

Coastal Area Development Programme

Workshop on **“Approaches to Address Safe Sanitation Issues in the villages of Coastal Areas”**

Collaboration between Civil Society Institutions, Local Communities, CSPC and WASMO

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Approaches to Address Safe Sanitation Issues in the villages of Coastal Areas

Introduction

The problem of salinity ingress has increased and has led pressure on availability of safe drinking water in most of the coastal regions in rural as well as urban areas. Drinking water and sanitation is a global phenomenon alarming the masses. Both drinking water and sanitation are inter-related with each other. Efforts are made by government as well as non-government organizations but satisfactory results are not achieved. Consequently, to have a special focus on drinking water issues in salinity affected villages in Gujarat, Water and Sanitation Management Organization (WASMO) and Coastal Salinity Prevention Cell (CSPC) has come together to launch a special initiative – Coastal Areas Drinking Water and Sanitation Programme in different coastal districts.

The project is planned to establish management systems to secure access to safe drinking water and sanitation facilities in the salinity affected coastal villages of Gujarat. Accordingly, the programme short listed 300 villages across 9 coastal districts viz, Rajkot, Jamnagar, Porbandar, Junagadh, Amreli, Bhavnagar, Ahmedabad, Anand and Bharuch. The project, visualized as a collaborative model for a comprehensive approach to drinking water and sanitation programme has been launched since January 2009.

Addressing Sanitation under CADP

Sanitation is an essential component. A direct relationship exists between water, sanitation, health, nutrition and human well being. India still faces the most daunting sanitation challenge wherein, around 65 percent of the total rural population remains without access to adequate sanitation. Sanitation denotes a comprehensive concept; in fact it is a “way of life” which is expressed in clean home, community, institutions for better health and safe environment. Moreover safe sanitation practice is a crucial indicator qualifying improvement in standard of living.

It is realized that the routine alternatives / solutions have not helped in overcoming the water and sanitation related difficulties in the coastal villages. Hence new solutions – technological as well as institutional will have to be thought of for solving the problems in a sustainable, socially acceptable as well as cost effective manner. Consequently, CSPC is in the process of developing detailed guidelines and approaches for addressing the sanitation component under CADP. In this context, study on sanitation status at village level and series of consultations were organized with different stakeholder groups to review the status of sanitation and to understand the perceptions of the villages on the problems and ideas that they have to respond to overcome the difficulties. The points covered in the study and consultation process are as mentioned below:

- Status of Sanitation facilities available at village level
- Coverage status under TSC (Total Sanitation Campaign) and proposed plan for further coverage

- Need for complementing financial support for construction of sanitation facilities (not only toilet, bathroom too at house hold level)
- Sanitation facilities at schools and other public utilities
- Possible mechanisms (arrangements) for the additional financial support through CBO, VLO including SHG, Youth Group, etc. The support could be in terms of revolving fund that can be used for extending loan to the identified group members.
- Developing a model, through consultation, for micro finance to strengthen initiatives to achieve total sanitation.
- Missing gaps in the programme of TSC (personal hygiene, environmental sanitation including management of solid & liquid waste).
- Strategy for multi-stakeholder participation for coordinated efforts (GO, NGO, CBO, Corporate Sector, etc).

Consultative workshop on approaches to address sanitation

A workshop was organized to share the survey findings and sanitation consultation for acquiring feedback and plan strategies for finalizing model to implement sanitation component under CADP. The workshop was organized on 24th July 2009 at Ahmedabad. The participants comprised of representatives from selected Implementing Support Agencies, respective DWSC / CMSU, WASMO and CSPC. The workshop was divided into five main sessions namely:

- Inaugural Session
- Experience sharing on sanitation
- Findings of the consultations and proposed financial and institutional model
- Group discussion for developing operational strategy
- Concluding remarks

Inaugural Session

The inaugural session started with a welcome note and objectives of the workshop by Mr. Apoorva Oza, Chairman, CSPC. He emphasized on:

- Challenge in saline villages for addressing drinking water and sanitation
- Partnership with TSC and community.
- Movement among the people is necessary for successful implementation of the project.

The second key note address was given by Mr. Jaipal Singh, CEO WASMO. In his speech drawing experience from WASMO drinking water project implementation mentioned about:

- Integration of water and sanitation for successful implementation of the programme.
- The heavy socio-economical cost paid by tribal and coastal communities due to negligence of sanitation in these areas.

- Emphasis on Direct interface with the community,
- Importance of carefully designed and well thought IEC
- Focus on importance of sanitation & hygiene, personal hygiene for achieving success.
- Caution for failure of water and sanitation programs because of negligence of the people.
- Social process (mobilization) is the most basic and necessary element.

Experience sharing on sanitation



Experiences in sanitation were shared by different organizations. The key speakers in this session were Mrs. Devuben Pandya, Mahiti; Mr. Kukadia, AKPBS, I and Dr. Indira Khurana, WaterAid.

The experiences of Mrs. Devuben Pandya, Mahiti gave some important tips for using micro financing for sanitation program. The key learnings

shared were:

- Micro finance model for addressing the issue of sanitation.
- Any activity should be based on the demand driven strategy
- The financial cost estimates and alternatives should discussed with the beneficiaries
- Funds could be leveraged through other resources
- People's participation and transparency are the key aspects in the implementation of the programme
- The Self help groups should be capable of carrying day to day transactions

Mr. Kukadia, AKPBS I shared their experience on sanitation component. He emphasized on

- Sanitation as a key program for achieving Millennium Development Goals (MDG) and motivating community for the same.
- An integrated programme should be framed including health and hygiene and water and sanitation.
- Child approach for long term sustainability of the programme as children are the best agents for initiating message to the house holds as well as community.

Experiences shared by Dr. Indira Khurana from Water aid spoke about different approaches for promotion of sanitation at national level:

- Discussed different approaches to sanitation including district wide approach, convergence approach, community led total sanitation approach, right based approach, etc.
- The question of low priority of toilets in community, she informed that one of the village in Orissa do not have power supply but each house has a toilet.
- Community can be empowered through sanitation and if the process of appropriate poverty is not a barrier for safe sanitation facilities.
- Children as sanitation ambassadors and good agents of change.
- Addressing menstrual hygiene under sanitation program is an integral part of strategies for gender mainstreaming in sanitation program.
- She also informed about importance of sanitation at international scenario reflected in asking for sanitation as a human right during SACOSAN conference in Newdelhi.

Findings of the consultations and proposed financial and institutional model

The key speakers in this session were Mr. Mayank Joshi; Mr. Divyang Waghela, SRTT and Dr. Sudarshan Iyengar, Gujarat Vidhyapith.

Mr. Mayank Joshi shared the current status, scenario of sanitation in the project villages and findings of study & consultations with various stakeholders. The findings are as follows:

- The data on sanitation facilities was presented in 246 villages out of 272 villages surveyed.
- The surveyed villages consisted of 86, 753 households wherein, about 42 percent households possessed toilets and 38 percent of households had bathrooms.
- It is observed that schools in all the villages have toilets but there is unavailability of water in 36 percent of schools.
- The reasons for lack of sanitation facilities were also discussed.

Mr. Divyang Waghela, SRTT presented the proposed financial and institutional model to achieve Open Defecation Free (ODF) status for the villages. The points discussed are as mentioned below:

- Behavioural change is an important aspect for achieving success.
- The approach to address sanitation issue was discussed which included region specific technical alternatives, village specific financial model, institutional mechanism, addressing environmental sanitation issues such as compost pits, soak pits, waste water treatment, etc.
- The financial model presented was revolving fund model and capital cost support to beneficiary model.

Dr. Sudarshan Iyengar, Vice Chancellor Gujarat Vidhyapith shared his feedback and suggestions for developing alternative sanitation models for coastal areas. He emphasized on

- Compulsion of toilets with water availability at public places, schools and panchayat.
- Village planning should be done with town planning. Construction of toilets in new houses should be made compulsory.
- Households without sanitation units should be charged penalty and panchayat with total sanitation facilities should be awarded.
- Villages with more than 50 percent house holds without sanitation units should be targeted.
- Regarding the financial estimate, APL families could be given loan and not capital cost whereas, BPL families should be aided with more amount.

After lunch, group discussion was held, wherein seven different groups were formed. The groups were formed on the basis of districts. Group discussion was held to develop operational strategy for selecting area specific technological, financial and institutional model; regional constraints and possible solutions to operationalize the project and develop district specific action plan. The presentations made on the discussion are as follows:

1. Ahmedabad

The present status of the project villages was discussed like the problems faced by people, migration rate, etc. Thereafter, micro finance model is acceptable in the villages in Ahmedabad. It is proposed to cover 100 percent villages within 6 months. There is a need to technological support for villages that are water logged.

2. Anand

It was discussed that local mentality of people about non use of toilets could be solved through IEC campaign like rallies, etc. The local water sources could be enhanced and RRWHS could be promoted. A question was laid that can saline water be used for sanitation? Some technical suggestions are soak pit width to be increased, tap to be give outside the bathroom for optimum utilization, eco sanitation to be promoted on pilot basis, etc. There milk and tree cooperatives are active, so support could be sought from these institutions, NSS, NCC and eco clubs.

3. Amreli

There are four different types of soils in this region. According to the soil strata, two types of model – soak pit and eco sanitation are feasible. IEC activity would be a major focus and simultaneously sensitization trainings, exposure visits for eco sanitation would be arranged. Apart from community contribution, the funds would also be leveraged from corporate like L & T and Narmada Cement.

Water and sanitation activities should be started together rather than focusing on single component. Village level sanitation committee to be developed for effective implementation of the programme.

4. Bhavnagar
CMSU will take up the implementation of the programme in this district. At present they will take 10 villages out of 30. Cost of 1.50 crore is estimated for the 10 project villages. It was discussed that after finalizing in Gram Sabha, Rs. 1000 could be kept at community contribution.
5. Jamnagar
The financial model proposed was acquiring funds from TSC, CSPC, ISAs, Industries and individual donors. For personal hygiene and school sanitation promotional activities like compulsory provision of pot with tap in households, IEC activities etc. could be taken up. An annual contract could be given to Gaushalas for the management of solid waste. Pani Samitis, SHGs and other institutions could be covered for fund routing.
6. Junagadh & Porbandar
The water table in these villages is shallow so some alternative options like twin soak pit is good for longer duration. Complete masonry is not required. Loan based model wherein contribution from ISA and Self Help Groups is workable. Rigorous wealth ranking model needs to be developed and provisions of subsidy should be for poor and ultra poor families. School sanitation activities should be given more importance.
7. Rajkot
Eco sanitation model could be replicated. Brick masonry could be taken up for APL and pre cast model for poor. Funds from TSC, NREGA for pit digging and local industries could be leveraged. Issues of salt pan workers should be dealt separately through industries.
8. Bharuch
Operational strategy discussed was to construct toilet and bathroom in the project villages through awareness by rallies, sanitation chariot, etc. The funds could be raised through beneficiaries, TSC, CSPC and other industries or donor agencies. District level committee should be formed to address the issues regarding availability of funds from TSC, attitudinal change, etc. New technological options could be worked out.

Concluding remarks

Conclusions by the panelist were made after the presentations made by the group leaders. Mr. Sama opined that efforts should be made for leveraging funds from public as well as private donors.

- Funds could be raised from private donors for 1 or 2 components as a part of Corporate Social Responsibility.
- In this programme, community contribution could be Rs. 2500 for APL and Rs. 1000 for BPL and the total cost of sanitation units should not exceed Rs. 8000 to Rs. 9000.
- For saltpan workers, WASMO has separate funds and the same could be provided to the ISAs.
- Emphasis was on developing and following laws in this programme.
- Ensuring water connection and storage in aanganwadis and schools.
- Hygiene is an important and relevant activity and therefore should be given priority, especially with children.
- Covering the constructed structures with wire fencing to ensure environmental sanitation.

Thereafter, Dr. Indira Khurana opined of an integrated approach for water and sanitation.

- Engaging with industrial as well as political sector.
- Change in terms of health and hygiene, school strength, etc., is important after the project.
- Pilot community led total sanitation approach in some villages.
- Community mobilization through exposure visit is important and doctors and educated people should be involved in the programme.
- WaterAid is interested in arranging exposure visit.
- The ISAs should focus on model creation and demand generation, rather than getting involved in service delivery mechanism.
- Proper documentation is important to capture learnings and the same to be utilized for state and national level advocacy.

Mr. Kirit Shelat expressed his views as follows:

- Awareness of health, hygiene and sanitation is a starting point for development and would prove a good model in the state.
- Its good to see integration of water and sanitation being talked at top most level.
- Further, bottom up approach is an important aspect and should be clubbed in an integrated way.
- Interest of young elected members is a good sign for the project.
- Coordinated efforts by WASMO and CSPC would provide good leadership is encouraging and provide us better opportunity to address the issue of "Total Sanitation".

Mr. I. K. Chhabra conveyed the following points:

- The aim is ZERO OPEN DEFECATION rather than Nirmal Gram project.
- Emphasis on penalty to the individuals that practice open defecation.
- Further mason training is an important issue and masons should be identified and motivated to construct toilets and rewarded for the same.
- Cleanliness, greenery and purity in the villages should be addressed simultaneously (parallel).

Mr. Apoorva Oza concluded the session by stating that target should be the institutions, proactive committees for work rather than construction of toilets. Work should be carried out in a time bound manner. Villages are heterogeneous; therefore ISAs have to strategically deal with them and maximize the conversion ratio. And accordingly develop operational plan at regional level.

Consequently, suggestions, opinions from different leaders and specialists were sought for the implementation of the programme. Lastly, vote of thanks was conveyed by Mr. Uday Gaikwad, Sr. Programme Manager, CSPC.
