Physical Environment (PE): Brief 2



Making home-based work environments safer, healthier and productive. Experiences and insights from MHT's work.



Improve access to individual water and sanitation in informal settlements

CONTEXT

According to a recent report by WaterAid, a staggering 3.5 crores (355 million) women and girls are still waiting for a toilet in India (WaterAid, 2017). Only 40.9% of households in the urban areas used piped water into dwellings as the primary source of drinking water (MOSPI, Government of India, 2019). 19.3% of urban households travel each day to collect water, with some traveling up to 1.5 km a day one way (Kapil, 2019). With two-thirds of the global population projected to be living in cities by 2030 - many in informal settlements with limited infrastructure- access to drinking water and safe sanitation becomes a critical aspect in improving the quality of life in fast-growing urban environments. Therefore, of particular importance is the need to integrate safe and inclusive sanitation systems into broader urban development planning.

Beside its health consequences, sanitation has environmental, economic and social implications, especially in the case of women and young girls. They are more exposed to the burden of inadequate sanitation as they compromise their safety and dignity each day to avail basic levels of sanitation hygiene. From waking up early to fetch water, cooking, cleaning, and assisting the old and children to the toilet eats up the productive work time of home-based workers. The time spent traversing long distances to access water and toilets is time lost in productive work at home.

The State is the most prominent actor in the Water, Sanitation, and Hygiene (WASH) sector in urban areas as the funder, policy-maker, and service provider. The Government of India has over the years rolled out schemes like Swachh Bharat Mission (SBM) to drive the impetus for sanitation change. The SBM largely focused on eliminating open defecation by facilitating access to toilets (individual or community). However, addressing sanitation issues in urban areas should not solely aim at eliminating open defecation; rather, it implies improving living and working conditions in highly dense and contested environments. Slum settlements face frequent waterlogging, sewage water mixing with potable water, and inadequate waste management. The subsequent health expenditure arising from waterborne diseases compounds their financial burden and fosters an unfavorable environment for household and livelihood activities. The benefits of functioning toilets, sewage pipelines, and safe water supply need to be highlighted and encouraged through continual dialogue with the governing bodies. Women homebased workers are the worst affected due to greater time spent in the household premises, facing exposure to unsanitary and hazardous environments.

MHT'S APPROACH

For the past twenty-five years, Mahila Housing SEWA Trust (MHT) has been working to bridge the gap between government and slum residents by mobilizing communities and empowering them to demand better services. MHT also works closely with local governments to design and implement sanitation programs targeted at informal settlements. Their journey in driving sanitation change at scale started with the Parivartan Slum Network Program (SNP) with the Ahmedabad Municipal Corporation (AMC), where they supported close to 40,000 households across 41 slums to avail a package of integrated services of water, sanitation, waste management, and paved roads. MHT has had a significant impact on the sector. It has enabled more than 1 lakh (0.1 million) families across nineteen cities to get improved access to sanitation. Borrowing from their years of grassroots experience, MHT has arrived at a comprehensive framework for action to improve sanitation in urban settlements which includes three distinct but interconnected elements: community capacity, physical infrastructure, and sanitation behaviour ((Mahila Housing Trust, 2018, 12).

Mobilizing communities to exercise citizenship and demand services

Community capacity is strictly intertwined with access to sanitation services in urban areas. Given that sanitation operates as a system at both the city and community level, local residents need to come together to develop a shared understanding of sanitation problems and how they affect the collective welfare. It demands concerted efforts from all community members, who have to cooperate and contribute financially to the installation and maintenance of shared infrastructure, including water and drainage networks. It also necessitates an enabling environment whereby even citizens from disadvantaged communities are aware of their rights and exercise voice and leadership to make demands on their government.

Since its inception, MHT has been focusing on building social capital in communities by instituting and training collectives of grassroots women as Community Action Groups (CAGs). MHT has constituted 270+ CAGs who are taking collective action to improve sanitation and living and working environments in their communities. In Ahmedabad, women and teenage girls are leading sanitation initiatives by conducting surveys, participating in surveillance drives, and registering complaints and grievances. This encourages more participants to join hands and mitigate challenges arising from poorly maintained sanitation services.

Supporting construction of individual sanitation facilities

When it comes to service provision in slums and informal communities, most cities focus largely on "common/shared services". MHT is a strong advocate of "private sanitation" and views it as fundamental to furthering women's health, productivity, and overall well-being. MHT plays a crucial role in linking lowincome communities to government programs like the SBM to support the construction of individual toilets. MHT guides the procedural requirements like making applications, locating toilets, following up with governing bodies, availing designated subsidies, and constructing toilets as per the right specifications. They also equip the community members with basic technical knowledge to monitor the construction of toilets. MHT helps mobilize the community to hire an external contractor, through the monetary incentives given under the SBM, to undertake the construction of toilets. Where required MHT also supports households with loans to pay the initial cost of constructing toilets.

Connecting communities to water and sanitation networks

An integrated strategy to ensure total sanitation implies not only toilet construction but also access to city-level infrastructures such as safe water supply and wastewater treatment systems. The two most critical constraints that hamper linking informal settlements to city-level networks are that of the "informal" nature of the tenure and the dense urban fabric with very narrow lanes within the settlements that do not support the laying of a pipeline as per standard norms. In Delhi for instance, applications for household toilets through the city's online portal are only allowed if the potential beneficiary is in possession of a land tenure certificate. The provisioning of legal piped water supply in Ranchi and Jaipur is conditional on a land-lease contract as well.

MHT's interventions in "delinking tenure from service delivery" stand at the forefront of their advocacy measures. For instance, the "100 NOC Scheme" for slum residents was an initiative by the AMC which allowed them to apply for legal individual sewage and water connections. MHT coordinated between the AMC and slum residents to facilitate the application process and trained community leaders for the same (Mahila Housing Trust, 2018, 24). MHT also plays the crucial role of community-level facilitator to mobilize and convince households to remove individual encroachments on streets and come up with negotiated solutions putting in community infrastructures like pipelines and paved roads.

Working with smaller cities in scaling up sanitation delivery

MHT is expanding its work in water and sanitation to smaller cities and towns. The Central Pollution Control Board's assessment reveals that small to mid-size cities in India have lower rates of water connection and wastewater facilities. For example, in Maharashtra, the per capita water supply for Class II towns is only 106.74 MLD as compared to 130.45 MLD in Class-I towns (Central Pollution Control Board, 2009). The local government in smaller cities and towns plays a central role in expanding service delivery. However, in smaller cities, governments often lack the knowledge, resources, and infrastructure needed for adequate services, in comparison to larger cities. MHT's role in smaller cities has thus expanded from engaging with and mobilizing communities to build the capacity of local governments to undertake city-level initiatives in water and sanitation. Since lack of adequate funding is the primary challenge in smaller cities, MHT supports cities in accessing funding from State and National Government, leveraging alternative finance like Corporate Social Responsibility (CSR) and also augmenting their revenue through improving property tax recovery.

Box 1

Building capacities of local governments to drive sanitation change Amalner, Maharashtra

Amalner is a small town with a population of 1 lakh (0.1 million) situated on the banks of the Bori River in the Jalgaon District of Maharashtra. With a hot and dry climate, Amalner experiences minimum rainfall and water scarcity. Water is supplied from the river once in five days for two hours a day by the local government: Amalner Nagar Palika (ANP). MHT has been supporting the ANP since 2017 to improve city-wide access to water and sanitation. Their role in Amalner started with assistance in building toilets in slums under SBM. Recognizing that toilet provision can't be realized without addressing the issues of water scarcity, MHT initiated a project for reviving traditional water systems and wells in partnership with the local government. MHT acknowledges that smaller cities often do not often have adequate funds for infrastructure projects. In this case, it leveraged alternate financing in the form of Corporate Social Responsibility (CSR) funds. In the process, MHT built capacities of the administrative staff in availing State and National funding, in preparing proposals to raise additional finances and in utilizing their financial resources optimally to fund measures for further impact. MHT also engaged elected representatives, especially women councilors, and built their capacities to exercise effective leadership and invest in water-sanitation infrastructure in their jurisdictions.

The Amalner case study has been a successful learning experience for MHT's interventions in smaller cities. They cultivate a system that enables the local governments and the communities to finance, construct, operate and maintain water and sanitation infrastructure. MHT also trains and spreads awareness about the existing issues to the slum households, thus ensuring demand for adequate water and sanitation facilities. MHT is now being invited by local governments of other smaller cities like Manmad, Pachora, Chandwad, and Jalgaon for implementing similar projects.



"We were moved to the remote area of Sawda Ghevra at the outskirts of Delhi in 2006. All we received was a plot of land with no roads and no access to services. MHT started working with us in 2010. To address the immediate problem of water, MHT lent us funds in groups of four to six to construct borewells. Later they also supported us in the construction of toilets. We now have a legal piped water connection and save a lot of time."

LEARNING AND DIRECTION OF FURTHER ADVOCACY

1) The association of land ownership status to the ability of citizens to avail basic infrastructure services is a major hindrance in improving sanitation in informal communities. The provision of services like water and sanitation should not depend on the land tenure status. For instance, cities in Gujarat are extending services in informal settlements regardless of their tenure. A system that delinks tenure to the right to basic services for low-income communities should be pushed to realize the faster and widespread impact of adequate water and sanitation facilities.

2) In recent years, with flagship schemes like Pradhan Mantri Awas Yojana (PMAY), the focus for improving habitat conditions for the poor have shifted to constructing housing units. This has surpassed the intention to extend basic infrastructure services like water and sanitation to existing slum colonies in dense urban settlements. Also, while national policies and grants have been crucial in providing an impetus to sanitation change in the country, the push to realize scalable interventions in dense informal communities has to come from local governments. Local governments should have the financial and technical capacity to undertake service delivery and not rely solely on grants and subsidies. To realize a positive impact, solutions should be locally-driven, with the decision arising from contextual challenges. The SNP program in Ahmedabad was a homegrown initiative that flourished without external funding and demonstrated the willingness of households in slum communities to pay for services. It is important to bring back focus on integrated slum up-gradation.

3) Change towards inclusive and sustainable sanitation is possible when state and non-state agents work together as partners. Grassroots organizations working on habitat issues have to act as an interface between governments and communities, not just providing community development inputs, but also co-creating solutions while recognizing resource and capacity challenges of local governments.

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These briefs have been created for WIEGO and MHT by City Collab under the Urban Policies Program.

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