Final Report

Independent Evaluation of Identified Projects under
Total Sanitation Campaign

Submitted to
The Director
Karnataka Rural Water Supply and Sanitation Agency
Bengaluru

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EXECUTIVE SUMMARY

The Total Sanitation Campaign (TSC) of the Government of India has been in operation for over a decade. The country has made significant progress in terms of coverage and outcomes. However, these achievements have been concentrated in a few states while others continue to lag significantly behind.

This report analyses the primary and secondary data related to TSC implementation at various levels in Karnataka for select districts to arrive at an understanding of the processes, outputs and outcomes and to identify correlations. It intends to compare the field data to the reported data to identify discrepancies. It also intends to analyze the major sections of the campaign related to IHHLs, School Toilets, Anganwadi Toilets, Community Sanitary Complexes (CSC), Nirmal Gram Puraskar (NGP), Solid and Liquid Waste Management to understand, evaluate and comment on their level of progress.

The major findings of the independent evaluation of the Total Sanitation Campaign in the selected districts of Karnataka based on their categories are as follows:

Individual Household Latrines (IHHLs)
- There seem to be differences between the reported and actual figures related to the total number of IHHLs constructed and total number of IHHLs functioning.
- Shimoga and Bangalore districts stand out in the reported IHHL figures as having consistently met their targets although Shimoga has the advantage of a low population compared to other districts.
- Based on actual collected data, Shimoga is seen to be performing the best and Bidar the worst in terms of IHHLs constructed and functioning. There is also an increasing trend in the number of unused toilets in the districts which have achieved close to 100% provision of IHHLs owing to the lack of water.
- The cost of construction of an IHHL is seen to be varying drastically across the districts. This is partly due to the non-existence of Rural Sanitary Marts (RSMs) in most of the districts. Distance from urban locations has also increased prices in certain regions.
- There seem to be discrepancies in the amount of subsidy provided and the reporting of the time when they were provided across most of the districts. This seems to be caused by institutional irregularities and inefficiencies. Subsidy is the major incentive that is driving the TSC campaign and hence much better monitoring and tracking in this regard is necessary.
Sanitation

Bidar and Raichur districts have the highest total student strength. The highest average number of students per toilet was noted in Bidar, Uttara Kannada and Shimoga followed by Bijapur, Chamrajnagar and Raichur districts. Only Bangalore Rural was seen to be better off with about 20 students per toilet.

- With exception of Bidar and Bangalore Rural districts, most of the toilets were functional. Accessibility to the toilets was generally seen to be good, except in the case of Bidar where the maximum respondents reported inaccessibility. In the case of regular maintenance and cleanliness the situation was problematical in Bidar and Raichur and relatively better in the other districts.

- Maximum open defecation was noted in Bidar and Shimoga districts and none in Bijapur and Davangere districts. The least availability of water facility was noted in Bidar and Raichur districts, with Davangere and Bangalore Rural districts being the best in this regard. The worst performing districts in terms of hand wash facility were Bidar and Raichur and the best performing was Davangere district.

- Thus Davangere emerged as the best performing district and Bidar as the worst performing district in the context of school sanitation.

Anganwadi Sanitation

- Bidar district had the maximum non-functioning Anganwadis. Bangalore Rural and Uttara Kannada had the highest total strength of children while Bijapur and Bidar had the lowest. Given the large number of children in the Anganwadis the average children using a single toilet were also high in Bangalore Rural and Uttara Kannada.

- It is notable that all the existing toilets were functioning, though several were not regularly maintained and cleaned in Bidar, Uttara Kannada, Chamrajnagar and Raichur districts.

- Toilets were generally accessible to the children though least so in Bidar, Uttara Kannada and Raichur districts. Hand wash facility was not seen to be available (except in the case of Davangere district where it was always seen to be available).

- Relatively less evident of open defecation and urination was noted and the availability of water was seen to be low except in Davangere district.
Community Sanitary Complex
- CSC seems to be helping in reducing open defecation in regions where people could not afford IHHLs. In Bijapur, Raichur and Uttar Kannada the number of households depending on CSC was identified to be high.
- There seems to be discrepancies related to the ownership and maintenance of CSC in some regions as to whether they should use GP money or tax the households separately.

Solid and Liquid Waste Management
- State of solid and liquid waste management is consistently poor in most of the selected districts. There is a strong need to integrate the importance of solid and liquid waste management to the households and also the problems caused by stagnant grey water.

District Support Units (DSUs)
- DSUs have been extremely crucial in the success of TSC implementation wherever they have been incorporated.
- Their role as a middle man has been very crucial in flow of information on both sides and has helped the departments in making more realistic action plans and also brought the concerns of the GP to them.
- They have also assisted the GPs in accelerating the TSC & NGP implementation process by assisting them in their IEC activities and also facilitating bulk procurement of materials for IHHL construction in certain regions.
- In Bangalore district, because of the use of members from the education department the IEC process has been very well executed. The DSU members even created CDs and had many rallies to accelerate the TSC implementation.
- There seems to be a healthy completion between the DSU members of adjacent talukas to make more GPs under their purview to qualify for NGP, which is helping the overall TSC implementation.
- Considering their immensely crucial role in the TSC implementation, the DSU personnel need to possess strong leadership capabilities and also need to be proactive. There is also a need to create a strong monitoring and appraisal mechanism for the DSU personnel, considering the multiple responsibilities they shoulder.
Education and Communication (IEC)

- There is seen to be a strong co-relation between the extent and nature of IEC activities and the level of success of the TSC campaign.
- The nature of the IEC activities based on how they engage the target audience (active or passive) is noted to be having an impact on the level of understanding of the target audience. In districts where TSC has been implemented successfully, the trend has been to have strong activities like meetings, skits, plays etc to engage and involve the residents and later follow it up by secondary drivers like hoardings etc. The IEC message needs to be also always available to the residents and beneficiaries through the use of tertiary drivers like TV and radio advertisements.
- The primary reason for most of the respondents for using the toilets seems to be enhanced hygiene as in many places IEC has been successful in enlightening the target audience with regards to the co-relation between health and sanitation.
- IEC campaigns which are active in nature and also the word of the village heads or officials seem to go long way in self-motivating personnel to construct IHHLs.
- Most of the GP personnel have understood the importance of washing hands with soap and state that it mainly helps in improving health and hygiene.

NGP

- Inception of NGPs has greatly accelerated the TSC campaign, but needs strong canvassing and leadership at various level to get initiated strongly.
- Visit to adjacent NGP regions has helped the aspiring GPs in understanding what has worked and what has not worked in achieving NGP.
- In most of the cases, the success of both TSC and NGP seems to be very strongly related to the involvement of strong leadership and commitment by the villagers. In regions where strong leadership was identified, GPs achieved NGP against all odds and in places where the Sarpanchs neglected the campaign it did not take off even if the villagers were enthusiastic about it. Also carrying the intensity post change in leadership seems to be crucial for its success.

The NGP is purely a target based process and in many cases rather than inculcating the importance of hygiene and sanitation, the GPs are after achieving physical targets, which are
leading to construction of IHHLs which are not appropriate. Hence many of the people are moving back to open defecation.

Recommendations

- There is a strong and immediate need for the introduction of RSMs to stabilize and bring down the cost of construction materials. The costs are particularly high in regions far from urban centers which are actually also most reluctant to change from open defecation. Measures must be taken to make affordable material available to remote regions.

- There is still lot more scope for using children to spread knowledge related to sanitation and hygiene.

- Adding topics related to hygiene in the course content, giving them exercises related to physical models of IHHLs and conducting student fairs to increase sanitation awareness can be explored.

- Providing proper sanitation facilities for young children is extremely crucial for the people to experience the change in their health conditions. There is a need to monitor them related to sanitation facilities as in many places they seem to exist independent of the school.

- There is a need to resolve the issues related to operation and maintenance of CSC as in many regions this is leading to poor standards.

- The state of solid and liquid waste management is consistently poor in most of the selected districts. There is a strong need to integrate the importance of solid and liquid waste management to the households and also the problems caused by stagnant grey water.

- The state of IEC activities scheduling in GPs needs lot more elaborate planning. The primary, secondary and tertiary drivers of IEC processes need to well distributed to achieve a more sustained and long lasting spread of knowledge related to sanitation and hygiene.

- The IEC activities need to be more consistent and performed over a much longer period of time by multiple agencies as it takes a long time for the information to be understood in regions that are performing poorly.
• The sense of pride increases in the villagers if they are asked to share their success stories with other villagers. Arranging frequent trips to high sanitation level villages helps and improves the awareness of both the tourists and the demonstrator.

• As experienced by many communities pursuing TSC, motivating change in the last 10% is the most hardest and communities need to inculcate active vigilance and other pro-active activities to motivate and change the behavioral patterns of all the villagers.

• Quality of construction material, technology options and transparency in subsidy allocation are other important factors that are acting as bottle necks for the development of the campaign in these regions.

• It can be observed from the diverse results of TSC in different districts that leadership is a very strong motivational factor and needs to be nurtured and encouraged, as it helps a lot in improving the state of the campaign. It also needs to be monitored so as to make sure that any one particular faction or group in the region is not favoured.

• There is a very important need to monitor and evaluate the changes in the NGP awarded villages as the study observed that most of them are falling back to old habits.

• Villages which have reached NGP status need to be educated towards improving their condition related to solid and liquid waste management as a next step to zero defecation.

• It was observed that in some Gram Panchayats (GPs) that the construction of the IHHLs was happening entirely within the subsidy amount, leading to poor quality of the structure. This is resulting in the structures becoming redundant and people moving back to open defecation. In this regard, standardizing the IHHL construction process and making sure that it is a community driven effort might improve the situation.

• There is a need to include in the IEC activities, best practices related to IHHL maintenance as they were found in many occasions to be poorly maintained.

• Maintenance of the school toilet complex needs to be clearly defined and need to be routinely checked by GP officials to make sure they are properly maintained.
Chapter 15
RECOMMENDATIONS

The Recommendations based on the independent evaluation of the Total Sanitation Campaign in the selected districts are presented in this chapter. The recommendations are broadly divided into two sections; section 1 provides region specific recommendations and section 2 provides specific recommendations related to individual TSC components.

15.1. Region Specific Recommendation
Based on the data and analysis of survey results, it was identified that the selected 8 districts could be mainly classified into three categories. Uttar Kannada, Bangalore Rural and Shimoga were belong to group 1 in which most of the GPs average more than 70% completion rate with regard to IHHL construction. Davangere, Chamrajanagar, Raichur and Bijapur belong to the group 2 in which most of the GPs average between 30% to 70% completion rate with regard to IHHL construction. Group 3 has districts in which most of the GPs average below 30% IHHL completion rate and only Bidar from the selected districts falls into this category.

- Group 1 (Uttar Kannada, Bangalore Rural & Shimoga) > 70%
- Group 2 (Davangere, Chamrajanagar, Raichur & Bijapur) > 30% & < 70%
- Group 3 (Bidar) < 30%

15.1.1. Group 1 Recommendations:
- As most of the regions in group 1 GPs have achieved above 70% IHHL construction rates, the most important recommendation for this group is to maintain the motivation levels in its villagers by use of innovative methods like IEC activities and speeches by prominent leaders.
- There is a need to improve the sanitation level to the next phase by making the second stream of IEC activities in the region more holistic and providing more stress on SWM activities and improving community cleanliness levels.

Independent Evaluation of Identified Projects under Total Sanitation Campaign
• The sense of pride increases in the villagers if they are asked to share their success stories to other villagers. Arranging frequent trips to high sanitation level villages helps and improves the awareness of both the tourists and the demonstrator.

• As experienced by many communities pursuing TSC, motivating change in the last 10% is the hardest and communities need to inculcate active vigilance and other proactive activities to motivate and change the behavioral patterns of all the villagers.

15.1.2. Group II Recommendations

• The districts in group II have achieved an IHHL completion rate ranging between 30 to 70% and belong to the most important group that needs to be concentrated upon, as they have the potential to reach 100%

• The major problem identified in most of the GPs belonging to this group was the lack of a coordinated social mobilization and IEC campaign. Although some of the GPs in these districts had done exemplary work there is a need to intensify or initiate a second wave of IEC campaign activities in these regions to further improve the sanitation level in these regions.

• Quality of construction material, technology options and transparency in subsidy allocation are other import factors that are acting as bottle necks for the development of the campaign in these regions.

• Providing Rural Sanitary Marts, particularly low cost models of IHHL designs might accelerate the sanitation drive in these regions.

• It can be observed from the diverse results of TSC in different districts that leadership is a very strong motivational factor and needs to be nurtured and encourage, as it helps a lot in improving the state of the campaign. Monitoring to ensure that any one particular faction or group in the region is not being favoured is required.
15.1.3. Group III Recommendations

- There is an immediate need to rethink and design the TSC approach in these regions as the impact of TSC activities on the sanitation levels within the region have been minimal.
- The roles and responsibilities of the NGOs, SHGs and DSUs working in these regions need to be clearly specified and their performance needs to be monitored more closely and frequently.
- It was observed during the survey that the interest levels of the GP officials in TSC to improve sanitation in their respective GPs was not of satisfactory levels and need to be addressed.

15.2. Component wise specifications

Specific recommendations related to individual components of TSC in the selected districts are as follows:

15.2.1. IHHLs

- There is a strong and immediate need for the introduction of RSMs to stabilize and bring down the cost of construction materials. The costs are particularly high in regions far from urban centers which are actually also most reluctant to change from open defecation. Measures must be taken to make affordable material available to remote regions.
- There is a need to monitor the subsidy allocation and distribution process.
- It was observed that in some GPs the construction of the IHHLs was happening entirely within the subsidy amount, leading to poor quality of the structure. This is leading to the structures becoming redundant and people moving back to open defecation. In this regard, standardizing the IHHL construction process and making sure that it is a community driven effort might improve the situation.
- There is a need to include in the IEC activities, best practices related to IHHL maintenance as they were found in many occasions to be poorly maintained. Poor quality maintenance is making many of the IHHLs completely unusable. This is causing many of the beneficiaries to move back to open defecation.
15.2.2. School Sanitation

- There is scope for using children to spread knowledge related to sanitation and hygiene.
- Adding topics related to hygiene in the course content, giving them exercises related to physical models of IHHLs and conducting of student fairs to increase sanitation awareness can be explored.
- The use of the student community for active policing against open defecation has been tried in several places and has been immensely successful.
- Maintenance of the school toilet complex needs to be clearly defined and need to be routinely checked by GP officials to make sure they are properly maintained. It was observed in some regions that the school toilets were in bad condition because of shortage in water supply. The responsibility regarding maintenance activities in schools need to include water charges in cases of short supply, sanitation charges etc.

15.2.3. Anganwadi Sanitation

- Providing proper sanitation facilities for young children is extremely crucial for the people to experience the change in their health conditions. There is a need to monitor them related to sanitation facilities as many places they seem to be existing independent of the school.
- Maintenance of the anganwadi toilets needs to be clearly defined and need to be routinely checked by GP officials to make sure they are properly maintained. It was observed in some regions that the anganwadi toilets were in bad condition because of deficiency in water supply. The responsibility regarding maintenance activities in anganwadi needs to include water charges in cases of short supply, sanitation charges etc.

15.2.4. Community Sanitary Complexes

- There is a need to resolve the issue related to operation and maintenance of CSC as in many regions this is leading to poor standards.
- Community sanitary complexes hold lot of potential in regions having very high BPL populations who are not able to afford IHHLs care must be taken to make sure that the CSCs are constructed in regions that are accessible to all the people within the region especially women.
• Who pays for the water supply charges and sanitation charges particularly in cases of water shortage need to be clearly defined. This is particularly important because in many regions it was observed that lack of water supply and poor maintenance was making many of the CSCs unusable.

15.2.5. Solid and liquid waste management
• State of solid and liquid waste management is consistently poor in most of the selected districts. There is a strong need to integrate the importance of solid and liquid waste management to the households and also the problems caused by stagnant grey water
• The difference and dangers of black and grey water and their disposal are important concepts that need to be covered in the IEC campaigns. Also based on interactions during the study is was inferred that most of the diseases related to hygiene are recurring due to stagnant black and grey water in house premises.

15.2.6. IEC
• The state of IEC activities scheduling in GPs needs lot more elaborate planning. The primary, secondary and tertiary drivers of IEC processes need to be well distributed to achieve a more sustained and long lasting spread of knowledge related to sanitation and hygiene.
• The IEC activities need to be more consistent and performed over a much longer period of times by multiple agencies as it takes a much longer period for the information to be understood in regions that are performing poorly.
• The roles and responsibilities of different agencies (NGO, SHG, DSU) need to be clearly defined and executed over a period of time.

15.2.7. NGP
• It was observed that in many cases, GPs having very low performance in TSC were awarded NGP status. It is necessary to standardize the NGP process more rigorously and thoroughly.
• There is a very important need to monitor and evaluate the changes in the NGP awarded villages as the study observed that most of them are falling back to old habits.
• Villages which have reached NGP status need to be educated towards improving their condition related to solid and liquid waste management as a next step to zero defecation.
• The NGP award being a point based award where in if the village achieves zero defecation at a given period needs to be revisited and needs to be made more time based and based on more attributes.

• Increasing the visits of non NGP members to NGP villages increases awareness in both the parties, the non NGP members understanding what went right and how to achieve it and NGP members experiencing the pride of their village in how they achieved it.