



# Rural Water and Sanitation Budgets for Schools, Anganwadi and Health Centres: An Assessment of Nuapada, Odisha

Discussion Paper

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## I. INTRODUCTION

Nuapada, a part of undivided Kalahandi district till early March 1993, is now a part of Koraput, Balangir and Kalahandi (KBK) districts and marked by severe impoverishment on many of the socio-economic indicators. In Nuapada, the content of fluoride in the ground water is higher than the recommended safe level; water quality is a serious issue in many development blocks. Frequent breakdowns in tube wells and rural piped water supply units are another worrying concern. In terms of the delivery of sanitation services, Nuapada is one of the poorly performing districts in Odisha.<sup>1</sup> Given these issues and challenges, the present paper attempts to track and analyse government or private interventions for providing water and sanitation facilities to institutions such as schools, *anganwadi* centres (AWCs) and health centres in Nuapada. It has analysed budgetary allocation and fund utilisation as well as examined challenges with regard to planning and implementation in the schemes and programmes delivering water, sanitation and hygiene (WASH) services in the district.

The discussion paper has used both primary and secondary sources of data. The important sources of budget data in the district are the Annual Financial Statements and the Quarterly Progress Reports of the Integrated Child Development Services (ICDS), National Health Mission (NHM) and *Samagra Shiksha Abhiyan* (SMSA). Similarly, the Annual Work Plan & Budget (AWP&B), Project

Implementation Plan (PIP) and the Annual Programme Implementation Plan (APIP) of schemes provide budget information of the water and sanitation component. The paper has reviewed the AWP&B, PIP and APIP of SMSA, NHM and ICDS for collating allocation and physical targets. Reports of the Central Finance Commissions (CFC), State Finance Commissions (SFC) and scheme guidelines have been reviewed and referred to document relevant data and information.

Since data on SMSA, ICDS and NHM at the district level were not available in the public domain, CBGA and WAI research team interacted with district level officials in the Education Department, Health Department and the ICDS/Social Welfare Department to collect necessary information on budget and outcome data in the district. Assessment of the quality of service delivery was done through spot checks and interactions with the relevant stakeholders. Further, to assess the status of the delivery of WASH services in institutions, field trips were undertaken to select *Gram Panchayats* (GPs) (Kandetar and Kureswar of Komna block and Khaira and Karlakote of Boden block). The discussion paper has analysed Central and State Finance Commission Grants and Centrally Sponsored Schemes (CSS) such as NHM, ICDS and SMSA, Corporate Social Responsibility (CSR) fund with respect to WASH services in institutions at the district level.

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<sup>1</sup> Economic\_Survey,2017-18([https://pc.odisha.gov.in/Download/Economic\\_Survey\\_2017-18.pdf](https://pc.odisha.gov.in/Download/Economic_Survey_2017-18.pdf))

## II. ROLE OF CFCs AND SFCs IN PROVISIONING WASH SERVICES IN INSTITUTIONS

The *Swachh Bharat Mission* (SBM) - Rural and the National Rural Drinking Water Programme (NRDWP) are prominent Centrally Sponsored Schemes (CSSs) that are being implemented to address the problems of sanitation and water supply in rural areas of the country. The Buxi Jagabandhu Assured Water Supply to Habitations (BASUDHA) - a piped water scheme focusing on sustainability measures is being implemented as a State Sponsored Scheme (SSS) in Odisha. Further, the National Bank for Agriculture and Rural Development (NABARD) has provided a loan to the Government of Odisha for installing mega piped water supply schemes which is being implemented in Nuapada. This is intended to take care of household needs only with respect to water supply. However, above mentioned schemes were largely focused on projects related to household toilets and water supply during the last five years.<sup>2</sup>

After the 73<sup>rd</sup> Constitutional Amendment Act, 1992, *Panchayati Raj* Institutions (PRIs) were mandated to carry out development activities in 29 subjects including management and monitoring of institutions like schools, health centres and AWCs. In Odisha, PRIs have been receiving funds from SSSs, CSSs and untied grants through the CFC and SFC. These grants have been used for providing basic services including water supply and drainage for households and institutions as they are in the jurisdiction of the GPs. Under the 14<sup>th</sup> Finance Commission (FC) grant, PRIs have been trying to improve basic civic services which include water supply and sanitation services for households, sewerage facilities and solid waste management. However, a special policy priority was given by the 14<sup>th</sup> FC towards provision of safe drinking water and sanitation facilities at the institutional level such as schools and AWCs. The 14<sup>th</sup> FC grant had

given permissions to celebrate the *Swachhta Pakhwadas* in GPs, campaigns to be held on water and sanitation, promoted the use of toilets, improve solid and liquid waste management and install dustbins in every habitation.

Developmental activities under the CFC are largely to be decided by the State government. Hence, GPs had not given priority to water and sanitation facilities in institutions as directed by the guidelines issued by the Ministry of *Panchayati Raj*, Govt. of India. GPs in Odisha gave priority to only those areas of work which were from time to time instructed by the *Panchayati Raj* and Drinking Water Department (PRDWD). Therefore, with regard to water and sanitation facilities, the GPs have so far, not taken up any projects for schools and AWCs. Rural water supply projects have largely been utilised on paying for water tankers and digging tube wells for households and not for providing WASH services at the institutional level. This clearly is an important area of concern and hence, there is a grave need for the provision of water and sanitation facilities in institutions. At the time of preparing *Gram Panchayat* Development Plans (GPDP), the GPs were not able to make decisions on development activities or respond to local felt needs, including those related to providing water and sanitation services in institutions.

There was low fund utilisation in both the 4<sup>th</sup> SFC and 14<sup>th</sup> FC grants across the year as per information provided by PRDWD.<sup>3</sup> This could be attributed to several reasons such as delays in fund flow from the State to the GPs, late completion of plans due to shortage of staff and their capacity, delays in receiving instructions related to initiating plan processes at the GP level, among others.

<sup>2</sup> Based on the interactions with the district level officials.

<sup>3</sup> *Panchayati Raj* and Drinking Water Dept. Government of Odisha, available at: [www.odishapanchayat.gov.in](http://www.odishapanchayat.gov.in)

### III. WASH SERVICES UNDER THE CENTRALLY SPONSORED SCHEMES

#### A) WASH Services under the Integrated Child Development Services (ICDS)

The ICDS scheme offers a set of six services, which include the provision of supplementary nutrition, pre-school non-formal education, nutrition and health education, immunisation, health check-ups and a referral service along with the provision of water and sanitation services. In the APIP of 2018-19 of Odisha, Rs. 0.08 crore were allocated for water supply which were increased to Rs. 0.42 crore in 2019-20. Similarly, Rs. 4.9 crore were allotted for construction of toilets in Odisha in 2018-19, which went up to Rs. 6.16 crore in 2019-20. An analysis of the Annual Financial Statement of the Department of Social Welfare shows the component-wise breakup for different services in terms of budget approved, released and spent. From Table 1 below it can be clearly seen that the budget allocated for water and sanitation was only Rs. 92,000 which looks almost negligible in the total ICDS budget of Rs. 128.9 crore in FY 2017-18 for the district. Information from the Department of Social Welfare, Nuapada revealed that only two units of water supply worth Rs. 10,000 each and six units of toilets worth Rs. 12,000 each were allotted to the district during FY 2017-18.

**Table 1: Budget Approved, Released and Spent for WASH Services under ICDS in Nuapada during FY 2017-18 (in Rs.)**

Components	Approved Budget	Released Budget	Expenditure Budget
Construction of Toilet and Drinking Water Facilities	92,000	92,000	92,000

Source: Department of Social Welfare, Nuapada

In FY 2018-19, the Nuapada District Administration requested the State government to provide an additional amount of Rs. 1.17 crore for the construction of toilets and Rs. 1.01 crore for the provision of drinking water facilities in AWCs (Table 2). However, as of August 2019, the district had not yet received the amount from the State government (Office of the Collector and District Magistrate, Nuapada).

**Table 2: Financial Support (Estimates) Required for ICDS including Water and Sanitation in Nuapada, FY 2018-19**

Heads	Amount (in Rs. crore)
Construction of toilets	1.17
Facilities for drinking water	1.01
Total for ICDS	13.4

Source: Estimations by the Office of the Collector and District Magistrate, Nuapada September, 2018.

The district had 1,029 AWCs and Mini AWCs as on May 2019 with functional toilets only in 387 AWCs and Mini AWCs. Similarly, 997 AWCs and Mini AWCs, had water supply through tube wells, 35 AWCs and Mini AWCs through piped water supply. Despite provision of water, there were wide spread complaints on the quality of water from tube wells, many of which were non functional. Findings from the field revealed that there was no funding source for the maintenance of tube wells or for checking the quality of water in AWCs. Further, presence of fluoride in ground water in the district made hand pump installation unsuitable.



**Table 3: Availability of WASH Facilities in AWCs, Nuapada, May, 2019**

Projects	No. of AWCs	No. of Mini AWCs	Total	Functional Toilets	Dysfunctional Toilets	Water from Tube Wells	Piped Water Supply	Overhead Tanks	Water Supply Connection
Nuapada	232	15	247	77	18	240	7	0	2
Komna	218	10	228	85	2	224	4	0	0
Khariar	190	5	195	106	23	186	9	3	3
Boden	150	19	169	34	3	163	6	0	0
Sinapali	172	18	190	85	11	184	9	8	7
<b>Total</b>	<b>962</b>	<b>67</b>	<b>1,029</b>	<b>387</b>	<b>57</b>	<b>997</b>	<b>35</b>	<b>11</b>	<b>12</b>

Source: Department of Social Welfare, Nuapada, Govt. of Odisha

As per the field survey in four GPs, it was observed that there were 7 toilets and 34 handpumps available in 51 AWCs, out of which 3 toilets and 31 handpumps were found to be functional. This reflected the fact that despite the ICDS being implemented in the district for a long time, there was still a huge deficit found in the availability of water and toilets in AWCs. According to ICDS officials, in order to reduce the incidences of malnutrition in the district, AWCs need to be fully equipped with water and sanitation services. However, financial support provided by the Union government was not sufficient to meet the present water and sanitation requirements in AWCs. Even the existing unit cost for installing water supply work and construction of child friendly toilets was inadequate for the provision of these services. Hence, the Department was dependent on other sources of funding, such as the *Mahatma Gandhi* National Rural Employment Guarantee Act (MGNREGA) or grants like the SFC and the 14<sup>th</sup> FC. Officials said that the monitoring of water and sanitation services remained weak due to the non-availability of vehicles for the Child Development Project Officers (CDPOs) in three projects of the district. (Table 3)

With regard to planning, a mechanism called Annual Programme Implementation Plan (APIP) was initiated in the ICDS on FY 2011-12. Unlike NHM and SMSA, the ICDS did not have this mechanism prior to FY 2011-12. The APIP had been introduced to fill the gap in need-based demand through a decentralised planning process. The ICDS was supposed to be implemented through a grassroots planning mechanism beginning from the AWCs and going up to the State level department. However, findings revealed that the APIP was not prepared at the district level. The ICDS had followed a normative approach from 1975, which did not give states much flexibility in the area of financial planning. Funds were released to the states on the basis of approved norms and the provision of the statement of expenditure and utilisation certificates as shared by the District officials.

## **B) WASH Services under the National Health Mission**

The availability of water and sanitation in health institutions is essential for sustaining universal health care facilities. NHM is a flagship programme which focuses on universal health care facilities.

Also, it focuses on improving water and sanitation facilities services to health institutions.<sup>4</sup> A component of NHM called Quality Assurance has the objective to build on and leverage achievements of two complementary sub-components viz. the *Swachh Swasth Sarvatra* (SSS) and *Kayakalp* with regard to quality health services including water and sanitation. The *Kayakalp* component aims at improving the quality of services through measuring and evaluating the entire array of services under NHM, including those related to water and sanitation. The SSS began in FY 2016-17 and it was an inter-ministerial joint initiative between the Ministry of Drinking Water and Sanitation (now Ministry of *Jal Shakti*) and the Ministry of Health and Family Welfare (MoHFW). There are three main components of SSS namely support to Community Health Centres (CHCs) in Open Defecation Free (ODF) blocks to achieve *Kayakalp* certification; prioritisation of GPs of *Kayakalp* so that Primary Health Centres (PHCs) could become ODF; and training of nominees from such CHCs and PHCs.<sup>5</sup> Another joint initiative, the *Swasth Bacche Swasth Bharat* (Healthy Children

Healthy India) programme between the MoHFW and the Ministry of Human Resource Development was launched along with SSS in 2016.

Nuapada district received funds for *Kayakalp* under the Quality Assurance head, which was meant for providing awards to health institutions after assessing the quality of health standards in District Hospitals and Community and Primary Health Centres.<sup>6</sup> As of now, Nuapada has not been able to achieve the desired score of health standards. Hence, it did not receive the *Kayakalp* Award. The District had been able to utilise the fund for SSS as blocks had not been declared ODF. Discussions with officials showed that PHCs and Sub-centres were facing more deficits in terms of the availability of water and sanitation facilities. It came to light that only 4.5 per cent of the total Quality Assurance fund has been utilised in FY 2018-19. District officials revealed that it was used for training and evaluation processes and not for *Kayakalp* and SSS. (Table 4)

**Table 4: Allocation for Quality Assurance under NHM (in Rs. crore)**

Component of Scheme	2018-19			2019-20		
	Approved Budget 2018-19	Released Budget	Expenditure as of March 2019	% of Expenditure	Approved Budget 2019-20	Released Budget
Quality Assurance	0.11	0.11.	0.05	0.04	0.12	0.06
Total NHM budget for the district	22.19	22.19	18.74	0.84	24.51	12.26

Source: Annual Financial Statement, District NHM Society, Nuapada.

The field survey of four GPs showed that four toilets and two handpumps were available in four health sub-centres. Among them three toilets and

two handpumps were found to be functional. This reflects a worrisome deficit in the availability of water and sanitation facilities in health institutions.

<sup>4</sup> Swachhata Guidelines for Public Health Facilities ([https://nhm.gov.in/images/pdf/in-focus/Swachhta\\_Abhiyaan\\_Guidelines.pdf](https://nhm.gov.in/images/pdf/in-focus/Swachhta_Abhiyaan_Guidelines.pdf))

<sup>5</sup> [https://nhm.gov.in/images/pdf/in-focus/swachh\\_swasth\\_sarvtra\\_09\\_02\\_2018.pdf](https://nhm.gov.in/images/pdf/in-focus/swachh_swasth_sarvtra_09_02_2018.pdf)

<sup>6</sup> [https://nhm.gov.in/images/pdf/in-focus/Implementation\\_Guidebook\\_for\\_Kayakalp.pdf](https://nhm.gov.in/images/pdf/in-focus/Implementation_Guidebook_for_Kayakalp.pdf)

### C) WASH Services under the *Samagra Shiksha Abhiyan*

The SMSA is an integrated scheme for school education. The scheme guidelines state that adequate basic infrastructure like electricity, toilets and drinking water facilities should be made available in schools. It talks of providing separate toilets for boys and girls and safe and adequate drinking water facilities for all children. Under the SMSA scheme, the funds for water and sanitation, in schools are provided under the budget head - Composite School Grants. It has a component known as strengthening of existing schools for various infrastructure interventions. This list for infrastructure may include building of toilets, providing drinking water facilities and electrification, among others.

A review of Project Approval Board (PAB) documents in SMSA, Odisha, it was found that a proposal of Rs. 191.2 crore was made for the Composite School Grants in FY 2018-19. An outlay

of Rs. 168.40 crore for the Composite School Grant as per enrolment was approved for 53,594 schools. The amount of allocation under Composite School Grants was based on the number of students enrolled in the schools. Around 10 per cent of the total composite School Grant can be incurred on the *Swachhta* Action Plan and an allocation of Rs. 2.58 crore and Rs. 0.51 crore up to upper primary and senior secondary schools respectively was made in FY 2018-19. However, while the allocated amount for the upper primary school was fully utilised, the allocation for senior secondary schools was not. The outcome data prepared by the District Education Office, Nuapada for FY 2018-19 showed that toilets for boys, girls and Children with Special Needs (CWSN) and water facilities were available in more than 1,200 schools with total of 1,37,368 children enrolled. As per calculations, this revealed that there were 46.4 boys per toilet, and 42.2 girls per toilet. As per norms, one toilet was required for 40 students. For most schools in the district, the hand pump was the largest source of drinking water.

**Table 5: Composite School Grant under SMSA during FY 2018-19, Nuapada (in Rs. crore)**

S.No.	AWP & Budget Sub-head	Physical Target	AWP&B Allocation in 2018-19	Expenditure
1	Annual School Grant (up to Class VIII)	908	2.58	2.58
2	Annual School Grant (up to Class X or XII)	79	0.51	0

Source: Annual Financial Statement, SMSA, Nuapada, 2018-19.

The Composite School Grant was received by Nuapada district for the financial year FY 2018-19 in seven installments.<sup>7</sup> A large amount of fund was received only in the January - March quarter. The district had transferred the entire sum to schools. The Composite School Grant had been used for purchasing stationaries, paying electricity bills, payment to sweepers and conducting awareness

about cleanliness and not for repair or maintenance of school toilets or water supply projects. While the School Sanitation Action Plan had not been prepared, some efforts have been made by schools to sensitise students on the importance of cleanliness and hygiene. According to the members and President of School Management Committee, the funds of the School

<sup>7</sup> Information shared by the officials of District Education Office, Nuapada.

Composite Grant were not adequate for taking up activities for water and sanitation. Hence, there was poor outcome data on water and sanitation facilities. (Table 5)

In the surveyed schools no work was taken up with regard to construction work of water and sanitation in the schools through the School Improvement Grants/Composite School Grant. As per the State government notification on the usage of the Composite School Grant, the fund could be used for setting up an electricity connection, paying electricity bills, buying teacher-aid materials and purchasing bulbs. To highlight the significance of sanitation and water, large-scale awareness and sensitisation programmes could be conducted in schools. Presently, only 10 per cent of the total allocation was being used for purchasing materials for the maintenance of toilet and water facilities and for conducting awareness generation programmes in schools.

The Corporate Social Responsibility (CSR) Fund is one of the major vehicles for the delivery of water

and sanitation services in schools. In 2017, Nuapada district received Rs. 892.70 lakhs for the construction of 565 school toilets at the rate of Rs. 1.58 lakh per unit in 336 schools from Coal India Limited (CIL). In addition, South Eastern Coalfield Limited (SECL) provided Rs. 319.16 lakhs for the construction of 202 units of school toilets and the Oil and Natural Gas Corporation (ONGC) gave Rs. 1.58 lakhs for one unit. The School Education Department is the nodal agency for implementing the CSR Fund. Officials apprised the research team that it took almost three years to complete toilet construction in schools as delays had occurred due to delay in selection of contractors, thereby slowing down the process of completion.

Field survey findings of schools in the four GPs showed that 99 toilets and 38 handpumps were made available in 52 schools, out of which 78 toilets and 33 hands pumps were in a functional condition. This clearly explains that despite the implementation of SMSA and CSR funds, there was still a shortfall in the availability of water and sanitation facilities in institutions like schools.



## CONCLUSION AND POLICY RECOMMENDATIONS

The above discussion makes it evident that there was a deficit in the availability of water and sanitation facilities in institutions at the GP level. It also showed that even among those, where these facilities were available, many of them were not found to be in a working condition. Apart from water and sanitation services, the maintenance of hygiene in schools, AWCs and health centres has not been a priority area. Some awareness generation programmes were conducted in schools and AWCs. Suggestions to address the challenges mentioned are given below:

### Key Recommendations

- ***Clear guidelines to be issued for the use of CFC and SFC grants and Jal Jeevan Mission budget for WASH services in institutions***

The guidelines for the utilisation of the 15<sup>th</sup> FC grants have to be revised with clear targets in terms of delivering water and sanitation facilities to institutions, such as schools, AWCs and health centres. A separate head of budget with adequate fund allocation should be introduced in the forthcoming *Jal Jeevan Mission* and the 15<sup>th</sup> FC and SFC grants are to be used exclusively for WASH services in institutions. There should be a specific component for providing toilet facilities in SBM for these institutions.

- ***WASH services under the Integrated Child Development Services***

The APIP should be prepared to fill the gap as per need-based demand through the decentralised planning process in the district. The need-based demand in the form of regular targets should be part of the APIP at the district level and there should be an adequate

allocation along with enhanced unit cost of services for water and sanitation facilities in ICDS as demanded by the office of the District Social Welfare Department.

- ***WASH services under the Samagra Shiksha Abhiyan***

The amount of Schools Composite Grants should be enhanced. Further, the cap of 10 per cent of total Schools Composite Grants fixed for water and sanitation should also be increased. The Union and State governments should ensure that there are adequate funds under SMSA for the construction of new toilets, maintenance of existing ones, in addition to setting-up of new water supply projects and providing adequate fund for their maintenance.

- ***WASH services under the National Health Mission***

There is a need for strengthening of the implementation of Quality Assurance component of NHM. Given the challenges in implementation of SSS and *Kayakalp* components, the National Health Mission division of the MoHFW, along with other relevant Ministries should revisit the guidelines for making it simpler. It is recommended that the PIPs should have a separate component with regard to construction and maintenance of water and sanitation projects for all health institutions. It is recommended that the ongoing CSSs, and grants like the SFC and CFC should give a heightened priority to WASH facilities at institutions in a sustained manner rather than leaning on CSR funds to accomplish these targets. The excessive dependence on CSR funds might lead to privatisation of social sector provisioning.

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