

Swachh Bharat Mission

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The Swachh Bharat Mission (SBM) was launched as a mass movement to bring about behavioural changes for crores of people in India and instil healthy sanitation practices in their daily lives. The socio-economic impact of SBM has been phenomenal both in terms of improving sanitation in hinterland but also improvement in health parameters especially for women and children

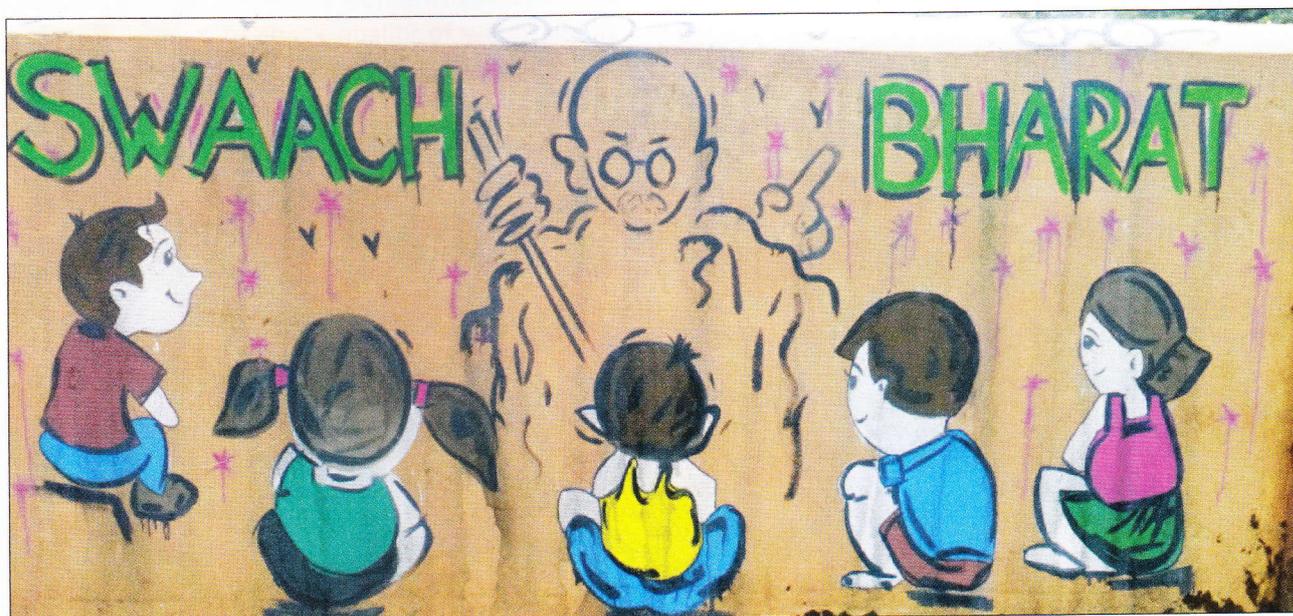
In the post-independence phase, health and sanitation aspects were part of the five-year plans. In 1954, the rural sanitation programme in India was introduced as a part of the First Five Year Plan. However, these provisions did not result in improving sanitation conditions across the country. No separate funds were allocated for construction and repair of toilets, thus sanitation facilities remain a cause of worry across the country. The 1981 Census revealed rural sanitation coverage was only around 1 percent. The lack of sanitation had been a leading cause of diarrhoea among children (under five year) resulting in stunting among children and also resulted in several preventable child deaths. Sanitation is also a critical aspect for ensuring safety and dignity for women.

In 1986 a programme - Central Rural Sanitation Programme (CRSP) which solely focussed on sanitation was introduced. The first nationwide centrally sponsored programme aimed to provide safe sanitation in rural areas. Since the programme didn't address the question of Open Defecation, it did not provide desired results. In 1999, Total Sanitation Campaign (TSC) with a vision to eradicate

open defecation by 2017 was launched. This was followed by the launch of Nirmal Gram Puraskar, Sampurna Swachata Andolana Scheme and other initiatives to strengthen the TSC.

In 2006, TSC was merged with Indira Awas Yojana (IAY), then a flagship scheme under the Ministry of Rural Development which addressed rural housing needs by giving financial assistance for the construction of dwelling units for Below Poverty Line (BPL) families. The convergence allowed the use of funds for the construction of sanitary toilets in IAY houses. Toilets were constructed in large numbers, but the quality of construction remained a concern and there was no focus on changing behaviour at the ground level in promotion of usage of toilets. Many households who had started using toilets slipped back to defecating in the open.

In 2012, the centre launched Nirmal Bharat Abhiyan (NBA), with an aim to provide 100 percent access to toilets in rural households by 2022. NBA was launched in convergence with Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA). NBA was an update of TSC with renewed strategies and modified guidelines and objectives to accelerate sanitation coverage in the rural areas.



In 2014, Prime Minister Shri Narendra Modi led government revamped the NBA into Swachh Bharat Mission (SBM) and introduced two sub-missions – Swachh Bharat Mission (*Gramin*) and Swachh Bharat Mission (Urban). While the prime focus of the NBA was to improve the sanitation conditions in the rural regions of the country, SBM took urban areas under its ambit through construction of public toilets across cities and towns. Under SBM, the subsidy provided by the government for the construction of Individual Household Latrine (IHHL) was increased from Rs. 10,000 to Rs. 12,000.

The SBM was approved on September 24, 2014, and took effect from October 2, 2014. The goal was to achieve clean and Open Defecation Free (ODF) India

by the 150th birth anniversary of Mahatma Gandhi on October 2, 2019. To make India ODF, the target was set to construct 67 lakh individual household toilets and 5 lakh community toilets in urban areas. For the rural areas, where the sanitation coverage was mere 38.70 percent at the time of launch of SBM, the aim was to bring it to 100 percent.

“A clean India would be the best tribute India could pay to Mahatma Gandhi on his 150th birth anniversary in 2019,” said Shri Narendra Modi after launching the Swachh Bharat Mission at Rajpath in New Delhi on 2nd October 2014. While leading the mass movement for cleanliness, the Prime Minister exhorted people to fulfil Mahatma Gandhi’s dream of a clean and hygienic India.

Mahatma Gandhi: Sanitation and Swaraj

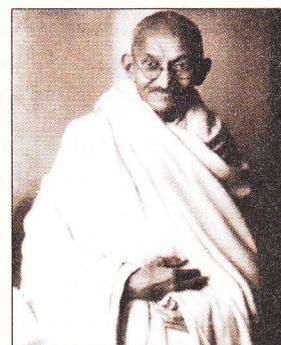
Mahatma Gandhi’s concern for public and private sanitation was part of his *satyagraha* campaign since the days he spent in South Africa. For Gandhi, the drive for cleanliness in society was an integral part of the process in bringing about a casteless and free society. “Everyone is his own scavenger,” he once said stressing the need for making cleanliness a personal responsibility was key to removing untouchability.

Gandhi’s call for sanitation came first during the *satyagraha* in South Africa. His priority back then was to remove the assertion made by white settlers that Indians lacked hygiene and therefore needed to be kept segregated. In an open letter to the Natal legislative assembly in 1894, Gandhi wrote that Indians too can maintain the same standards of sanitation as Europeans, provided they received the same kind of attention and opportunity. However, he had emphasised on the need for Indians themselves to take up the matter of cleanliness with a vigour and urgency.

Connecting the issues of cleanliness and untouchability, Gandhi emphasised the fact that it is extremely unjust to look upon those who do scavenging to be of the lowest social status. Stressing upon the need for better living conditions for those who did manual scavenging, Gandhi insisted that each one of us should be our own scavenger. He observed that since scavengers were considered to be of low status, people had been neglecting sanitation as ‘unclean’ work.

The drive for cleanliness in the Gandhian movement grew stronger after the non-cooperation struggle of the early 1920s. By that time, Gandhi’s call for sanitation was firmly embedded in two separate movements- the struggle for independence and the need for removing untouchability. Emphasising on the close connection between cleanliness and *swaraj*, Gandhi asked Indians to learn from the West the art of municipal sanitation and modify it to suit our own specific needs. He maintained that open defecation should only be done in a secluded spot in a hole dug in the ground and commodes should be used in the latrines.

“Swaraj can only be had by clean, brave people,” wrote Gandhi in an article titled ‘Our insanitation’ in 1925. Gandhi had stated that sanitation is more important than independence. He advocated that cleanliness is most important for physical well-being and a healthy environment and was essential for everyone to learn about cleanliness, hygiene, sanitation and the various diseases that were caused due to poor hygienic conditions. Mahatma Gandhi said, “I will not let anyone walk through my mind with their dirty feet”.



The main objectives of SBM(G) are:

- Bring about an improvement in the general quality of life in the rural areas, by promoting cleanliness, hygiene and eliminating open defecation
- Accelerate sanitation coverage in rural areas
- Motivate communities and Panchayati Raj Institutions to adopt sustainable sanitation practices and facilities through awareness creation and health education
- Encourage cost effective technologies for ecologically safe and sustainable sanitation
- Develop community managed sanitation systems focusing on scientific solid and liquid waste management systems for overall cleanliness in the rural areas
- Create significant positive impact on gender and promote social inclusion by improving sanitation especially in marginalised communities

For ensuring effective planning and implementation of SBM(G), a district was taken up as the base unit of intervention, with the goal of creating ODF Gram Panchayats. The District Collectors, Magistrates, CEOs of Zilla Panchayats were designated to lead the Mission, so as to facilitate district-wide planning of SBM for ensuring optimum utilisation of resources. The preparation of District Swachhta Plan (DSP) was the key aspect of SBM which outlined the scope of working to be taken up in a specific district for making it ODF in a time bound manner through ensuring behavior change initiatives.

Swachh Bharat Abhiyan *Gramin* was implemented with the aim of making rural areas in India open defecation free. There were several other activities which were implemented as a part of SBM. These programmes were broadly categorised into inter-ministerial and sectoral collaborations.

Some of the activities taken up through inter-ministerial collaboration are:

Namami Gange

The focus of the programme was to make villages near Ganga open defecation free and the handling in solid and liquid waste management implemented across 4000 villages located on the bank of Ganges in Utrakhand, Jharkhand, Uttar Pradesh and West Bengal.

Swachh Swasth Sarvatra

A joint initiative by Ministry of Drinking Water and Sanitation (MDWS) and the Ministry of Health and Family Welfare, the main objective was to strengthen community health centres in 708 open defecation-free blocks around the country and to empower them to attain higher levels of cleanliness and hygiene.

Rashtriya Swachhata Kendra

The objective was to monitor the progress of the Prime Minister's Swachh Bharat Abhiyan programme. Rashtriya Swachhata Kendra was established by MDWS at Gandhi Smriti and Darshan Samiti, New Delhi.

Swachhata at Petrol Pumps

An initiative of the Ministry of Petroleum and Natural Gas, the focus was to create facilities for a clean basic toilet for promoting cleanliness and hygiene at all the petrol pumps.

Rashtriya Swachhata Kendra

Established by MDWS at Gandhi Smriti and Darshan Samiti, Rajghat, the key function was to monitor the progress of the SBM.

Swachh Bharat App and Web Portal

The objective behind the mobile application and web portal (www.swachhataactionplan.com) was to monitor coordination between 76 departments or ministries by MDWS, Committee of Secretaries, Cabinet Secretary and the Prime Minister's Office.

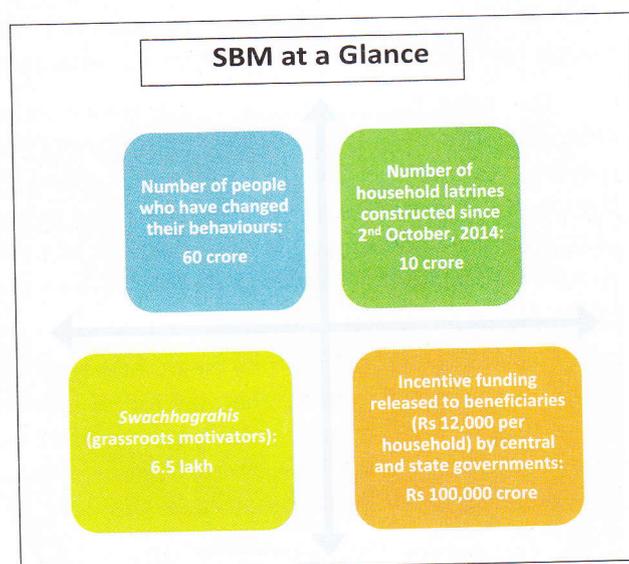


Table 1: India's Sanitation Coverage (%)

1981	1
1991	9
2001	21.92
2014	38.7
2019	100

Source: https://swachhbharatmission.gov.in/SBMCMS/writereaddata/Portal/Images/pdf/SBMG_Report_Card.pdf

Since the implementation of SBM, the rural sanitation coverage has increased significantly, from 39 percent in October 2014 to 100 percent in September 2019. Over 10 million household toilets were constructed under the SBM. Thirty-five States & Union Territories, 699 districts, and 599,963 villages have declared themselves as free from open defecation. The Mission, with its exclusive focus on Behaviour Change Communication, women's engagement and social inclusion has turned out to be an overwhelming success.

Addressing 20,000 Swachhagrahis and Sarpanches assembled from all over the country at a public event at the Sabarmati Riverfront in Ahmedabad on October 2nd 2019, the Prime Minister said 'the number of people practicing open defecation in India has gone down from 600 million in 2014, to negligible today, through an intensive behaviour change programme under the SBM.'. He said that by alleviating 60 percent of the world's share of people defecating in the open, India has significantly contributed to the global achievement of Sustainable Development Goals (SDG) 6.

Impact Assessment of SBM

Several studies were conducted to assess socio-economic impact of SBM. Two studies provide vital information on the far-reaching impact of SBM in improving the socio-economic profile of rural masses.

The UNICEF studied the Financial and Economic Impact of the Swachh Bharat Mission in India in November 2018. The study adopted standard economic modelling methods for estimating the efficiency of development interventions. UNICEF implemented an independent survey on a sample of 18,376 respondents representing 10,068 rural households, randomly selected from 550 Gram Panchayats across 12 states accounting for 90 percent of open defecation in India.

Key findings:

- On an average, households in ODF villages

CABINET DECISION: 19 February 2020

Intensifying Rural Sanitation

Swachh Bharat Mission (Grameen) Phase-II Approved

- Focus on ODF Plus** including ODF sustainability & SLWM*
- Total budget of **Rs. 52,497 crore** for 2020-21 to 2024-25
- 15th Finance Commission **proposed Rs. 30,375 crores** for rural water supply & sanitation for 2020-21
- Financial assistance to Gram Panchayats for construction per CMSC** **increased from Rs. 2 lakh to Rs. 3 lakh**

*Solid and Liquid Waste Management **Community Managed Sanitary Complex

accrued cumulative benefits of Rs.50,000 per year

- On an average, total benefits exceed costs by 4.7 times for households
- Financial savings from paying less for medical costs based on reductions in illness episodes (average Rs 8,024 per household per year).
- Reduced time lost from sickness and seeking a place for open defecation (average Rs 24,646 per household per year).
- Economic value of saved lives due to lower mortality rates (average Rs 17,622 per household per year).
- Rs 18,991 per household was estimated as the average increase in property value from having a latrine, made by the household occupants.

The study has shown that the Swachh Bharat *Gramin* was highly cost-beneficial from both a financial and an economic perspective. The impacts of reducing sanitation related diseases such as diarrhea and tropical enteropathy is beyond the saved medical expenditure and time of the patient and carer, it has led to reduced suffering and improved quality of life to the population.

A study titled - Access to toilets and the safety, convenience and self-respect of women in rural India was conducted in collaboration between UNICEF, Bill & Melinda Gates Foundation (BMGF), Sambodhi Research and Communications Private Limited with assistance from Department of Drinking Water and Sanitation, Ministry of Jal Shakti.

For the study a representative sample of 8290 households (interviews with 6993 women and 1297 men) with a toilet constructed after 2017 were interviewed across 320 villages of five states – Bihar, Madhya Pradesh, Maharashtra, Rajasthan, and Uttar Pradesh. Selection of States (the districts) was actuated by the fact that they represented the highest percentage increase in toilet construction under SBM-G.

Key Findings:

- 40 percent of the households also constructed toilets to ensure proper sanitation and hygiene and more than half of the households constructed it to prevent the spread of diseases. A major improvement in the safety of women after the construction of toilets was evident, with 93 percent of women reporting that they were no longer afraid of being hurt by someone or harmed by animals while defecating.
- 91 percent of the women reported that they have been able to save up to an hour and do not have to travel up to a kilometre for defecation after the construction of toilets.
- Earlier, without access to a private toilet, women would deliberately limit their intake of water and other liquids to control the urge to urinate. But after the construction of a household toilet, 93 percent of the women reported no longer having to stop having food or water to control the urge to defecate or urinate.
- More than half of the women surveyed were afraid of being judged by others in their community when they did not have a private toilet. Also, almost half the women surveyed used to avoid their relatives or neighbours out of embarrassment over not having a private toilet.
- Majority of the women, especially unmarried young women, said they were proud to own a toilet. An overwhelming majority (88%) of men also reported a sense of pride in owning a toilet.

SBM (G)-phase II also referred ODF Plus

For ensuring that open defecation free behaviours are sustained and solid and liquid management facilities are accessible, the government has launched Swachh Bharat Mission (Gramin) SBMG phase II also referred as ODF-plus in February, 2020. The programme would be implemented in a mission mode till 2024-25, with

a total outlay of Rs. 1,40,881 crores. Of this Rs 52,497 crore will be allocated from the budget of the Department of Drinking Water and Sanitation while the remaining amount will be allocated from the funds being released under 15th Finance Commission, MGNREGA and revenue generation models particularly for solid and liquid waste management.

Under the program, provision for incentive of Rs.12,000/- for construction of Individual Household Toilet to the newly emerging eligible households as per the existing norms will continue. Funding norms for Solid and Liquid Waste Management (SLWM) have been rationalised and changed to per capita basis in place of no. of households. The financial assistance to the Gram Panchayats (GPs) for construction of Community Managed Sanitary Complex (CMSC) at village level has been increased from Rs. 2 lakh to Rs. 3 lakh per CMSC.

The SBM-G Phase II is aimed at generating employment and providing impetus to the rural economy through construction of household toilets and community toilets, as well as infrastructure for SLWM such as compost pits, soak pits, waste stabilisation ponds, material recovery facilities etc. So that by the end of 2024-25, India would reach a significant milestone by providing sustainable sanitary facilities to millions of people.

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