

The Government Effort towards Rural Sanitation since Independence

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Abstract: Sanitation is directly related to human health. The creativity of an individual is associated with health. Human health is very vital part for increasing the growth of economy. The government has been taken many initiatives in this direction since independence. UNICEF (United Nations International Children's Emergency Fund) has conducted a study to evaluate the economic impacts of the Swachh Bharat Mission-Gramin in rural setting on the request of Ministry of Drinking Water and Sanitation. It was found that the cumulative benefits of Rs. 50,000 per year was received by an average households in Open Defecation Free village as well as increase of Rs. 19,000 seen in property of that households where toilet was built (Summary Report of Ministry of Drinking Water and Sanitation). The objective of this paper is to study about the scheme Swachh Bharat Mission –Gramin and to analyze the open defecation free situation of country in rural areas. The medical cost has been declined, time, life saved and property value increased due to this scheme. It was found that if budget allocation amount will increase the physical target of the scheme can be achieved at fast pace within stipulated time period. The number of toilets in rural areas increased after 2014.

Keywords: Rural Sanitation, Open Defecation, Swachh Bharat Mission-Gramin

Swachh Bharat Mission- Gramin

The concept of sanitation is related to human health. As we all know that the working capacity, productivity of an individual associated with their health. The productivity of a person is related to the growth rate of economy. Thus, health becomes more important. Health comes under social infrastructure also. The high growth rate of economy depends on both social and economic infrastructure. Safe sanitation incorporated in itself disposal of human excreta, use of toilet and eradication of open defecation and proper, secure management of solid and liquid waste. Contaminated drinking water sources, food with pathogen-laden human waste is a major reason of diarrhea, and can be influenced by cholera, trachoma, intestinal worms, malaria, etc. Poor sanitation has negative impact on children who are below age of five because their immunity level not able to fight with many diseases occurred due to this. Severe diarrhea is the second large killer of children especially in developing countries. It kills 1.5 million children per year. Poor sanitation and inadequate waste management had negative impact on environment because untreated sewage flowed directly into water bodies. It is polluted the water bodies as well as destroying the marine ecosystems. It is caused so many diseases. A study was conducted by the World Bank which stated the absence of toilets and conventional sanitation cost India 6.4% of its GDP in 2006. In nutshell, the economic impact of poor sanitation for India is nearly USD 38.5 billion every year under health, education, access time and tourism. . Initially, the sanitation programme was launched in 1954 as a part of First Five Year Plan. The census of 1981 stated that the rural sanitation coverage was only 1%. The International Decade for Drinking Water and Sanitation was started to provide required emphasis on rural sanitation. The Central Rural Sanitation Programme was launched in this direction in 1986 to enhance the quality of life of rural habitats. It aims to provide privacy and dignity to women also (Guidelines for Swachh Bharat Mission (Gramin) 2017, Ministry of Drinking Water and Sanitation, www.sbm.gov.in). Mahatma Gandhi also put his efforts to aware the people on the importance of health and sanitation Government of India started the demand driven approach the name of the scheme was Total Sanitation Campaign in 1999. It was restructured into Nirmal Bharat Abhiyan. The monetary aid was provided to the beneficiaries for constructing the toilet under the scheme. The government has initiated Nirmal Gram Puraskar to provide the speed to the Total Sanitation Campaign. The great initiative has been taken by government in 2014 regarding to speed up the efforts to get universal sanitation coverage and to put the focus on sanitation Swachh Bharat Mission-Garmin was launched in 2014 to achieve universal sanitation coverage and eradicate open defecation by October 2, 2019. Previously, this scheme was known as Nirmal Bharat Abhiyan. Swachh Bharat Mission is running into two sub-missions-Swachh Bharat Mission (Gramin) and Swachh Bharat Mission (Urban). India is a country where still larger number of population is practicing open defecation. Many people of country considered it as a national awkwardness revolutionary step was required to eradicate open defecation for keeping sanitation and people safe, secure and healthy.

Objectives of Scheme

- Eradication of open defecation ,manual scavenging
- Municipal Solid Waste Management which would modern and more scientific
- To put efforts on behavioural change regarding healthy practices and sanitation
- To spread awareness among people regarding linkages between health and sanitation

Components of Swachh Bharat Mission

- Start-up Activities
- Information, Education, Communication

- Capacity Building
- Construction of Individual Household Latrines
- Availability of Sanitary Material-through Rural Sanitary Marts, Production Centers, Self Help Groups
- Provision of Revolving Fund at the District
- Micro Financing of Construction of Toilets
- Community Sanitary Complex
- Equity and Inclusion
- Solid and Liquid Resource Management
- Administrative Charges

Open Defecation and its Impact

The threat on the life of rural women especially young girls more in rural area whenever they opted open defecation and its negative impact also found on their health. It is matter of shame for especially young girls. There is threat of attack by animals on villagers during open defecation. They have to face difficulties in rain and dark. It imposes more challenge for the aged and disabled persons.

Table 1: Percentage of Households with Toilets (National Level)

Year	Rural	Urban	Total
1991	9%	64%	24%
2001	22%	74%	36%
2011	31%	81%	47%

Source: prsindia.org (The PRS blog Swachh Bharat Mission)

The above table 1 shows the percentage of households with toilets. This number has been increased both urban and rural areas. This percentage is still remained low in rural areas need to put more efforts in this direction.

Table 2: Percentage of Rural Households with Toilets across the States

State	2001	2011	% Change
Andhra Pradesh	18	32	14
Arunachal Pradesh	47	53	5
Assam	60	60	0
Bihar	14	18	4
Chhattisgarh	5	15	9
Goa	48	71	23
Gujarat	22	33	11
Haryana	29	56	27
Himachal Pradesh	28	67	39
Jammu and Kashmir	42	39	-3
Jharkhand	7	8	1
Karnataka	17	28	11
Kerala	81	93	12
Madhya Pradesh	9	13	4
Maharashtra	18	38	20
Manipur	78	86	9
Meghalaya	40	54	14
Mizoram	80	85	5
Nagaland	65	69	5
Odisha	8	14	6
Punjab	41	70	30
Rajasthan	15	20	5
Sikkim	59	84	25
Tamilnadu	14	23	9
Tripura	78	82	4
Uttar Pradesh	19	22	3
Uttarakhand	32	54	23
West Bengal	27	47	20
All India	22	31	9

Source: www.prsindia.org

The above table 2 shows that positive change was seen in top four states Punjab, Haryana, Goa and Uttarakhand. There was no change found in Assam from 2001 to 2011. Many states such as Uttar Pradesh and Madhya Pradesh performance were very low during this decade.

H0- There is no correlation between actual expenditure on rural sanitation and budgeted amount.

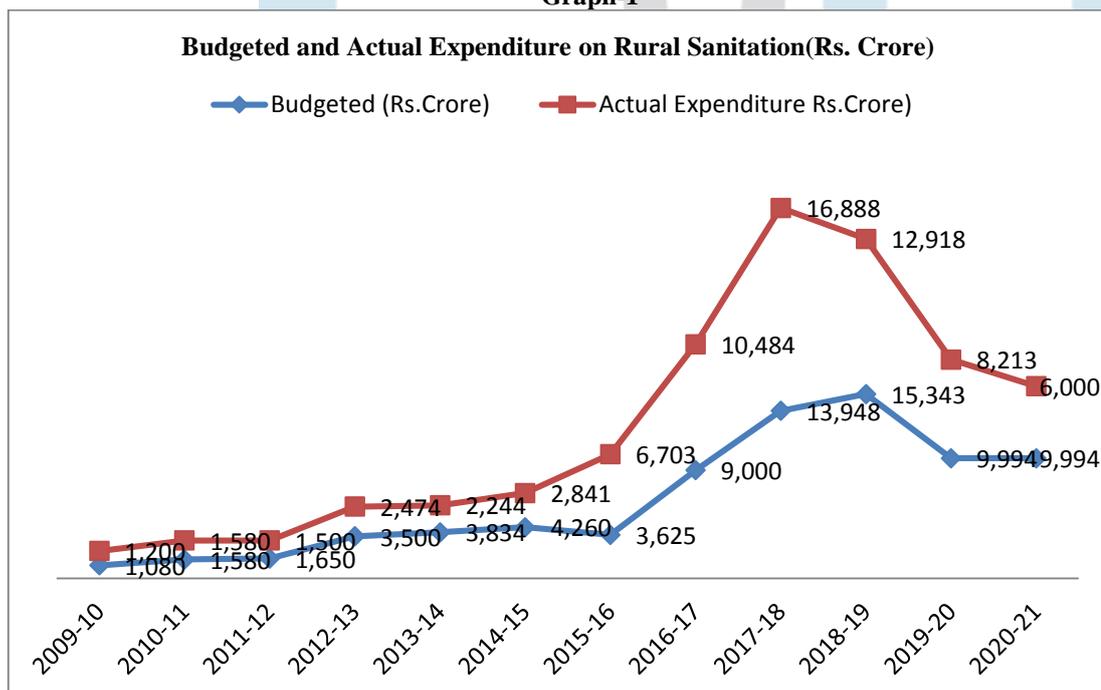
H1- There is correlation between actual expenditure on rural sanitation and budgeted amount.

Table 3: Budgeted and Actual Expenditure on Rural Sanitation (Rs. Crore)

Year	Budgeted	Actual Expenditure
2009-10	1,080	1,200
2010-11	1,580	1,580
2011-12	1,650	1,500
2012-13	3,500	2,474
2013-14	3,834	2,244
2014-15	4,260	2,841
2015-16	3,625	6,703
2016-17	9,000	10,484
2017-18	13,948	16,888
2018-19	15,343	12,918
2019-20	9,994	8,213
2020-21	9,994	6,000
CAGR	20.37%	14.35%

Source: Demand for grants 2021-22 Analysis: Jal Shakti

The above table 3 shows the budgeted and actual expenditure amount on rural sanitation over twelve years. The budgeted and actual expenditure amount both were increased from 2012-13 to 2017-18 and decrease was seen in subsequent years. The reason may be the unspent balances of previous years or something else. The correlation (Pearson correlation coefficient) was applied between actual expenditure and budgeted amount. The value of R is 0.9133. It means that there is strong relationship between actual expenditure and budgeted amount. The null hypothesis is rejected. The value of r square (the coefficient of determination) is 0.8341. If the government enhances the budget allocation and actual expenditure the positive impact can be seen on the performance of rural sanitation scheme.

Graph-1**Table 4: Coverage Status of IHHL (Individual Households Latrine)**

Years	Overall Coverage (in %)
2014-15	38.7
2015-16	50.85
2016-17	64.92
2017-18	84.19
2018-19	98.28
2019-20	100
2020-21	100

Source: www.sbm.gov.in (Note: Sanitation coverage is based on Households reported on the MIS)

The above table 4 shows the overall coverage in percentage under Swachh Bharat Gramin Mission from 2014-15 to 2020-21. It can be seen from above table the percentage of coverage has been increased over the years. Open Defecation Free districts number are 711 and around 12, 03992 toilets constructed since 2nd October, 2014 to 2021-22.

Conclusion

It can be concluded that the number and percentage of toilet constructed increased after 2014 in rural areas as sanitation has been make mass revolution by Prime Minister Narendra Modi. The budget allocation and actual expenditure amount was increasing at slow place before 2014-15 but after this year the actual expenditure has been increased at a fast pace. There is positive correlation between actual expenditure and budget allocation and positive impact can be seen on the physical performance of rural sanitation. But, there is huge gap existed between need and actual amount received for spending over the scheme. It will create hindrance in achieving the goals of the scheme within stipulated time period. There is need to put more effort in inclusive manner on behavioural change of rural people. The quality assurance is required in Individual Households Toilet. This scheme has more positive impact on the life of women folk.

Suggestions

- The government should focus on behavioural change through more innovative ways.
- There is need to work on supply side of this initiative and try to take feedback of rural citizens that what kind of challenges faced by beneficiaries after having toilet.
- The provided aid should enhance for constructing sustainable toilets and concern should be on environment also.
- The community toilet should be promoting more in rural areas.
- The Gram Sarpanch should work on more in spreading more information regarding government initiatives.
- The awareness programme should run in schools and they have to provide information about the benefits of use of toilets.

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