



Introduction

Ensuring universal access to clean water, sanitation and hygiene services is extremely important if we have to eradicate poor health along with poverty. The Sustainable Development Goal (SDG) 6, is aimed at ensuring sustained availability and management of water and sanitation for all. This target has been prioritized in India as well, as reflected in the national and state programmes and schemes on water and sanitation. On 2nd October 2014, the Swachh Bharat Mission (SBM) was launched, with the aim to putting an end to open defecation. As per the mission's target, by 2nd October 2019, both rural and urban regions of Indian states were declared open defecation free (ODF). In March 2020, the SBM Phase II was launched with ODF Plus and ODF Plus Plus guidelines, to sustain the clean, sanitized and open defecation free status achieved in Phase I.

Further, on 15 August 2019, the Jal Jeevan Mission was launched to provide safe and adequate drinking water through individual household tap connections to all households in rural India by 2024. Several states in India too have introduced programmes aimed at providing safe drinking water to all. In 2018, the Government of Odisha launched the Buxi Jagabandhu Assured Water Supply to Habitations (BASUDHA) scheme, with the aim to provide safe potable piped water to all.

In addition to the different national and state programmes, the 15th Finance Commission (2021-2026) recommends that 60% of the allocation to the Rural Local Bodies or Panchayats be utilized for water and sanitation services.

Objective >>>

It is thus in order to investigate how the various government initiatives have fared on the ground. This note briefly discusses the findings from an assessment of the prevailing water supply, sanitation and hygiene situation and practices in Chhatrapur block of Ganjam district.

Methodology >>>

The situation assessment is based on a mixed method approach, involving both qualitative and quantitative data collection. Discussions were held with community members, representatives of the Panchayati Raj Institutions (PRIs), Village Health Sanitation and Nutrition Committee (VHSNC) members, and frontline workers, during between the months of December 2021 and January 2022. The PRI members were consulted for collection of quantitative information about the number of households, number of Individual Household Latrines (IHHL), incentives received towards construction of IHHLs etc., in their respective Panchayats. The qualitative information regarding hygiene behaviour and practices were obtained from discussions with the community, VHSNC members and frontline workers.

The scope of the study has been limited to three panchayats in Chhatrapur block of Ganjam district, namely Agasti Nuagaon, Aryapalli and Kanamana.

The assessment was carried out by three local youth – community resource persons (one from each Gram Panchayat) – oriented in conducting Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs).



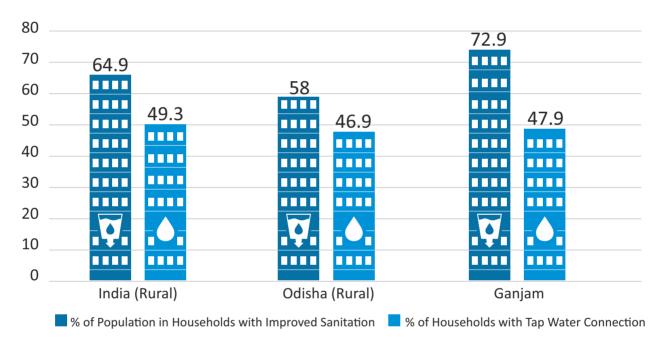
Findings >>>

The Numbers

According to the 2019-2021 National Family & Health Survey (NFHS) Series V, in India (rural) 64.9% of the population living in households use an improved sanitation facility. In Odisha (rural) and Ganjam district (total), 58% and 72.9%, respectively, of the population living in households use an improved sanitation facility. (See Chart 1).

Further, as per the Jal Jeevan Mission dashboard, as on May 11, 2022, 49.27% households in India (rural), 46.89 % households in Odisha (rural), and 47.99% households in Ganjam district (rural) have tap water connections. (See Chart 1).

Chart 1: Sanitation and Water Coverage



^{*}Note: The sanitation figure for Ganjam is for the total district, whereas that for water is that for only the rural part of the district.

¹India.pdf (rchiips.org)

²As per the JMP Sanitation ladder, improved sanitation facilities are those that hygienically separate excreta from human contact. The NFHS 5 considers those that separate excreta from human contact (such as flush to piped sewer system, flush to septic tank, flush to pit latrine, flush to don't know where, ventilated improved pit (VIP)/biogas latrine, pit latrine with slab, twin pit/composting toilet) and are not shared with any other household.

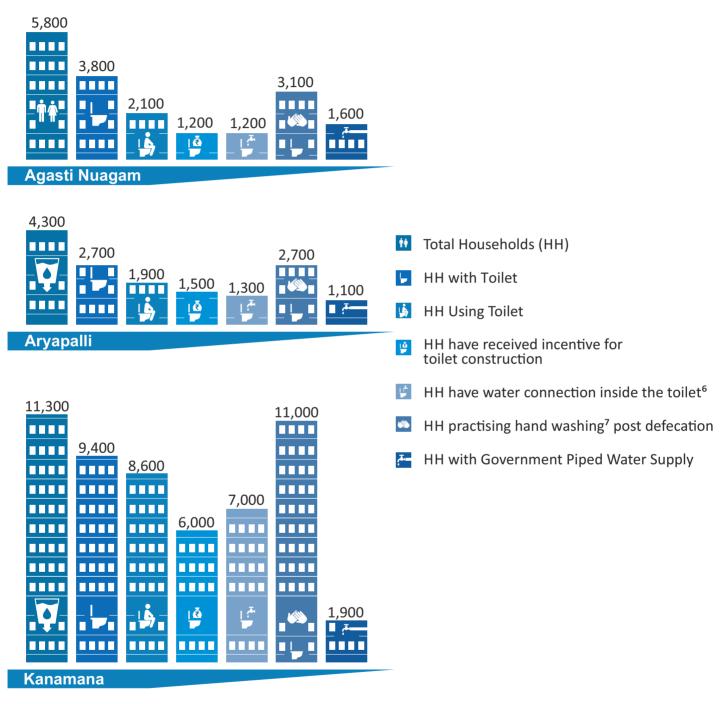
³Odisha.pdf (rchiips.org)

⁴Ganjam.pdf (rchiips.org)

⁵JJM Dashboard (ejalshakti.gov.in)

The following table (Table 1) shows the numbers relating to the access and usage of sanitation and water facilities that have been reported in the KIIs held with the PRIs for their respective Gram Panchayat.

Table 1: Household Toilet Access, Piped Water Connection, Usage and Handwashing practice



Total 21,400 15,900 12,600 8,700 9,500 16,800 4,600

⁶Household toilet water connection includes self-supply (pipe connection from handpump/ tubewell) in addition to Government pipeline connection

⁷Handwashing implies handwashing with soap and water.

Of the 21,400 households in the three Gram Panchayats under study, 15,900 households (74%) possess household toilets. 8,700 of the total households (41%) have received the household toilet construction incentive of Rs. 12,000 under the Swachh Bharat Mission. Out of 15,900 households that possess toilets, 12,600 households (79%) use the household toilet.

4600 (21%) of the total households in the three panchayats have been connected to government piped water scheme. However, 9,500 (60%) of the households with toilet have water connection within the toilet.

In Table 2, the percentage of households with access to water and sanitation facilities in the study area has been shown. It is to be mentioned here that the percentage of households with piped water supply only refers to those households that have been connected to the public piped water scheme of the government in the Gram Panchayat. On the other hand, households with water connection in the toilet include households that are connected to the public piped water connection as well as to private connections to tube well/hand pump. It is seen that the percentage of households with water connection inside the toilet is higher than those connected to public piped water supply.

Table 2: Access to Toilet, Piped Water Supply (public) and Water Connection in Toilet (in %)

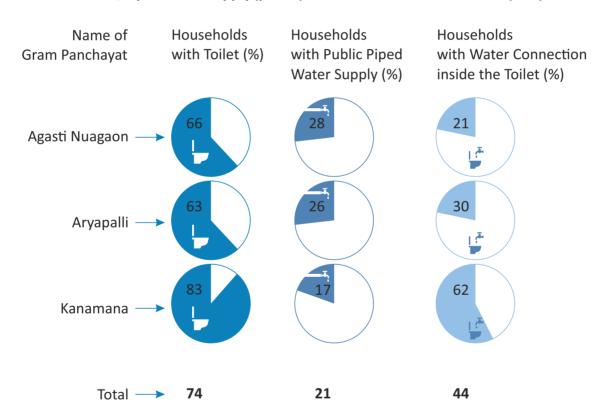
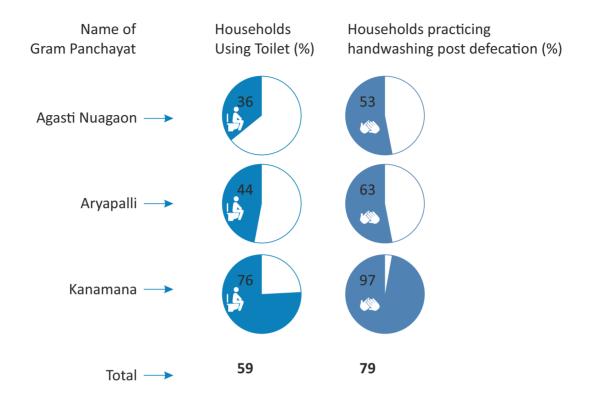


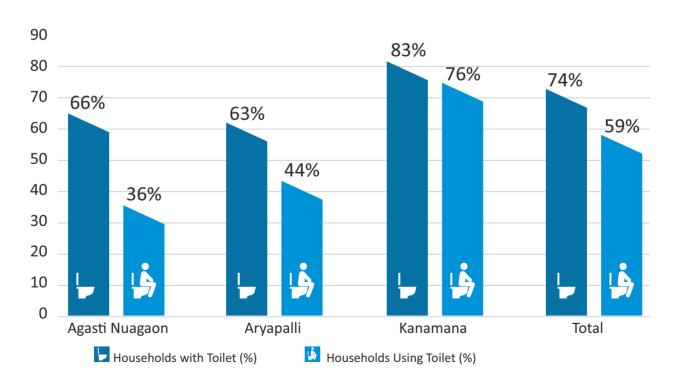
Table 3 details out the practice of using toilets and washing hands post defecation in the three Gram Panchayats. The percentage of households using toilets at 59% is very low. The percentage of households practicing handwashing post defecation is also not 100%. It must be mentioned here that collecting data on practices, particularly those related to hygiene are often subject to reporting bias. Factoring in the reporting bias too, the numbers reported in the assessment are quite low.

Table 3: Toilet use and handwashing practice (in %)



In Chart 2, we can see that the percentage of households using toilet is consistently lower than the percentage of household with toilet across all the three Gram Panchayats.

Chart 2: Access and Use of Toilet



In Chart 3, we see that there is the practice of handwashing post defecation even if the household does not have water connection inside the toilet. However, all households need to practice handwashing post defecation. This points to the need for hygiene awareness in the area of study, particularly in the Gram Panchayats of Agasti Nuagaon and Aryapalli.

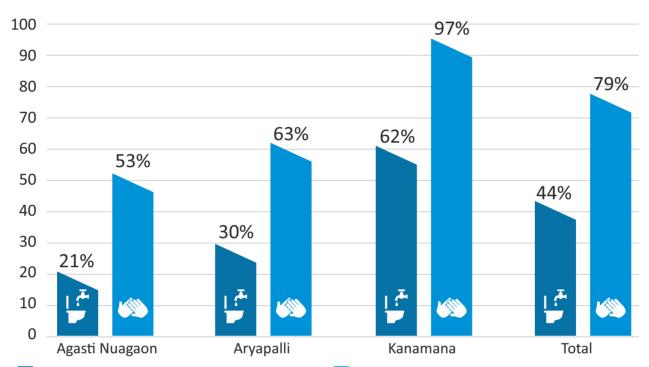


Chart 3: Access to water in toilet and practice of handwashing post defecation

Households with Water Connection inside the Toilet (%) 🚳 Households practicing handwashing post defection (%)

Prevailing Practices >>>

As the numbers suggest, not everyone in the three Gram Panchayats uses a toilet, even if they have access to one in the house. The qualitative study revealed that open defecation is still in practice in the area. The fact that many of the households that have toilet prefer to go out for open-defecation points to the prevalence of the age-old practice.

One of the reasons behind the reported low usage of household toilet may also be the lack of water connection within the toilet. 9500 of the 15900 households with toilet (60%) have water connection inside the toilet. Further, of the 12,600 households with toilet that use toilet, there are 9500 households that have water connection inside, i.e. 75%.

The households connected to the government piped water supply pay a monthly user fee for operation and maintenance of the facility. However, this user fee varies from one Gram Panchayat to another. For instance, the villagers of Aryapalli Gram Panchayat pay Rs. 100 per household per month, whereas, in Kanamana Gram Panchayat, the monthly user fee is Rs. 30 per person in the household per month. In Agasti Nuagaon no tariff collection is in place yet. As per the VHSNC members interviewed, the quality of water supplied through the government piped water scheme is safe for drinking purposes but the community remains suspicious of it, so use it sparingly.

The assessment reveals that there is an urgent need for hygiene awareness and behaviour change communication initiatives in Ganjam district. The PRIs shared their intention to work towards improving the hygiene by including in their annual plan items such as placement of dustbins in the common areas of the Panchayat, regular cleaning of village roads, wall paintings to spread awareness messages on WASH, etc.

Through Pragati, an attempt is being made to address the issue of hygiene from the demand as well as supply side. In terms of demand, community members, primarily the women self-help group members are being made aware of the need for hygiene for ensuring a healthy and thriving community. They are also being trained to use constitutional platforms to promote hygiene, and water and sanitation services. In terms of supply, to meet the heightened demand for soap and make it affordable, the women self-help groups have been trained in making organic soaps.

The villagers of
Kanamana Panchayat
are buying drinking
water on daily basis.
In a month, they are
spending at least
Rs. 600 for this.

Said by a VHSNC member, Kanamana Gram Panchayat

