



NATIONAL WASH CONCLAVE 2022

WASH FORWARD

Advancing Water, Sanitation and Hygiene
(WASH) in Panchayats

Conclave Handbook



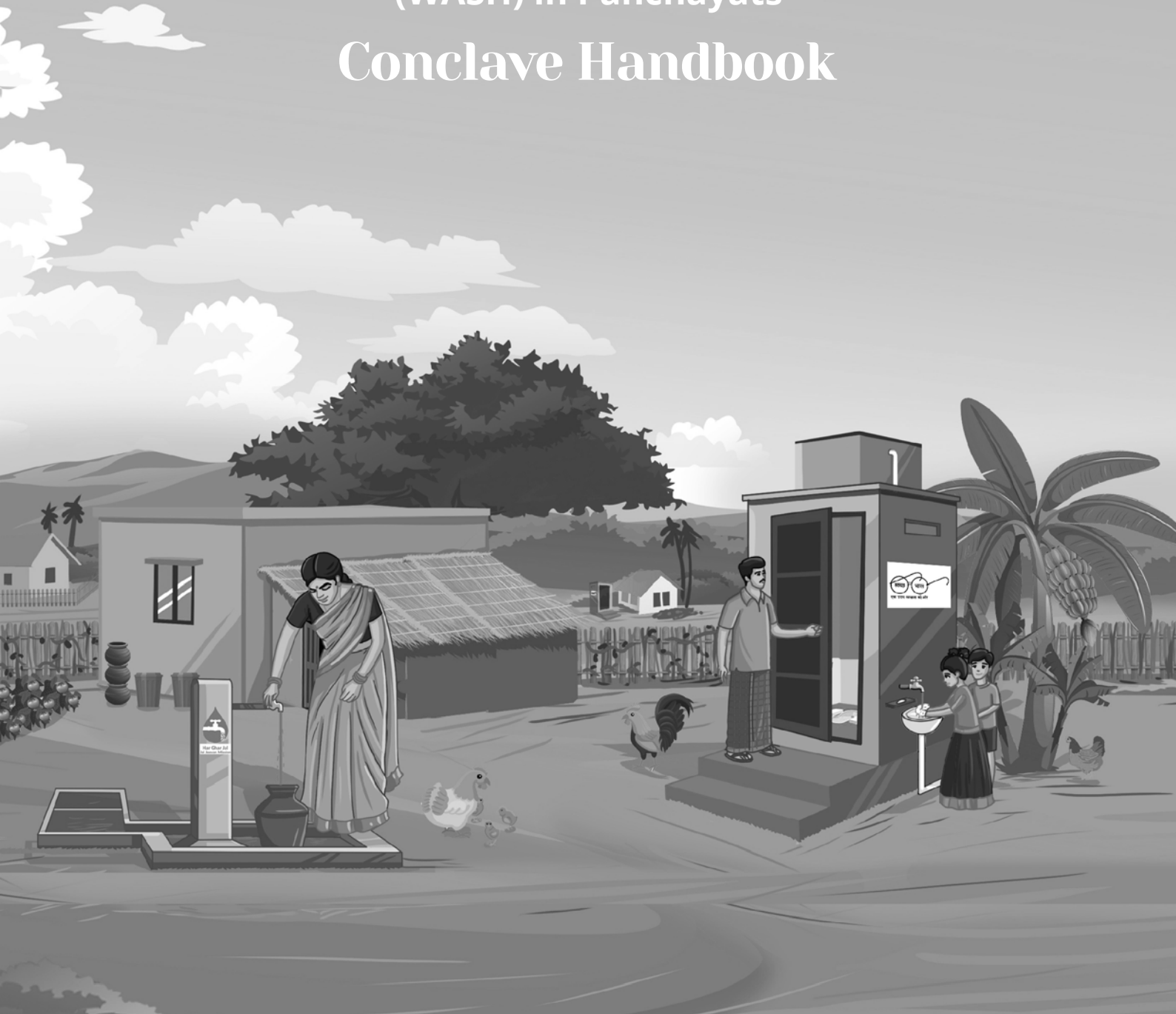


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भारत के उपराष्ट्रपति
VICE-PRESIDENT OF INDIA
MESSAGE

In many Indian languages the word for water is '*jeevan*, which means life'. We consider: 'Water is Life'. Adequate amount of safe drinking water for every rural household is a basic necessity. Under the Sustainable Development Goals (SDGs-6), '*Clean water and sanitation for all*' is a global commitment that most countries of the world have made to provide to their citizens.

In the last few years, India has made significant progress on rural sanitation front. It's time we ensure that there is adequate amount of water available for toilet use, as well as for drinking purposes. I appreciate the initiative of the Government of India and all the WASH Sector players and NGOs involved in this gigantic mission.

Providing safe drinking water and sanitation to every rural household is a humongous task, given the size of this country and the varied nature of terrain etc. Yet, as a nation we need to ensure that every household gets all the basic facilities – the most essential of them being WASH related. This can be realised only if a vast array of WASH sector players join hands with a single focus. I am glad that this conclave is making this happen.

I am happy that this National WASH Conclave 2022, organised by the National Institute of Rural Development and Panchayati Raj (NIRDPR), Hyderabad in association with the Ministry of Jal Shakti, Ministry of Panchayati Raj, UNICEF and other development partners shall provide the extra momentum that this task may entail.

I wish the National WASH Conclave 2022 a grand success.


(M. Venkaiah Naidu)

New Delhi
12th February, 2022.

गजेन्द्र सिंह शेखावत
Gajendra Singh Shekhawat



जल शक्ति मंत्री
भारत सरकार
Minister for Jal Shakti
Government of India

17 FEB 2022

Message

The availability and access to Water, Sanitation and Hygiene (WASH) facilities are key determinants of Quality of Life of people. Assured availability of potable water and safe sanitation are vital elements for human development. The novel approach adopted by the Government of India to provide toilet facility to every rural household in record time attracted the attention of the international development professionals and researchers to study it for replication in other parts of the world.

In the same vein, the Ministry of Jal Shakti has launched "Jal Jeevan Mission" (JJM) for Providing Functional House Tap Connection (FHTC) to every rural household by 2024. The progress reported by States is more than impressive that already about seven states have achieved 100% coverage. A host of other states will follow suit. We are hoping that India fulfils the SDG-6 commitments much ahead of 2030. This is true not only of water and sanitation, but also on many other related development indicators such as good health and well-being, nutrition and so on, because our commitment is primarily to the people of India.

The Jal Jeevan Mission aims at covering not only households, but also institutions in villages. Nearly 48% of the blocks in India are reportedly quality affected. The JJM has a mandate to pay special attention to such quality affected areas. Thus, JJM works on rural water supply from end to end - meaning starting from source sustainability to waste water recycling and reuse. The Ministry considers that creating a sense of community ownership, building and strengthening local institutions for maintenance of the facilities created are crucial. Therefore, the Ministry of Jal Shakti and the Ministry of Panchayati Raj are sending joint advisories to Panchayati Raj Institutions (PRIs) on Operation and Maintenance of the facilities.

I am happy to note that this National WASH Conclave brings together on the same platform a range of institutions, from the UN bodies to international and national institutions that stand by the Ministry on this important mission. I am therefore confident that everything that the Honourable Prime Minister envisioned under this Mission will become an objective reality.

I congratulate the efforts put in by the National Institute of Rural Development & Panchayati Raj (NIRDPR), Hyderabad, the UNICEF, and all other development partners who have joined hands with a commitment to contribute to the success of this National WASH Conclave, which is a step in the direction of carrying WASH agenda forward at the grassroots level.

(Gajendra Singh Shekhawat)



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75
Azadi Ka
Amrit Mahotsav

सचिव
भारत सरकार
पंचायती राज मंत्रालय
SECRETARY
GOVERNMENT OF INDIA
MINISTRY OF PANCHAYATI RAJ



सत्यमेव जयते

MESSAGE

The Constitution of India has mandated that the States are to devolve functions to the Rural Local Bodies (RLBs) towards delivery of basic services to the rural citizens. In this regard, the governance and administrative abilities of the RLBs will be the foundation on which safe and adequate water and sanitation services are made available in the Gram Panchayats. It is not just enough to create the necessary infrastructure but their operation and maintenance also assume important role.

The RLBs are being facilitated towards water, sanitation and hygiene (WASH) infrastructure to be implemented at village level. Apart from substantial Fifteenth Finance Commission Tied grants, the flagship schemes of Jal Jeevan Mission and Swachh Bharat Mission Grameen also support rural water and sanitation services. Achievement of Sustainable Development Goals, in which provision of water, sanitation and hygiene services form a major goal of the Government which is possible to be achieved only through community engagement. RLBs will be the fulcrum of this movement and will need to be strengthened to perform this role and utilize the resources effectively.

In the mission towards achievement of Sustainable Development Goals (SDGs), capacity development by having fully trained and well-informed Elected Representatives and other Panchayat officials will play an important role. This is all the more important that the funds provided to the RLBs can be effectively utilised only if community participation and guidance can be ensured through well-developed human resources. Ministry of Panchayati Raj (MoPR) has been taking much efforts towards making the capacity building programmes for the Elected Representatives and Panchayat officials cater to the changed requirements and times.

The various sources of funds for the WASH are available like the Jal Jeevan Mission, the Swachh Bharat Mission, the Fifteenth Finance Commission funds, the Rashtriya Gram Swaraj Abhiyaan (RGSA), MGNREGS and so on. The Gram Panchayat Development Plans (GPDPs) would need to be developed in an integrated manner in order to make effective utilisation of these funds towards achievement of the goals. MoPR is putting in all-out efforts to ensure that every Gram Panchayat comes out with quality GPDP as it is sine-qua-non for meaningful work to get executed on the ground.

In order to get the WASH projects speedily executed and managed well throughout their lifetimes, the Panchayats have to also look for various management models, for example they can outsource the service delivery to external service providers through a well-developed contract management system. Such efforts would not only ensure cost effectiveness, domain expertise etc but also would serve to develop entrepreneurial capabilities in the rural parts of the country.

I am confident that the National Conclave on WASH being participated by a host of specialist institutions, and key stakeholders would be providing fruitful inputs to the RLBs to deliver WASH services professionally.

I wish this National WASH Conclave 2022 a great success and commend the efforts taken by the NIRDPR along with UNICEF in this regard.

(Sunil Kumar)



डॉ. जी. नरेंद्र कुमार, आई ए एस
महानिदेशक

Dr. G. Narendra Kumar, IAS
Director General



राष्ट्रीय ग्रामीण विकास एवं पंचायती राज संस्थान

(ग्रामीण विकास मंत्रालय, भारत सरकार)

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Message

Clean water and sanitation for all by 2030 is an international commitment that most countries of the world have committed to. I can proudly say that on WASH matters India leads rest of the world as we have made significant progress in rural sanitation in the past few years. Adopting the saturation approach the Government of India has taken up providing Functional House Tap Connection to every rural household and sustaining the sanitation gains that rural households enjoy at this moment.

Our approach at the NIRDPR has always been aligning our work with the priorities of the Government of India. This assumes far more significance in the wake of Gram Panchayat Development Plans (GPDP), which are essentially about converging resources, and efforts towards a single vision. The Ministry of Panchayati Raj is in the forefront with a view to bringing out quality GPDPs, where the NIRDPR stands making a significant contribution. This National WASH Conclave 2022 is yet another step in that direction.

This platform brings together two key ministries of the Government of India viz. the Ministry of Jal Sakthi and Ministry of Panchayati Raj and some of the prominent players in WASH sector to discuss strategies and share good practices with a view to making every rural household in every village enjoy the benefits of WASH facilities. This coming together - of governments, international organisations, the civil society, and the private sector players - to share responsibilities will move this country in the direction shown by the National Development Goals signifying the functioning of a real democracy.

This is, in fact, the eighth WASH Conclave that the NIRDPR is organizing in collaboration with the UNICEF consecutively. The earlier seven conclaves were regional covering some of the Southern states only. This time - or rather this time onwards, we have decided to make it a Pan-India level event. I sincerely appreciate the efforts put in, and the support rendered by the Ministry of Jal Sakthi, Ministry of Panchayati Raj, and the UNICEF team for making it a grand success. I am sure the outcome of this National Conclave shall help accelerate the progress we make in the WASH sector.


Dr. G. Narendra Kumar
Director General

विनी महाजन
VINI MAHAJAN
सचिव
Secretary



भारत सरकार
जल शक्ति मंत्रालय
पेयजल एवं स्वच्छता विभाग
चौथा तल, पं० दीनदयाल अन्त्योदय भवन,
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14th February, 2022

Message

Jal Jeevan Mission is an ambitious plan to provide Functional House Tap Connection (FHTC) to every rural household of this country by 2024. I am sure, by now, the message has gone across to all the villages of India. All the State Governments are busy either implementing the plans as envisioned by the Mission or are preparing and consolidating their Village Action Plans. In order to assist the States Departments of Public Health Engineering or Rural Water Supply as the case may be, the Mission is involving a host of technical institutions, Key Resource Centres (KRCs), and Implementation Support Agencies (ISAs) which support the state and district level teams.

The progress being reported is very encouraging and we have nearly 100 districts today that have reached near 100% achievement in providing FHTCs to all the households. The JJM Dashboard provides all details. There is no dearth of funding under JJM to achieve the objectives. The Gram Panchayats also get substantial grants for water & sanitation under the XV Finance Commission devolution.

In order to ensure sustainable functioning of the technical systems, the Gram Panchayats have to take initiative, taking the help of ISAs, to set up functional Village Water and Sanitation Committees (VWSCs), and responsible user groups. This is essential in view of the importance of management at the village level. Second related issue is setting up wastewater management systems, whereby we shall be able to recycle wastewater generated by households and reuse for Panchayat level tree plantation programmes, or for use in the toilets at village *anganwadis* and local schools and other purposes, apart from recharge.

Under the Swachh Bharat Mission Phase – II every Gram Panchayat has put in place arrangements for waste collection and disposal. The Gram Panchayats need to be supported and given technical training on proper segregation of waste, and how to handle wastes of varying characteristics – such as wet waste, dry waste, sanitary wastes etc. On solid waste management front, the task in front of us is enormous. At the same time, the enthusiasm we witness at various levels, and innovations brought in by the non-governmental institutions, and international organisations working in WASH sector give us complete confidence that together we shall be able to overcome the challenges, and make these ambitious missions benefit every rural household. I sincerely appreciate the National Institute of Rural Development and Panchayati Raj, the UNICEF and all the development partners who have joined here to take WASH agenda forward in Indian villages. I wish this conclave a great success.

(Vini Mahajan)

National WASH Conclave 2022

Advancing Water, Sanitation, and Hygiene with Panchayats

Ms. Gillian Mellsof, Country Representative, UNICEF India



UNICEF believes in the transformative potential of a generation of healthy and thriving children, and we are dedicated to working with our partners to nurture the enabling environments that can help them realize it. In this, we believe water, sanitation and hygiene (WASH) are key enablers.

Clean, resilient, and safe households, schools, and hospitals are the bedrock of children's health, their access to quality education, and better life outcomes all around. This was only made clearer by COVID 19 when hand washing and sheltering in homes with safe drinking water facilities became pandemic containment strategies. Environmentally sensitive and inclusive WASH services are inextricably linked to the economic empowerment of families, the access of girls to school, and the resilience of children and mothers to future global shocks – pandemics, disasters, and climate change.

India has realized this interconnectedness through the Swachh Bharat and Jal Jeevan Missions, framing water and sanitation as forces that will supercharge both growth and social justice: through the achievement of open defecation free India undertaken as a people's movement, and extending drinking water to rural habitations so children, women, and communities are healthy and empowered.

Under the leadership of the Ministry of Jal Shakti, these two flagships have transformed lives in India, particularly those of women and children. UNICEF's "Financial and Economic Impact of Swachh Bharat Mission" assessment in 2017 found that households in open defecation free (ODF) communities saved approximately INR 50,000 annually, owing to averted medical costs, reduction of waterborne disease prevalence, and time saved. A UNICEF study in 2020 found that the Swachh Bharat Mission (SBM) has generated 7.55 million equivalent jobs and WHO estimates that SBM has potentially saved 300,000 lives during its roll-out and 150,000 annually after.

The Jal Jeevan Mission (JJM) will be equally catalytic and is already unleashing transformational skilling and livelihood opportunities for women.

Even as the WASH sector is detailed in one SDG – Sustainable Development Goal 6 – it underpins the achievement of the full spectrum of sustainable development, our collective effort to Leave No One Behind, and, indeed, the survival of our species. Global recovery from the pandemic and progress towards a New India will both rely on basic services reaching those who are most vulnerable: children, adolescent girls, persons with disabilities, and those who are multidimensionally poor.

The role of local government bodies and Panchayat Raj institutions will be critical. In this context, the 3-day National WASH Conclave 2022 on the theme 'WASH FORWARD – advancing Water, sanitation and Hygiene in Panchayats', is a timely and critical showcase for the significance of WASH in building community resilience and realizing positive outcomes for children across India.

I look forward to the sessions and to working closely with policymakers and representatives to take the agenda forward.

I would like to congratulate the National Institute of Rural Development and Panchayati Raj, the Ministry of Jal Shakti, the Ministry of Panchayati Raj, and development partners for convening this important summit and for leading India's remarkable achievements in the sector. UNICEF is proud to support this effort, and I wish the conclave every success.

With best wishes,

A handwritten signature in black ink that reads "G R Mellsof". The signature is written in a cursive, slightly slanted style.

Gillian Mellsof

Message



The last decade has been pivotal for water, sanitation and hygiene (WASH) in India as the Government of India steered the world's largest rural water supply and sanitation programmes – the Jal Jeevan Mission (JJM) and the Swachh Bharat Mission (now in phase II of its implementation) respectively. The primary objective of these programmes is to achieve safely managed drinking water and sanitation services for all, an inspiring example for the development agenda in India, and globally, possibly making them the most tangible investments worldwide towards the targets outlined under Sustainable Development Goal 6.

The overarching impact of such flagships bring major changes to everyday lives, especially for women and children, and the dignity and socio-economic development benefitting the most deprived and marginalized children and communities. Notably, these programmes are potentially very much gender transformative as well, as women and girls are not just envisaged as passive recipient of the investments, but rather they are empowered to take lead in managing WASH, notably at the grassroots level, in gram panchayats and in urban wards, and be real change agents.

The focus of this WASH Conclave on the role of development partners, civil society organisations (CSOs) and the private sector is a strategic choice. These stakeholders play a significant role in support to the investment of the government and of communities for improved, sustainable and affordable WASH services. Given India's dynamic private sector and NGO networks, it would be a missed opportunity to not associate them, notably to support service delivery in the field.

The Implementation Support Agency (ISA) initiative led by the Ministry of Jal Shakti for the JJM is a great innovative approach in this regard. As on date, approximately 14,000 ISAs are being engaged for hand-holding support to communities and Gram Panchayats for the operation, maintenance and overall management of WASH services; these are critical priorities, which also require well equipped, trained and incentivized WASH professionals. UNICEF is engaged to make such approaches impactful in the field.

On the occasion of this National WASH Conclave, this booklet "WASH Forward: Advancing Water, Sanitation and Hygiene in Panchayats" is being released to share a sector update, including various perspectives and insights on advancing the WASH agenda in Gram Panchayats towards universal access to safe and sustainable water and sanitation for all.

I wish the National WASH Conclave a grand success and look forward to our active participation.

With best wishes,



Nicolas Osbert

Message



UNICEF Hyderabad Field Office supports Andhra Pradesh, Karnataka and Telangana states for strengthening Water, Sanitation and Hygiene sector along with other sectors. In partnership with the National Institute of Rural Development and Panchayati Raj (NIRD&PR), every year Water, Sanitation and Hygiene (WASH) conclave is held with an aim to bring WASH sector players from Government, Development Partners, civil society, private sector and academia from the above states under one platform to share their experiences, progress, deliberate, strengthen strategies for scaling up and sustaining the WASH outcomes. So far, seven WASH conclaves were held which provided very good learnings and built partnerships among sector players besides strengthening the policy environment and implementation strategies of WASH sector. This year WASH conclave is being organized at the National level.

It gives me immense pleasure that the National WASH Conclave 2022 is being organized virtually from 23rd to 25th February 2022 by the NIRDPR in collaboration with the Ministry of Jal Shakti (MoJS), Ministry of Panchayati Raj (MoPR), UNICEF and other development partners. The focus of this WASH Conclave is on advancing water, sanitation and hygiene in panchayats. The participants will get an opportunity to deliberate, reflect, share and learn from experiences, in particular, on effective delivery of WASH services by Panchayats; and the ways to improve resilience to future pandemics and major disruptions, including climate change.

I hope that this Conclave will provide the right platform for knowledge sharing and strategizing for the future by laying importance on the Panchayat Raj Institutions (PRIs) and in forging partnerships to create sustainable and model WASH Panchayats.

This booklet attempts to bring together a collection of articles on various themes around WASH and Panchayats from a range of stakeholders to showcase the present status and areas for future focus for strengthening WASH in PRIs. It also examines the status of the Sustainable Development Goals (SDGs) and sectors in the country with a special focus on WASH components.

I wish all the success for the conclave and learning for all participants and further pave the way for making strong commitments to strengthen the PRIs in scaling up and managing WASH programmes.

With best wishes,



Meital Rusdia
Chief of Field Office
UNICEF Field Office for Andhra Pradesh, Karnataka and Telangana

MESSAGE



India is witnessing an unprecedented investment in water and sanitation. The flagship programmes of the Government of India – Swachh Bharat Mission and Jal Jeevan mission are transforming the lives of Indians by providing them with access to toilets and safe water through functional household tap connections. This emphasis on the provision of basic services is not just limited to investments by the Union Government, but finds reflection in state specific schemes in states like Telangana, Odisha and Bihar. The National Nutrition Mission, Swachh Bharat Swachh Vidyalaya guidelines, the Kayakalp awards and guidelines and the more recent 100-day mission are reflective of a conducive policy environment that can also facilitate the provision of water, sanitation and hygiene (WASH) services in institutions such as anganwadis, schools and health care facilities.

The investment in WASH is changing the norm for citizens hitherto dependent on shared or common facilities and unreliable systems. The transformative impact of this emphasis, on the lives of women and adolescent girls in particular, will be visible in the years to come. The COVID-19 pandemic has reminded us about the importance of hygiene in preventing morbidity and mortality.

Our institutions of self-governance – Panchayats – have a central role to play in the provision of safely managed WASH services. Guidelines of the Jal Jeevan Mission and Swachh Bharat Mission recognise this and emphasise the role of statutory committees like the Village Water and Sanitation Committees. Allocations from the 15th Finance Commission, with funds from state and union government schemes, can significantly address the financing requirements for WASH provision at the Panchayat Level. There is an urgent need to invest in the capacities of Panchayats to plan, design and manage WASH efforts. Gaps in skills and in the availability of trained personnel - accountable and available to Panchayats need to be ensured. Strengthening Panchayati Raj Institutions and investing in their capacities are necessary to ensure that the financial investments are used effectively.

The WASH Conclave organised by the National Institute of Rural Development and Panchayati Raj with the theme – “WASH Forward: Advancing Water, Sanitation and Hygiene in Panchayats” is both timely and of immense importance today. We are delighted to partner and contribute to this Conclave. We wish the Conclave every success and hope that it can lead to collaborations and pathways to strengthen Panchayati Raj Institutions.



VK Madhavan
Chief Executive

Jal Seva Charitable Foundation

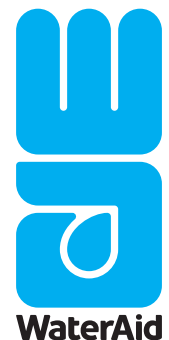
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NATIONAL WASH CONCLAVE 2022

WASH FORWARD

Advancing Water, Sanitation and Hygiene
(WASH) in Panchayats

India and Sustainable Development Goal 6 - An Update

Much of India's development agenda is mirrored in the Sustainable Development Goals. Our national plans are ambitious and purposeful; sustainable development of one-sixth of humanity will be of great consequence to the world and our beautiful planet.

*- Narendra Modi,
Prime Minister of India United Nations Sustainable Development Summit, 2015*



India and Sustainable Development Goal 6 - An Update

The Sustainable Development Goals (SDGs) are an ambitious commitment by world leaders which set out a universal and an unprecedented agenda for realizing a more equitable and sustainable world. They are a set of 17 goals with 169 targets to help organise and streamline climate-resilient development for achieving a positive outcome for all societies, while leaving no one behind, by 2030. They were adopted by 193 member states at the historic United Nations General Assembly Summit in September 2015 and came into effect on January 1, 2016. The spectrum of the 17 SDGs and 169 targets range from poverty eradication, human health and sanitation to urban settlements and to safeguarding the global ecosystems on which humanity depends for its survival.

The Government of India and all its partners are strongly committed towards the achievement of the Sustainable Development Goals. The progress of the world to meet the SDGs largely depends on India's progress. In turn, India played a prominent role in the formulation of SDGs and much of the country's National Development Agenda is mirrored in the SDGs.

SDG 6: Ensuring Availability and Sustainable Management of Water and Sanitation for All

SDG 6 aims to end open defecation and improve water quality by reducing pollution, substantially increasing water-use efficiency across all sectors and support and strengthen the participation of local communities in improvement water and sanitation management.

Table 1. Global targets under SDG 6

The targets to be achieved by 2030 are as follows:

6.1 By 2030, achieve universal and equitable access to safe and affordable drinking water for all.

6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.

6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimising release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally.

6.4 By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity.

6.5 By 2030, implement integrated water resources management at all levels, including through trans-boundary co-operation as appropriate.

6.6 By 2020, protect and restore water-related ecosystems, including mountains, forests, wetlands, rivers, aquifers and lakes.

6.a By 2030, expand international co-operation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling and reuse technologies.

6.b Support and strengthen the participation of local communities in improving water and sanitation management.

India's Performance on Sustainable Development Goal 6

Access to safe drinking water and sanitation is one of the most pressing challenges in the country and is being addressed by the government on a priority basis. As per 2011 Census data, 85.5 percent population had access to safe drinking water whereas only 30.8 percent of the households in rural areas had toilet facilities.

As per the **Joint Monitoring Report (JMP)** by the WHO and UNICEF for 2020, 89% of the rural population of India has access to at least basic drinking water supply¹, while only 56% of the population is using safely managed water supply². In the case of sanitation, the JMP reported that 67% of the rural population had access to at least basic sanitation services³, with 51% of the population using safely managed sanitation facilities⁴ (including shared facilities). For sanitation estimates, however, in 2019, the JMP acknowledged that the methodology employed by the JMP is simple linear regression to calculate consistent estimates over a long period of time. Given the significant change in rural sanitation in India since 2014 in the relatively short-term, the methodology is less suited to capture such change brought about by rapid increases or decreases in service coverage.

While striving to ensure full access to water and sanitation for all, robust efforts are being taken to optimize water resource endowments in the country. It is important to take an integrated, balanced approach to managing water resources towards effective water governance. The allocation of water among various uses needs to be carefully planned to ensure sustainability. Research and development efforts need to be targeted at improving water use efficiency as fresh water becomes a scarce resource.

National initiatives like the Swachh Bharat Mission, the Jal Jeevan Mission and the National Mission for Clean Ganga (Namami Gange), have provided the necessary thrust to India's commitment on providing universal access to clean water and sanitation to all.

The Swachh Bharat Mission (2014-19) brought national focus on sanitation, especially, elimination of open defecation in rural areas. In 2014, about 60% of India's 180 million rural households did not have household toilets. This meant that 550 million people likely defecated in the open. By 2019, the Mission reported a remarkable 110 million new toilets having been built. In addition, out of the nearly 650,000 villages, over 250,000 villages now have community sanitation complexes mainly focused on providing toilet access to those households who still do not have a household toilet, as well as to service itinerant populations.

After the success of SBM-Grameen (rural) Phase I, it was deemed important to pivot focus towards ensuring universal access or 'no one left behind' while ensuring an 'enabling environment' around toilet functionality, maintenance, and usage. In 2020, **Swachh Bharat Mission Grameen (SBM-G) Phase II** was launched to promote investment in sustaining ODF status of communities, by providing access to all through household or community level facilities, promoting usage by all at all times, initiating open defecation free plus (ODF+) activities, which includes in addition to a) retrofitting toilets, b) promoting investment in their operations and maintenance, the implementation of waste management systems for reducing potential for contamination, disease transmission and blockages due to biowaste, plastics, faecal sludge, and greywater. While the original focus was on improving faecal sludge waste management to improve the lifespan of a toilet, the Government of India took this opportunity to garner interest in and support for improving waste management systems across the board, as is envisioned by the SDGs.

Meanwhile, in August 2019, the Government of India launched the **Jal Jeevan Mission** – another ambitious flagship programme with the objective to ensure household piped water supply for all by 2024. Maintaining focus not only of service delivery but also sustainable operations and maintenance, the programme design is embedded in community engagement and management of piped water schemes as well as source sustainability measures such as greywater management and groundwater recharge.

Figure 1. Situation of SDG Goal 6 in India.



Source: The SDG India Index and dashboard 2020-21 by NITI Aayog

The SDG India Index by NITI Aayog

Given the importance accorded by the Government of India to achieving SDGs, the NITI Aayog decided to estimate the progress through a single measurable index that would serve as an advocacy tool and trigger action at the State level. NITI Aayog has constructed the SDG India Index⁵ spanning across 13 out of 17 SDGs (leaving out Goals 12, 13, 14 and 17). The Index tracks the progress of all the States and UTs on a set of 62 Priority Indicators, measuring their progress on the outcomes of the interventions and schemes of the Government of India. The SDG India Index is intended to provide a holistic view on the social, economic and environmental status of the country and its States and UTs.

To measure India's performance towards clean water and sanitation, eight national level indicators have been identified, which capture five out of the eight SDG targets for 2030 outlined under this goal. These indicators have been selected based on availability of data at the national level and to ensure comparability across States and Union Territories (UTs).

The SDG Index Score for the Goal of Clean Water and Sanitation ranges between 54 and 100 for States and between 61 and 100 for Union Territories.

Goa and Lakshadweep are the top performers among the States and the UTs, respectively, having secured a score of 100. Twenty five States and six UTs bagged a position in the category of Front Runners. Although no State/UT fell behind in the Aspirants category, two States and one UT belonged in the Performers category.

Table 2. Target Justification

Indicator	Target	Justification of Target
Percentage of rural population getting safe and adequate drinking water within premises through piped water supply (PWS)	100	The Jal Jeevan Mission aims to provide piped water supply to the entire rural population by 2024.
Percentage of rural population having improved source of drinking water	100	Global SDG target 6.1 aims to achieve universal and equitable access to safe and affordable drinking water for all by 2030.
Percentage of individual household toilets constructed against target	100	Global SDG target 6.2 aims to achieve access to adequate and equitable sanitation and hygiene for all and end open defecation by 2030. This is also in line with the objectives of the Government of India's Swachh Bharat Mission (Grameen).
Percentage of districts verified to be ODF	100	Global SDG target 6.2 aims to achieve access to adequate and equitable sanitation and hygiene for all and end open defecation by 2030. This is also in line with the objectives of the Government of India's Swachh Bharat Mission (Urban).
Percentage of schools with separate toilet facility for girls	100	Global SDG target 6.2 aims to achieve access to adequate and equitable sanitation and hygiene for all and end open defecation by 2030.
Percentage of industries (17 category of highly polluting industries/grossly polluting/red category of industries) complying with wastewater treatment as per CPCB norms	100	Global SDG target 6.3 aims to improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials.
Percentage of ground water withdrawal against availability	70	The report "National Compilation on Dynamic Ground Water Resources of India (2017)" by the Central Ground Water Board, Ministry of Jal Shakti, categorizes stages of groundwater extraction below 70 percent as "Safe"
Percentage of over-exploited blocks/mandals/taluka	0	This target corresponds to global SDG target 6.4 that aims to substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals to address water scarcity and global SDG target 6.6 that aims to protect and restore water-related ecosystems.

Table 3. Performance of All State and Union Territories on Indicators of SDG 6
[SOURCE: NITI AAYOG]

SNO	States/UTs	6.1	6.1	6.2	6.2	6.2	6.3	6.4	6.6	SDG 6 Index Score
		Percentage of rural population getting safe and adequate drinking water within premises through Pipe Water Supply (PWS)	Percentage of rural population having improved source of drinking water	Percentage of individual household toilets constructed against target (SBM(G))	Percentage of districts verified to be ODF (SBM(G))	Percentage of schools with separate toilet facility for girls	Percentage of industries (17 category of highly polluting industries/ grossly polluting/ red category of industries) complying with waste water treatment as per CPCB norms	Percentage of ground water withdrawal against availability	Percentage of blocks/ mandals/ taluka over-exploited	
1	Andhra Pradesh	68.52	99.81	100	100	97.28	96.82	44.17	6.72	92
2	Arunachal Pradesh	34.13	92.64	100	100	70.12	70.89	0.37	0	67
3	Assam	25.70	74.72	100	100	75.30	90.02	11.25	0	64
4	Bihar	65.19	96.29	100	100	97.92	96.84	45.74	2.25	91
5	Chhattisgarh	52.17	99.60	100	100	99.15	90.05	44.47	0	89
6	Goa	100	100	100	100	100	99.21	31.25	0	100
7	Gujarat	97.57	100	100	100	99.87	80.60	63.91	10.08	93
8	Haryana	97.41	99.71	100	100	98.49	96.86	136.91	60.94	80
9	Himachal Pradesh	76.57	100	100	100	97.87	98.92	84.78	50.00	85
10	Jharkhand	35.49	99.71	100	100	98.33	79.15	27.77	1.15	83
11	Karnataka	59.47	100	100	100	95.64	87.71	69.91	25.57	85
12	Kerala	35.29	99.35	100	100	99.28	99.22	51.25	0.66	89
13	Madhya Pradesh	47.95	99.65	100	100	98.50	91.12	54.77	7.03	88
14	Maharashtra	64.39	99.70	100	100	96.80	92.36	54.62	3.12	90
15	Manipur	69.55	100	100	100	77.84	100	2.56	0	87
16	Meghalaya	23.49	100	100	100	67.98	99.38	2.44	0	75
17	Mizoram	46.17	100	100	100	85.48	97.14	5.26	0	85
18	Nagaland	40.14	100	100	100	90.33	100	1.01	0	87
19	Odisha	51.73	98.13	100	100	98.04	83.16	42.20	0	86
20	Punjab	80.68	92.41	100	100	98.06	94.11	165.80	78.99	66
21	Rajasthan	35.25	92.28	100	100	90.44	65.79	139.87	62.71	54
22	Sikkim	37.42	100	100	100	99.34	96.77	0.06	0	89
23	Tamil Nadu	73.05	99.39	100	100	98.39	98.23	80.93	39.62	87
24	Telangana	100	100	100	100	96.23	98.22	65.40	11.99	96
25	Tripura	63.05	84.84	100	100	88.18	100	8.06	0	82
26	Uttar Pradesh	20.35	99.63	100	100	95.51	96.27	70.18	10.96	83
27	Uttarakhand	52.46	99.26	100	100	95.36	78.39	56.75	0	85
28	West Bengal	39.75	95.48	100	100	98.84	74.07	44.58	0	81
29	Andaman and Nicobar Islands	88.89	100	100	100	99.28	60.00	3.03	0	87
30	Chandigarh	Null	Null	100	100	100	98.45	75.00	0	99
31	Dadra and Nagar Haveli	Null	Null	100	100	94.80	Null	28.57	0	95
32	Daman and Diu	Null	Null	100	100	100	78.26	50.00	0	95
33	Delhi	Null	Null	100	100	100	53.44	120.00	64.71	61
34	Jammu and Kashmir	52.87	99.89	100	100	89.02	97.31	29.23	0	88
35	Ladakh	29.80	100	100	100	89.02	97.31	29.23	0	84
36	Lakshadweep	Null	Null	100	100	100	Null	50.00	0	100
37	Puducherry	95.17	95.89	100	100	98.74	95.35	75.00	25.00	91
	India	51.36	97.44	100	100	95.33	88.40	63.33	17.24	83
	Target	100	100	100	100	100	100	70	0	100

● Aspirant (0-49) ● Performer (50-64) ● Front Runner (65-99) ● Achiever (100)

References:

- 1 Drinking water from an improved source, provided collection time is not more than 30 minutes for a round trip, including queuing
- 2 Drinking water from an improved source that is accessible on premises, available when needed and free from faecal and priority chemical contamination
- 3 Use of improved facilities that are not shared with other households
- 4 Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or removed and treated offsite
- 5 The latest report of the SDG Index by NITI Aayog on 'Partnership in the decade of action' can be found here and the dashboard for 2020-21 here.



NATIONAL WASH CONCLAVE 2022

WASH FORWARD

Advancing Water, Sanitation and Hygiene
(WASH) in Panchayats

Sector Spotlight



Safe Drinking Water for All in Rural India

1. Introduction

Access to safe drinking water is critical to survival, and its deprivation could affect the health, food security, and livelihoods of human beings. India achieved 93% coverage of access to improved water supply in rural areas in 2015 towards fulfilling its commitment under the Millennium Development Goal¹. However, with reference to safely managed drinking water (improved water supply located on-premises, available when needed and free of contamination) as per Sustainable Development Goal, India still has major targets to achieve, and is geared up to accomplish the same by the end of 2024. With the shift from the Millennium Development Goals (MDGs) to the Sustainable Development Goals (SDGs) less than half of the total rural households in the country have access to safely managed drinking water (improved water supply located on-premises, available when needed and free of contamination).

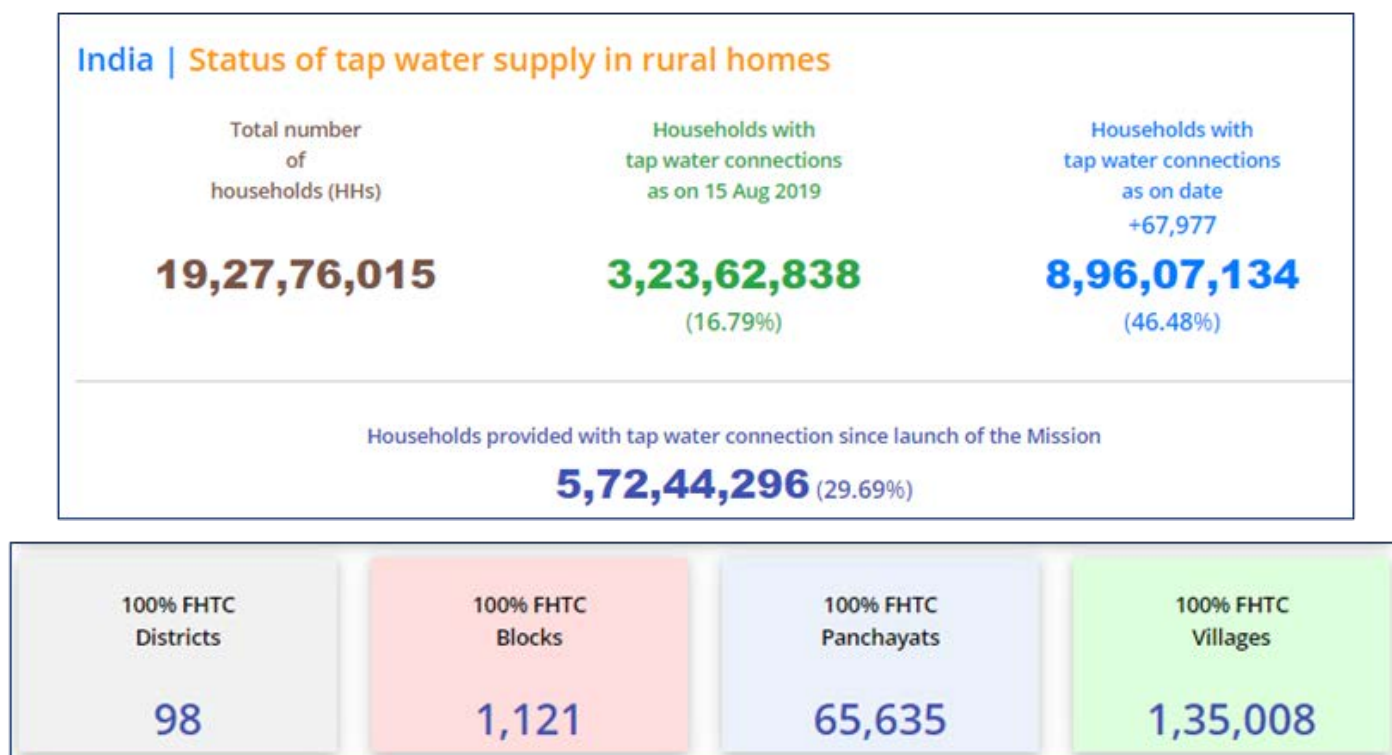
2. Status of Rural Access to Safe Drinking Water in the Country

Globally, 60% of the population in rural areas² had access to **safely managed drinking water services**³ in 2020. In the same period, only 56% rural population in India had access to safely managed drinking water services. The NFHS-5 survey reported that 95% of our rural population depends on an **improved drinking-water source**⁴ (99% for urban) but not necessarily drinking water at premises. With the introduction of ambitious flagship scheme Jal Jeevan Mission launched on 15th August 2019, there is a visible leap forward, with more than eight crore rural households being reported to be connected to functional household tap connections. This comes to 46.48% of total rural households in the country, while such coverage as on 15th August 2019 was just 16.79%. The central government is committed to cover the remaining rural households through piped water supply at premises by 2024.

Going by the reports of the Jal Jeevan Mission, while states are showing varying progress, some states like Goa, Telangana and Haryana as well as Union Territories Andaman & Nicobar Islands, Puducherry, Dadra & Nagar Haveli and Daman & Diu have already achieved 100% FHTCs. The work towards providing universalised access to FHTCs is under progress across remaining states and districts, with reported coverage of going up on each day.

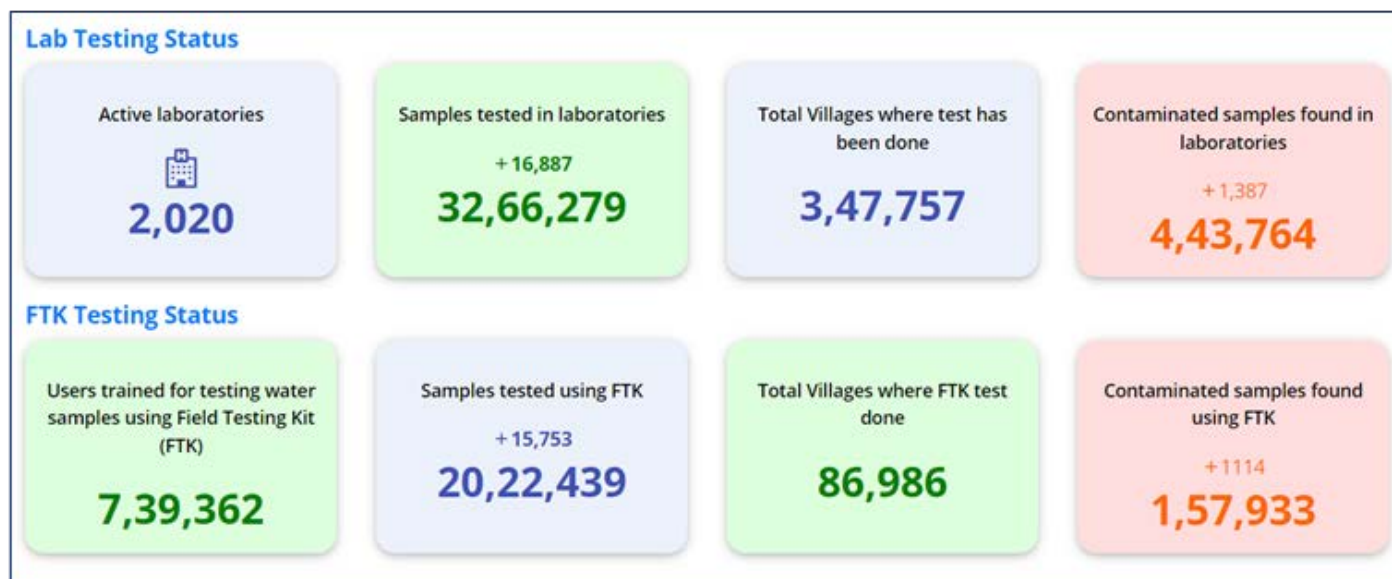
Figure 1. Situation of access to FHTCs as on 10 Feb 2022.

Source: Jal Jeevan Mission DASH Board.



Yet another important feature of the Jal Jeevan Mission is its focus on improving quality of drinking water, with a focus on improving water quality testing as well as mitigation measures, and to strengthen its monitoring. Nationally, a Water Quality Dashboard has been set up by the Indian Council for Medical Research, which enables people to report issues related to water quality, in addition to the reporting from the district level laboratories.

Figure 2. Status of testing of drinking water samples as on 10 February 2022. Source: WQMIS, ICMR.



Looking at the financial allocations commencing from the financial year 2020-21 that witnessed the launch of JJM, the scheme has received a substantial budget share as well. For Financial year 2022-23, the scheme got INR 60,000 crore earmarked, with a target to reach 3.8 crore households with FHTCs. The scheme has received a cumulative allocation of INR 116,000 crore so far, as part of the union budgets of last 3 years, while the overall commitment is to spend INR 2.87 lakh crores by financial year 2024-25.

3. Central and State Policies, Schemes and Initiatives for Drinking Water

In order to meet the global commitment towards SDG 6 target and citizens of the country, union and state governments have taken affirmative actions towards ensuring access to safe drinking water especially in rural areas with targeted and specific schemes over the past few years.

3.1 Central Government Schemes

The Central Government assistance to States for rural water supply began in 1972 with the launch of **Accelerated Rural Water Supply Programme**. Before this, a pilot program on rural water supply was supported by UNICEF in 1969. Accelerated Rural Water Supply Program was renamed as **National Rural Drinking Water Programme (NRDWP)** in 2009, which was a centrally sponsored scheme with fund sharing between the Centre and the States. Under NRDWP, one of the objectives was to “enable all households to have access to and use safe & adequate drinking water within reasonable distance”. This is the precursor to Jal Jeevan Mission.

Jal Jeevan Mission is the union government’s flagship program launched by the Prime Minister on 15th August 2019 with a commitment to provide safe and adequate drinking water through individual household tap connections by 2024 to all households in rural India. **The goal of JJM is to provide functional household tap connection (FHTC) to every household with a minimum service level at the rate of 55 litres per capita per day.** The programme will also implement source sustainability measures as mandatory elements, such as recharge and reuse through grey water management, water conservation, rain water harvesting. The Jal Jeevan Mission will be based on a community approach to water and will include extensive efforts using Information, Education and Communication as a key component of the mission.

3.2 Key State Government Schemes:

Drinking water supply and household level tap connections for all has been prioritised by several state governments as well. Some of the states like Gujarat, Telangana, Bihar and Odisha pioneered state wide schemes towards this, allocating ample financial resources as well, while states like Maharashtra, Rajasthan, Punjab, Andhra Pradesh, Uttar Pradesh, Uttarakhand, Kerala and Karnataka also have their own schemes.

WASMO Project, Gujarat: A pioneering water supply program, the state-led Water and Sanitation Management Organisation (WASMO) has successfully implemented a unique rural water supply programme to ensure adequate, quality drinking water supply at an affordable cost in all rural areas of Gujarat. The programme is distinctive because the State government has adopted a demand-responsive adaptable approach involving strong community participation. It has successfully brought drinking water supply to the doorstep of rural Gujarat while establishing a financially sustainable water system.

Mission Bhagiratha, Telangana: Mission Bhagiratha was a flagship project for safe drinking water for every village and city households in Telangana state, with a budget of ₹43,791 crores. The scheme aimed to provide piped water supply to 2.32 crore people in 20 lakh households in urban and 60 lakhs in rural areas of Telangana. This project was completed providing supply of clean drinking water across the state through water sourced from River Godavari (53.68 TMC) and River Krishna (32.43TMC). This scheme has been a major contributor for the leap in FHTC coverage under the JJM.

Mukhya Mantri Peyjal Nishchay Yojana, Bihar: With an aim to provide clean drinking water to every citizen through a piped water connection to approximately 2 crore households, under **Har Ghar Nal Ka Jal**; the Government of Bihar launched the Mukhya Mantri Peyjal Nishchay Yojana for both rural and urban areas, as part of fulfilling the 7 commitments made by the Chief Minister in September, 2016. With a budget commitment of Rs. 30,000 crores, the scheme was implemented by Panchayati Raj Department and Public Health Engineering Department across 1,14,651 habitations and as per state data, 97.67% habitations have been covered by 2021 whereas JJM dashboard indicates 89.77% coverage as on 9th February 2022.

Rural Drinking Supply Scheme Odisha: Odisha has set a target to enable all rural households to have access to safe and adequate drinking water within the premises of their house by 2024. A sum of Rs 50,000 crore is projected to be spent under different schemes and projects to ensure the same. Around 55% villages in the state have already been covered under the piped water supply project. However, only 11% rural households have access to piped drinking water within their premises. One of the mega water supply projects under the Buxi Jagabandhu Assured Water Supply to Habitations (BASUDHA) scheme was recently launched with a piped water scheme to supply potable-piped water to 147 water scarce villages of Puri and Ganjam districts. The primary objective of the BASUDHA scheme is to provide adequate safe water to rural people for drinking and domestic purposes on a sustainable basis. An investment of Rs. 12,000 crore for piped drinking water (which includes Rs. 2,419 crore under BASUDHA, Rs. 6,300 crore under Jal Jeevan Mission and Rs. 560 crores towards operation and maintenance of water supply systems) was planned during financial year 2021-22.

Drinking Water Project for Bundelkhand, Vindhya & Quality Affected Regions, Uttar Pradesh: The Government of Uttar Pradesh started this project to ensure the supply of clean drinking water to every household of the Bundelkhand & Vindhya regions. Through this scheme, the government aspires to ensure access to safe drinking water in the remote areas of the region. Under Bundelkhand region, 2,429 villages across seven districts - Jhansi, Mahoba, Lalitpur, Jalaun, Hamirpur, Banda and Chitrakoot and 2,704 villages of two districts in Vindhya region - Mirzapur and Sonbhadra are covered. Further, 3,700 quality affected (Arsenic, Fluoride, Japanese Encephalitis/Acute Encephalitis Syndrome (JE/AES) villages will be covered through tap water connections to every household. With a central allocation of Rs 10,870 crore, the total assured fund available for the implementation of JJM in the state in FY 2021-22 was approximately Rs 23,937 crore.

4. Opportunities and Challenges for PRIs in ensuring Universal FHTCs

- The local governments were reasonably quick to take up and lead the ODF drive through construction of household and community toilets on mission mode under Swachh Bharat Mission. However, the piped water supply and grey water management is far more complex and technical in nature compared to construction of toilets. It involves multiple agencies and stakeholders including contractors, technical consultants for preparing DPRs, Implementation Support Agencies (ISAs) for community mobilisation, Sector Partners, Monitoring and Quality Assurance agencies are few critical ones to mention. Capacity, coordination and convergence require urgent and adequate attention for effective implementation and sustenance of infrastructure and services.
- Preparation of DPRs, Village Action Plan and Gram Panchayat Development Plans (GPDPs) need to be undertaken in a participatory manner to reflect the community's needs and aspirations. In the absence of such a consultative process, a sense of ownership and active participation by people and elected representatives in operation and management may be difficult subsequently. While pushing for the time-bound push action for achieving the targets, ensuring the leadership and ownership of PRIS as well as communities requires a specialised focus.
- Ensuring active leadership of the mandated institutions such as Village Water and Sanitation Committees or Pani Samitis for planning, monitoring and management of schemes is another challenge that needs attention both by the mission, states and by the PRIs. Making them capable and confident to deal with technicalities

including or operation and maintenance aspects is an important measure to initiate in scale, through robust capacity strengthening and local level technical support processes. While both Union and State Governments have ensured provisions for training of elected representatives and mandated institutions under Jal Jeevan Mission, these need to be backed with adequate handholding and follow up support.

- While consumers are expected to contribute regularly towards O&M costs, a proper system for tariff setting and collection needs to be initiated. If PRIs are involved from the design stage, challenges around financial sustainability of operations could be avoided.
- O&M is particularly challenging in case of multi village schemes where more than one Panchayat or a contractor are involved. There can be issues about the role of PRIs in such a situation. Calls needs to be taken if the block level PRIs can have a role to play in overseeing multi-village schemes. There is a need for clarity in such instances.
- Understanding and addressing water quality is another area where PRIs would require major attention. They need to have capacities and necessary technical as well as technological guidance and support for ensuring timely testing, resources for remediation and priority attention wherever required, in case of quality impairment.
- Preparing the community for water budgeting, water conservation, reducing wastage, managing waste water are also the added challenges for the PRIs, in addition to efforts to ensure source sustainability. Running water at a household level will lead to greater wastage. The attention to piped water schemes may also come at the cost of ignoring traditional water bodies. These are areas that PRIs will have to act upon. Equipping them to address these needs is to be prioritised.
- Ensuring proper monitoring systems, processes for building convergence and regular review and trouble shooting initiatives are also important while expecting PRIs to deliver sustainable FHTCs for all.
- Finally, PRIs are hugely under resourced in terms of human resources currently. To manage various tasks - technical, operational, financial and social - as mentioned above, it requires specific skill sets and competencies. While the ISAs can support this during the inception of JJM, PRI's will need trained personnel accountable to them to manage these in the long-run.

5. Way Forward for Panchayats towards Ensuring Sustainable Access to Safe Drinking Water to the People:

The Jal Jeevan Mission and most of the state schemes have placed Panchayati Raj Institutions at the centre of implementing and managing the schemes. They have instrumental roles to play in mobilising communities, preparing details of technical as well as operational plans, getting the necessary approvals, co-financing the scheme through community contributions and other means and ensuring operation, management as well and maintenance of the scheme. They have roles to play in grey water management and source sustainability as well. While they have support from implementation support agencies in some of these tasks, they need to invest their own time and resources for the purpose.

In addition, the recommendations of the 15th Finance Commission (FC) that 60% of funds allocated to Panchayats be spent on drinking water provisions, water conservation, household waste and excreta management, including sustaining the open-defecation free (ODF) status, were accepted by the Central Government and included in the Union Budget 2021-22. This also adds to the roles of the PRIs. The commission granted Rs 4,36,361 crore from the central divisive tax pool to local governments — both rural and urban — for 2021-26. The grant has both tied and untied components. The tied grant (60% of the total) has to be spent on water and sanitation-related activities. The remaining 40% is untied: Local bodies are free to choose on how to spend it.

Being an institution of local self-governance, PRIs will have the emerging regulatory responsibilities with relation to water consumption and safety too, in coming days.

References:

1 <https://www.unicef.org/india/what-we-do/clean-drinking-water>

2 <https://data.unicef.org/resources/progress-on-household-drinking-water-sanitation-and-hygiene-2000-2020/>

3 Drinking water from an improved source that is accessible on premises, available when needed and free from faecal and priority chemical contamination

4 'Improved drinking water source' denotes access to drinking water from Piped water into dwelling / yard / plot, Piped water to neighbour, Public tap / standpipe, Tube well or borehole, Protected dug well, Protected spring, Rainwater, Tanker truck, Cart with small tank, Bottled water or Community RO plant

Sustainable Sanitation for All in Rural India

1. Introduction

With the aim to make India open defecation free (ODF), the Government of India's Flagship Swachh Bharat Mission – Gramin' (SBM-G), from 2014 until today, has resulted in the construction of over 10.91 crore rural individual household latrines (IHHL), taking rural India's sanitation coverage from 39% to nearly 100%¹. While the first phase of the SBM (SBM 1.0) primarily focused on the construction of toilets, the current phase two of the SBM's (SBM 2.0) focus is on sustaining rural India's ODF status, improving every village's overall cleanliness and towards ensuring sanitation safety among rural households.

While some recent national surveys by the National Sample Survey Organisation (NSSO), and the Ministry of Health and Family Welfare's National Family Health Survey -5 (NFHS-5) have indicated lower achievement levels of various sanitation milestones under the SBM 1.0, the need for further efforts to improve the situation were identified and accepted as part of the SBM 2.0.

Government of India's ongoing efforts towards ensuring universal sustainable sanitation across the country are in line with the United Nation's Sustainable Development Goal 6.2 which focuses on "achieving access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations by 2030"².

2. Status of Sanitation in India

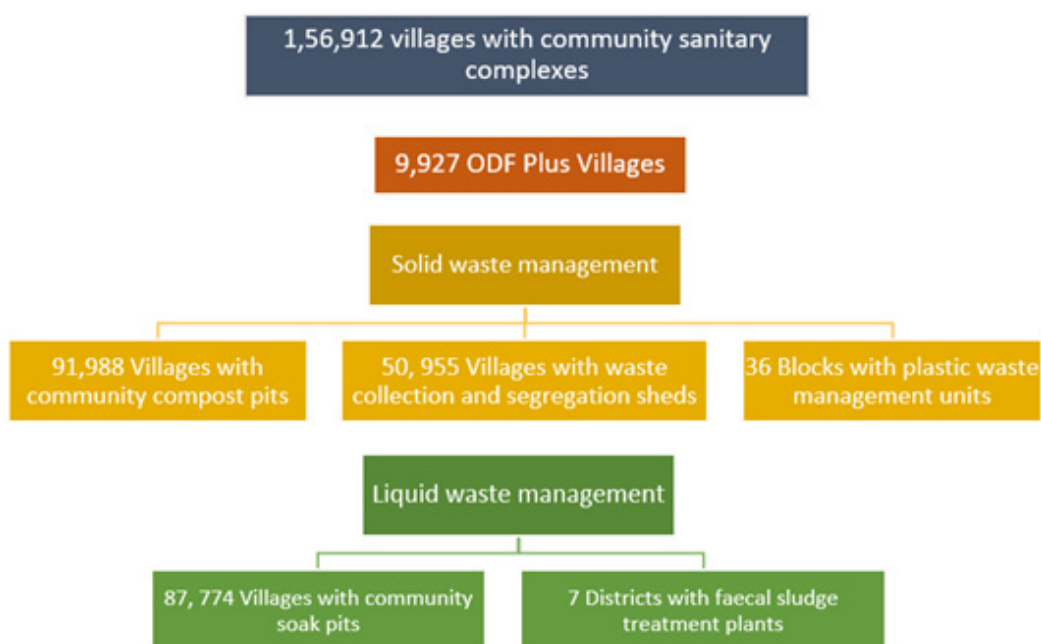
Across the world, while at least 892 million people continue to practice open defecation and 2.4 billion people lack access to basic sanitation³, India with its continued sanitation efforts, while keeping the Panchayati Raj Institutions (PRIs) at the centre, has made an unprecedented progress by achieving the ODF status via nearly 100% IHHL coverage. Furthermore, while over 80% wastewater (resulting from human activities) across the world is discharged into water bodies⁴, the nation's focus on retrofitting toilets sub-structures and greywater management at household and community level resulted in leap towards safe wastewater treatment and disposal.

To support the state governments and Panchayati Raj Institutions (PRIs) towards achieving ODF Plus status, the SBM has designed and deployed a criterion. Only those villages which (a) sustain their ODF status; (b) implement effective solid waste management (SWM) covering at least 80% households and all public places; (c) deploy systems for greywater management (GWM) at individual or community level by way of covering at least 80% households and public places; and (d) ensure visual cleanliness of all public places with at least 80% of households and all public places having minimal litter, minimal stagnant water and no accumulation of solid waste dumps are provided with the ODF Plus status⁴. A large number of local bodies across India are moving towards achieving these goals, supported by the national, state as well as district level program management structures under the SBM.

Currently, initiatives that can help sustain India's ODF efforts are being deployed across the ~6.5 lakh villages in the country and significant progress can already be seen on this front. As on 10 February 2022, approximately 1.57 lakh villages are covered with community sanitary complexes, 51,000 villages with solid waste collection and segregation units, 92,000 villages with community compost pits for wet waste treatment and 87,000 villages with community soak pits for greywater treatment, as per the SBM Phase-2 dashboard⁵. Furthermore, 36 plastic waste management units have been set up in 36 blocks across different states and 7 rural faecal sludge treatment plants (FSTPs) to treat faecal sludge from single pit latrines and septic tanks have been piloted in different states across the country⁵.

Figure 1. Rural sanitation situation in India at a glance as on 10 Feb 2022.

Source: SBM-Phase 2 Dashboard⁵



To further these efforts, many development sector organizations, private companies, researchers and academicians have also been putting in efforts on sustainable solid and liquid waste management including terrain appropriate sanitation technologies, grey water management, faecal sludge management and technologies to eliminate human interface with faecal matter, across the country.

On the financial side, the union government had initially allocated the Ministry of Jal Shakti INR 59,697 crores for five years during the phase 1 of the SBM-G, from the financial year 2014-15 to 2019-20. The SBM-G Phase 2 has received a cumulative allocation of 18,137 crores INR so far, from the financial year 2020-21, including the recent allocation of INR 7192 crores for the upcoming FY 2022-23⁶. Furthermore, the Centre's 15th Finance Commission (FC) has allocated a total of INR 2,36,805 crores for rural local bodies across 25 states for the period 2021-26. Of the overall 15th FC funds, 60% funds have been earmarked towards Panchayati Raj Institutions (PRIs) to improve access to basic water and sanitation services at household level as tied grants. To better support panchayats in effective utilization of the earmarked funds, the Ministry of Jal Shakti's Department of drinking water and sanitation has developed a manual that clearly identifies and suggests avenues to utilize these funds.

3. Central and State Policies, Schemes and Initiatives for Sanitation

Before the Centre launched the Swachh Bharat Mission in 2014, the GOI deployed several sanitation initiatives in India such as the Comprehensive Rural Sanitation Program, Total Sanitation Program and the Nirmal Bharat Abhiyan. While these programs could achieve over one third of the ODF targets⁷, the Swachh Bharat Mission 1.0 took it close to full achievement. There are some states which have tried state specific program designs in total sanitation, while linking up with the national level initiatives. These include, but are not limited to, Kerala's *Haritha Keralam* Mission, Bihar's *Lohiya Swachh Bihar Abhiyan*, Tamil Nadu's *Muzhu Sugathaara Thamizhakam*, *Munnodi Thamizham*.

In 2019, the Government of India has also launched its rural sanitation strategy 2019-29, for achieving ODF to ODF Plus targets in a 10-year span. The Phase II of SBM (SBM 2.0), which was launched post this, seeks to ensure that every household has access to sustainable sanitation measures. The SBM 2.0 is focussed on supporting rural local bodies and districts for initiating measures for strengthening the sanitation as well as solid waste management situation via safe solid and liquid waste management (SLWM) including greywater management and faecal sludge management, and towards building awareness on repair and retrofitting of toilet infrastructure. It is also focussed on necessary infrastructure creation, institution building, awareness generation, behaviour change initiatives and capacity building of various stakeholders, so that all possible second and third generational challenges as part of the world's largest sanitation program can be identified and addressed.

Safety, dignity and well-being of sanitation workers has been a major focus of sanitation initiatives across the world, which has been identified by the SBM as well. While this agenda has been largely limited to the urban areas earlier, the large number of toilets built during SBM 1.0 that require emptying and cleaning has made this agenda important for several rural pockets as well. GARIMA, one of the Odisha State Government schemes launched in 2020, for the safety and welfare of core sanitation workers dealing with faecal matter from toilet sub and super structures and sewer/ faecal sludge treatment facilities can be seen as a way forward here. Albeit this scheme is primarily aimed to provide benefits to around 20,000 sanitation workers (from 114 urban local bodies in Odisha) and their families, this step by the Odisha Government is the first of its kind in the country and similar measures can be thought for the rural areas as well, in light of the importance of this issue.

4. Opportunities and Challenges to Strengthen Rural Sanitation through PRIs

While significant efforts have been made towards ensuring rural India's ODF status, sustainability of the efforts needs to continue at the grassroots level. While the roles of PRIs in leading the implementation is accepted, their independent role in planning and implementing self-reliance in sanitation, in their capacity as the local government is yet to be realised. Following are some key challenges often faced by PRIs and some opportunities that need further deliberation and focus by the districts, states and the centre:

- The SBM has been designed to be a decentralized scheme, with PRIs as the primary focus and as ultimate implementers. Whilst the PRIs are provided with the funds and are implementing the scheme, there is a need to develop ownership among PRIs towards sustaining the efforts and works. There is a need to build the capacities of PRIs for this. This requires several measures, including measures for sustaining the large force of Swachhagrahis that was created for the SBM 1.0.
- In its guidelines, the SBM 2.0 emphasizes the importance of retrofitting of sanitation infrastructure but no financial allocations have been made towards retrofitting (under the SBM). However, the 15th FC allocations towards villages can be used to undertake rigorous retrofitting activities. For this, it is important that PRI officials, volunteers, masons and other workers are trained and their capacities are built. Localised understanding, approaches and financing models for terrain appropriate toilet technologies, accessible sanitation for persons with disabilities, female friendly community and public toilet infrastructures etc. also need to be developed towards this, so that PRIs can translate these into reality.
- PRIs are often provided with funds for implementation via centrally/ state sponsored schemes and tied grants which come with conditions attached and have certain restrictions. These financial allocations do not necessarily provide PRIs with the liberty to undertake works as per the requirements at community level. Whilst it is important to adhere to the scheme goals and ensure financial integrity, how to provide flexibility for PRIs for addressing local issues needs to be kept into consideration.
- PRIs need to be equipped to understand and design comprehensive waste management solutions. Further, liquid waste management, including both grey water management and faecal sludge management is an area where significant efforts are needed to strengthen the understanding and abilities of PRIs.
- Current mechanisms to promote behaviour change among various stakeholders and to monitor and evaluate works, at PRI level, are limited. Efforts need to be furthered on changing communities' attitudes towards toilet usage, child faeces management, menstrual waste management, the plight of sanitation workers, caste and gender issues associated with sanitation, etc. to ensure sustainable sanitation in rural India. PRI roles are to be strengthened in these areas as well.
- Another challenge is that the sanitation initiatives at rural level face is the inadequacy with reference to technical and managerial capacities as well as human resources at the PRI level. There are scheme specific support measures that are provided to Panchayats in this regard, such as support from Key Resource Centres (KRC) and Implementation Support Agencies (ISA). However, there need to be initiatives for addressing these challenges in a sustainable manner through institutional strengthening and human resource provisions. Strengthening the capacities of relevant departments at the block and district level as well, in order to ensure regular handholding and support.
- While several states introduced monitoring and evaluation (M&E) in this context, the list of indicators considered as part of the M&E efforts is unclear. It is important that all pertinent WASH indicators are included and evaluated for, at the field level, holistically. Regular learning and knowledge sharing initiatives of field level teams are also important in this regard.

5. Way Forward for Panchayati Raj Institutions in strengthening action on Rural Sanitation

PRIs, including the local bodies in scheduled areas, are the backbones for ensuring sustainable sanitation in rural India, and the primary interface with people, services and service providers. Once strengthening of the above areas are prioritised towards overall strengthening of the PRIs, they will be able to play pivotal roles in attaining and sustaining accessible, inclusive and safe sanitation for all through various improved measures. Key areas where Panchayats needs to focus with reference to sustainable sanitation sustainability are:

- 1. Community mobilisation, education and participation:** PRIs will have to play major roles in ensuring community ownership in all the various initiatives for the environmental sanitation. through the involvement of gram sabhas at the village level. Such planning could also be helpful to ensure equity and gender, disability and social inclusion in sanitation related initiatives. This should lead to further education of the community members on various issues around safe sanitation and to ensure their participation and ownership.
- 2. Situation assessment and planning:** With ownership and leadership of PRIs across India, it will be possible to develop a fully reliable and localised database on current situation of coverage with reference to individual and household toilets including the accessibility needs, usage of the same, faecal waste management requirements, population level gaps with reference to sanitation related hygiene behaviours and so on, which the PRIs can use for planning to improve the situation.
- 3. Financing:** Building on the participatory planning data, PRIs can use the available data for optimised financial allocation for fulfilling various needs from various sources that are available with them, such as the central and state finance commissions, own revenue, program funds from SBM, district and block level allocations, MLA/ MP LAD and so on.
- 4. Monitoring:** Once closer to the sanitation strategy goals, the Panchayats will have to start monitoring of the situation themselves, in order to strengthen and sustain the sanitation gains. Community monitoring of sanitation initiatives and outcome is a potential area that PRIs can ensure. At the district, state and national government levels, this will help to oversee, handhold and support the initiatives as well, including documentation, evaluation and sharing of the best practices and initiatives.
- 5. Regulation:** PRIs, being the local governments need to see and build linkages between sanitation, public and environment health. Stronger PRIs can introduce regulatory measures for both individuals and organisations within their limits for ensuring safe sanitation, towards reducing contamination of ground water, protecting water bodies, optimising cleanliness, safe management of solid and liquid waste and so on.

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- 2 <https://www.un.org/sustainabledevelopment/water-and-sanitation/>
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- 4 <https://swachhbharatmission.gov.in/SBMCMS/writereaddata/portal/images/pdf/sbm-ph-II-Guidelines.pdf>
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Water, Sanitation and Hygiene in Rural Schools and Anganwadi Centres

1. Introduction

Safe and adequate water, sanitation and hygiene (WASH) services in educational institutions and in early childhood care centres are critical for child health and wellbeing, and can enable children to reach their full potential. The significance of WASH in schools is emphasized globally through its inclusion in Sustainable Development Goals (4.a, 6.1, 6.2) as core components of a 'safe, non-violent, inclusive and effective learning environment' and part of 'universal WASH access'.

Inadequate WASH places children at risk for diseases and undermines their dignity and safety, especially for girls. Unsafe water, poor sanitation, and unhygienic behaviours are associated with stunting, a result of severe and persistent undernutrition that compromises a child's physical and cognitive growth. Research has found that children who are stunted demonstrate poorer performance in school compared to children who are not stunted. Accessible, adequate, appropriate and functional WASH services in institutions serving children during the early childhood phase and the school years can confer long-term health and educational benefits.

2. Status of WASH in Schools and Anganwadi Centres in India

2.1 Schools

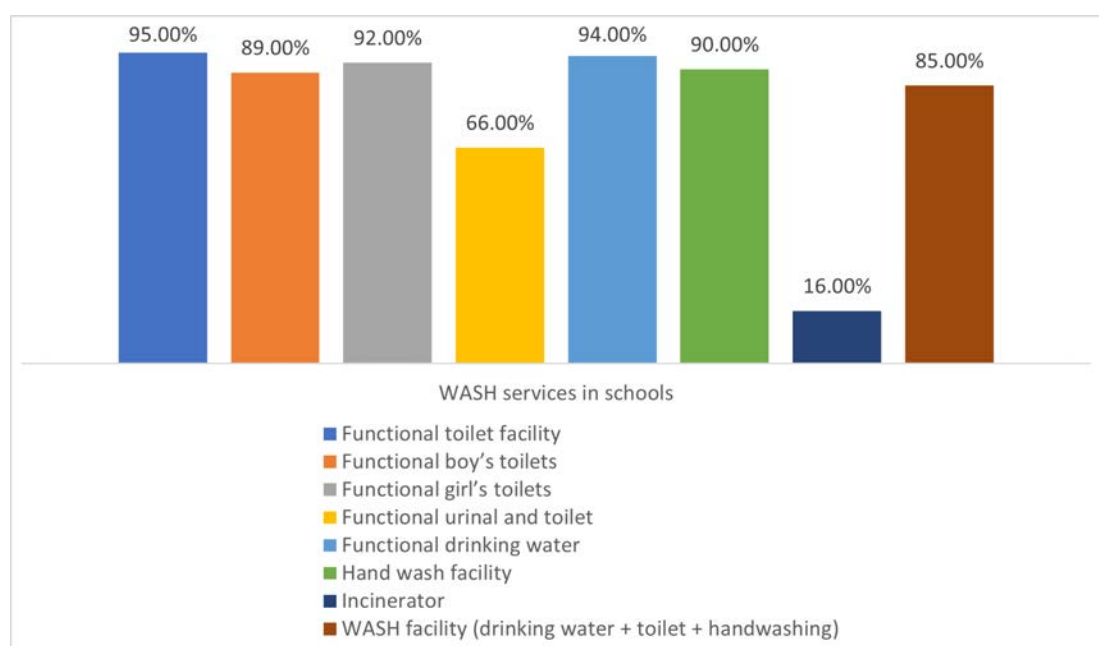
The Unified District Information System for Education (U-DISE) provides the latest data on schools in the country. Table 1 presents the total number of schools and the number of students enrolled in schools by category.

Table 1: Number of schools and student enrolment

	Primary	Upper Primary	Secondary	Higher Secondary	Total
Schools¹	7,78,842	1,01,728	31,551	15,816	15,07,708
Enrolment² (in crores)					
Boys	6.3	3.3	2.0	1.3	
Girls	5.8	3.1	1.8	1.3	
Total	12.2	6.5	3.8	2.6	

U-DISE data for 2019-2020 further provides insight into the status of WASH services in schools, as shown in Figure 1, with approximately 85.00% of schools having drinking water, toilet and handwashing facilities.

Figure 1: WASH services in schools



The National Annual Rural Sanitation Survey (NARSS) Round 3, conducted in 2019-2020, reported that 97.50% of schools surveyed had access to toilets; of these, 99.30% were found to be functional. Gender-segregated toilets were present in 86.70% of co-educational schools. In open defecation free villages, one functional toilet was available for 68 boys, and one functional toilet was available for 63 girls. Among all schools, toilet use was observed in 98.70% of schools. Further, 99.50% of schools reported that the toilet was connected to a septic tank/leach pit or to a sewer system and 99.40 percent toilets had a fly proof seal. Handwashing practices³ were observed in 98.70% of schools⁴. The Ministry of Jal Shakti's live dashboard for drinking water supply shows that 82.31% of schools have tap water supply⁵.

2.2 Status of WASH in Anganwadi Centres

According to a 2020 report on anganwadi centres by the Parliamentary Standing Committee on Human Resource Development, 82.03% of anganwadi centres had water facilities and 69.19% had sanitation facilities, with significant regional variations reported⁶.

The NARSS Round 3 (2019-2020) found that 94.50% of anganwadi centres had access to toilets, of which 97.80% were functional. 98% of anganwadi Centres were found to have evidence of handwashing facilities (soap and water)⁴. The Ministry of Jal Shakti's live dashboard for drinking water supply shows that 77.63% of anganwadi Centres have tap water supply⁷.

3. Central Policies, Schemes and Initiatives for WASH in Schools and Anganwadi Centres

The Swachh Bharat Mission provided impetus to improve WASH services in schools and anganwadi Centres, focusing on toilet facilities as well as drinking water, hand washing stations, and hygiene promotion. Table 2 highlights Central Government initiatives to improve WASH services in schools and anganwadi Centres, and indicates which aspects of WASH are addressed.

Table 2: Policies, Schemes and Initiatives for WASH in Schools and Anganwadi Centres

Institution	WASH relevant scheme	Sanitation infrastructure	Drinking water infrastructure	Hygiene infrastructure	Behaviour change
Schools	Swachh Bharat Swachh Vidyalaya Guidelines (2015-2019)	✓	✓	✓	✓
	Swachh Vidyalaya Standards Operating Procedures (2015-2019)	✓	✓	✓	✓
	Swachh Vidyalaya Puraskar (2017-2018)	✓	✓	✓	✓
	100 days campaign to provide piped water supply in anganwadi centres, ashramshalas and schools (2020)	—	✓	—	—
Anganwadi centres	National Nutrition Mission (POSHAN Abhiyan)	✓	✓	✓	✓
	Community based events (CBE) Guidelines				✓
	ICDS CAS (Common Application Software for monitoring)	✓	✓	✓	✓
	100 days campaign to provide piped water supply in anganwadi centres, ashramshalas and schools (2020)	—	✓	—	—

4. Opportunities and Challenges to Strengthen WASH Services in Schools and Anganwadi Centres

While an enabling policy environment and implementation frameworks for WASH in schools and anganwadi centres exist, challenges persist in terms of access to quality, child-friendly, and gender responsive infrastructure, functionality of WASH services, and hygiene promotion in schools. Salient areas to address in both schools and anganwadi centres include the following:

1. WASH infrastructure:

- Functionality of existing WASH infrastructure
- Adequacy of WASH infrastructure according to established norms (i.e., Swachh Vidyalaya guidelines for schools, ICDS guidance for anganwadi construction)
- Inclusive and responsive facilities that meet the needs of male and female children, children with disabilities, and children of all ages
- Access to sustainable functional and adequate WASH services in all schools and anganwadi Centres, including residential schools (ashramshalas, Kasturba Gandhi Balika Vidyalayas), and anganwadi centres in rented premises
- Regular operation and maintenance of WASH infrastructure

2. WASH related behaviour change and communication material:

- Hygiene promotion curriculum implemented as a part of the school and anganwadi curriculum
- Inclusion of the following hygiene behaviours in hygiene sessions and curriculum: toilet use, hand washing with soap, food hygiene, safe storage and handling of drinking water, menstrual hygiene, and COVID appropriate hygiene behaviours
- Development and appropriate placement of information, education and communication (IEC) and behaviour change communication (BCC) material in schools and anganwadi centres. Further nudges to be placed at appropriate locations (e.g., outside toilet, above handwashing stations) to encourage handwashing practices
- Promotion of hygiene through health and nutrition programs implemented in schools and anganwadi centres (e.g., National De-worming Day, Anaemia Mukta Bharat Program, School Health Ambassador Program)

3. Capacity building:

- Training of teachers, anganwadi workers on WASH in institutions (infrastructure standards) and on hygiene promotion
- Orientation and capacity building of students (student cabinet members) and school management committees (SMC) on WASH, and their role in ensuring adequate functional WASH services in educational institutions
- Integrate WASH modules in Teachers training curriculum

4. Fund allocation is needed in terms of:

- Adequate and regular financing for operation and maintenance of WASH infrastructure
- Adequate financing for new infrastructure in institutions lacking WASH services
- Adequate and regular financing for hygiene promotion and related materials
- Adequate and regular financing for capacity building of relevant stakeholders

5. Monitoring:

- Functionality and adequacy of WASH infrastructure as a part of routine monitoring information systems
- Implementation of hygiene sessions
- Training/capacity building of relevant stakeholders
- Budgetary allocations and spends for operation and maintenance, training/capacity building and hygiene promotion

5. Way Forward for PRIs in Addressing the Challenges and Opportunities for WASH in Schools and Anganwadi Centres

Panchayati Raj Institutions can support the strengthening of WASH in schools and anganwadi centres in the following ways:

- 1. Planning:** Include provisions to establish new infrastructure or to support the operation and maintenance of existing WASH services in these institutions under the Gram Panchayat Development Plans
- 2. Financing:** Allocate funds under 15th Finance Commission/State Finance Commissions, and own revenue sources to address gaps in WASH services in these institutions. Further other sources of funds (e.g., Corporate Social Responsibility, District Mineral Funds, Members of Parliament Local Area Development Scheme Funds) can be explored to support provisioning of soap, building of new WASH infrastructure, or implementing hygiene campaigns
- 3. Institutional arrangements and capacities:** Engage formal and informal institutions for hygiene promotion. Formal institutions include self-help groups, SMCs, village water, sanitation committees, village health, nutrition, and sanitation committees, National Service Scheme, Nehru Yuva Kendra Sangathan. Informal groups include youth groups, women's groups (e.g., mother's groups in anganwadi Centres) and religious leaders. PRIs can support schools and anganwadi Centres with regular cleaning staff, who can be supported through Gram Panchayat programs.
- 4. Monitoring:** Appoint a Swachhata supervisor or entrust extra responsibilities to existing staff to oversee status of WASH in schools and anganwadi centres to ensure that WASH services are adequate, functional and responsive to the needs of children of all genders, ages and abilities. Key monitoring indicators include presence of functional WASH services, and adequacy in line with existing norms for schools and anganwadi centres (e.g., Swachh Vidyalaya). PRIs may facilitate data collection through their engagement with SMCs and anganwadi workers and supervisors, and encourage the use of the Swachh Vidyalaya criteria for regular assessments in schools (and the use of an adapted version for anganwadis). Undertake regular social audits and promote child panchayats to review the progress, identify critical issues and ways of addressing them.

PRI members and relevant village committees at various levels (gram panchayat, district, state) need to be oriented towards the importance of WASH in schools and anganwadis for children in their communities, the components of WASH in these educational institutions, and their role in catalysing action and facilitating fund allocation. PRIs can be trained to monitor progress in these educational institutions, facilitate assessments and/or social audits, and engage NGOs and CBOs to support initiatives and innovations in schools and anganwadi Centres. Given the potential to expand the role of PRIs to accelerate action on WASH in these institutions, existing guidelines for PRIs need to be revised to expand their scope of work. Correspondingly, National and State Governments, as well as the National and State Institutes of Rural Development and Panchayati Raj need to plan for and facilitate regular trainings, and organize for technical experts to provide additional support to PRIs to carry out their expanded roles.

References:

1 Data presented is for all schools captured in U-DISE. Available at: <https://dashboard.udiseplus.gov.in/#/reportDashboard/sReport>

2 UDISE+ 2019-2020 Report. Available at: <https://udiseplus.gov.in/#/Publication>

3 NARSS ascertained handwashing practice by the presence of water, soap, and both water and soap near the toilet

4 National Annual Rural Sanitation Survey 3 (2019-2020). Available at: https://jalshakti-ddws.gov.in/sites/default/files/NARSS_Round_3_2019_20_Report.pdf

5 Jal Jeevan Mission Dashboard for piped water supply in schools and anganwadis. Available at: https://ejalshakti.gov.in/jjmreport/School/JJMSchool_India.aspx

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COVID Appropriate Behaviours and Water, Sanitation and Hygiene in Health Care Facilities

1. Introduction

By mid-February 2022, India recorded approximately 4.23 crore COVID-19 cases, and 5.03 lac COVID related deaths since the start of the pandemic, as per the Ministry of Health and Family Welfare. Efforts to secure medical services for those infected are essential to ensure treatment of those infected. Equally critical, however, are urgent actions to protect a vast population who are not infected, yet at risk for this infectious disease, particularly children, the elderly, and those with pre-existing health conditions. COVID-19 appropriate behaviours (CAB) are a vital part of the solution, alongside curative services and widespread vaccination to protect millions from avertible infection.

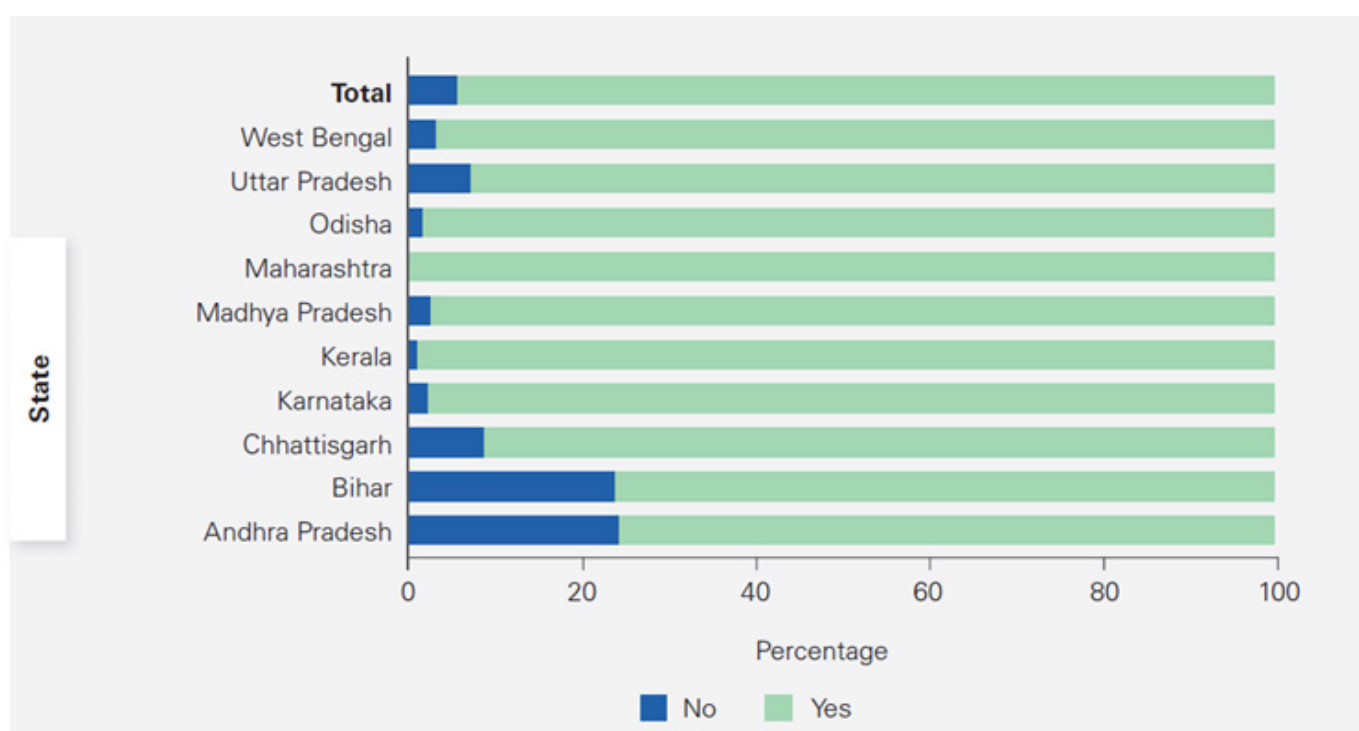
CABs are protective – these behaviours slow the transmission of the Novel Coronavirus that causes COVID-19 disease. Frequent and thorough handwashing with soap, mask use, and physical distancing were promoted as protective measures during the initial phase of the pandemic when infection rates were low. As the pandemic progressed, infections increased, the messaging on protective measures evolved, with as many as 15 COVID-19 appropriate behaviours identified by the Ministry of Health and Family Welfare in 2021. Given the number of hospitalizations during the second COVID-19 wave (in April – June 2021), critical infrastructure in health care facilities (HCFs) such as water, sanitation and hygiene services, assumed importance to improve treatment outcomes among the infected and to protect all cadres of health workers providing treatment services.

2. Status of CABs and WASH in HCFs in India

2.1 COVID-appropriate behaviours

Nationally representative data on CABs does not exist. Some studies have shed light on the status of handwashing, with a focus on selected states. The National Family Health Survey-4 (conducted in 2015-16) found that 80.3% of urban households and just 49.4% of rural households had a designated handwashing space with soap and water at the household level¹. The National Sample Survey, 76 Round asked about hand washing practices, finding that 74.1% respondents washed hands after defecation and 35.8% did so before eating². One year into the COVID-19 pandemic, a survey conducted by UNICEF and WaterAid India in ten states in 2021, found that 94.00% of households surveyed had handwashing facilities, with 95.00% respondents reporting that all household members washed hands with soap and water, mostly after toilet use and before eating. Strikingly, 84.00% of households reported that handwashing practices had increased as a result of the COVID-19 pandemic. 70.00% of respondents reported not having access to handwashing facilities in public spaces in the community³.

Figure 1: Proportion of respondents reporting the presence of handwashing facility at home (UNICEF and WaterAid India 2021)



The Joint Monitoring Programme (JMP by the World Health Organization and UNICEF) latest report on WASH in HCFs showed the status of WASH in HCFs (Table 1).

Table 1: Status of WASH in HCFs

Basic services in health care facilities (JMP)
94% HCFs have basic water service
89% rural hospitals have improved sanitation facilities
99% HCFs have handwashing facilities at points of care
78% HCFs have handwashing facilities near toilets
80% HCFs segregate waste
94% HCFs treat waste
74% HCFs have protocols for cleaning
92% HCFs have training on cleaning

Source: Global Progress Report on WASH in Health Care Facilities: Fundamentals First (<https://washdata.org/sites/default/files/2020-12/WHO-UNICEF-2020-wash-in-hcf.pdf>)

3. Central Policies, Schemes and Initiatives for CABs and WASH in HCFs

The COVID-19 pandemic facilitated a multi-pronged approach to COVID-19 prevention and treatment. The Ministry of Health and Family Welfare (MoHFW) has issued several guidelines emphasizing the importance of CABs both to slow the spread of the disease as well as to better manage the disease among those infected (e.g., guidelines to be followed by those in quarantine and isolation). Relevant guidance are highlighted in Table 2 (highlighting the relevant aspects of WASH addressed by policies, schemes, initiatives).

Guidance on WASH in HCFs dates back to the Indian Public Health Standards for all types of public health facilities (primary, secondary and tertiary), with in-depth guidance on cleanliness issued under the Swachhata Guidelines and corresponding Kayakalp criteria and awards in 2015. In 2017, detailed guidance on cleanliness of labour and delivery rooms was released by the Ministry of Health and Family Welfare with the Labour Room Quality Improvement Initiative (LaQshya). Table 2 presents key guidelines on WASH in HCFs .

Table 2: Policies, Schemes and Initiatives for CABs and for WASH in HCFs

Area of focus	WASH relevant Policy/scheme	Sanitation infrastructure	Drinking water infrastructure	Hygiene infrastructure	Hygiene promotion and behaviour change	Policy focus
CABs	Illustrated Guide of COVID appropriate behaviours	—	—	—	✓	—
	Revised Comprehensive Guidelines for Management of COVID-19 in Children and Adolescents (below 18 years)	—	—	—	✓	—
	Revised Guidelines for home isolation of mild/asymptomatic COVID-19 cases	—	—	—	✓	—
	Hand Hygiene for all: The catalytic role of Panchayati Raj Institutions	—	—	✓	✓	—
Health care facilities	National Health Policy (2017)	—	—	✓	—	✓
	Swachhta Guidelines and Kayakalp awards criteria	—	—	—	✓	—
	Swachh Swasth Sarvatra	✓	✓	✓	✓	—
	LaQshya guidelines	✓	✓	✓	✓	—

4. Opportunities and Challenges to Strengthen CABs and WASH in HCFs

The COVID-19 pandemic provided impetus for action on hand hygiene, as a key component of COVID-19 prevention. While handwashing practices have improved, challenges still remain in terms of adherence to hand hygiene behaviours and necessary infrastructure to support handwashing practices in households, public spaces, and institutions. In HCFs, the pandemic has led to the prioritization of treatment services, while allied services such as WASH have received less attention.

1. Salient areas to address on CABs include:

- Institutionalizing CABs, particularly handwashing, as a part of all COVID-19 response
- Integrating hand hygiene as a component of health programs, particularly those that focus on health promotion and disease prevention (e.g., ante-natal and post-natal care, immunization programs, child health programs, adolescent health programs)
- Training of cadres of health care providers on hygiene promotion and behaviour change as a component on their ongoing work
- Developing a Hand Hygiene for All framework for India drawing on global guidance from the World Health Organization, and ongoing programs in India

2. Salient areas to address for WASH in HCFs include:

- Ensuring adequacy, appropriateness and functionality of WASH services in all categories of HCFs (primary, secondary and tertiary)
- Addressing the poorly managed solid, liquid and medical waste in facilities, and supporting the establishment of appropriate infrastructure and capacity for segregation and treatment
- Developing facility specific guidelines and training on facility cleanliness, infection control and personal protective equipment, and ensuring consistency in implementation
- Ensuring that budgetary investments in WASH infrastructure and training are not just concentrated in the tertiary care facilities, and are allocated to primary health care facilities, located closest to communities
- Balancing investments in other health priorities (e.g., medical equipment, medicines) with investments in WASH
- Facilitating recognition of WASH as a critical component quality of care, disease prevention, and health promotion, having potential to contribute to improved treatment outcomes alongside curative efforts
- Supporting the capacity strengthening of staff in health facilities towards WASH in HCFs , and ensuring that participatory management structures such as the Hospital Management Committees are functional and address WASH alongside and in conjunction with other priorities

5. Way forward for PRIs in addressing challenges and opportunities for action on CABs and WASH in HCFs

Panchayati Raj Institutions can strengthen action on CABs in the following ways:

1. **Planning:** Include provisions to establish new infrastructure or for the operation and maintenance of existing WASH services, particularly handwashing facilities in public spaces, community toilets, schools, anganwadi Centres, and worksites under the Gram Panchayat Development Plans based on COVID-19 advisories by the Government of India
2. **Financing:** Allocate funds under 15th Finance Commission/State Finance Commissions, and own revenue sources to address gaps in handwashing services in the public spaces, educational institutions and worksites. The 15th Finance Commission provides guidance on utilization of funds for WASH; a part of this can be allocated for handwashing infrastructure in a concerted manner, where gaps exist. Further, other sources of funds (e.g., Corporate Social Responsibility, District Mineral Funds, Members of Parliament Local Area Development Scheme Funds) can be explored with support of districts and state, to support provisioning of soap, building of new handwashing facilities, or implementing hygiene campaigns
3. **Institutional arrangements and capacities:** Engage formal and informal institutions for hygiene promotion, with a focus on hand washing with soap, as well as other CABs. Formal institutions include self-help groups, SMCs, village water, sanitation committees, village health, nutrition, and sanitation committees, National Service Scheme, Nehru Yuva Kendra Sangathan. Informal groups include youth groups, women's groups (e.g., mother's groups in anganwadi Centres) and religious leaders

4. **Integration:** PRIs are suggested to integrate CAB and WASH measures in all existing programs and further ensure progress is tracked along with other programs for timely actions
5. **Monitoring:** Appoint a Swachhata supervisor or entrust extra responsibilities to existing staff to oversee status of hygiene facilities to ensure that handwashing facilities are adequate, functional and responsive to the needs of the community.

Panchayati Raj Institutions are a part of Rogi Kalyan Samitis, and can catalyse action on WASH in HCFs in the following ways:

1. **Planning:** Emphasize inclusion of WASH services in HCFs , particularly primary health centres and community health centres
2. **Financing:** Advocate for adequate financing to ensure sufficient sanitation and water supply, and hand hygiene facilities in HCFs. Such financing should include regular operations and maintenance of WASH infrastructure; training and capacity building of health care providers and mandated institutions on WASH in general and hygiene and infection prevention and control in particular; and strong social and behaviour change campaigns to promote hygiene among all health care facility staff, patients and their caregivers. The 15th Finance Commission does have provisions to support infrastructure development in HCFs, and PRIs may guide allocation of funds to address WASH infrastructure gaps where they exist
3. **Monitoring:** Support and contribute to regular reviews or assessment of WASH status at HCFs in keeping with existing standards and criteria. Key monitoring indicators include presence of a functional handwashing facility with soap and water, and adequacy in line with existing norms for HCFs (e.g., presence of handwashing facility in patient care areas, procedure rooms, wards). PRIs may facilitate data collection through their engagement as members of the Rogi Kalyan Samiti, and using the Kayakalp criteria
4. Facilitate community engagement to demand WASH services in HCFs. Communities can also be sensitized on the importance of WASH in HCFs, and their rights as patients and caregivers to demand WASH secure facilities during Gram Sabhas and Mahila Sabhas

To achieve the above, appropriate guidance in the form of guidelines for PRIs need to be developed at the national and state levels. Further, orientation and regular training of PRI members at various levels (gram panchayat, district, state) towards CABs, WASH in HCFs , and their role in catalysing action and facilitating fund allocation, will be essential. PRIs can be supported with technical inputs from the National and State levels, as well as by development sector actors working on these issues, and offering technical assistance to the Government. National and State Governments, as well as the National and State Institutes of Rural Development and Panchayati Raj can facilitate such trainings.

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- 1 International Institute for Population Sciences (IIPS) and ICF. 2017. National Family Health Survey (NFHS-4), 2015-16: India. Mumbai: IIPS. Available at: <http://rchiips>.
- 2 Ministry of Statistics and Programme Implementation. National Sample Survey, 76 Round (2018). Available at: <https://mospi.gov.in/web/mospi/download-tables-data/-/reports/view/templateTwo/16205?q=TBDCAT>
- 3 These findings may be a result of these surveyed households having received some form of intervention on handwashing during the COVID-19 pandemic. The survey was on sample basis and cannot be generalized.



NATIONAL WASH CONCLAVE 2022

WASH FORWARD

Advancing Water, Sanitation and Hygiene
(WASH) in Panchayats

Conclave Agenda, Session Details and Speakers



Curtain-raiser Plenary

DAY 1 | 23 FEBRUARY, 2022 | 02:00 PM - 03:45 PM

Welcome Song

Youngistaan Foundation

Welcome and Context Setting

Dr G Narendra Kumar, Director General, NIRDPR

Opening Remarks

Ms Meital Rusdia, Chief, UNICEF Hyderabad Field Office

Instructions for using Conference Platform

Interactive Discussion using Mentimeter

Ms Swathi Manchikanti and Ms Karishma Kadyan, UNICEF India Country Office

Strengthening Panchayati Raj Institutions to deliver improved WASH services – What needs to be done?

Mr Nicolas Osbert, Chief of WASH, UNICEF India – Moderator

1. Mr Sunil Kumar, Secretary, MoPR
2. Ms Vini Mahajan, Secretary, MoJS
3. Mr Arun Baroka, Addl. Secretary, MoJS
4. Dr Chandra Shekhar Kumar, Addl. Secretary, MoPR
5. Ms P. Amudha, Principal Secretary to Government of Tamil Nadu
6. Mr Junaid Ahmad, Country Director, World Bank, India
7. Mr V.K. Madhavan, Chief Executive, WaterAid India

Videos

Success Stories from Gram Panchayats

Inaugural Session

DAY 1 | 23 FEBRUARY, 2022 | 04:00 PM - 05:00 PM

Arrival of Hon'ble Vice President of India

National Anthem

Welcome Address

Dr G Narendra Kumar, Director General, NIRDPR

Role of Development partners, CSOs and Pvt Sector for WASH in India

Ms Gillian Mellsop, UNICEF India Country Representative

Special Address

Shri Amitabh Kant, CEO NITI Aayog

Keynote Address

Shri Gajendra Singh Shekhawat, Hon'ble Minister of Jal Shakti
Shri Giriraj Singh, Hon'ble Minister of Panchayati Raj

Release of Conclave Booklet & Inaugural Address

Shri M Venkaiah Naidu, Hon'ble Vice President of India

Words of Thanks

Dr R Ramesh, Associate Professor & Head, CRI, NIRDPR

National Anthem

Technical Breakout Sessions

Successes, Bottlenecks and Way Forward: Improving Financing and Spending by PRIs for Fulfilling SBM-2 Priorities

DAY 1 | 23 FEBRUARY, 2022 | 05:00 PM - 06:30 PM

Moderator:

Mr Sujoy Mojumdar, WASH Specialist, UNICEF India Country Office

Context/ Problem Statement:

The Swachh Bharat Mission phase I implemented from 2014-2019, had a massive impact. Not only did this unique campaign provide toilet access at homes to millions of Indians, but it also brought the subject of sanitation out into public discourse. Under the Swachh Bharat Mission II, launched in 2019 and currently under implementation, the focus is on sustaining sanitation gains in terms of ODF status of communities, covering those left out, including providing toilet access in public places, repairing/retrofitting incorrectly built or defunct toilets, and promoting universal toilet use. It also provides for setting up ODF+ operations including management of Biodegradable waste (and Gobardhan), Plastic waste, Grey waste, and Faecal waste. Other important areas of concern are hygiene practices of management of menstrual waste and Handwashing with soap.

Why are we Talking about this?

In addition to infrastructure creation, a major effort will need to be placed on ensuring effective operations and maintenance of systems and sustainability of service delivery. These are major steps that the country is taking moving towards, targeting the goal of 'safely managed sanitation' under the Sustainable Development Goals 6.2. It is also essential to ensure that the consumer in rural areas is provided with high quality and sustained sanitation services at a reasonable cost. To do all the above across over 255,000 GPs and 630,000 villages is a massive exercise and all stakeholders need to be capacitated and involved.

Why PRIs are important for this issue?

The 73rd Amendment of the constitution envisages the Gram Sabha as the foundation of the Panchayat Raj System, to perform functions and powers entrusted to it by the State Legislatures. The amendment provides for a three tier Panchayat Raj System at the village, intermediate and district levels. The eleventh schedule of the constitution created by the 73rd Amendment contains 29 subjects on which the Panchayats shall have administrative Control, and Water and sanitation are among the subjects. Thus, the role of the GPs and the Block and District panchayats are critical for the success of the sanitation programme and efforts to achieve the national goal.

Gaps, Challenges, and Issues:

While the policy is in place, the actual participation of the PRIs has been stifled by lack of clarity in the 3Fs – Funds, Functions and Functionaries. The situation has become much better with increased state level devolutions and now the provision of financial resources under the Finance commission devolutions and other sources. In fact, the Fifteenth FC has 'Tied' 60% of FFC funds (About INR 3,2000 crore per year) with PRIs for water and sanitation related activities. In view of the above, there is need for an urgent discourse on the successes and the bottlenecks and intervention needs to ensure that the PRIs effectively participate and 'own' the sanitation programme.

What is the potential that we can gain with involvement of PRIs?

The strategic, effective, and continuous involvement of the PRIs will ensure effective operation of schemes and sustained high level quality service delivery of sanitation services to the population. This will mean that capital investment is used effectively, and in the Covid context, have an impact on the health and wellbeing of the population.

Speakers

Ms Priyanka Tiwari	Gram Panchayat Pradhan	Rajpur, Gram Panchayat Hathras District, UP
Er Partha Pratim Baruah	State Coordinator, SBM-G	Assam
Mr Ayush Prasad	CEO ZP Pune	Pune Gram Panchayat, Govt. of Maharashtra
Shri Kushwant Singh Sethi	Joint Secretary	Ministry of Panchayati Raj, Govt. of India

Technical Breakout Sessions

Successes, Bottlenecks and Way forward:

Improving financing and Spending by PRIs for Fulfilling JJM Priorities

DAY 1 | 23 FEBRUARY, 2022 | 05:00 PM - 06:30 PM

Moderator:

Mr V K Madhavan, Chief Executive, WaterAid India

Context/ Problem Statement:

The Jal Jeevan Mission seeks to ensure that every household has access to safe and assured drinking water through a functional household tap connection by 2024. In other words, the new normal would be a tap available in the household and an end to fetching water from community stand-posts or other water sources. This has the potential to transform the lives of millions of women and adolescent girls – who currently face the primary burden of fetching water for their households. Success would also imply that India's progress alone could shift the global indicators towards meeting SDG Goal 6.

Historically, two problems have plagued drinking water schemes. Poor operation and maintenance and the source of water not being sustainable. Jal Jeevan Mission seeks to address both these problems. As part of the design, a central role for Village Water and Sanitation Committees – statutory committees of the Gram Panchayat has been envisaged. The desire is for Gram Panchayats and rural communities to participate in the planning, implementation, management and operation and maintenance of the drinking water schemes that will deliver water to households.

Access to water at a household level in rural India in August 2019, was 17% and is 46% as on date, as per the Jal Jeevan Mission Dashboard. There are sixteen states and Union Territories, where coverage is still less than 50% and these include some of the more populous states in the country. There are six states and Union Territories, which have reported 100% coverage and another five, with coverage between 71% and 99%. This progress reflects the provision of water at a household level. The challenges around sustainability of the source and more importantly management by rural communities and their institutions are likely to be a work in progress.

Why PRIs are important for this issue?

Over the past seven decades, the responsibility for provision of drinking water progressively became that of the 'state', which sought to achieve this through its line departments. Jal Jeevan Mission does not merely seek to ensure water at a household level, but also seeks to change this reality by ensuring ownership and management by Panchayats or formal or informal committees under it. This requires a significant participation by Panchayats, members of the relevant statutory committees and most importantly in all members of the Gram Sabha if this has to succeed.

A sense of ownership has to be created amongst citizens and their institution of self-governance – the Panchayats. Experience suggests that involving communities' right from the design and planning helps in create a sense of ownership. Their capacity to plan, manage, operate and maintain will need to be developed. Skilled personnel will need to be available to help operate and maintain these systems. Capital will be required for operation and maintenance, as well as repair and replacement of assets.

In addition to investment from Jal Jeevan Mission and contributions by State Government's – both of which will primarily help in asset creation, improvements and expansion - Panchayats also have funds available to them through 15th Finance Commission allocations. In all likelihood, there will need to be contributions by households to meet operational expenses as well.

This session seeks to discuss the challenges in ensuring that Panchayats and their committees are able to plan for and manage the drinking water schemes invested in by Jal Jeevan Mission, potential solutions, and examples of what is possible.

Speakers

Shri Manoj Kumar Sahoo	Director	Jal Jeevan Mission, Department of Drinking Water and Sanitation, Ministry of Jal Shakti, New Delhi
Smt Kavita Sushil Patidar	Sarpanch	Rajpurkuti Panchayat, Indore District
Smt Uma Mahadevan Dasgupta	Principal Secretary	Panchayati Raj, Government of Karnataka
Shri Ashok Singh	Director	Sahbhagi Shikshan Kendra, Lucknow, Uttar Pradesh

Technical Breakout Sessions on Drinking Water

Sustainable FHTC models for Local Bodies to Deploy in Water Quality Affected Locations

DAY 2 | 24 FEBRUARY, 2022 | 02:00 PM - 03:30 PM

Moderator:

Dr Sunderrajan Krishnan, Executive Director, INREM Foundation

Context/ Problem Statement:

Ensuring FHTC for Jal Jeevan Mission needs the supply of safe water at the household and point of use. Given that the quality of local groundwater resources have shown wide variety of Water quality problems over the years (100 million and more affected from Parliament responses), this puts a pressure on scarce surface water resources that otherwise need to be supplied for ensuring FHTC. Sustaining infrastructure for such water supply along with effective disinfection till the point of use, is necessary. In absence of such surface water or alternative sources, treatment of local chemical contamination becomes the only option.

- Either of the possibilities for FHTC in Water quality affected areas, requires strong community participation in O&M and sustainability. Experience till now shows that schemes are unable to be effective in the long term, both in ensuring effective disinfection by chlorination or otherwise; or with local water treatment plants; both needing effective participation of VWSC in PRIs.
- Given that either Chlorination and/or local Water treatment is a necessity for every Water supply scheme, Water quality has now emerged as an important problem to be solved with 1.42 lakh (out of 17.72 lakh) FTK results showing contamination (as of Jan 21, 2022 in JJM dashboard). Only 5954 of these 1.42 lakh reported points, are reported as those where remedial action has been taken, as of date, which says that 96% of the reports are still unresolved.

Sustaining this effort of Water quality monitoring and surveillance (WQM&S) with the participation of laboratories and PRIs along with VWSCs and women, children and youth testing water in villages has now become core to the JJM. Some states such as Chattisgarh are now outperforming (6.33 lakh/17.72 lakh total FTK tests in 2021-22), whereas many states are lagging behind. The status of NABL laboratory certification is also an aspect which plays a big role in laboratories being able to produce reliable and accurate data.

Bringing together laboratories, PRIs and PHED/RWSS onto a single platform on WQM&S, and together enabling effective water quality monitoring, surveillance and action is critical. Unless each Water quality data point that shows a problem is taken seriously and acted upon, we will soon have a massive pile of unsolved problems (already 96% unresolved, as shown earlier). The year 2022-23 for JJM will be critical in resolving these Water quality issues, for which the collective problem solving between these institutions within the district will help address the problems for JJM.

This session will help address these core issues for JJM. Apart from Data governance issues, we will have communication and behavioural problems being addressed, Water safety planning, along with institutional capacity and system strengthening goals put forward by the speakers.

Speakers

Mr Ajay Kumar	Director	WQ, NJJM
Mr Khileshwari Sahu	WQMS District Coordinator	District JJM Team, Rajnandgaon, Chattisgarh
Mr Nanak Santdasani	WASH Officer	UNICEF Jaipur Field Office
Dr Urmila Chattejee	Senior Economist, Water Global Practice	World Bank
Dr Priyanka Jamwal	Fellow, Centre for Environment and Development	ATREE
Mr Divyang Waghela	Head, Tata Water Mission	Tata Trusts
Dr Pawan Labhasetwar	Scientist and Head	Water Technology and Development, NEERI
Dr TNVV Rao	Project Advisor	ICCW
Er Hemanta Koley	Superintendent Engineer (Water Quality)	WSSO, PHED, West Bengal

Ensuring Source Protection, Security and Sustainability Under Jal Jeevan Mission DAY 2 | 24 FEBRUARY, 2022 | 02:00 PM - 03:30 PM

Moderator:

Mr Muralidharan Ardhanarewaran, Deputy Adviser,
Department of Drinking Water and Sanitation, Government of India.

Context/ Problem Statement:

Majority of rural water supply systems are dependent on groundwater. With the same aquifer catering to agriculture and water supply, depletion of groundwater aquifers would seriously threaten water availability for drinking. Pollution of surface water sources from point and non-point sources also reduces the fresh water availability. With functionality of tap under Jal Jeevan Mission linked to water quantity, quality, regularity with adequate pressure, ensuring water security *inter alia* sustainable access is key to the success of the mission.

We are talking about this to understand the provisions made in the programme guidelines for source sustainability through convergence, field observations and water conservation practitioners views on ensuring sustainability involving Government Departments, Local Governance Institutions and grassroot community organizations for strengthening and sustaining sources.

Including data points on groundwater availability, scheme details and field data on water conservation through relevant data points.

Why PRIs are important for this issue?

As per the Constitution, PRIs are vested with water supply and sanitation functions at village level and they are key enablers in delivery of water and WASH services. It is imperative that they are sensitized and onboarded for the success of JJM.

Gaps, Challenges, and Issues:

Currently, water supply service delivery is considered as a government's responsibility. There is a necessity to involve community ab initio and make them own the scheme so that local governance institutions can function as small self-sustaining utilities at Gram Panchayat level to manage the water supply and sanitation services. Capacity building and IEC tools have to be extensively used for this transition.

What is the potential that we can gain with involvement of PRIs?

Sustaining the benefits of tap water supply with full participation of community in ensuring the O&M, water conservation and demand management for sustenance of water and WASH provisioning so that water becomes a shared responsibility i.e. making water everyone's business.

Speakers

Dr Prakash Kumar	Commissioner	Rural Drinking Water & Sanitation Department, Govt. Karnataka
Mr Vishwanath Srikantiah	Director	Biome Environmental Solutions
Dr Snehalatha Mekala	Regional Director	FANSA
Dr Devaraja Reddy	Hydrogeologist	Geo Rain Water Board, Chitradurga, Karnataka
Mr Rajesh Rangarajan	State Program Director for AP & Telangana	WaterAid India
Mr Bishwajit Ghose	Country Director	Water For People

Strengthening Roles and Capacities of KRAs & Implementation Support Agencies for Effectively Supporting Local Bodies

DAY 2 | 24 FEBRUARY, 2022 | 02:00 PM - 03:30 PM

Moderator:

Ms Apoorva Oza, CEO, Aga Khan Rural Support Programme (India)

Context/ Problem Statement:

The Jal Jeevan Mission is an ambitious programme which seeks to provide Functional Household Tap Connection (FHTC) to every rural household in this country. At the village level, the programme envisions empowering panchayats, and women, to design, implement and manage the drinking water systems. Empowering and capacity building processes are time-consuming, and require skills and competencies other than what classical Public health engineers are trained for. Also, the staff available with most states for JJM is inadequate to the huge task. Hence the need for Resource Agencies and Implementation Support Agencies to capacitate the panchayats, especially women, to play their role effectively.

While an elaborate process has been followed in selection of the KRC, their acceptance at the state level is still facing hesitancy as its early days. The ISA model has worked very well in some states, and lessons from such states need to be shared and adopted wider.

The advent of covid almost as soon as the JJM started has affected capacity building activities to some extent. While knowledge transfer can be possible in an online mode; issues of attitude and behavior change face-to-face interaction and exposure visits which have been badly affected by covid

FHTC have reached 46% of the households as per the JJM website: many of the larger states like UP, Bengal, Rajasthan, MP etc have low coverage. Only 64000 out of the total 2,50,000 gram panchayats are fully covered, which means that many households in the remaining 1.86 lakhs panchayats need to be covered. Capacitating these panchayats is critical, as even after full coverage, unless there is maintenance, slippage can happen.

Therefore sharing best practices and addressing the challenges faced by KRCs and ISAs are critical for the sustainability of JJM.

Speakers

Mr Jayesh Bhai Abtubhai Bagul	Member, Pani Samiti	VWSC, Isadar, Dang, Gujarat
Mr Gulab Bhai Devram Gayakwad	Member, Pani Samiti	VWSC, Vasurna, Dang, Gujarat
Mr Nikunj Patel	District Coordinator	WASMO, Dang, Gujarat
Mr Badaruddin Jivan Bhai	Member, Pani Samiti	VWSC, Bhalchhel, Junagadh, Gujarat
Mr Shailesh Mansukh Bhai	Ex. Sarpanch	Mota Zinsuda, Junagadh, Gujarat
Mr Yogesh Kumar	Director	Samarthan

Ensuring WASH Services in Rural Schools and Anganwadi Centres: Potential Roles of PRIs

DAY 2 | 24 FEBRUARY, 2022 | 02:00 PM - 03:30 PM

Moderator:

Dr. Pratibha Singh, WASH Specialist, UNICEF India Country Office

Context/ Problem Statement:

The provision of WASH facilities in schools secures a healthy school environment and protects children from illness and exclusion. It is a first step towards a healthy physical learning environment, benefiting both learning and health. Children who are healthy and well-nourished can fully participate in schools and get the most from the education being imparted. The COVID-19 pandemic re-emphasized the significance of handwashing with soap and personal hygiene for prevention of diseases. It is important that the schools have adequate water supply, functional gender segregated toilets, handwashing facilities, environmental cleaning, solid and liquid waste management, physical distancing measures in the context of COVID-19. These protocols need to be institutionalized in the school administration as a daily routine to fight with any such emergencies in the future.

Policy Environment for WASH in Schools and AWCs in India:

The RTE Act (Right to Education) 2009 provides a legally enforceable rights framework with certain time targets that Governments must adhere to. The Schedule to the RTE Act lays down the norms and standards (including drinking water and sanitation) for a school building. A school building has to be an all-weather building comprising at least one classroom for every teacher, barrier free access, separate toilets for boys and girls, safe and adequate drinking water facility for all children.

Swachh Bharat Swachh Vidyalaya is the national campaign driving 'Clean India: Clean Schools'. A key feature of the campaign is to ensure that every school in India has a set of functioning and well-maintained water, sanitation, and hygiene facilities.

The Swachh Vidyalaya Puraskar (Clean School Award) was instituted by the Ministry of Education (erstwhile Ministry of Human Resource Development), Government of India in 2016 to recognize, inspire and celebrate excellence in sanitation and hygiene practice in schools. The explicit purpose of the awards is to honour schools that have undertaken significant steps towards fulfilling the mandate of the Swachh Vidyalaya Campaign.

WASH is integral part of National Policy on Early Childhood Care and Education (ECCE), 2013, encompasses care, health, nutrition, play and early learning within a protective and stimulating environment created by caregivers. The policy seeks to universalize the provision of ECCE for all children, mainly through the Integrated Child Development Scheme (ICDS) in the public sector and other service provisions across systems. Convergence is in-built in the Scheme which provides a platform in the form of Anganwadi Centre for providing all services under the Scheme. The Anganwadi Centers have been repositioned as a "vibrant child-friendly Early Childhood Development Centre" with adequate infrastructure and resources for ensuring a continuum of the ECCE in a life-cycle approach and child-related outcomes.

Statistical scenario – WinS in India: (Source: UDISE+2019-20)

- % of Government Schools with drinking water facility within school premises - 97.1%.
- % of Government Schools with functional toilet facility – 95.05%.
- % of Boys and coeducational Government Schools with functional boy's toilet facility – 89.88%.
- % of Girls' and coeducational Government Schools with functional Girl's toilet facility – 92.95%.
- % of Government Schools with functional CWSN friendly toilets - 19.79%.
- % of Government Schools with handwash facility – 90.55%.

Gaps, Challenges, and Issues:

The provision of drinking water and toilet facilities in schools has steadily increased over the last few years in the country. However, it is necessary to focus more to ensure basic quality, adequacy and gender norms, operation & maintenance and to improve equitable access. Above all, water and sanitation facilities must be used every day and for this to happen these facilities must be functional – and this also includes the provision and maintenance of handwashing with soap facilities.

Role of PRIs:

Adequacy, functionality and operation & maintenance has been critical for ensuring sustainable WASH services in educational institutions. Though the Samagra Shiksha Abhiyan mandates to spend minimum 10% of the composite school grant for Swachhata related activities, the operation and maintenance has been challenging in Schools due to limited human and financial resources. As far as Anganwadi centers are concerned, majority of them are being operated in rent- and rent-free buildings. Availability, accessibility, and functionality of the WASH facilities has been challenging during the years in AWCs as well. Therefore, PRIs can mobilize resources from internal (finance commission grants, MGNREGS) and external (CSOs, CSRs, Public representatives MP/ MLA grants) sources to create adequate WASH infrastructure in schools and AWCs. PRIs can take the ownership of the WASH infrastructure and its operation and maintenance in Schools and Pre Schools to ensure sustained functionality. Regular monitoring by the PRIs can help protecting the WASH infrastructure in these institutions. This would help schools and AWCs maintaining adequate, functional and sustainable WASH facilities and practices to be able to create a child friendly environment in Schools and AWCs.

Speakers

Mr Sudhakar Reddy Ontari	WASH Officer	UNICEF Bihar Field Office
Mr Shayamnarayan Dave	WASH Specialist	UNICEF Gujarat Field Office
Shri Maneesh Garg, IAS	Joint Secretary	Ministry of Education, Government of India
Ms Hema	Director	SNEHA NGO

Technical Breakout Sessions on Sanitation

Implementation Solutions for PRIs on, Improved Liquid Waste and Faecal Sludge Management

DAY 2 | 24 FEBRUARY, 2022 | 03:30 PM - 05:00 PM

Moderator:

Mr Binu Arickal, Head of Strategic Projects, WaterAid India

Context/ Problem Statement:

Swachh Bharat Mission has been able to make significant strides by providing underserved areas access to toilets and encouraging their sustainable use. Local bodies in rural India have declared themselves Open Defecation Free with a reported 100% toilet coverage. However, the work on sanitation does not end with a cent percent coverage of households with toilets. India now is bracing to deal with the 2nd generation challenges in sanitation viz. liquid waste management and faecal sludge management in the rural areas. This need coordinated efforts and action, wherein the leadership and proper implementation of appropriate solutions by the local panchayats are critical, in order to address the emerging challenges.

Why PRIs are important for this issue?

The 73rd Constitutional Amendment has vested powers with the three tier panchayats to take up several development activities. Sustainable sanitation is one of them and this can only be ensured if there is appropriate knowledge, access to proper technologies and proper implementation is assured by the panchayats and they are able to build complete ownership by the community. There are several examples across the country where sustainable sanitation services have been made possible by the active role of gram sabha and the Panchayats. Various sources of funds like 15th FC grant, SBM, NREGS etc available at the panchayat's disposal to address water and sanitation issues in the villages, in addition to the conventional sources of funds. In order to realise sustainable sanitation across the country in scale, it is important that the knowhow and capacities of the panchayats on sanitation sustainability needs to be improved including in the health, technological and social aspects of the same.

Gaps, Challenges, and Issues:

Liquid waste management in rural area

- Waste water generated from household has remained one of the most menacing sanitation challenges in rural areas, that affects health, water quality as well as the visible environmental cleanliness of the locality.
- SBM - II has emphasised on treatment of grey water at the nearest point of its generation. Without adequate capacity building and handholding support it may be difficult to address this issue for the rural local bodies.
- With the increase of access to piped water to every rural household by 2024 under JJM, there will be an increased generation of grey water.

Faecal sludge management

- In a population where a vast majority were defecating in the open, the Swach Bharat Mission has generated the aspiration to build toilets. While most of the toilets constructed in rural area are the standard twin pit latrines, there are a sizable number which have either single leach pits, simple holding tanks or septic tanks.
- Dense villages and peri urban areas with limited space for in-situ toilets will also face a daunting task to deal with Faecal Sludge and septage.
- SBM -II has made provisions for the state to introduce variety of options to deal with Faecal Sludge in rural area.
- However, the lack of comprehensive understanding on this issue and its solutions at the local level is a bottleneck in recognising the need for FSM and to identify and opt for appropriate solutions.

What is the potential that we can gain with involvement of PRIs?

With adequate investments in building capacities of the panchayats and demystifying the technicalities in dealing with Liquid waste and Faecal Sludge management, there is a greater possibility of addressing the 2nd generation challenges of sanitation more efficiently. Just like SBM-I where panchayats led the way to make India ODF, leadership and involvement by panchayat will be able to address the next level of challenges in sanitation.

The proposed session on this topic as part of the National WASH Conclave will present a broad idea of the need, gaps and various solutions available towards eliciting knowledge and action at the panchayat level, including tips from experts and administrators on how to address implementation bottlenecks.

Speakers

Mr Shrikant Navrekar	Director	Nirmal Gram Nirman Kendra, Maharashtra
Mr Ravikumar Joseph	Sr. WASH Specialist	World Bank
Ms Ajita Gopesh Sahu	Sarpanch	Gram Panchayat, Patora, Chattisgarh
Ms Misha Singh	Chief Executive Officer	Zilla, Panchayat, Shajapur
Ms Sandhya Haribal	Senior Project Manager	CDD Society

Management of Organic Solid Waste and Plastic Waste by PRIs: Experiences, Challenges and Way Forward

DAY 2 | 24 FEBRUARY, 2022 | 03:30 PM - 05:00 PM

Moderator:

Dr R Ramesh, Associate Professor and Head CRI, NIRDPR

Context/ Problem Statement:

Waste is a mounting problem not only in Corporations and Municipalities, but also in rural areas. The Solid Waste Management Rules amended in 2016 has brought in Gram Panchayats also in its purview. It means whoever generates waste – be it households, institutions, or marketplaces – at the end of the day all such waste fall on the lap of Gram Panchayats to clean up. This necessitates Gram Panchayats to put in place a waste management system. In other words, the Gram Panchayats must be equipped to plan, organise, and implement waste management as a regular practice – and not as a project to place dust-bins in street corners without a system in place for collection, and scientific treatment. Without a functioning waste management system in place, it doesn't augur well blaming the households of being irresponsible.

Why are we Talking about this?

Solid waste management is a vital component under the Swachh Bharat Mission (SBM-G) Phase – II. Under SBM-G funds are made available to Gram Panchayats for setting up solid waste management units at GP level, and Plastic Waste Management Units at block level. All that is required is the Gram Panchayats need to get prepared either to carry it out themselves or to get into a service contract agreement with a third party agency, which might be versed in waste management service provision. However the challenges are many.

Gaps, Challenges, and Issues:

As per the 73rd Constitutional amendment, the XIth Schedule of the Constitution demands the Gram Panchayats to take up sanitation and village cleanliness. However, the fact remains that the Panchayats do not have the technical capacity to make plan for proper collection of waste, nor do they have the logistics, and the financial capacity to take up scientific treatment of waste. Lack of trained manpower, absence of technical capacity, and financial constraints do not allow many Gram Panchayats to come forward to take on this challenge. We must understand that getting involved in waste management - unlike provision of Individual Household Latrines - is not a one-time affair. This is an endless affair, which will have to go on and on on a daily basis.

The lesson so far is that some Gram Panchayats that are reportedly doing successfully are either backed by an NGO or CSR, or by a committed officer of the Government, who goes out of the way to ensure that it becomes a success in one or two, or in a few villages.

The main challenges, thus this conclave has to address on solid waste management in rural context are: Any success stories or brilliant models on Gram Panchayats managing waste scientifically in a financially self-reliant way? The idea of waste to wealth that sounds fascinating to listen to in conferences and seminars. Does it work in reality anywhere, which can be spoken about without underplaying the assumptions and limitations? What seems to be the best way to put in place a scientific waste management system in Gram Panchayats that will be financially sustainable? How do we match, or modify the institutional arrangement for waste collection and management bearing in view a practicable operational scale? What kind of support / facilitation need to come from the SBM-G –II or from the private players and NGOs involved in waste management so that Gram Panchayats become capacitated to either manage waste in a scientifically acceptable way, or involve a third party agency who shall do it for a price, for which the GPs must have source of funds to pay from.

Speakers

Mr Muthukumar Maganti	Social Entrepreneur	KCG Consulting and Advisory
Dr Mangalam Balasubramaniam	Social Activist	
Ms Archana	CEO	SAHAAS
Mr Gaurav Nigam	SBM G	Indore, Madhya Pradesh

Repair and Retrofitting of Sanitation Infrastructure for Sustainable Sanitation: Challenges and Solutions for PRIs

DAY 2 | 24 FEBRUARY, 2022 | 03:30 PM - 05:00 PM

Moderators:

Mr V R Raman, Policy Advisor, WaterAid India

Ms Amulya Miriyala, Officer-Policy and Technical Support (Sanitation) WaterAid India

Context/ Problem Statement:

Safe, terrain appropriate and sustainable sanitation infrastructure is critical for the overall success of the sanitation initiatives at all levels. Such infrastructure includes toilet substructures, superstructures and related fixtures and fittings. However, while the country was pursuing the universal sanitation targets, the vast scale of implementation has affected supply of materials as well as construction quality. In many places, gaps in design and among the implementers with reference to understanding about terrain appropriate toilet technologies has also led to the construction of substructures that can challenge environmental safety associated to the sanitation infrastructure in the long run. While such gaps are normal for a campaign with such a huge scale of outreach as the Swachh Bharat Mission (SBM), it is important to note that the mission has accepted and acknowledged these and included necessary course corrections as part of the Swachh Bharat Mission 2.0, in the form of repair and retrofitting of toilet infrastructure, as they are required. It is important to ensure that stakeholders at the grassroots level are well informed in this context for the sustainability of an initiative such as the SBM 2.0.

Why PRIs are important for this issue?

Since Panchayat Raj Institutions (PRIs) are the ultimate implementers or regulators on ground for all WASH related issues; it is important that they are taken on board, informed and made aware of the sanitation safety and related environmental health issues, as well as the potential generational challenges of improperly designed and constructed toilet super and sub structures; Furthermore, building their understanding and abilities, coupled with allocating necessary resources, will help will help overcome these challenges sustainably. The Fifteenth Finance Commission's prioritisation of water and sanitation in its key agenda is an important way forward in this regard, wherein PRIs will be able to locate some resources for necessary actions in this regard.

Gaps, Challenges, and Issues:

- While most of the rural households and common areas at the community level have a toilet infrastructure constructed as part of the Swachh Bharat Mission, a considerable proportion of them would require some kind of repair or correction of technological details, in order to make them safe for the environment/ ecology and for regular usage.
- SBM – II has emphasised on repair and retrofitting of the toilet infrastructure as part of its guidelines. 15th Finance Commission has asked the PRIs to prioritise WASH up to the level of 50% of the grants allocated as well.
- However, there is lack of clarity at the district, block and PRI levels about undertaking this initiative, in terms of technical and operational and financial steps, hence the agenda is yet not taken up widely.

What is the potential that we can gain with involvement of PRIs?

As the local self-government and the closest public body for the people, The PRIs can intervene and prioritise this issue at local levels across rural India, towards ensuring the safety and sustainability of a huge number of toilets came into existence in rural India, and thus contributing to the meaningfulness of SBM. The PRIs, if guided and supported properly, can play a pivotal role in addressing most of the challenges in this regard and deploy their solutions and resources for the issue, at the grassroots level operationalisation of this agenda.

Speakers

Mr Prabhakar Sinha	WASH Specialist	UNICEF Bihar
Mr Rushabh Hemani	WASH Specialist	UNICEF Rajasthan Field Office
Mr Tapan Das	WASH Consultant	UNICEF Rajasthan Field Office
Ms Shipra Saxena	WASH Specialist	UNICEF Odisha Field Office
Mr Eklavya Prasad, Megh Pyne Abhiyan	Managing Trustee	Megh Pyne Abhiyan
Mr V G Gopinathan	Adviser	IRTC, Kerala
Mr D Balamurugan, IAS	Secretary & Commissioner	Rural Development, Govt. of Bihar
Mr PC Kishan, IAS	Secretary	Panchayati Raj, Govt. of Rajasthan
Ms Ruhil Iyer	Research Officer	Sanitation Learning Hub, IDS Sussex

Placing WASH in Health Care Facilities into Panchayat's Agenda - Issues and Potential Solutions

DAY 2 | 24 FEBRUARY, 2022 | 03:30 PM - 05:00 PM

Moderators:

Dr Pratibha Singh, UNICEF India Country Office & Dr Asad Umar, Aga Khan Foundation

Context/ Problem Statement:

In India, 130 mothers die for every 100,000 babies born, and 28 out of every 1,000 newborns do not survive beyond their first month. A leading cause of this is sepsis, an infection associated with poor hygienic practices during delivery and soon after. The Government of India has taken steps to improve maternal and child health under the National Health Mission. For instance, the Janani Shishu Suraksha Yojana entitles all women to a free delivery at a public health care facility to ensure safe childbirth. As a result of concerted efforts, the proportion of women who give birth in a health care facility in India has improved significantly from 38.7% in 2005-2006 to 78.9% in 2015-16. Additionally, the launch of the Swachh Bharat Mission in 2014 also saw the participation of the MoHFW to prepare a programme for swachh health care facilities which culminated in the launch of KAYAKALP in 2015. The KAYAKALP programme of MoHFW has been a pioneering initiative in the country that aims to improve situation of sanitation, safe water, hygienic practices and waste management in health facilities by assessing and rewarding health care facilities based on indicators related to status of WASH infrastructure, general hygiene, laundry, bio medical waste management and environmental sustainability.

To improve health outcomes, health care must be safe, effective, timely, efficient, equitable and people centred. Deaths and illnesses from maternal and early neonatal sepsis are suggestive of substandard quality of care. When health care facilities have unhygienic environment, with inadequate supply of running water and handwashing facilities, and poorly maintained or dysfunctional toilets, women may avoid or delay seeking care and are likely to leave such facilities sooner than they should after delivery. Health care providers working under such conditions are unable to maintain hygiene and prevent infections.

The landmark 2015 report of the World Health Organization (WHO) and UNICEF on WASH in health care facilities states that 72% of HCFs in India have water and only 59% have sanitation amenities. WASH in healthcare facilities (HCFs) has become an international priority in recent years. Sustainable Development Goals (SDGs) Three and Six ("Good Health and Well-Being" and "Clean Water and Sanitation", respectively) place a new emphasis on universal health coverage and access to WASH services. Improving WASH in institutions like health care facilities is critical to achieving adequate and equitable sanitation for all, especially women and children. Not only does the lack of WASH services in health care facilities compromise patient safety and dignity, it also has the potential to undermine efforts to improve child and maternal health.

Adequate WASH infrastructure and hygiene behaviour (i.e., handwashing at critical times, infection prevention and control practices) are an important component of the quality of care framework defined by the World Health Organization (2016).

The Role of PRIs in Enabling WASH in Health Care Facilities:

The Fifteenth Finance Commission (15th FC) has recommended a total of Rs 2,36,805 crore grant to local rural bodies and panchayats for the next five years (from 2021-22 to 2025-26) to ensure adequate water supply and sanitation services in villages. As per the guidelines issued by JJM, the nodal agency determining the allocation of funds under the grant to local rural bodies and PRIs, 60% of this grant would be tied and be earmarked for national priorities like ensuring drinking water supply, rainwater harvesting, water recycling, sanitation, and maintenance of open defecation-free status in village.

Even National Health Mission that has been closely involving the PRIs at various levels of health care delivery. The formation of Village Health, Sanitation and Nutrition Committees (VHSNCs) for decentralised health planning at the village level is a case in point. Formed at the revenue village level, these committees comprise of the elected member of the Panchayat (who leads the committee) and representatives from all vulnerable community sub-groups, NGOs and ASHAs. Functioning as a sub-committee of the Gram Panchayat, VHSNCs serve as platforms to raise awareness on health and nutrition and take adequate measures to improve and ensure access of community members to standard health services.

The upgradation of CHCs to Indian Public Health Standards (IPHS) has been another significant strategic intervention under the National Health Mission (NHM) to provide sustainable quality care to community members. To this end, the constitution of Rogi Kalyan Samiti (RKS)/Hospital Management Committee (HMC) has been introduced as an effective management structure to ensure proper functioning and management of the hospital/ Community Health Centre / First Referral Unit. Consisting of members from local Panchayati Raj Institutions (PRIs), NGOs, local elected representatives and officials from Government sector, the RKC functions as a group of trustees that manages the affairs of the hospital to ensure quality health services to the community, while maintaining accountability and transparency in the utilisation of funds. A key inter-sectoral collaborative initiative of the Health Department in partnership with PRIs, the chief purpose of these committees is to jointly plan, implement and monitor health activities at various levels by providing a platform to elected PRI members and health officials to collectively work towards putting in place efficient public health institutions.

Gaps, Challenges, and Issues:

Although the government has taken varied measures to involve PRIs in healthcare, there has been limited evidence regarding their role in influencing health services. Some studies evaluating different NHM schemes and programmes have reported lack of coordination between PRIs and other stakeholders. While others have cited certain challenges associated with the functioning of VHSNCs that include insufficient funds, lack of people's interest and unfair behaviour of the Panchayati Raj leaders.

The lack of role clarity of different stakeholders, absence of structured capacity building programmes for PRIs, obscurity in the understanding of financial guidelines, lack of understanding regarding the linkage of WASH in health care facilities with community health and lack of suitable programmatic support to PRIs have been some of the primary challenges that have prevented PRIs from functioning as effective public health delivery institutions. However, improved leadership and capacities of PRIs has the potential to not only make village action plans, but also proper planning of untied funds and interventions to strengthen HCFs (including the channelization of funds towards WASH infrastructure) that would lead to improved health delivery and outcomes at the village level for the most marginalised. In addition, sensitization of PRIs on the KAYAKALP awards' scheme for their respective health care facility is another gap, filling which, would help them gain recognition for their entire community.

What is the potential that we can gain with involvement of PRIs?

10% of the global disease burden has been a consequence of inadequate WASH services, that has resulted in women and girls missing out on school, or opportunities to earn their own income, because they bear more of the burden when it comes to unpaid care and collecting water. However, investment in water and sanitation leads to significant economic benefits as evident from a report by WaterAid that estimates annualised net benefits of \$86 million from 2021-2040 owing to provision of safely managed sanitation services.

The approach to improving WASH in healthcare facilities is rooted in partnership, collaboration, and knowledge-sharing, however, an improvement in WASH service delivery and health outcomes of HCFs requires both financial and technical resources. The close involvement of PRIs will help reap meaningful health benefits for at-risk rural communities, particularly women and children, through the much-needed investments in WASH services by leveraging and channelizing funds allocated under the 15th Finance Commission. At the same time, advocating for WASH services in HCFs by PRI members during VHSNC and RKS meetings is another approach for strengthening HCFs.

Collaboration PRIs would contribute to sustainable improvements in the quality of healthcare services, while supporting core aspects of Universal Health Coverage (UHC) including dignity and equity and ultimately, to positive health and empowerment outcomes for women and their families.

Speakers

Dr Deepika Sharma	NHSRC	MoHFW, Govt. India
Dr Manjeet Saluja	National Professional Officer(Public Health and Environment)	WHO India Office
Mr Pankaj Mathur	WASH Specialist	UNICEF Madhya Pradesh Field Office
Mr Nagesh Patidar	WASH Officer	UNICEF Madhya Pradesh Field Office
Dr Yogesh Kumar		Samarthan

Technical Breakout Sessions on Hygiene

Making Hand Hygiene for all a Reality in Rural Areas, Building on the Covid Experience - What can PRIs do?

DAY 2 | 24 FEBRUARY, 2022 | 05:00 PM - 06:30 PM

Moderator:

Ms Ruchika Shiva, Country Coordinator for India Programme, IRC WASH

Context/ Problem Statement:

Handwashing with soap is one of the cheapest and most effective ways to protect people against many common and life-threatening infections. This, in the last two years, has been highlighted globally due to the Covid-19 pandemic. It is important to reiterate that handwashing with soap provides protection against disease-causing bacteria and viruses, the simple act of handwashing with soap removes the bacteria and viruses from contaminated hands and avoids the transition of these into our body or spread to other people.

The 76th round of the National Sample Survey conducted in 2018 found that the practice of handwashing in India is limited. According to the survey, it was found that 25.3 per cent households in rural India wash hands with soap or detergent and 70 per cent wash hands without soap or detergent before meals. Further, it found that 15.2 per cent rural households do not wash hands with soap or detergents after defecation. While this status can be a function of availability of facilities/space, water and soap of handwashing, the role and hence the requirement of hand hygiene promotion in communities' cannot be ignored.

As per the Indian Constitution, the Panchayati Raj Institutions (PRIs) have a role to play with respect to provision of WASH services in rural communities. Additionally, the 15th Finance Commission provides 60% of the grant to PRIs earmarked towards WASH with a purpose of impacting public health in communities. We know from the response of COVID -19, the panchayats played a key role towards supporting with facilities and for the promotion of hand hygiene behaviors. As hand hygiene has public health and economic health impacts, it is an opportune time to leverage the efforts made during the COVID-19 pandemic to further strengthen (and institutionalize) the efforts to promote hand hygiene behaviors. The Panchayats have a crucial role in ensuring hand hygiene, especially in public spaces and institutions within the PRIs jurisdiction. Institutions in rural communities include aganwadi centres, schools and health care facilities. Evidence from the field show that while schools have made progress in providing functional handwash facilities, this is lacking in aganwadi centres and in health care facilities.

The discussion in this session will capture –

- Initiatives taken up by Gram Panchayats on hand hygiene during the COVID-19 pandemic,
- Gaps and challenges,
- Going ahead, how hand hygiene can continue to have the importance and leverage other social sector efforts.

The session will capture perspectives of gram panchayats leaders, NGOs that work closely with gram panchayats and of government official/s.

Speakers

Smt Parwati	Sarpanch	Urmul, Bikaner, Rajasthan
Mr Rameshwar Lal	Sarpanch	Urmul, Bikaner, Rajasthan
Mr Suresh Chandranayak	Sarpanch	Mayurbhanj, Odisha
Mr Yogesh Kumar	Executive Director	Samarathan
Mr Basant K Nayak	Director Programme	CYSD, Odisha
Ms Nabanita	Senior Researcher	CYSD, Odisha
Ms Urvashi Prasad	Director, DMEO	Niti Aayog

Strengthening Action on Menstrual Health and Hygiene at the Community Level DAY 2 | 24 FEBRUARY, 2022 | 05:00 PM - 06:30 PM

Moderators:

Dr Arundhati Muralidharan & Ms Tanya Mahajan, MHA

Context/ Problem Statement:

Menstruation is a normal physiological phenomenon, yet millions of girls and women face numerous hurdles to managing their monthly menses in a healthy manner. Challenges include deep set gender and social norms, low level of awareness, limited access to and unhygienic use of menstrual hygiene products, and lack of safe disposal and waste management options for used materials. Efforts by Government, non-Government and private sector stakeholders have strived to tackle these challenges, paving the way for improved menstrual health for all girls and women.

Initiatives to improve menstrual health and hygiene have predominantly focused on improving awareness among adolescent girls and enhancing access to menstrual materials, notably disposable sanitary pads. These cumulative efforts have resulted in improvements, particularly with regard to the use of menstrual materials. The National Family Health Survey (NFHS) 4 (IIPS, 2015-2016) showed that 57.6% of young women ages 15-24 years were using a hygienic method of protection. The NFHS-5, conducted five years later in 2019-2020, found a marked increase in the use of hygienic materials – 77.3% of young women were using safe materials, mostly sanitary pads (IIPS, 2019-2020). Innovations related to safe disposal and management of menstrual waste have also been implemented in some geographies.

Addressing the deep-rooted taboos and misinformation related to menstruation amongst girls, women and those in their communities have provided the foundation for this progress. Implementation models adopted by state and district administrations and Gram Panchayats (GPs) for access and waste management have paved the way. To sustain this progress, we must learn from these models and ensure that they are replicated at scale.

Role of PRIs in Strengthening Action on Menstrual Health and Hygiene:

PRIs can catalyze action on menstrual health and hygiene (MHH) at the community level given their role in the overall development of Gram Panchayats. At the very least PRIs can facilitate discussions on MHH interventions during gram sabhas and mahila sabhas. PRI are also in a position to address MHH through the gram panchayat development plans and allocate budgets for activities. Hence, it is also important to understand the specific roles that PRIs can adopt to further progress on MHH in their communities.

Session:

The session on “Strengthening action on menstrual health and hygiene at the community level” will highlight the MHH value chain, and delve into two aspects where PRIS can accelerate action, namely local access to quality menstrual materials, and disposal of menstrual waste. The session will also identify the underlying role that behavior change communication can play in furthering these objectives.

The session aims to:

1. Create awareness about the MHH value chain and corresponding areas of action
2. Facilitate sharing of programmatic good practices with regard to enhancing menstrual hygiene product availability and waste management solutions at the GP level

During the session, the audience will hear from thematic experts and from implementers, who will share good practices from several states.

Speakers

Mrs R Vimla	Collector and District Magistrate	Nagpur Collectorate, Govt. of Maharashtra
Dr Ketaki Bapat	Scientist	Office of the PSA to the Govt. of India
Ms Gayathri Prashanth	Chief Operating Officer	Healing Fields Foundation
Mr Devidas Kisan Nimje	Senior Program Manager	Samarthan
Mr Kalachari B K	State WASH Consultant	UNICEF/Rural Drinking Water Supply & Sanitation Department, Govt. of Karnataka

Hygienic Disposal of Child Faeces in Rural Areas - How Can PRIs Make it Possible and Feasible?

DAY 2 | 24 FEBRUARY, 2022 | 05:00 PM - 06:30 PM

Moderator:

Dr Apurva Vijay Ghugey, Thematic Manager- Sanitation and Hygiene, Gram Vikas

Context/ Problem Statement:

The world has made great progress in increasing access to basic sanitation and reducing open defecation, with only 9% of the global population open defecating as of 2017. In India, the percentage is as high as 15%. However, an often overlooked component of sanitation is safe Child Faeces Management (CFM). Child faeces may contain more pathogens compared to adult faeces and are likely a significant source of fecal exposure in rural Indian households, and other similar settings. The latest National Family Health Survey (2015-2016) reported only 36% of Indian households safely dispose of their child's faeces into a latrine despite 61% of households having a latrine.

There is a need for effective behavioral interventions that focus on safe CFM practices among caregivers, with the eventual goal of the child learning to use the latrine, and to achieve the global commitment to ensure safe drinking water and sanitation for all.

Why PRIs are important for this issue?

The PRIs are the immediate governance for the rural communities when it comes to getting aware, addressing and reporting any issues and ideas in the community. Active PRI in any panchayat leads to progressive rural community.

When it comes to Child Faeces Management, it is of utmost importance for the people to learn, accept and be accountable for the new habits they need to inculcate in order to bring about sustainable health changes.

PRI can help people to,

- Be aware of the magnitude of the issue, and its connection to bigger picture
- Believe themselves to solve the problem by facilitating to avail the provisions
- Set up a good monitoring practices ensuring the long term success of the CFM initiative.

Gaps, Challenges, and Issues:

In India, managing child faeces is often neglected due to many reasons, some of which listed below,

- Ignorance- considering child's faeces as non-harmful
- Lack of education to parents
- Lack of proper healthcare facility focusing on children
- Lack of institution where parents can take guidance from.
- Lack of access to proper infrastructure such as toilet, diapers, etc
- Lack of political willpower

Hence, it is very important to put a good amount of focus on Child Pieces Management.

What is the potential that we can gain with involvement of PRIs?

Direct involvement of the PRI will ensure that their political activism for the issues and parents would get the sense of belongingness.

This will bring more focused approach towards all the schemes and initiatives the Government is taking to address the issues. This will also make the people aware of the grave health problems if the issue is not tackled with focus and seriousness. With roll-out of SBM-2, role of PRIs has become even more critical.

PRIs, since they have significance impact on local people's psychology, can play a very important role to make behavioural changes on ground possible and monitorable.

Speakers

Ms Gloria Sclar	Public Health Researcher	Emory University
Mr V R Raman	Policy Advisor	WaterAid India
Mr Alok bisoyi	Research Manager	Emory University
Ms Anju Khewar	Program Coordinator	State Health Resource Centre, Chhattisgarh
Mr Prabhakar Sahu	Secretary, Village Water and Sanitation Committee	Laxmanpalli GP, Ganjam, Odisha
Mr Narayan Sahu	President, Village Water and Sanitation Committee	Laxmanpalli GP, Ganjam, Odisha
Ms Mamata Kumari Sahu	ASHA Worker	Laxmanpalli GP, Ganjam, Odisha
Ms Sanjulata Pradhan	Anganwadi Worker	Laxmanpalli GP, Ganjam, Odisha

Medium, Channels and Tools for Communication on Improving Hand Hygiene and Menstrual Hygiene Behaviours at PRI Level

DAY 2 | 24 FEBRUARY, 2022 | 05:00 PM - 06:30 PM

Moderator:

Ms Shalini Prasad, Social and Behaviour Change Specialist, UNICEF India Country Office

Context/ Problem Statement:

Panchayati Raj Institution (PRI) members are responsible for local, village level development, and play a key role in connecting communities with key services around Water, Sanitation and Hygiene (WASH). PRI members' role as basic units of local administration make them key enablers at the ground level, rendering them a key stakeholder in driving WASH practices among communities.

As PRI members play a dual role in implementing and monitoring government services and programs, their ownership and engagement around WASH issues is essential to building grassroots level action around WASH. The first step therefore is to build the capacities of PRI members on technical issues of WASH, followed by skilling them on effectively communicating these in simple messages to communities through various channels and tools (conducting interpersonal communication, holding group meetings, demonstrating, and promoting WASH practices). Since PRI members are elected representatives within a community, they are respected members of societies and may be looked up to as role models and influencers of key behaviours. Thus, PRI members play an important role in engaging and mobilising their communities to adopt positive behaviours. They can balance the demand and supply and can create an enabling environment at the ground level. It is therefore critical to optimize their role in driving Social and Behaviour Change (SBC), and improving uptake of WASH practices among communities.

Making the sarpanch and gram panchayat members well conversant with their responsibilities of integrating SBC communication as part of their plans, is key to ensuring improved and sustained use of WASH facilities and adoption of positive practices. As PRI members have a unique potential to drive local community led planning and action processes, investing in their leadership qualities is critical to bringing about large-scale community mobilization and engagement around WASH. As developers of action plans such as the GPDP, PRI members are also responsible for village level agenda and priority setting around WASH, and well as bringing about convergent efforts to administer WASH service delivery on the ground.

Engaging with PRI members and establishing sustained communication with these key stakeholders and understanding their current gaps in capacity and knowledge around WASH Social and Behaviour Change is essential to improving WASH outcomes.

Speakers

Shri Yugal Joshi	Director, JJM	Ministry of Jal Shakti, Govt. India
Mr Vijay Shankar Kanthan	Social and Behaviour Change Specialist	UNICEF Gujarat Field Office
Ms Sowmyaa Bharadwaj	Director - Capacity Building & Operations	Praxis – Institute for Participatory Practices

Plenary 2

DAY 3 | 25 FEBRUARY, 2022 | 02:00 PM - 03:00 PM

Strengthening GPs to set up service benchmarks, monitor and attain WASH related SDGs in time: A potential roadmap for data, capacities and finances, data visualization and monitoring under JJM and SBM, learning from Swachh Sarvekshan for rural JJM and SBM; and suggestions from NITI Aayog, UNDP, and others on way forward towards achieving SDG

Moderators: Dr Ramesh, NIRDPR &

Ms Koushiki Banerjee, UNICEF India Country Office

Context/ Problem Statement:

India is committed to implement and monitor WASH programme moving towards the Sustainable Development Goal of 6.1 “By 2030, achieve universal and equitable access to safe and affordable drinking water for all” and 6.2. “By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations. “In order to achieve these goals it is important to be able to correctly monitor the progress of sanitation and water program in India. The SDGs closely follow the Joint monitoring programme (JMP) by WHO and UNICEF which follows monitoring safely managed sanitation and water. Safely managed sanitation is defined as “Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or removed and treated offsite”. Safely managed sanitation ensures a sustainable sanitation programming in the country. Swachh Bharat Mission Gamin 2 has included solid and liquid waste management as part of reaching the safely managed goal. As part of Jal Jeevan Mission which aims to provide 100% functional household tap connection to rural India by 2024, also needs to ensure that the water provided is safe, within premises and free from bacteriological and chemical contamination. Access is only one step towards realizing objective of safe water for all seasons available to the households.

Why PRIs are important for this issue?

As part of Jal Jeevan Mission, the Government of India is supporting creation of rural water supply infrastructure - both financially and technically. The technical infrastructures created are supposed to deliver service as per standards and norms for the entire design period. The standards related to quantity, quality, and regularity of supply irrespective of seasons etc. which not only depends on the design principles, but also on the efficiency of operation and maintenance of the facilities. The operation and maintenance completely rest on the Gram Panchayats because as per the Panchayati Raj Act rural water supply or wastewater management etc. are in the purview of Gram Panchayats.

Gaps, Challenges, and Issues:

Have Panchayats been capacitated to take up the O&M? Do they understand standards and norms of drinking water service delivery? Do they have the trained manpower at GP level to be able to determine, for instance, the residual chlorine levels in the water being supplied? The options are capacitating the Gram Panchayats. And as part of capacity building throwing open the options (models) available for delivering as per service level benchmarks. An option could be Panchayats engaging possible alternative agencies that can deliver such services to the rural households in a professional way? In the event of appointing a third-party agency to manage rural water supply in a professional way, the GPs need to get into a ‘Service Contract Agreement’. The same holds good for solid waste management, wastewater management or maintenance of community sanitary complex etc. To sign such service contracts what are the service level benchmarks for rural water supply? What are the service level benchmarks in solid waste management so as to progressively move towards zero waste? What parameters a Gram Panchayat shall use or demand service from such service provider. What parameters shall be monitored to be able to gauge that the service delivery by the third-party agency is on par with or below standards? What are those standards for rural water supply – wastewater recycling – solid waste management etc.?

What is the potential that we can gain with involvement of PRIs?

Gram panchayat is one of the key stakeholders who not only ensures that proper WASH facilities are put in place, but they also need to be equipped with a common understanding of monitoring and maintaining the service level benchmarks. This creates a great opportunity to align the overall monitoring requirements for water, sanitation and also hygiene within the overall Panchayati Raj system and engaging with National ministries such as Ministry of Jal Shakti, Ministry of Panchayati Raj and other state sanitation departments.

As part of JJM, Bihar government is committed to provide safe water to 1.72 crore rural households. They have already provided tap connection to 1.54 crore households. This remarkable achievement was possible due to decentralization of the implementation process, making available a basket of model estimates, and leveraging funding available through 14th & 15th finance commission at large scale. Government has made an appropriate amendment in the Bihar State Panchayati Raj Act to have an active Ward level committee- Ward Implementation and Management Committees (WIMCs) with appropriate implementation responsibility and ensured adequate timely funding.

This discussion shall center around understanding of the global perspective on WASH monitoring and delve further into the capacities of GOI to engage professionals for standard service delivery benchmarks within the ambit of JJM. It will also look at the professional service delivery mechanism in different terrains, and during different times such as flood or outbreak of a pandemic. It will dive deeper to understand the functioning of piped water supply schemes in Bihar and how they monitor for sustainability of piped water supply, as a case in point.

Speakers

Shri Khushwant Singh Sethi	Joint Secretary	Ministry of Panchayati Raj, Govt. India
Mr Rajeev Kumar	WASH Officer	UNICEF Bihar Field Office
Mr. Yella Reddy	Ex. Sarpanch	Ibrahimpur, Medak, Telangana

Special Talk

DAY 3 | 25 FEBRUARY, 2022 | 03:30 PM - 04:00 PM

Building WASH Agenda in Panchayats: National Perspective, Priorities and Strategies

Speaker: Shri Amitabh Kant, CEO NITI Aayog

Technical Breakout Sessions on Cross-Cutting Themes

Role of PRIs in Improving Communication and Mobilisation at Village Level for Strengthening Sustainable WASH Behaviours and Environmental Health

DAY 3 | 25 FEBRUARY, 2022 | 04:00 PM - 05:30 PM

Moderator:

Mr Manjaree Pant, SBC Specialist, UNICEF Rajasthan Field Office

Context/ Problem Statement:

Enhanced participation of communities is well acknowledged as a suitable development strategy in India. The progressive incarnations of water, sanitation and hygiene related flagship programmes of Government of India heavily bank on collective community action and ownership for improved outcomes, on a sustained basis. The programme resonates with ideas of a demand driven, socially inclusive planning, implementation and monitoring that considers local needs and priorities pertaining to safe water and sanitation practices.

An inclusive, participatory approach is indeed crucial in a country like ours where patriarchal, feudalistic norms substantially shape the rightsholders perspective and ability to demand services and entitlements. Communication that can empower and catalyze social & behaviours change holds the key. It is important to strategize on not merely the “what” to be communicated, but also “who” will say it for maximum influence for long lasting impacts.

Why PRIs are important for this issue?

For centuries, India has existed in its villages and Panchayats have enjoyed a social and cultural recognition and influence much before they were constitutionally mandated to deliver on 29 rural development activities in XIth Schedule. All rural water supply and sanitation schemes are to be operated and maintained by local bodies such as Gram Panchayats, and Village Water & sanitation Committees. A large part of the current Gram Panchayat Development Plan and funding is dedicated to water and sanitation objectives, with an inbuilt component of community participation. Inclusion of needs and aspiration of the villagers lies at the very core and hence communication and community engagement emerge as a critical initiative. With their immense influence, PRIs can potentially catalyse community mobilisation including the marginalized sections.

Gaps, Challenges, and Issues:

On the ground, there are multiple challenges faced by Panchayats towards deliverance of a sustained, result centric community engagement. Poor capacities and understanding of the water and sanitation programme itself are primary bottlenecks. Skill building for communication and sustained community engagement in a rights-based approach, is negligible in a regular PRI capacity building programme, even in a best-case scenario. With limited resources for community engagement, most often, Panchayats are relegated to acting as implementing agencies of flagships. Often the interests of the most marginalized are left unaddressed as panchayats are unable to overcome strong social norms and hierarchies. The equity agenda, ironically, takes a hit.

What is the potential that we can gain with involvement of PRIs?

PRIs have the potential to render sustainability in many ways. When successful in community mobilization and communication, the longevity and maintenance of the shared resources and practices are ensured. Government flagships can safely handover the facilities and services to the public, the right holders themselves as the real custodians of these resources. Environmental sustainability also gains a strong fillip given the optimal management of natural resources and practices of recycle, reuse, reduce and recover associated with WASH. Strengthened collective ownership, pride, and creation of new normal around WASH practices can be a natural result of improved communication and mobilization by Panchayats.

Speakers

Ms Manju Rajpal IAS	Secretary	Govt. of Rajasthan
Mr R.K Sama IFS (Retd)	Trustee	Shroff Foundation Trusts
Mr Ajit Fadnis	Director	PriMove

Strategies for Disability, Gender, Equity and Inclusion in WASH Programmes at PRI Level

DAY 3 | 25 FEBRUARY, 2022 | 04:00 PM - 05:30 PM

Moderator:

Mr Anurag Gupta, State Programme Director (Odisha & West Bengal), WaterAid India

Context/ Problem Statement:

Gender equality and social inclusion are the key factors for sustainable development. Socially excluded groups have the right to access safe, improved, and affordable WASH facilities at home, in the community and in institutions. Although there is progress in providing access to WASH services for all, women and girls and persons with disabilities are still deprived to a large extent. A disability is a result of the interaction between a person with a health condition and a particular environmental context. Individuals with similar health conditions may not be similarly disabled or share the same perception of their disability, depending on their environmental adaptations. As per Census 2011, in India, out of the 121 Cr population, about 2.68 Cr persons are 'persons with disabilities' which is 2.21% of the total population.

Why PRIs are important for this issue?

Women, girls and persons with disabilities – specifically those who live in poverty are most affected when basic water and sanitation systems fail. Women and girls carry the bulk of the responsibility for collecting water and are exposed to the risks of harassment and violence. Walking long distances for water and/or to defecate in the open also put them at risk.

According to the joint report by World Health Organization and World Bank, "World Report on Disability and Rehabilitation" 2011, "Households with a disabled member are more likely to experience material hardship including food insecurity, poor housing, lack of access to safe water and sanitation, and inadequate access to health care" Furthermore, "people with disabilities have poorer health outcomes, lower education achievements, less economic participation and higher rates of poverty than people without disabilities".

Panchayati Raj Institutions have the responsibility as the duty bearers for provisioning of clean drinking water and safe sanitation services to the communities in their jurisdiction.

Gaps, Challenges, and Issues:

It is of utmost importance that planning and designing of WASH facilities be done by keeping in consideration gender, social inclusion and disabilities. Women emerge as the worst sufferers due to non-access to facilities. Any intervention in the WASH is one size fit for all, this affects people with special needs most and despite having facilities at the door step, most are not able to access them. In addition to this, in some cases facilities are provided on socio economic and political clout which often lead to further marginalization.

What is the potential that we can gain with involvement of PRIs?

The 73rd constitutional amendment was brought to address the anomalies present in the local administration and to strengthen the process of governance at the grass-root level. This reform in the Panchayati Raj were made to address efficiency, openness, and accessibility of quality public services and to promote development with inclusion. It was also a response to the rising demand to create an institution to bring about 'inclusion' of the marginalised communities and groups. Considering the increasing political will towards WASH, all flagship programmes have potential scope for PRIs. PRIs play the pivotal role in better utilization of resources. From being within the community, they can better understand and address the needs of the different sections of society.

Many of the states have reservation of women for PRIs. Involving the elected representatives from disadvantaged sections can help in addressing their challenges in more appropriate manner.

It is a known fact that the construction of the facilities alone doesn't ensure its sustainability. Ensuring sustainability requires the concepts and facets of gender, disability and social inclusion be intertwined in the planning of these facilities. And this can be achieved to a large extent by involving PRIs. PRI being the local elected members have greater accountability towards each section of the community.

Speakers

Mr Samir Ghosh	Director	Sodhana, Pune
Mr Nitin Pawar	Director	Rasikashraya Sanstha Yavatmal
Ms Krupali Bidaye	Programme Manager - Social Inclusion & Gender	Shodharambh Research and Development Foundation
Ms Vidhya Rajput	Social Activist	Mitwa Sankalp Samiti Chhattisgarh

How to Build Linkages of WASH Programmes with Sustainable Climate and Disaster Resilience Agenda at Panchayat Level

DAY 3 | 25 FEBRUARY, 2022 | 04:00 PM - 05:30 PM

Moderators:

Dr. Prabhakar Sinha, Wash Specialist, UNICEF Bihar Field Office

Ms Swathi Manchikanti, WASH Specialist, UNICEF India Country Office

Context/ Problem Statement:

In 2019, India was ranked as the seventh most affected country due to climate change led extreme weather events – both in terms of the fatalities (2,267 people) as well as the economic losses (66,182 million USD). The impact of climate induced disaster, has been more severe in rural areas compared to urban counterparts due to poverty, limited infrastructures and access to meagre resources and health care services. Moreover, beyond economic consequences, climate change and environmental degradation has also impacted people's access to clean air and land, sufficient food, secure shelter, and safe water, sanitation and hygiene (WASH). Poor waste management - of plastics, faecal sludge, greywater, biowaste and other waste types – and limited investment in water conservation efforts and other resilient practices makes the existing challenges worse and reduces the resilience and ability of communities to withstand shocks.

Why PRIs are important for this issue?

The gram panchayat is the key local level institution responsible for the fulfilment of the community's aspirations with respect to overall development of the village. Hence, it is necessary that the PRI functionaries are i) well-conversant with their duties for ensuring access to safe WASH ii) capacitated and equipped for implementing resilience-building activities, and iii) are able to respond quickly to climate and environment-related shocks.

Proper climate adaptation depends on community planning and preparedness on a regular basis, irrespective of whether a disaster will strike. This could be achieved by integrating climate resilient WASH features into daily planning under the Gram Panchayat Development Plans (GDPDs) as well as including the disaster preparedness and response mechanism under the Village Disaster Management Plans (VDMP).

Gaps, Challenges, and Issues:

Limited institutional capacities, technical competencies and access to resources are preventive factors that hinder robust planning and successful implementation of programmes. While indigenous knowledge and practices of the rural community have a great potential in promoting the management of resources, these needs to be complemented by scientific understanding of climate change impacts and the adaptation practices that can go hand in hand with development planning.

What is the Potential that we can gain with Involvement of PRIs:

Leadership from PRIs has the greatest potential for sustaining positive behaviour change and practices. Ensuring a bottom-up planning process, reflecting the needs and aspirations of the people, and including participation of women and children through Mahila Sabha and Bal Sabha would make building resilience more inclusive and equitable.

Through these measures, decentralised planning, accounting, implementation, and monitoring could play an important role in improving the coping capacity and enabling continued access to safe drinking water, clean sanitation and hygiene services. This in turn would lead to improved nutrition, reduced risk of diarrhoeal, cardio-respiratory and infectious diseases, and a secure living condition.

In this session, speakers will share experiences on how they responded to disasters, and will share recommendations for how PRIs and district officials can prepare their communities to withstand future shocks and environmental challenges.

Speakers

Ms Ritu Jaiswal	Mukhiya, Gram Panchayat	Singhwahini, Sitamarhi, Bihar
Shri Vijay Amruta Kulange, IAS	District Magistrate	Ganjam, Odisha
Mr Binoy Acharya	Director	Unnati
Mr Salathiel R Nalli	Emergency & Climate Change Manager	UNICEF Maldives

Ways for Developing Technical Human Resources for WASH at PRIs and Ensuring Safety of Sanitation Work in Rural Areas

DAY 3 | 25 FEBRUARY, 2022 | 04:00 PM - 05:30 PM

Moderators:

Mr Nitya Jacob, Coordinator, SuSanA India Chapter

Mr VR Raman, Policy Advisor, WaterAid India

Context/ Problem Statement:

Rural water and sanitation programmes, Swachh Bharat Mission II and Jal Jeevan Mission, respectively, have become increasingly technical. The maintenance of infrastructure, treatment of solid and liquid waste, and planning and operating water supply schemes need a WASH corps at the local level with the ability to plan, execute, monitor and communicate with their communities.

Panchayats at the three levels have been tasked with the work and provided finances from the two missions, the Finance Commissions and other sources. Implementation Support Agencies (ISAs), KRCs, Swachh Bharat Mission secretariat, Rural Development Department and the Public Health Engineering (or the state equivalent) Department will provide technical support, oversight, certification of the yield and quality of water sources and management of wastewater, solid waste and faecal sludge. Similarly, the Health and Family Welfare Department supports the PRIs in health and hygiene-related issues. They are also expected to oversee the institutions such as schools, Anganwadi Centres and health facilities in rural areas. The session will look at the challenge of human resources in PRIs to meet these requirements; is it possible to have a 'WASH Corps?'

Why PRIs are important for this issue?

The JJM guidelines state gram panchayats are responsible for in-village infrastructure development and management through VWSC/ Paani Samiti / User Groups, supported by PHED or ISA. The SBM II guidelines have entrusted PRIs with managing solid and liquid waste, toilet infrastructure and faecal sludge management. PRIs must support the execution by ensuring the availability of land, addressing concerns of the communities, monitoring progress and overseeing the payments. They are to prepare village action plans in consultation with the communities, ISA, PHED and DWSM. However, there are insufficient human resources in PRIs at all levels, especially at the Gram Panchayats which is the primary interface with the populace. They rely on block or district level staff, and even ISAs, for all technical inputs. Currently, most states provide a secretary and the MGNREGS coordinator to panchayats, and sometimes the secretary is shared between several panchayats. Therefore, it is crucial to address the human resource needs for PRIs to adequately address WASH needs. This is a large-scale challenge. Coming to the issue of sanitation workers, few states have hired them on a contractual basis but are not able to provide them with the equipment or a regular salary. The SBM II guidelines have provisions to hire them using funds from MGNREGS. It is crucial to avoid the direct interface of these workers with faecal matter, which may amount to manual scavenging.

Ideally, each gram panchayat will need a panel of technically-qualified people who are available on demand. The waste treatment and water supply work will need continuous support that a local person can provide. For example, the operator of the piped water network must daily turn on and off the pump and valves, while checking for leaks. This person needs skilling in the job and regular remuneration. Additionally, materials need to be available when needed, which also seeks management and oversight. Several lakhs of swacchagrahis were trained under SBM-I. wherein there is a need to see if these and other educated people be organized into the WASH corps. Similarly, the PRIs need to engage sanitation workers, plumbers etc. for various WASH related tasks safely and sustainably.

How will this benefit PRIs?

Although the constitutional amendment for introducing 3-tier governments in rural areas is a 3-decade old reform, the discussion about strengthening PRIs as local governments is yet in an initial stage, in most states. Given this situation and the added load on PRIs due to the WASH-related responsibilities, the discussion about WASH human resource development and safety of sanitation workers can generate pathways for several state governments to think in this direction in a futuristic manner.

Gaps, Challenges, and Issues:

- The sheer number and diversity of schemes will require a vast number of people to maintain them, as also assured funds and materials. These people will need continuous training and handholding from external agencies such as ISAs, while PRIs will have to ensure funds and materials. Making the job attractive for local, educated youth is a related issue.
- JJM and SBM II envisage the long-term engagement of PRIs as the elected body that is closest to communities, and therefore best able to manage the systems. But PRIs will need support at all stages of the water supply and sanitation project lifecycle and the continuous and timely release of funds
- The DWSSM, SWSSMs and PHEDs are to provide technical and managerial support but there is no clear definition of roles and responsibilities as yet to them to support PRIs
- The understanding of the need and positioning of sanitation workers in rural areas is yet an emerging concept, wherein there is a need to build clarity.
- Critically, PRIs need to work as equal partners in the two missions and other WASH-related issues else there is a risk of being reduced to contractors or worse, passive recipients of technical and financial assistance.

Speakers

Ms Pragya Bhartiya	PMU, SBM	Govt. of Madhya Pradesh
Shri Saroj Kumar Dash	Joint Director	SIRD and PR, Govt of Odisha
Mr Om Prakash	Trainer and Community Motivator	
Mr Anshuman Karol	Lead, Local Governance Program	PRIA Delhi
Mr Devidas Kisan Nimje	Senior Program Manager	Samarthan
Mr Sathyanarayana	Executive Director, DDU-GKY	NIRDPR, Hyderabad
Ms Natasha Patel	Executive Director	India Sanitation Coalition

Valedictory Ceremony

DAY 3 | 25 FEBRUARY, 2022 | 05:30 PM - 07:00 PM

Special Address

Dr Roderico H Ofrin, Representative, World Health Organisation – India

Summary of the Conclave

Mr V K Madhavan, Chief Executive, WaterAid India

Call to Action and Way Forward

Dr G Narendra Kumar, Director General, NIRDPR

Key Reflections

Ms Vini Mahajan, Secretary, MoJS

Mr Sunil Kumar, Secretary, MoPR

Valedictory Address

Shri. Bhupender Yadav, Hon'ble Minister of Environment, Forest and Climate Change

Concluding Remarks

Mr Nicolas Osbert, Chief of WASH, UNICEF India Country Office

Ms Meital Rusdia, Chief, UNICEF Hyderabad Field Office

Closing Remarks

Mr. Salathiel. R. Nalli, Emergency & Climate Change Manager, UNICEF Maldives (Moderator)

Words of Thanks

Dr R Ramesh, Associate Professor & Head, CRI, NIRDPR

Mr Venkatesh Aralikatty, WASH Specialist, UNICEF Hyderabad Field Office



NATIONAL WASH CONCLAVE 2022

WASH FORWARD

Advancing Water, Sanitation and Hygiene
(WASH) in Panchayats

Mentors, Organizers and Contributors



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5	Member	Mr Arun Baroka, IAS,	Additional Secretary Ministry of Jal Shakti
6	Member	Mr Sujoy Mojumdar	WASH Specialist UNICEF India Country office
7	Member	Mr V K Madhavan	Chief Executive WaterAid India
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9	Member	Mr Venkatesh Aralikatty	WASH Specialist (OIC) UNICEF Hyderabad Field Office

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My Idea of village Swaraj is that it is a complete republic, independent of its neighbours for its own vital wants and yet interdependent for many others in which dependence is necessary.

- Mahatma Gandhi

