Since 1997, the number of rural families who have access to toilet facilities has more than tripled, in Maharashtra. Despite this dramatic increase, however, only 20 per cent of families in the state presently have access to toilet facilities and even if the numbers were tripled yet again, this still would not be enough. In fact, until every person in every community is practising safe sanitation, none is free from the threat of sickness and disease. Sanitation becomes meaningful and effective only when it is total and comprehensive.

Sanitation is a habit and not a mere infrastructure or facility. Until the need for and benefits of sanitation are realized and internalized, mere provision of toilet facilities will not achieve total sanitation. You can take the horse to the water, but can’t make it drink until it is thirsty.

Coupled with the fact that the community would not reap the benefits of safe sanitation until all the members of the community adopt hygienic sanitary practices, the Government of Maharashtra has decided to develop a strategy which determines the most effective ways of creating awareness and sensitizing and mobilizing communities to adopt better sanitation practices through a comprehensive, community-wide coverage.

Towards this objective, the Government of Maharashtra organized a workshop in Pune, in partnership with the Water and Sanitation Program-South Asia (WSP-SA), to deliberate and formulate a new strategy for total rural sanitation. This workshop sought to benefit from the valuable lessons learned to date throughout India and beyond, shaping and refining the country’s own efforts in accord.

BC Khatua
Secretary, WSSD
Government of Maharashtra
ABOUT THE WORKSHOP

It is not simply the lack of toilets that keeps people away from proper sanitation practices. Lack of awareness of proper hygiene behavior and socio-cultural factors are also responsible for unsatisfactory sanitation practices. Therefore, any successful approach must be holistic in nature. Communities must internalize the need to adopt improved hygienic behavior; they must know and understand the need for proper sanitation as well as how it can be achieved. A multiplicity of unique financial, personal and household conditions must be acknowledged and respected, and these must be reflected in such fundamental issues as the provision of technology options. At the same time, sanitation must be addressed as a paramount issue in public health.

In February 2002, the WSP-SA organized a study tour to and conducted a workshop in Bangladesh, to study and review the success of an approach adopted by WaterAid Bangladesh and its local NGO partner, Village Education Resource Center (VERC). This workshop was attended by government functionaries from Central Government and four Indian states, including Maharashtra, and by NGO stakeholders.

Following this, the Government of Maharashtra and WSP-SA supported a team of state government officials, Zilla Panchayat and NGO representatives to visit Tiruchirapally, Tamil Nadu, where WaterAid India and NGO partners employ a different, but also successful, approach to the promotion of total sanitation.

Marking the end of the first stage in a process, a state-level workshop on ‘Strategy Building for Rural Sanitation in Maharashtra’ was held in Pune, from August 23-24, 2002, in partnership with the Government of Maharashtra and the WSP-SA. Approximately 71 participants had attended, including officials from the Government of India, a large representation from the Government of Maharashtra, Maharashtra-based NGOs as well as international NGOs such as WaterAid India and multilateral agencies (UNICEF and World Bank). Resource persons were drawn from Village Education Resource Center, a local NGO in Bangladesh, Medinipur District and RamaKrishna Mission Lok Sikhshya Parishad, West Bengal, and WaterAid India from Trichy, Tamil Nadu. Mr. Kamal Kar, Participatory Development Consultant, had facilitated the workshop.

Lessons learned in Pune

At the Pune Workshop, we have shared our knowledge and exchanged our experiences and will now work towards realizing the proven value of the sanitation principles:

- The focus of sanitation efforts should be on the elimination of open defecation, rather than on building latrines.
- Infrastructure must be demand-driven and this must occur at the community level, rather than at the individual level.
- A variety of technological options must be available so that none are excluded or impeded from participation.
- It is empowerment, rather than fiscal subsidy, that provides a sustainable trigger for action.
- If fiscal incentives are to be used, they must be directed toward the community-level rewards.
- involvement of local government in strategic partnership with NGOs/CBOs is critical to the ultimate success of any plan.
Would you care for some feces on that pau bhaji?

How about some feces poured over your pau bhaji? In fact, when care is not taken to properly dispose of human excreta, the result is that people are indirectly consuming it, washing their clothes in it and rubbing it into their skin. Some people estimate that 15,000 truckloads of human feces are produced, daily in India, and are left exposed. None of this is pleasant to imagine and these are examples of what the Village Education and Resource Center (VERC) calls a ‘trigger’. These kind of images help people to understand the seriousness of sanitation issues and also to create a mental reminder that will not soon be forgotten. In fact, an effective trigger can be so powerful that even the poorest households find the means to address what they realize as a situation that cannot be ignored.

DRAWING FROM SUCCESSFUL EXPERIENCES

The rich experiences from Medinipur (West Bengal), Rajshahi (Bangladesh), Trichy (Tamil Nadu) and the Government of Maharashtra’s own Sant Gadge Baba Campaign serve to inform a future direction in rural sanitation.

Triggering change: A motivational approach to rural sanitation in Bangladesh

Success in the sanitation efforts of the Village Education Resource Center, an NGO supported by WaterAid, in Bangladesh, can largely be attributed to the concept of a ‘trigger’ or ‘ignition’. The project which is initiated by outside sources provides absolutely no financial assistance or incentive for communities, who become so genuinely intent to improve their own sanitation status that this is simply not an impediment. In fact, they are that convinced of the imperative of investment in the effort, that better-off families have voluntarily assisted poorer ones to obtain any necessary technological structures and logistical support.

The process involves the outside party who provides the ‘trigger’ by engaging the community in self-assessment of the existing practice of open defecation. The thrust was to stop open defecation by internalizing the ill effects thereof. This realization that open defecation by even one person in the community poses a collective danger makes the community acutely and uncomfortably aware that they must make changes in behavior, collectively. This is motivated by a felt need, first-hand exposure to the problem, a fear of diseases or sense of being dirty and is sustained by mass consensus and social pressure.

In this case, because technology is neither provided nor subsidized, coverage is tantamount to usage and communities share their knowledge with others with a genuine sense of urgency.

Technology options and financing mechanism for total sanitation coverage: Experience in Tamil Nadu

WaterAid India, with its NGO partners, creates an enabling environment for the communities of Tiruchilapally District in Tamil Nadu. Community groups are facilitated to provide fundamental sanitation and hygiene information.

To accommodate the resulting demand for sanitation facilities, technology is made available at an affordable price and in various models. Both production and promotion are decentralized so as to allow for competitive pricing and innovations. However, minimum technology standards are defined, in order to ensure effectiveness and optimum benefit. In addition, there is a transfer of skills to the community and among institutions so that improvement in technology provision is without limit.
Fiscal incentive: When does it help and when does it hinder?

Successful sanitation models illustrate that communities unite and feel motivated when they cooperate for the collective good. Finances might be better used for the benefit of the entire community, once sanitation has been achieved. However, total sanitation can only be achieved with the participation of every household and this can lead to a disproportionate burden upon the poorest families. Therefore:

Fiscal incentive might be directed to the community, as a whole, as an incentive to cooperate and a reward for their efforts.

As a complement to the availability of facilities, credit and other financial opportunities are also created for those in need. These are not disbursed as a form of reward but rather as an enabling factor for those who might otherwise not be able to afford a toilet. The individual subsidy which comes from the Government is re-directed to a village development fund based on community consensus and decision. The fund is managed by the community for common village development activities. Banks and local financial institutions recognize sanitation as a priority investment and credit is available to community groups at market interest rate. This way, no household is excluded and, in fact, both the burden and benefits can be shared through cooperation.

The role of local government for rural sanitation: Experience in West Bengal

Experience in Medinipur District, West Bengal draws attention to the importance of the role of local government in coordinating with NGOs. Coverage in the district has risen from 8.9 per cent to 56 per cent in the last two years alone, and this can be attributed to effective cooperation in the provision of hygiene and health education as well as regular and extensive monitoring of these activities.

This program uses IEC as a means of informing and drawing commitment from the community. However, it is important to note that it is the dedication and interest of the local government that is the driving force.

WATSAN (Water and Sanitation) Committees have been formed at District, Block and Gram Panchayat levels. The Zilla Parishad then carefully selects the NGOs who will best carry out field-level projects, monitoring and evaluation, while the Gram Panchayats select the motivators who establish direct contact with households. Every week, scheduled meetings are held at Gram Samsad, Gram Panchayat, Block, Sub-Division and District levels in order to maintain close lines of communication, as well as to strengthen capacity at each level.

Sant Gadge Baba Clean Village Sanitation Campaign in Maharashtra

In view of the access of a mere 6 per cent of the rural families to sanitation facilities and the imminent threats posed by insufficient sanitation, the Government of Maharashtra implemented an ambitious strategy in 1997, emphasizing the need for the construction of sanitation infrastructure. Within a three-year period, financial resources were poured into the effort and by the year 2000, 16.61 lakh toilets had been constructed and expenditure had reached Rs. 6.5 billion, with a Government subsidy support of Rs. 4.56 billion. To some, the mere quantity of toilets provided and the incredible amount of money invested could be interpreted as ‘success’. However, subsequent surveys revealed that in the best possible case, only 37 per cent of the toilets constructed were actually
<table>
<thead>
<tr>
<th>Comparison of sanitation models</th>
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<tbody>
<tr>
<td><strong>BANGLADESH</strong></td>
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<tr>
<td>Village Education Resource Center (VERC)</td>
</tr>
<tr>
<td><strong>TAMIL NADU</strong></td>
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<tr>
<td>WaterAid India (WAI)</td>
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<tr>
<td><strong>MEDINIPUR</strong></td>
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<tr>
<td>Local government and NGO partners</td>
</tr>
<tr>
<td><strong>MAHARASHTRA</strong></td>
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<tr>
<td>Government of Maharashtra (GOM)</td>
</tr>
<tr>
<td><strong>MOTIVATION</strong></td>
</tr>
<tr>
<td>✷ Participatory process</td>
</tr>
<tr>
<td>✷ Trigger: Self-assessment, oral/fecal link</td>
</tr>
<tr>
<td>✷ Community focus</td>
</tr>
<tr>
<td>✷ Emphasis is on both, individual households and the community, as a whole</td>
</tr>
<tr>
<td>✷ Hygiene education</td>
</tr>
<tr>
<td>✷ Emphasis is on the household, rather than the community</td>
</tr>
<tr>
<td>✷ Competition (for financial reward)</td>
</tr>
<tr>
<td>✷ Recognition</td>
</tr>
<tr>
<td>✷ Reputation</td>
</tr>
<tr>
<td>✷ Unity of community for the common cause</td>
</tr>
<tr>
<td><strong>INSTITUTION</strong></td>
</tr>
<tr>
<td>✷ Donor</td>
</tr>
<tr>
<td>✷ NGO</td>
</tr>
<tr>
<td>✷ Community</td>
</tr>
<tr>
<td>✷ Donor</td>
</tr>
<tr>
<td>✷ NGO/CBO</td>
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<tr>
<td>✷ NGO/PRI</td>
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<tr>
<td>✷ Banks/financial institutions</td>
</tr>
<tr>
<td>✷ NGO/PRI</td>
</tr>
<tr>
<td>✷ Sanitary market</td>
</tr>
<tr>
<td>✷ Government as facilitator</td>
</tr>
<tr>
<td>✷ State/District/Community</td>
</tr>
<tr>
<td>✷ ‘Government Participation in Community Initiatives and Activities’</td>
</tr>
<tr>
<td><strong>FISCAL/FINANCIAL INVESTMENT</strong></td>
</tr>
<tr>
<td>✷ No subsidy from Government</td>
</tr>
<tr>
<td>✷ Some community members would assist others</td>
</tr>
<tr>
<td>✷ Individual subsidies contributed to Village Development Fund</td>
</tr>
<tr>
<td>✷ Micro-credit support from WaterAid and financial institutions</td>
</tr>
<tr>
<td>✷ Subsidy is accessible but is not the driving force. It is directed toward the community and not the household</td>
</tr>
<tr>
<td>✷ Low subsidy for those below the poverty line... but they tend not to want it</td>
</tr>
<tr>
<td>✷ Community contribution of approximately Rs. 200 crore, annually, through collective community action</td>
</tr>
<tr>
<td>✷ Community receives a monetary reward if theirs’ is declared the most successful village</td>
</tr>
<tr>
<td><strong>TECHNICAL</strong></td>
</tr>
<tr>
<td>✷ No prescription</td>
</tr>
<tr>
<td>✷ Market response</td>
</tr>
<tr>
<td>✷ Focus on elimination of open defecation</td>
</tr>
<tr>
<td>✷ Technology guidelines and standards are disseminated</td>
</tr>
<tr>
<td>✷ State-promoted/local government-driven, NGO-run sanitation mart</td>
</tr>
<tr>
<td>✷ No technology is imposed</td>
</tr>
<tr>
<td><strong>SCALE</strong></td>
</tr>
<tr>
<td>✷ Village-to-village</td>
</tr>
<tr>
<td>✷ Village-to-village</td>
</tr>
<tr>
<td>✷ Usage has increased to 56 per cent in the last two years</td>
</tr>
<tr>
<td>✷ Full: State, village, NGO</td>
</tr>
<tr>
<td><strong>SUSTAINABILITY</strong></td>
</tr>
<tr>
<td>✷ Empowerment is a permanent change</td>
</tr>
<tr>
<td>✷ Program is not dependent on resources for implementation</td>
</tr>
<tr>
<td>✷ Managed by community-based institutions and sound technology</td>
</tr>
<tr>
<td>✷ Sustained through PRI/NGO monitoring and weekly meetings</td>
</tr>
<tr>
<td>✷ Uncertain: Would it continue without competition incentive?</td>
</tr>
</tbody>
</table>
Key factors in the chain of implementation are:

- **EMPOWERING**: Many people are simply unaware of the health hazards and the effects of them on their lives. Through explanation and self-analysis, people become genuinely concerned when they realize the impact of poor sanitation on health, the environment, employment, financial prosperity and ultimately the entire economy. Awareness of technological options, how to acquire, use and maintain them is also important in order for people to take appropriate action.

- **OWNERSHIP**: Genuine investment in any cause is relative to the sense of ownership of it. While the GOI may issue policy directives, PRLs and community groups must be actively involved and continuously engaged in the effort.

- **SOCIAL FACTORS**: The power of socialization must not be underestimated. Peer-to-peer learning, behavior example within a community, social pressure to emulate ‘a good thing’ or to adopt a habit perceived as a symbol of status are perhaps the most effective tools of influence.

- **CONVENIENCE**: Opportunity to act in accord with newly-adopted behavioral changes must be made available to all sections of the community. Technology options should be available in a variety of designs and at various costs, so that none are excluded.

- **FISCAL INCENTIVE**: Despite a tendency to look toward financing as a means of mobilization, experience reveals that subsidy is not an effective way of enabling either households or communities to achieve a desirable level of sanitation. Fiscal incentives should be in the form of reward, upon task completion and recognition of improved practice.

being used for their intended purpose; the rest were being used for other purposes or not at all.

The findings were more revealing than shocking and lessons were obvious.

The Government of Maharashtra’s recent initiative attributes its success to participant communities, who have united in a spirit of internal cooperation and external competition. The idea was to create an atmosphere which motivated people to become the driving force in sanitation efforts, while promoting new habits that could be sustained, thereafter.

The Sant Gadge Baba Clean Village Sanitation Campaign is a contest, whereby communities compete against each other in order to gain a reward, to be used for the collective good. Points are earned as a variety of cleanliness principles are implemented, ranging from toilet use to personal hygiene. In the competition, the three highest-scoring villages at each level (Block, District, Region and State) are awarded with a cash prize to be used for the benefit of the entire community, though not necessarily for sanitation purposes. The main benefit to the villages involves reputation and recognition rather than simply monetary gain and communities stand to lose their recognition if they do not maintain their village in ways that are environmentally sound.

Those villages who do not ‘win’ do not receive either cash or subsidy from the Government. However, they still benefit as they will presumably develop and cultivate healthier sanitation practices. And there is always a chance to win the competition the next time or thereafter.

In addition to other works, an estimated one lakh household latrines are being built in the state as a result of this program. A total expenditure of Rs. 6.6 crore in the form of cash prizes leverages the creation of an estimated Rs. 200-250 crore worth of rural infrastructure, annually, through collective community action.

**STRATEGIC ISSUES**

The participants were divided into groups and the groups worked on the following three themes based on their experiences in the field and lessons from the workshop:

- How can the implementation of the existing TSC of the GOI be improved?

- Approaches to awareness creation and igniting mindset changes and how these can be taken to scale.

- Developing functional institutional arrangements, creative use of fiscal instruments, and the issue of technical choice.

The outcome of the group discussion and recommendations made by the participants during the workshop are summarized here.

I. How can the TSC be modified to take into consideration the lessons learnt in past and present efforts?

**How to make current TSC work: Presentation by Group 2**

The GOI Total Sanitation Campaign was revised in May 2002 and has adopted a holistic approach to sanitation, addressing various aspects of personal hygiene and environmental sanitation. The policy draws attention to the importance of participation and has served to raise awareness among both, district administrators and communities, in many cases.

However, the full potential of this campaign has yet to be realized. Many administrators perceive this to be simply ‘another scheme’ and give it little priority. Others argue that the shift to low financial assistance has also decreased the willingness to participate, adding to the economic burdens at the household level.
Instead, the implementation of the TSC might become more effective by refining several aspects:

- **Explicit guidelines:** Specific reference must be made to social and environmental aspects, the relation of sanitation issues to the spread of disease and the prevention of them, and to the maintenance and sustainability of various technological structures.
- **Coordination:** Well-structured and effective coordination among all institutions, including government departments (Health, Rural Development, Water and Sanitation, Education, Social Welfare and the Panchayati Raj), NGOs and district administrators must be established. In order to ensure that the TSC remains a priority, there should be a dedicated, full-time district authority who is responsible only for this area.
- **Orientation:** Orientation to TSC and its guidelines should be supplemented with regular workshops and opportunities to clarify understanding.
- **Information/Education/Communication (IEC):** Until both coverage and usage are 100 per cent, IEC cannot be considered a completed task.
- **Technology options:** Standards should be issued, addressing all aspects pertaining to the use of latrines. A menu of technology options need to be demonstrated to be able to cater to all economic sections.
- **Target:** The target should be at the community level.
- **Subsidy as reward:** Any cash subsidy should be considered a reward, rather than a cost rebate. In addition, the subsidy should be given to the community, as a group, who would then decide collectively as to its utilization.
- **Monitoring and evaluation:** Instead of targets that focus on hardware and construction, more relevant indicators of proper sanitation are the elimination of open defecation, the reduction in diseases and epidemics and improvements in health and well-being.

II. What are the best ways to raise awareness and to mobilize a community?

The best approach to sanitation mobilization is again a holistic one, involving each one in the process. The community must be made to understand the benefits of hygienic sanitation to help them to make informed choices regarding the technology and design of facilities:

The approach for triggering behavioral change in sanitation practices is based on: a) creating awareness within the community for collective action against the adverse impact of inadequate environmental sanitation on hygiene and health; and b) empowering communities to make and sustain the required behavior changes. Communities must be assisted in internalizing the fact that every household should adopt hygienic sanitary practices and made to understand that the benefits of individual behavior change has a collective impact on the entire community.

The change could be initiated through a state/local government-NGO partnership. Local government involvement is required to sustain and scale up the efforts while the field implementation process could be led by NGOs that have the skills of mobilizing communities through participatory processes and facilitate community ownership and understanding. At the same time, leadership from within the community is critical for catalyzing and sustaining the behavior change. Peer pressures and community dynamics should be recognized to facilitate the process of community action.

III. What institutional arrangements should be made in order to provide the most effective mechanisms for service-delivery?

Current institutional arrangements address sanitation within a holistic framework but seem to illustrate the expression that, “If everyone is responsible...then no one is responsible”. Sanitation is a local issue that has to be addressed by communities residing within the spatial area. Gram Panchayats are the appropriate institutions to promote and sustain rural sanitation. Under the sanitation initiative, the Water Supply and Sanitation Department (WSSD) at state-level is responsible for both rural water supply and sanitation programs. At district-level, the Water Supply Department (WSD) of the Zilla Parishad is responsible for water supply and the Village Panchayat Department of ZP is responsible for the promotion of sanitation. There is no one department, however, which is concerned specifically with and held accountable for the implementation of proper sanitation measures.

While NGOs have assumed some responsibility as implementers at the grassroots level, they are only temporary in nature, as opposed to the latter three. In addition, while they may have a capacity to motivate communities, they do not have the institutional capacity, necessary for the eventual expansion and development of programs, across the state. Therefore:
The Jal Manthan (meaning ‘churning of water’ in Hindi) is a think tank on rural water supply and sanitation. It is a forum that aims to be an open network encouraging frank and informal policy-level dialogue between sector practitioners and professionals. Prior to this, six Jal Manthans have been held.

A FRESH APPROACH:
WHERE DO WE BEGIN?

After careful consideration of the lessons learned, the next step is to develop an appropriate strategy to be implemented in the state.

The capacity of local government institutions must be strengthened and specifically directed towards the elimination of open defecation, possibly identifying the Gram Panchayats as primary implementors.

The role of NGOs need to be recognized and local government-NGO partnership must be forged. NGOs might be employed as capacity support in actual project implementation, while the State Government develops the rules, criteria and system for providing capacity support to the ZP and GPs. At this point, working relationships would be established between the implementing NGOs and respective Gram Panchayats.

A Village WATSAN Committee under the GP would be responsible for the overall promotion.

Most importantly, the community must be simultaneously empowered to accept ownership of the process.

An appropriate delivery mechanism will enable rural households to identify their own preferred technology option, to accommodate their specific budget and personal needs. This may be achieved by allowing the commercial market to respond to demands but could also occur through NGOs, cooperatives, local entrepreneurs or even through basic community innovations.

The strategy proposal will be founded upon:
- the objective of achieving total elimination of open defecation;
- an emphasis on personal hygiene and environmental sanitation as complementary to this goal;
- empowerment of the community to act on its own and address the sanitation needs;
- a focus on the community, as a whole;
- appropriate partnerships between the State Government, local governments, NGOs and market forces, for scale and sustainability; and
- providing community rewards rather than individual subsidies.

As a result of the experiences shared by other successful sanitation initiatives, a set of issues have revealed themselves as specific opportunities for the implementation of improved sanitation in Maharashtra and these have also served as a foundation:
- Transforming attitudes: Identify catalysts for positive change in traditional sanitation practices.
- Spreading the message: Create awareness of the need and subsequent demand for improved sanitation through communication.
- Creating awareness of economic factors: Point to the correlation between proper sanitation and the national economy/personal poverty.
- Accommodating the stated community will: Support sanitation as a demand-driven business opportunity.
- Implementing effective structure: Establish clear lines of institutional responsibility and accountability.
- Ensure quality service delivery: Establish standards of technology and effectiveness of delivery mechanisms.
Seventh Jal Manthan: List of Participants

Strategy Building for Rural Sanitation in Maharashtra
August 23-24, 2002, Pune, Maharashtra

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