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MAXIMIZING THE BENEFITS FROM WATER AND ENVIRONMENTAL SANITATION

Community empowerment through water and sanitation project among an indigenous people group

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This paper is an experience of the water and sanitation project in an indigenous group in Kerala, South India where community empowerment has been achieved through the support of world bank assisted water and sanitation project "JALANIDHI". The experience in Sholayoor Grama Panchayath reduced the burden of women and children for fetching water. Through this project the tribal women played active roles in decision making, implementation, operation and maintenance. This experience is a showcase of restoring dignity of socially disadvantaged people, increased access to WATSAN services etc. Hither to, not heard concepts like cost recovery, participation of tribal community especially women community contracting etc became a reality.

Introduction

International, national and local governments have set targets for achieving the Millennium Development Goals and have recognized the role of concerted actions by all. It is to be remembered that the most disadvantaged communities are to be given priority as they are to be empowered for reaching the goals. Maximum benefits of water and sanitation could be achieved through community empowerment and capacity building for self reliance.

This paper is an experience sharing of a project in remote local self government body called Sholayoor, in South India, where water, sanitation, electricity, healthcare measures and other facilities essential for human habitation are severely lacking. The initial coverage in this Panchayath on drinking water supply was 26% and sanitation 1.2% only. The awareness regarding the use of clean drinking water, sanitation and hygiene habits were bare minimum. This case presented here is focusing on the benefits that the tribal population of Sholayoor have achieved in water and sanitation sector through their own community actions supported by the local government and a support organization with the financial assistance of World Bank. This is of special importance as the government and other agencies were bumping financial resources in this tribal pocket for the upliftment of tribes but with little impact or result. Over 300- 400 million of Rupees have been spent here through various projects during the last 15 years. The indigenous people group population has been heavily subsidized for all programmes and most programs for development is implemented by other people or contractors. The tradition of cost sharing or participation was never heard of. They have been neglected and thought of as an illiterate group and a community with low self esteem, incapable of doing anything by them.

In 2002, with the objective of capacity building of the indigenous community groups through water and sanitation programmes, *'Jalanidhi project'* was initiated.

Methodology

The methodologies adopted for information collection were literature review, focus group discussion, pocket voting and key informant interview. The literature review was conducted for collecting data on baseline status of water and sanitation facilities and development activities undertaken. Focus group discussions were conducted with elected Grama Panchayath members, *'oorukuttam'*, (the rural administrative group of indigenous People) Kerala water authority, Rural development department and Schedule caste /Schedule tribe department of government of Kerala. The key informants interviewed includes the presidents and secretaries of beneficiary groups, women masons President and members of Grama Panchayath and tribal volunteers for information collection before and after project intervention. The hygiene behaviours were measured through pocket voting and observations on water handling, use of latrine, hand washing practices and personal hygiene habits of beneficiaries before and after project interventions.

Background

The people living in the remote parts of India are called Tribes constitute 80 million of the total population of India. They are the most deprived marginalized group living in deplorable conditions. They do not have stable income, and depend on the forest for their livelihood. As per the 91 census 1.10 percent of the population of Kerala are tribes.

Sholayoor Grama Panchayath is situated in on the north-eastern side of the district Palakkad in Kerala and spread over an area of 150.74 sq. kms has the largest tribal settlement. Attappady is of great interest to anthropologists, as this is

the habitat of many tribes like 'Irulas', 'Mudugas', and 'Kurumbas'. Sholayoor local self government body consists of 10 wards. The total population as per 1991 census is 16941 and according to household survey by Socio economic unit foundation in 2002 there are 5015 household out of which 2295 (46%) families are tribes in Sholayur. The Jalanidhi concentrated only on the tribal population which is 9245 people in Sholayur. The Oorumooppan (The administrative leader of tribal hamlet) Kuruthala (in charge of administration), Bhandari (in charge of finance), Mannukkaran (in charge of agriculture) constitute the traditional tribal leadership which is having the power to decide all aspects of socio economic cultural life of tribes.

Jalanidhi

The overall Project Development Objective is to assist the Government of Kerala in improving the quality of rural water supply and environmental sanitation service delivery to achieve sustainability of investments. Specific project development objectives would be to (a)demonstrate the viability of cost- recovery and institutional reforms by developing, testing and implementing the new service delivery model on a pilot basis (b)build the State's capacity in improved sector management in order to scale up the new decentralized service delivery model statewide. The goal is to increase the access of Kerala's rural population, particularly the poor and the socially disadvantaged groups, to drinking water supply and environmental sanitation services.

Baseline Data Before Project Implementation

Components	Data
Drinking water supply	12 taps
Dug wells	32
Ponds	6
Bore wells	8
HH latrines (Single pit)	16
Usable Latrines	7
% of people handling drinking water safely	35
% of people bathing daily	35
% of people washing hands • Before eating • After eating • After defecation • After defecation with soap	 52 100 78 0

Situation analysis

As shown in the baseline survey the water and sanitation situation was very poor in the study area. The community was not aware of the need for potable drinking water, sanitation and the relationship of these with their health conditions. So the demand creation was the first task for the programme team in this village. There was no distinction in regard to water quality and they use any water available for drinking. They were fetching water from far away places as far as 3 kilometers in difficult terrain. Sanitation facilities were only 1.2 %

The baseline data on water borne diseases like diarrhea was alarmingly high in the community. There were 322 cases on diarrhea, 11 on Hepatitis, 17 on Typhoid, 01 on cholera reported in Primary health Centre in 2002. The existing poor medical facilities & very low income status, coupled with traditional beliefs on diseases and low awareness on health care measures, make them live with all these problems causing high mortality rate.

Strategy

The strategy used in the project was community empowerment through continuous interaction. The project management team selected 6 community facilitators comprising 4 women and 2 men from the community and trained them in management aspects of integrated Watsan project. The project team of 3 social 3 technical and 2 administrative staff under the guidance of a team leader supported the local government institution to implement this programme. The strategy developed for Jalanidhi project in the tribal area is primarily focused on the capacity building and empowerment to take the responsibility to plan, implement, monitor the programmes and ultimately to create the ownership feeling in them. The Support organization (Socio Economic Unit Foundation) was strengthened through trainings by KRWSA emphasizing the special situation in tribal area.

Project cycle

Exploratory phase	3 months
Preparatory phase	3 months
Planning phase	9 months
Implementation phase	12 months
Post- implementation Phase	6 months

Exploratory phase

The objective of the phase is to collect information on existing situation. The exercises conducted include mapping the existing scenario and create demand and awareness about water, sanitation and hygiene. Orientation to the local self government, other stakeholders like Kerala Water Authority, Rural Development Department, Integrated Tribal Development Department, Education Department and the Integrated Child Development Project on the various components of

project and discussed the existing problems and situations. Community meetings in tribal hamlets were the next step for analyzing the situation with the community. The methods adopted included house visit, *'Oorusabha',(meeting of the group)* informal discussions. This phase has resulted in identifying the need and potential areas for the project by the community.

Preparatory phase

A more structured interaction with potential project beneficiaries was undertaken in this phase. Baselines data collection through household survey, community meetings for assessing the need and creating demands were the next step followed. The methods used were social mapping, three pile sorting cards- awareness on hygiene habits, water handling, water borne disease, water quality test result sharing, Time utilization mapping for awareness on the time spent for water collection, cooking, bathing, washing, cleaning house and cattle rearing. Folk arts *"Koothu"* a tribal art form using songs and dance was used for creating awareness on the Watsan situation at household and community level and its impact. Need for community contribution for ownership building was given high priority since contribution by tribal population was beyond their understanding and they were heavily subsidized for all development projects by all agencies including the government. The presence of tribal facilitators helped to build confidence and trust between project partners.

Planning phase

The decisions to implement the programme was taken by the community and they formed 9 member beneficiary committee including 5 women members and got registered under societies registration act of government of Kerala. Intensive capacity building training program were carried about on community empowerment plan (CEP) preparation, Accounting, Sanitation Hygiene Promotion, IEC methods, Technical aspects of water and sanitation, Decision making tools, Resource mapping, Facilitation skills, Operation and maintenance and monitoring. Exposure visits to other project area and cross visit in the same community encouraged the beneficiary committee and increased their commitment. Exhibitions, wall paintings of messages, involvement of community in material preparations, competitions for school children and community, healthy home survey, video show etc were organized during this phase. The technology workshops gave them opportunity for familiarizing cost estimates and enabled to make informed choices about technology options on water and sanitation. Demonstration units were constructed. CEP (Project plan) for each Beneficiary Group was prepared and got approved by KRWSA during this phase.

Implementation phase

14 Water supply schemes, 540 household two pit latrines, 170 compost pits, 78 dish drying platforms, 19 baby friendly toilets for Anganwadies(pre-school nursery) and demonstration units for vermin compost units were constructed. All construction activities were carried out by community contracting which enabled quality assurance and cost control. Women were trained as masons for constructing latrines. Through this project a computorised resource centre for sharing information about Watsan was established in the Panchayath.

Post implementation phase

During 6 months post implementation period operation and maintenance mechanisms were set up emphasizing on sustainability. Training were given on O&M charge collection, training for pump operators, water quality monitoring, joint review by community and project team. On sustainability point of view, linkages with Resource centre and BGs were established.

Achievements

The tribal community has been empowered and they took the responsibility of implementing water and sanitation project. The results were:

- Self reliance of the community
- Participation of women and youth of tribes in development activities
- Community cost sharing/contribution for water and sanitation.
- Formation of beneficiary groups(14) each comprising 15-107 families
- 217 trained community leaders from tribal society
- Implementation of projects leading to ownership of facilities created
- Operation and maintenance by community, operation cost below 1 $ household per month
- Could get the land for source development and tank construction free of cost
- Tribes contributed 1.5 million as labour and .3 million as cash. They also earned .5 million as wages.
- 24 hours water supply
- Total benefits for a family is minimum of 250 $
- Total coverage in 4 tribal hamlets
- Increased awareness regarding water sanitation hygiene habits
- Transparency and accountability of all stakeholders

Challenges

The most important challenge confronted in the exploratory, preparatory and planning phase is the building of trust of community in the programmes. Demand creation and confidence building of community to take up the project was overcome through awareness building of existing situation and discussions on options at different levels using interactive participatory strategies. The. specific programmes conducted were discussed under each step elsewhere in this paper.

Conclusion

The experience of Watsan project in Sholayoor reduced the burden of women and children for fetching water. Through this project the tribal women took active role in decision making, implementation and operation and maintenance. This experience is a showcase of restoring dignity of socially disadvantaged members and increased access to Watsan services. Hither to not heard concepts like cost contribution, participation of indigenous community especially women and community contracting came into reality.

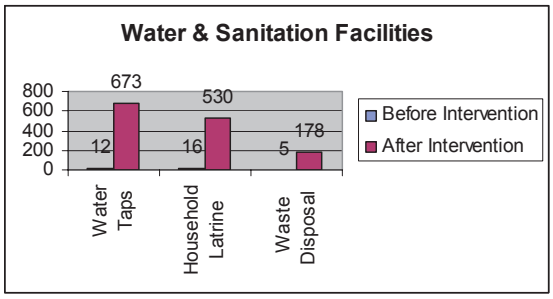


Figure 1. Coverage data

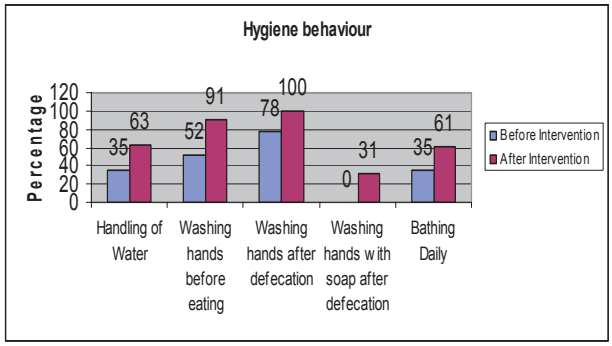


Figure 2. Hygiene practices among the tribes



Photograph 1. Water collection before project intervention



Photograph 2. Water collection after project intervention

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