Thematic Discussion Series Synthesis

ODF+, ODF++ and Sustainability of Sanitation

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Introduction

From 28 August to 24 September, The India Chapter of SuSanA organised a thematic online discussion on the post-ODF scenario looking at what the Government of India calls ODF+, ODF++ and ODF-S. This is the synthesis of the discussion.

SuSanA's Thematic Discussion Series

The Thematic Discussion Series is an initiative from the Sustainable Sanitation Alliance (SuSanA) to engage actors from interconnected areas of expertise in discussions which are organised and focused on a thematic area, and led by experienced practitioners of the field. Each thematic discussion is held for 3-4 weeks on the SuSanA Discussion Forum platform. The discussion is guided and led by thematic leads, who provide background information on the topic, respond to and lead the ongoing discussion with the support of a coordinator. More information can be found at www.susana.org/resources/thematic-discussion-series

The discussion was divided into two sections. The first section sought comments on how behaviour change is the critical factor for consolidating gains from sanitation infrastructure and ODF. Sujoy Mojumdar from UNICEF was the topic lead. This topic was open for comments from 27 August to 9 September.

The second part of the discussion concerned the emerging issues of sanitation workers and manual scavengers. Ankit Tulsyan from the Quality Council of India led the topic. Comments were sought on the need to address them as a critical factor for upscaling from ODF (access and usage of toilets) to ODF-S and +/++ that concern sustainability of the sanitation status achieved, maintenance of toilets and safe management of faecal sludge.

Concept

The clock is counting down to 2nd October 2019, the Government of India's date to eradicate open defecation. It is quickly becoming clear the Government is looking at how to consolidate gains made in the past few years on sanitation and not being undone by slippages. As the mission has progressed, the sanitation coverage of rural India has increased to 94.73% and 19 states and UTS, 432 districts and 4,22650 villages have been declared as open defecation-free (ODF). Still, there is need to construct as many 148 million toilets in one year (SBM MIS, 2018). However, as pluses (by Ministry of Housing and Urban Affairs) and Ss (by Ministry of Drinking Water and Sanitation) are added to ODF, marking progression in thought, notions of what should happen after India achieves ODF appear to diverge, reflecting ground realities.

The Ministry of Housing and Urban Affairs (MoHUA) guidelines says a city or ward can be declared as ODF+ if at any point of the day, not a single person is found defecating and/or urinating in the open, AND all community and public toilets are functional and well maintained (italicised part is for ODF+). For ODF++, the condition of safe management of faecal sludge/septage and sewage is added.

The Ministry of Drinking Water and Sanitation (MDWS) considers ODF+ to be a state where there are no faeces in the environment and everybody is using safe technology option for disposing faeces, AND solid and liquid resources are managed along with menstrual hygiene (italicised part is for ODF+). MDWS progresses to ODF-Sustainability, where the ODF status is maintained by ensuring everybody uses toilets all the time and assets created under SBM remain functional through proper upkeep.

Despite these difference, there is convergence in thinking. MoHUA relies on self-certification and an independent six-monthly verification. Usage and upkeep norms are explicitly mentioned in declaration formats and the guidelines. MDWS's guidelines are also explicit about the process of declaration and

verification process for ODF and the need to ensure usage and upkeep. Significantly, they include funding to support ODF-S activities.
Thus, both Ministries emphasise self-declaration of ODF backed by external verification. But evidence from the field shows both the urban and rural components of SBM are focused on infrastructural provisions. As per the 2012 Baseline survey, rural India will be declared ODF. However, challenges persist. Urban India has progressed slowly, several million rural toilets are unusable because of faulty construction, lack of water, poor behaviour change, notions of purity and disposal of faeces, etc.

To move towards ODF+ and beyond therefore, resources and collection and handling methods for faecal matter need to be developed. Achieving ODF is just the beginning of the journey to attain improved and sustained sanitation. It opens up a new goal – from ODF to sustainability and from there to ODF +, ODF++; from toilet construction to achieve overall health and wellbeing. While 140 districts still have to become ODF, the rest have to prepare post-ODF plans.

The purpose of this discussion is to unpack certain aspects of the post-ODF situation that are common to rural and urban areas. This is to develop a common understanding of these concepts. Some issues to be considered are how to deal with defunct toilets, linking WASH with health and education, sustaining behaviour change in villages and strengthening systems.

We would like you to share your experiences about how ODF, ODF-S, ODF+ and ODF++ are being sustained and implemented in rural and urban areas. Two specific areas of inquiry are:

1. What aspects of behaviour change communications are required to sustain sanitation's gains after construction. This is led by Sujoy Mojumdar, UNICEF
2. What are the emerging issues of sanitation workers and manual scavengers. This was led by Ankit Tulsyan, Quality Council of India

Summary of discussions

The responses provided a canvas of problems with sustaining ODF that covers technical, behavioural and physical issues. These issues, persistent since before SBM, must be overcome before India could move onto ODF+, ODF++ and ODF-S. All the issues were related to the ODF-centric approach of SBM that focussed only on toilet coverage.

The technical problems concerned the quality of construction and types of toilets. Twin leach pit latrines were useful in most parts of India except in waterlogged areas. Here, members said, beneficiaries must be provided with different types of toilets so the pits did not fill with water or contaminate groundwater. The 'acceptable' superstructure was suffocating; people would be willing to use toilets if they were combined with bathrooms.

Behavioural issues, members enumerated, concerned the social norms around open defecation. While triggering through community-led approaches prompted a flurry of construction activity, there was need to keep the spotlight on sanitation and hygiene after all households built toilets. This could be achieved by appointing a swacchagrahi in each village who was paid an incentive for specific outcomes. In the post-construction phase, aspirations messages should emphasise the benefits of using toilets rather than berating people for defecating in the open. Some suggested separate toilets for men and women.

Physical issues concerned the lack of water and poor placement of toilets. The government should ensure ODF villages had a reliable water supply, said members.

The health sector, notably those working on HIV-AIDS, had run a long and successful campaign to change behaviour and spread awareness about unsafe sex. Members said this should be beacon for

sanitation that a long, sustained and cross-media campaign would be needed along with construction to ensure the sustainability of ODF. ODF+ and later stages could be folded into this media campaign.

They brought up the issue handling faecal sludge. Single-pit toilets would fill up in a few years after which the family could resort to open defecation until they could make another pit or find a way of emptying their pit. Mechanical desludgers were an option, but the sludge needed to be transported and recycled safely.

This led to the issue of sanitation workers and manual scavenging. While banned under the 2013 Act, municipalities and panchayats simply denied their existence. This made it impossible to develop any local plans for re-emplying manual scavengers by training them. Members suggested without data on their numbers and type (regular municipal employees, contract workers or ad hoc employees) it was difficult to develop skilling curricula.

A multi-stakeholder approach was needed, suggested members. This would involve NGOs, CSOs, youth groups, the government, private sector, and others working together to sustain ODF, address issues of sanitation workers while progressing towards ODF++ or ODF-S.

Topic 1: Aspects of Behaviour Change

Led by Sujoy Mojumdar, UNICEF WASH Specialist.

His initial comments sought inputs on behaviour change as the critical factor for consolidating gains from sanitation infrastructure and ODF.

The success of sanitation programmes rests on behaviour change. Migrating to the ODF-S and thereafter to ODF+ levels will require a consistent and dedicated engagement with communities on social behaviour change. They need to ensure all households have access, everyone uses toilets, maintain them, repair incorrectly built toilets, maintain safe hygiene practices and keep their surroundings free from waste water and garbage. They also need to ensure ground water is not contaminated by leachates from septic tanks or improper disposal of faecal sludge. Therefore, once the focused construction phase is completed, the longer haul of consolidating gains from sanitation starts.

Mojumar asked members for experiences about behaviour change. He requested examples of behaviour change that have been effective in ensuring people use toilets, manage solid and liquid waste and practice good hygiene behaviour such as washing hands, safely dispose child faeces, practice safe menstrual hygiene and safely handle of drinking water. The central question is, “What are the behaviour change communications are required to sustain sanitation’s gains after construction”

In response, members wrote tehaviour change was part of a process and activities without which sanitation outcomes, notably maintaining ODF, is not possible. Participants in the discussion pointed out several facets of this process of ‘social engineering’ that included the quality of construction, messages, punitive measures, availability of water and cultural norms of using toilets. Some of these are part of the government’s guidelines while others will have to be factored in subsequently.

They said knowledge and awareness were not enough to effect behaviour change; it required intensive approaches. An understanding of the barriers and drivers of specific behaviour had to inform the mix, medium and process of spreading messages. Usually, programmes jumped from behaviour change to activities, without giving much thought as to why people did what they did. The social engineering for lasting behaviour change seemed to run contrary to making intervention scalable. Behavioural science could help understand what makes people act in a particular manner. These include factors that

influence whether an individual had the opportunity, ability and motivation to engage in a given sanitation or hygiene behaviour.

How toilets were made also affected sanitation behaviour. Several participants said poorly-designed or inappropriate models of toilets detered people from using them. The single-minded push by the government towards ODF led to poor construction. People seldom knew about the types of toilets available and cheaper alternatives.

One respondent posted photographs of twin leachpits constructed in a waterlogged area; the pits were full of water. Such toilets exacerbated the problem of water pollution, especially shallow aquifers. He said the Swachh Bharat Mission (SBM) does not specify norms for the superstructure. These toilets can be suffocating or so poorly-built as to discourage use. Instead, people would prefer to have better and larger toilets with bathrooms connected to a well-made septic tank. Examples of such toilets could be had from MDWS' handbook of sanitation for on-site sanitation.

One respondent quoted a recent survey report of SBM (G) which showed 41 per cent households had single pits. Karnataka had the highest percentage (92 per cent). These were not mentioned in the SBM guidelines nor in the Handbook on Technical Options for on-site Sanitation. To maintain ODF-S, these needed to be converted to twin leach pit latrines, a major challenge. A single pit could be used for 4-5 years and as there were no simple ways to clean them in rural areas, owners of such toilets were likely to revert to open defecation once the pit was full. This was another aspect of behaviour change to ensure people built proper twin leach pit toilets.

Behaviour change was more effective when driven by a combination of positive (feel good) and negative (ill-effects on health or wealth) messages. It requires additional inputs to change social norms as in the case of HIV-AIDS campaigns where it took more than a decade for people to speak about, and change, risky sexual behaviour. The campaign used every possible medium to communicate about risky sexual behaviour, and how using condoms or not being promiscuous could prevent a person from getting infected. Communication experts from other fields could design a suiteble behaviour change campaign. A participant suggested having a core team in each district to spread these messages regularly and all levels.

In SBM, CLTS has been used as the approach of choice in many states. The 'triggering' process invoking disgust, women's safety and dignity has been followed by setting up committees of local people to prevent people from defecating in the open. This 'pressure cooker' has been used during during the construction stage. A participant said it should be repeated since to ensure toilets are used. The messages should address issues of self-perception that determine a community's attitude towards toilets. For instance, the messages could focus on taking pride in using toilets to ensure hygiene and health. In remote and tribal areas, the message could be around safety from animal attacks while defecating, convenience and comfort.

Recommendations

Improved service delivery of sanitation services need to go hand-in-hand with SBCC

Orienting and capacitating service providers is essential. One swacchagrahi can be stationed in each village and paid an incentive for each step towards ODF+, ODF++ or ODF-S

Using streams and water bodies for natural treatment of effluents seems a good practical solution even in rural areas

Households have to decide what kind of toilet they want to ensure quality, O&M and usage

MDWS has promoted the pour flush twin leach-pit toilet as it is SDG compliant but the reasons need to be effectively communicated

Children can be effective communicators specially in families 1st generation school goers input.

Some additional questions are: What needs to be done by the Government to facilitate the ODF sustainability process; what should a 10 year strategy of the Government post 2019 look like; to whom should the government give funds?

To reinforce positive behaviour, a respondent suggested having dedicated human resources. One swachhagrahi from the trained CLTS cadre could be assigned to each village with defined roles and responsibilities and paid incentive.

The MDWS report also showed 10 per cent households did not use toilets due to a lack of water. This was both an issue of behaviour change and service delivery. A fund to repair toilets damaged in disasters was needed, given the magnitude and frequency of floods. While 32 per cent rural households had septic tanks, there was no system for emptying and disposing sepatage safely. This 'deferred open defecation' was a major health hazard and cause of pollution and required behaviour change interventions.

Participants said the objectives of ODF+ or ODF++ would be defeated if rural septage management was not handled properly. They suggested guiding panchayats to use funds from the 14th Finance commission and state finance commissions, MP and MLA local area development funds, soft bank loans, etc., for septage management.

A participant gave the example of the national BCC guidelines from Cambodia that were based on the principle that BCC needed to be evidence-based. Several behaviour change models could be used to develop similar guidelines: The EVO-ECO model that considers the interaction between the environment, the brain and the body and; the SaniFOAM and FOAM frameworks developed by WSP in 2008 to address sanitation and handwashing practices, respectively.

These categorize sanitation and hygiene behavioural determinants as follows:

- Opportunity, a category of four factors that can affect an individual's chance to perform the target behaviour including structural and institutional factors (e.g., social norms, fines or sanctions, and access to products and services)
- Ability: a category of factors related to an individual's skills and capacity to perform the target behaviour
- Motivation: a category of factors that affect an individual's desire to perform the target behaviour including their beliefs and values and social, physical, or emotional drivers.

A respondent said about a quarter of the urban and rural poor continue to defecate in the open. Indiscriminate open defecation could be checked by 'controlled open defecation' by providing fixed open places for defecation that were rotated. Faeces from these places could be cleared and co-composted with wet waste, cowdung, etc., to produce manure. However, Mojumdar replied this was unlikely to be adopted by the government.

Streams and water bodies could be used for natural treatment of of effluent and the water, further treated through planted artificial wetlands. This could also generate jobs if self-help groups were trained to manage the system and use the grasses for cultivating livestock.

The 'pluses and the S' did not change the overarching philosophy of sanitation campaigns, said a participant. Movements that spur and shock people to shift to safe practices will continue to need the nurture and gentle push to keep at it such as when people choose healthy eating practices to lose weight. As soon as the target was achieved (often over months), people slip back to old habits. Thus, a lot of attention would be required to keep people committed and communities motivated, to strengthen ground level institutions through capacity building and regular flow of communication.

To sum up, while it was important to follow the logical progress from ODF to ODF+, ODF++ and ODF-S, it was essential to keep a few factors in mind: ensuring equitable access to sanitation; permanent change in sanitation and hygiene practices; effective operations and maintenance; managing faecal sludge; adequate and clean community toilets or shared toilets; sufficiency of water supply; using water-saving toilets (SATOPans, Ecosan toilets and waterless urinals) and; a four-pronged strategy of awareness creation, supply chain solutions, capacity building and decentralised management.

Topic 2: Emerging Issues of Sanitation Workers and Manual Scavengers

Led by Ankit Tulsyan, Quality Council of India

In his initial comments, he introduced the topic saying issues of sanitation workers and manual scavengers had to be addressed if we had to move on from ODF (access and usage of toilets) to ODF-S and +/++ that concern sustainability, maintenance and safe management of faecal sludge.

Recommendations

- Enumerate and classify sanitation workers – regular employees, ad hoc workers and contract workers
- Implement the Prohibition of employment of Manual Scavengers and their Rehabilitation Act (2013)
- Develop suitable training programmes for manual scavengers
- Ensure they are informed about these programmes through NGOs, the media and the administration
- Ensure municipalities have mechanised units for cleaning drains, sewers and septic tanks
- Ensure sanitation workers had equipment and training
- Encourage schools to maintain toilets to the highest standards so students imbibed good sanitation and hygiene practices and became WASH ambassadors
- Ensure public toilets were clean and functional
- Pay incentives for making toilets in instalments to encourage use and maintenance by the owners

As rural and urban areas of India gradually become ODF with a continuous journey of slippages and becoming ODF again, it is critical to keep an eye on the next step of the sanitation ladder as well. This herculean task of sustaining the ODF status, maintaining the toilets and managing the faecal sludge at the bottom of the implementation level is currently shouldered by millions of sanitation workers and thousands of 'identified' manual scavengers.

However, there is a lot of scope of eradicating manual scavenging to improve the lives of these foot soldiers. This can be accomplished through interventions such as their formalization and recognition of work, providing health and life insurance coverage, access to protective gears, ensuring mechanized system of sewer cleaning and faecal sludge emptying and transport. They can also be trained to become entrepreneurs and/or take up other livelihood opportunities in the changing sanitation regime.

He invited comments on the role of sanitation workers role in achieving ODF and beyond. What were the nuanced challenges these workers face and the barriers in improving the lives of these workers, and what could address their challenges?

Participants said the first challenge was enumerating and acknowledging their numbers. Municipal officials and panchayat members denied the existence of manual scavenging since it was illegal. But there had been several incidents of deaths and injury of workers engaged in cleaning not only septic tank toilets but also sewers.

A recent meeting in Delhi brought out many hard facts that are ignored by the media. For example, how many workers are engaged in the work on manual cleaning of sewers and septic tanks in Delhi and other cities and towns of India? How is the network sewers cleaned, how is work distributed across divisions and zones, what machines are used and what is their status? How is the manual cleaning work organised in terms of contracting, what about Municipal laws for workers safety and other related issues of training and their health safety?

He wrote there could be anywhere from 20,000 to 30,000 workers engaged in manual cleaning of

sewers and septic tanks in Delhi - NCR. Union representatives claimed that there were very few deaths in the manual sewer and septage cleaning work before 2000. More deaths have been reported since then when the number of full-time sanitation workers of the Delhi Jal Board had decreased from 7,000 to 700. About 300 workers were needed for each of the 32 sanitary divisions of DJB. This indicated the shift to contract labourers, often untrained and unequipped for this hazardous job.

Governments and stakeholders at multiple levels, including civil society, had to work together to address this issue. While some NGOs like WaterAid had advanced the rights and freedoms of manual scavengers, others had to contribute as well, said another respondent. The need of the hour was effective implementation of Prohibition of employment of Manual Scavengers and their Rehabilitation Act (2013). The fact remained that while there were provisions relating to various institutions responsible for implementation of the provisions of the act, including monitoring and rehabilitation programs for manual scavengers, they have largely remained in paper.

This was an opportunity for civil society to work towards community education to prevent employment of manual scavengers. With India moving to ODF, the question of FSM would emerge as a key health and environmental issue. The down side of this development would be the continued employment of manual scavengers and sanitation workers to deal with the faecal sludge without protection, safety gear, extremely poor working conditions endangering their health and right to life. Another person said people had to follow norms and laws through information and education. There are ways to eliminate manual scavening using simple tools, said another respondent. The biodigester was one method that did not generate any sludge but was yet to be widely accepted.

There were government institutions and programmes to train them for different work, said a member's response. These included the National Skills Development Corporation (NSDC) and a National Policy on Skill Development and Entrepreneurship in 2015. The Policy estimated 109.73 million additional people would be required by 2022 across 24 key sectors identified by NSDC.

NSDC had developed a portfolio of 2,000 roles under categorised under 39 sector skill councils, one of which was Green Jobs. This provided skills in waste management, renewable energy and transportation. A major target of Green Jobs was to ensure safe sanitation practices in urban local bodies. Most sanitation workers performed 'yellow' and 'black' jobs; manual scavenging was a 'yellow' job while manual drain-cleaning was a 'black' job. An estimated 1.2 million, 90 per cent of whom were women, performed this work.

Some were regular municipality employees. Many, as has been discussed, were contracted as daily wage labourers to whom the municipality outsourced work. They worked in very poor conditions. Being casual labourers, it was hard to enumerate them. In many instances, a regular municipal sanitation worker sub-let his/her job to another, called the sublet worker. Being illegal, they have no service conditions, work for below minimum wage, barely eke out a living, and remain uncounted.

This bewildering array of types of workers made it hard to determine how many, and what type, they were. Lacking this basic data, it was impossible to plan how to train them. As a first step, workers and manual scavengers could be informed about skilling opportunities avialable so they could make an informed choice of upskilling themselves and getting linked to opportunities for enhanced, "green" livelihood options. Members said it was necessary to sharpen definitions drawing on the experiences of NGOs working on the issue.

Regarding manual scavengers in Chennai, in 2008, the Madras High Court directed the Chennai Metro Water Supply and Sewerage Board (CMWSSB) to detail out infrastructure, machinery (for mechanical cleaning), protective equipment and safety protocols (for physical entry), and listed specific instances

only in which manual entry was to be permitted. Such instances would be useful for activists working to eliminated manua scavenging.

The question, the participant posed, was who would do this and how would it be done. Did municipalities have the skills, capacities and resources to do this? Were NSDC and skilling centres ready to take up this pre-skilling process? Could sanitation workers' unions be persuaded to take on this responsibility? Was civil society, resident welfare associations, traders associations, Lions Club and students, ready to facilitate this process and commit to bringing this change?

Some participants said the administration, schools and media had to take the lead to bring about change. The administration had the powers to bring in the required change, notably stopping manual scavenging. It should come down heavily on those who engaged manual scavengers. The administration could subsidise purchase of machines for cleaning septic tanks and sewers. Schools should have good toilets so children learnt about sanitation and hygiene and became sanitation ambassadors. Incentives for making toilets could be phased out to encourage use. The media could highlight successes and challenges. Public toilets should be made free to use and well maintained. And a multi-stakeholder approach would help to accelerate progress.

Resources and links

1. Advisory from the Ministry of Drinking Water and Sanitation on ODF Sustainability to state government, dated 20-2-2018. Link here.
2. Publication from the Ministry of Housing and Urban Affairs. Declaring your City/Town SBM ODF+ and SBM ODF++: Toolkit for Urban Local Bodies. Link here.
3. Formative Research to Develop Appropriate Participatory Approaches towards Water, Sanitation, and Hygiene in Rural Areas. Link here.
4. The Evo-Eco Approach from the London School of Hygiene and Tropical Medicine. Link here.
5. SaniFOAM: A Framework to Design Effective Sanitation Programs from the Water and Sanitation Program. Link here.
6. The FOAM toolkit for behaviour change. Link here.
7. The Gates Foundation partners in India have a community of practice working on FSM. Link here.
8. Related SuSanA discussion on manual scavening:
    a. Where there are no sewers: The toilet cleaners of Lucknow, India - and statements about the Indian caste system
    b. Manual Scavenging - It is pity that they have to perform such a job
    c. India bans human waste scavenging - and the definition of manual scavenging
9. Report from the National Institute of Urban Affairs workshop on ation was held at NIUA in April 2018 on Sanitation Workers safety. Link here.
10. Study by PRIA on state of Women sanitation workers in Jhansi, Uttar Pradesh "Bodies of Accumulation - A study on women sanitation workers. Link here.
11. Studies for Ajmer (Rajasthan) and Muzaffarpur (Bihar). Link here.
12. Hindustan Times report the state of women sanitation workers. Link here.
13. Report from Down to Earth on Letting sanitation workers die inside sewers is not ‘seva’: Bezwada Wilson. Link here.
14. SuSanA India Chapter Seminar in Pune, 19th November 2017 report.
15. FSM session at the BoP Summit in New Delhi, April 2018, organised by Water for People. Link here. Report available here.
16. Safari Karamchari Andolan
17. Podcast on manual scavenging from a legal, engineering and sanitation policy perspective. Link here.

The Thematic Discussion Series Host

The Thematic Discussion Series on Innovations in WASH was organised and hosted by the Sustainable Sanitation Alliance (SuSanA) on the SuSanA Discussion Forum Platform. It was facilitated by the India Sanitation Coalition. The discussion is part of a series of online discussion taking place under the umbrella of the SuSanA India Chapter.
To view the whole discussion, please go to the SuSanA Forum: https://forum.susana.org/odf-odf-and-sustainability-of-sanitation

Contributors

This document was compiled by Nitya Jacob, 17-10-2018. The following people have contributed to the thematic online discussion:

Name of contributors	Organisation	Country of registration
Sujoy Mojumdar	UNICEF	India
Ajit Seshadri	Vels Unversity	India
Nasir Nasiruddin	Wateraid India	India
Ashok Jain	Ashok & Associates	India
P K Jha	Foundation for Environment and Sanitation	India
Depinder Kapur	National Institute of Urban Affairs	India
Sunetra Lala	SNV Netherlands Development Organization	Cambodia
Aditya Jain	TISS	India
Sanchita Ghosh	Independent	India
Indraneel Ghosh	Strategic Alliance Management Services	India
Santwana Sneha	TISS	India
Ankit Tulsyan	Quality Council of India	India
Sophia Joseph	Habitat fo Humanity India	India
Naresh Kewalramani	KK Nag Pvt Ltd	India
Jaison Thomas	WaterAid	Laos
Anshuman Karol	Society for Participatory Research in Asia	India
Sundaram Seshadri	Indigenous and Frontier Technology Research Centre	India
Navneet Garg	Caya Constructs	India
Arkaja Singh	Centre for Policy Research	India