sanitation programme service delivery

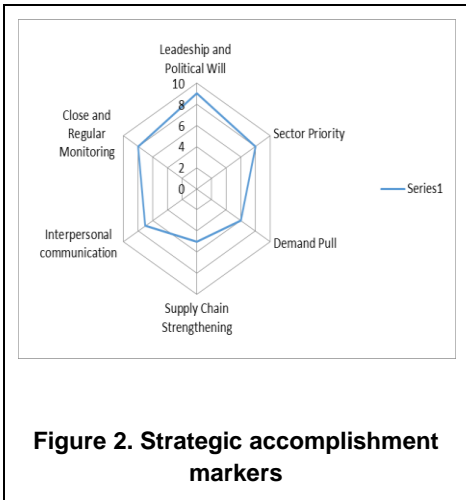
Lessons learnt:

- Political and administrative will is very important for any movement (*Refer: figure-2*)
- Community involvement is the key to make a programme success
- Every stakeholder contribution matters
- Women participation is the Game Changer
- Convergence of resources enables and generate synergy
- No substitute for intense monitoring

The table below informs that during the project period (April 2013 to February 2015) nearly 302,622 families were provided sanitary toilets that increased the access to sanitary toilets from 69.34% to 99.29% which is significant. The Sabar Shouchagar initiative is monitoring the service delivery component very closely and the remaining 7259 families without access to toilets will be reached by March 2015 to achieve the mission objective to reach 100% families and ensure all have toilets and they use.

Table 1. Baseline data: March 2013					Accomplishments	
Type of family	Total Households (A)	Households with toilets (B)	Households without toilets (C)	% of households without toilet (D)	Households out of column (C) have toilet as of Feb 2015	Households without toilet (%) As of Feb 2015
Below poverty line families (eligible for subsidy)	395386	238020	157366	39.80	151307	6059 (1.53%)
Above poverty line families (eligible for subsidy)	413370	298727	114643	27.73	114558	85 (0.02%)
Above poverty line families	201700	163828	37872	18.77	36757	1115 (0.55%)
Total Families	1010456	700575	309881	30.66	302622	7259 (0.71%)





Public health status-Nadia

Year	Diahorreal incidences	Diahorreal deaths	Severally malnourished	Moderately malnourished
2012-13	1044767	28	1195	81664
2013-14	96185	19	0675	60652

Figure 3. Public health status-Nadia



Photograph 1. A snap from the longest Human Chain against Open Defecation (122.3 Km), at Nadia; 21st Feb,'15



Photograph 2. Proud women with her new toilet at home in Nadia



Photograph 3. Oath by stakeholders, on 2nd Oct, 2013 for, ODF-Nadia

Photographs: District Water and Sanitation Mission-Nadia

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Note:

Sabar Shouchagar means "toilet for all". This local name became very popular that conveys the objective of the programme and well received by rural communities.

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