LET'S HAVE A CONVERSATION.
IT'S TIME TO COME CLEAN.

SaniTrail
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Photographer: Thomas Leuthard
Marking the fifth anniversary of the adoption of SDGs in 2020, India has committed to fulfill the SDG 6 that aims to ‘ensure availability and sustainable management of water and sanitation for all’. Since 2000, nearly half of the population of India (47%) has stopped practicing open defecation (OD). This not only represents a significant reduction in inequality but also a transformational shift in social norms and public health in the country.

The current Annual Rates of Reduction (ARR) in OD from 2000-2017 has been 2.8% and the required ARR from 2017-2030 needs to be 1.9%. Further, the proportion of population with basic hand washing facilities at home in India is 60% for 2017 and only 30% of domestic wastewater is treated in India. All these facts only go to show that there is a long road ahead for the country to achieve its sanitation goals.

The sanitation sector in India has historically been neglected and so has its budget. Since the launch of the Central Rural Sanitation Programme in 1986, sanitation was primarily looked at as a toilet construction scheme. However, with the launch of the Total Sanitation Campaign (TSC) in 1999, the concept of behavior change was introduced. The TSC was meant to be a demand-driven scheme and provided monetary assistance to Below Poverty Line (BPL) families, schools and anganwadis to construct their own toilets. It also focused on information, education, and communication to change the attitude of the people towards sanitation.

As per government data, there had been a substantial increase in rural sanitation coverage from 21.9% in 2001 to about 67.86% by 2010 – attributed to the scaling up of the TSC, along with higher budget allocation. The Nirmal Bharat Abhiyan (NBA) launched in 2012-13 was a restructured version of the TSC. To build ownership among the community regarding the scheme, the ‘Nirmal Gram Puraskar’ was introduced wherein monetary assistance and public recognition was given to those Gram Panchayats which achieved an ‘open defecation free’ status.
Due to efforts of the NBA, access to toilets in rural areas had increased from nearly 33% to 41% between Census 2011 and NSSO survey of 2013. Another milestone in the journey has been the establishment of the Ministry of Drinking Water and Sanitation in 2010, which puts the spotlight on the drinking water and sanitation sector in the country leading to enhanced budgetary resources. Further, sanitation got a renewed impetus with the launch of the Swachh Bharat Mission (SBM) in 2014-15.

This could be seen in the steep rise in budgetary allocation since the financial year 2015-16. Even in the 2020-21 budget speech, the Finance Minister highlighted the significance of comprehensive sanitation program to support the government’s “health vision” and reduce the disease burden among the poor. Additionally, the government has planned to start an Open Defecation Free (ODF)-plus scheme to sustain the current ODF mission.

**Union Budget Allocation for Swachh Bharat Mission - Rural & Urban, 2014-15 to 2020-21**

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Source: Compiled by CBGA from Union Budget documents, various years
(A – Actual; BE – Budget Estimates; RE – Revised Estimates)

**Significance of Sanitation during COVID-19**

Given that water, sanitation and hygiene (WASH) solutions are critical in addressing the COVID-19 pandemic, the significance of prioritising WASH has substantially increased. The importance of the much-neglected areas of hand washing and menstrual hygiene management has also come into prominence. More often than not, these issues are not sufficiently or appropriately incorporated into urban/rural planning for water and sanitation priorities and, needless to say, people living in villages and peri-urban settings will be affected the most. Since WASH would be a key part in the post-COVID recovery and to enable the right to potable water and adequate sanitation, it would be imperative to guarantee that everyone has access to a minimum level of water and sanitation; ensure the continuity and safety of WASH services, raise public awareness about hand hygiene, strengthen infection prevention and control, and provide practical and financial support to WASH providers.

However, greater public funding for WASH would be an underlying requirement with increased budgets for sanitation. One would need to keep an eye on such budgetary requirements in order to protect existing public funding for sanitation as well as to maximise its utilisation.