

# Conference on "Sustainable sanitation: Evidence and Practice"

## Background

Access to safe sanitation, especially in the rural areas, emerged as a policy issue in the first five year plan of 1954 itself. However, by the 1980s little progress had been made. The Census of 1981 found that safe sanitation was accessed by no more than 1% of rural households, prompting the Government to launch the Central Rural Sanitation Programme in 1986. By 1991, rural sanitation coverage had increased to 9%. The need for faster progress was felt acutely and the scheme was restructured into the Total Sanitation Campaign in 1999. Budget allocations for rural sanitation increased 35 fold between 1999 and 2007-08. Access to latrines continued to rise albeit at a slow pace. As toilet access increased from 22% to 31% in rural areas between 2001 and 2011, other issues such as lack of usage and the need for behaviour change began to be recognized.

The focus on individual behaviour change to promote use of toilets with a low subsidy regime drew on the Medinipur experience in West Bengal and was the basis of the Total Sanitation Campaign (TSC), which began in 1999. With the 'discovery' of Community Led Total Sanitation (CLTS) in 2000 and the dissemination of its possibilities, the concept of collective behaviour change to promote Open Defecation Free (ODF) communities first entered policy with the Nirmal Gram Puraskar. A greater emphasis on ODF communities in Nirmal Bharat Abhiyan has evolved into the Swachh Bharat Mission, which sets for itself the goal of an ODF India. This has all however been accompanied by an ever increasing scale of subsidies for the construction of household toilets.

The Integrated Low Cost Sanitation (ILCS) programme, launched in 1980s was the first programme that specifically targeted urban areas. It aimed to convert dry latrines into pour flush latrines and construct new ones where none existed. However, it was limited to EWS (Economically Weaker Section) households only. Post ILCS, urban sanitation did not receive much attention other than being a small component in sanitation programmes and schemes. Jawaharlal Nehru National Urban Renewal Scheme (JNNURM) launched in 2005 by the Ministry of Urban Development (MoUD), is considered as the first integrated and holistic approach to address urban issues. It was a reform based policy to strengthen urban infrastructure and provide basic services in urban areas by increasing investment in water and sanitation infrastructure. Urban Infrastructure Development Scheme for Small and Medium Towns (UIDSSMT) under JNNURM focussed on sewerage and solid waste management as key components. These schemes and Missions gave an impetus to improve sanitation in urban India. Bringing urban sanitation to the forefront, the National Urban Sanitation Policy (NUSP) was released in 2008. It was the first policy which specifically addressed urban sanitation and recommended preparation of state sanitation strategies and city sanitation plans to align with the national policy.

A tectonic shift in urban sanitation came with the launch of Swachh Bharat Mission (SBM) in 2014. SBM (Urban) departs from the strategies of the past; it is the first urban development scheme on sanitation targeting all households in urban areas as beneficiaries who do not have access to toilets. It targets all 4,041 Statutory Towns (STs) and aims to eliminate open defecation (OD), eradicate manual scavenging and ensure modern and scientific municipal solid waste management. It is not a reform linked Mission. SBM (U) has six key components. These include: (1) Household toilets (2) Community toilets (3) Public toilets (4) Solid and liquid waste management (SLWM) (5) Information Education and Communication (IEC) and public awareness and (6) Capacity building, administrative and office expense (A&OE).

<sup>1</sup>The Swachh Bharat Mission Dashboard of Ministry of Housing and Urban Affairs reveals that SBM (U) aims to provide 66.42 lakh individual households toilets, 2.52 lakh community toilets, 2.56 lakh public toilets across urban India by 2019. <sup>2</sup> Of this, a total of 40.84 lakh individual toilets, 2.34 lakh community and public toilets have been completed. <sup>3</sup> In the last three years, 1338 cities across India and seven states namely, Haryana, Madhya Pradesh, Gujarat, Maharashtra, Chattisgarh, Jharkhand and Andhra Pradesh have been declared Open defecation free (ODF).

While SBM aims to end open defecation by universalizing construction and use of toilets, Atal Mission for Rejuvenation and Urban Transformation (AMRUT) focuses on providing sewerage facilities and septage management. It was launched for a period of five years in 2015 as a Centrally Sponsored Scheme (CSS) with a total outlay of Rs 50,000 crores. However, this mission will cover only 500 cities across the country with over one lakh population. It excludes over 3,500 towns. The components of the AMRUT consist of capacity building, reform implementation, water supply, sewerage and septage management, storm water drainage, urban transport and development of green spaces and parks. Cities under AMRUT have also been encouraged to set up Faecal Sludge Treatment Plants (FSTPs) under the component of sewerage facility and septage management.

Collection, treatment and disposal of faecal waste and septage management remains a challenge for Non-AMRUT cities in urban areas. Currently, 47% (Census 2011) of the urban households depends on onsite-sanitation system, which is expected to increase with the increase in dependence on onsite toilet facilities. To address this gap, National Policy on Faecal Sludge and Septage Management was launched in February 2017. The policy aims to provide and strengthen safe faecal sludge treatment and septage management. SBM, AMRUT and FSSP together seek to provide a sustainable sanitation value chain services to the urban population.

On the 2<sup>nd</sup> of October 2017, the Swachh Bharat Mission (SBM) completed 3 of its 5 year tenure to have an open defecation free India. Over this period, there has been significant movement in toilet construction in both urban and rural components of this national programme. 7 states have already declared their rural areas free of open defecation, and have constructed over 5.3 crore toilets for more than 70% of the households identified as needing them.

Government aside, much of civil society and the international donor community has joined hands to ensure comprehensive and sustainable resolution of India's sanitation problems. However, despite significant political will and visibility to the programme, numerous studies and commentators have found a number of systemic gaps in the mission implementation. Some of these include the access-usage gap, which widens as availability outpaces uptake, concerns with toilet technology and sustainability, mechanical approach to target completions in some catchments to the detriment of behaviour change efforts, and above all the deviation from norms essential to community approaches to sanitation.

## Rationale for the Conference

The experience from the implementation of SBM raises some important questions. First, is a question of state capacity: What happens when inherently inadequate systems are forced to move at an extraordinary pace to achieve ambitious targets? Is it possible for these systems to adapt? How can those managing the system on the ground respond? Are the effects of increased political backing for sanitation targets lasting or

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<sup>1</sup> More details available from: <http://moud.gov.in/cms/swachh-bharat-mission.php> retrieved on 26.11.2017

<sup>2</sup> More details available from: <http://www.swachhbharaturban.in/sbm/home/#/SBM> retrieved on 7.12.2017

<sup>3</sup> More details available from : <http://www.swachhbharaturban.in/sbm/home/#/SBM> retrieved on 7.12.2017

do they dissipate over a period as nominal results become visible? The conference will seek to engage with these broad themes. This continuing principal agent relationship between the Centre and the States and frontline bureaucracies is also an area of concern from the perspective of sustainability and credible outcome evaluations. How can one ensure that ODF declarations do not become an end in themselves under the current governance structure?

The second set of questions refers to the *process* of achieving the mission objectives. The policy is very clear in advocating the community approach to sanitation, but in many parts of the country, the implementation has been bureaucratic and top-down. How can these two seemingly contrary objectives be reconciled? How are frontline bureaucrats negotiating these contradictions? Is it possible for both objectives to be met together? These questions are relevant each time a government seeks to drive and manage community-driven approaches to development.

The third focal area explores community approaches to sanitation and the CLTS method. CLTS theorists and practitioners have questioned the continuing toilet subsidy within SBM. Are subsidies and sustainable behaviour change at the community level inimical, and if now, how can they be reconciled? The policy is placing greater emphasis on sanitation beyond ending open defecation through provision of toilets. The issues of sustainability, Faecal Sludge Management, and Solid and Liquid Waste Management, especially in urban areas, are coming to the fore. Can CAS be applied to these urban and the peri-urban contexts and can it be used to tackle the larger scope of safe sanitation including FSM and SLWM?

This conference will therefore bring together policy makers and practitioners across the different levels of the administrative spectrum to gain insights on community approaches to development, particularly in the case of sanitation, without restricting the discussion to the ongoing Swachh Bharat Mission. This gathering of policymakers and implementers to synthesize their respective experiences and observations would be most opportune to draw lessons for the future implementation of this and other programmes where the changes sought are by necessity bottom up. The specific objectives and framework of this conference are briefly described below.

## Objectives and focus areas

Given these questions, the objectives of the conference are as follows –

- To bring together experts on policy and ground implementers on a common platform, to create a common understanding of the policy and implementation challenges and the resultant gaps in outcomes.
- To share lessons and better practices by researchers and administrators on achievements with a focus on community approaches to sanitation, and finally,
- To attempt a reconciliation between the two objectives of timeliness and sustainability and chart a way forward for policy, implementation, and evaluation in the context of SBM.

The following are proposed as the focus areas of the conference –

1. Community approaches to sanitation – in theory and practice
2. Sustainability of safe sanitation practices
3. Unforeseen impacts of current approach on marginalized and vulnerable groups