

**21st March,
2013**

Final Report
**Social Assessment, Capacity
Building and Communications
Strategy**

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Acknowledgements

The study team is immensely grateful to more than 700 people, mainly women and men, but also some children from 20 villages across 5 districts in Eastern UP: namely Shravasti, Kushinagar, Chandauli, Kaushambi and Faizabad, who spared their time to share their experience regarding various aspects of water and sanitation services at the village level.

We owe special thanks to the District Collectors, Chief Development Officers (CDOs), and District Development Officers (DDOs) and their field staff, who were very helpful in selection of sample villages/GPs and facilitating our interaction with people in villages and concerned government functionaries at various levels.

The study would not have been possible without the active support of SWSM and SPMU at Lucknow. Executive Director, State Water and Sanitation Mission (SWSM), Mr. Rakesh Kumar Ojha, Joint Director, SWSM, Mr. S. C. Srivastava, and Mr. Gyanendra Singh, Procurement Specialist, SPMU provided invaluable guidance and advice through the duration of the study. Mr. Prabhakar Sinha, Social Development and Communication Specialist at SPMU provided insightful and useful comments during our discussion on the draft final report at SWSM/SPMU on 7th of March.

We do hope that the study offers some useful insights into some of the key social issues that can inform the overall project design of the project along with required capacity building and communication interventions during project planning and implementation.

Preface

This report presents the key findings and recommendations of the study on social assessment, capacity building and communications strategy. The study has been carried out as an input into the design of the proposed World Bank assisted project on rural water supply and sanitation originally proposed to be in 28 districts of Eastern Uttar Pradesh (list attached as annex 1). This is under the World Bank's Rural Water Supply and Sanitation Project for Low Income States (RWSSP-LIS). Though the project size of the first phase of the project in UP is reportedly reduced to only 10 districts now, the study is in the larger context of the Eastern UP as a whole.

As discussions between the World Bank and Government of UP are still on-going regarding the size and scope of the project, decisions regarding the number of districts to be taken up in phase 1 and the nature of institutional arrangement to be put in place for project management at the state and district levels have yet to be fully firmed up.. Hence, it is quite likely that some of the recommendations of the study get radically revised, if required in view of the decisions taken, as and when they are final.

To begin with, the report presents the broad demographic and development profile of the region for which the project is proposed and eventually makes a case for the need for this project in UP.

There is a general assumption underlying most of the development initiatives that more investment means more benefits for people for whom the project is designed. But the reality check offered by this study tells that this may not necessarily be true, as the implementation of projects is mediated by a range of factors related to social and political dynamics obtaining in the intended project area, along with other factors related to capacity and communication across different stakeholders and levels of operation.

As against the popular perception that in many districts people, particularly poor, do not have equitable and sustainable access to water and sanitation services, the study tells that almost everyone in the rural areas of UP has access to water through private and public facilities. A very small segment of the poor (less than 2%) is dependent only on public facilities, with no private facilities of their own. But they are not necessarily worse off than others who have these facilities. Reasons for the same are delineated in the main body of this report.

Issues and challenges that emerge relate mainly to the quality of water being consumed by people and the rampant practice of open defecation leading to faecal contamination of water in most of the study villages visited. The proposed project needs to address these upfront in order to be able to make a substantive difference in the quality of life of people, who are supposed to be benefitted by this project.

Abbreviations and Acronyms

| | |
|----------|---|
| ADO | Assistant Development Officer |
| AES | Advanced Encephalitis Syndrome |
| ARWSP | Accelerated Rural Water Supply Programme |
| BDO | Block Development Officer |
| CDI | Composite Development Index |
| CRSP | Central Rural Sanitation Programme |
| DDWS | Department of Drinking Water Supply |
| DPR | Detailed Project Report |
| DPRO | District Panchayati Raj Officer |
| GP | Gram Panchayat |
| GS | Gram Sabha |
| HRD | Human Resource Development |
| IEC | Information Education Communication |
| JE | Japanese Encephalitis |
| JPS | Jal Prabandhan Samiti |
| JN | Jal Nigam |
| M&E | Monitoring And Evaluation |
| MDG | Millennium Development Goals |
| MIS | Management Information Systems |
| NBA | Nirmal Bharat Abhiyan |
| NGOs | Non Government Organisations |
| NGP | Nirmal Gram Puraskar |
| NRDWP | National Rural Drinking Water Programme |
| NRDWQMSP | National Rural Drinking Water Quality Monitoring Surveillance Programme |
| O&M | Operation & Maintenance |
| ODF | Open Defecation Free |
| OP | Operational Policy |
| PRIs | Panchayati Raj Institutions |
| PWS | Piped Water Supply |
| RWS | Rural Water Supply |
| RWSS | Rural Water Supply and Sanitation |
| SRP | Sector Reform Programme |
| TSC | Total sanitation Campaign |
| UNICEF | United Nations International Children's Emergency Fund |
| UP | Uttar Pradesh |
| VWSC | Village Water and Sanitation Committee |
| WHO | World Health Organisation |
| WSSO | Water and Sanitation Support Organisation |

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Executive Summary

1 Executive Summary

1.1 Context

This study has been undertaken as input into the design of the World Bank assisted project on improved water supply and sanitation services in the Eastern Uttar Pradesh. The study covers three major concerns of social assessment, capacity building and communication that can impact the eventual provision of water and sanitation services on the ground.

The study included intensive field visits to 5 out of the 28 districts of Eastern UP. Selection of sample districts was done using a set of criteria to ensure fair representation of different regions in Eastern UP and differential access of people to basic infrastructure and services. The composite development index (CDI) of districts as available in Government of UP's Planning Atlas of 2010 was used as one of the criteria, as the ranking of districts on the basis of CDI considers 36 development indicators on the state of development in the districts. CDI groups districts into very high, high, medium, low and very low categories using these indicators. None of the 28 districts in Eastern UP fall into very high and high categories. Five districts selected include: Shravasti and Kushinagar in the category of very low CDI; Chandauli and Kaushambi in the low CDI category; and Faizabad of medium CDI. Care was also taken in selecting the sample districts from different agro-climatic zones within Eastern UP to have a as geographically representative sample as well.

Eastern Uttar Pradesh: a socio-economic profile

The Eastern Uttar Pradesh (UP) comprising 28 out of total 75 districts in UP is one of the most socially and economically backward regions of the state, along with the Bundelkhand region. More than 80% of the people live below the poverty line and without access to basic services including water, sanitation and health.

Rural communities are internally divided along caste, class and gender lines. Caste hierarchies are fairly strong within rural communities represented by physical segregation of scheduled caste communities on the fringes of villages in most of the mixed caste villages. More than 80% of the households owning land are in the category of small and marginal farmers with precarious **subsistence farming, which is often not enough to feed the entire household for the whole year. Women constitute the major agricultural work force and providers of water at the household level, but are largely excluded from the decision making processes at the household and community level.**

Eastern UP lies largely on the Indo-Gangetic plain, and together with western Bihar is one of the most densely populated areas of India, and is characterized by frequent natural disasters mainly floods. Agriculture is a predominant activity -- Eastern UP leads the tally² in the state with highest percentage of agricultural land holdings below one hectare, which classifies a farmer as marginal. The region tops with over 84 percent of land holdings below one hectare. Lower land holdings make farm mechanization rather uneconomical and the farmer is unable to reap the full benefits of economies of scale.

The State Human Development Report 2007 (HDR) also highlights the developmental disparities of Eastern UP vis-à-vis UP as a whole. Among the bottom

² Business Standard, Lucknow January 06, 2012

ten districts in terms of the human development index (HDI), eight belong to the Eastern UP.

1.2 RWSS Services in Eastern UP: an overview

Field visits to 20 GPs across 5 districts (Chandauli, Faizabad, Kaushambi, Kushi Nagar and Shrawasti) in different agro-climatic zones of the Eastern UP suggest that close to 100% people in rural areas have access to drinking water through public and private facilities, mainly hand-pumps. Most of the households have shallow hand-pumps (dug at 30-60 feet) installed within the household premises, besides the public stand posts set up by Jal Nigam or GP under different schemes including Swajaldhara. People without a proper house or land, who are not more than 2% of the study sample, are dependent on public stand posts.

Data from the field suggests that despite near universal access to water for people in the rural areas, the quality of water being consumed is suspect and unsafe in most of the cases. This remains the most daunting challenge in terms of ensuring safe water supply to people. People as consumers and government agencies as service providers try and address water supply issues differently with varying perceptions and positions on what constitutes improved water supply. This is quite pronounced in the case of Kushi Nagar, which has a very high incidence of Japanese Encephalitis (JE) and Acute Encephalitis Syndrome (AES).

The government agencies believe that shallow hand-pumps, which are dug on the first strata, are the primary source of this killer virus. But people find the water coming out of India Mark II hand-pumps dug by Jal Nigam also to be of dubious quality in many cases. Like for example, as per many respondents in the 4 GPs visited in Shrawasti, the water from India Mark II hand-pump turns yellow or red within a couple of hours of storing the water and smells bad. The reasons quoted by them are that these hand-pumps are dug at a shallow depth of 30-60 feet (though at times this is also at 100 feet) and not at the second strata at the depth of 150-200 feet, as claimed by the Jal Nigam. This suggests the need to ensure the quality of construction as per agreed norms.

Other implications of this phenomenon are as follows. As most of the households have their own facility in the form of a shallow hand-pump and there is hardly any awareness about the quality of water being consumed, people are apparently not interested in the water facilities being set up by the Jal Nigam. Even in the case of Swajaldhara schemes visited across the study districts, only few interested people made the initial contribution of 10% for the scheme to come through.

Consultations with people in most of the villages suggested that people are willing to pay for improved water supply services (through a piped water supply scheme) by way of user charges ranging from 10-50 rupees per household, but are not willing to share the capital cost for such schemes, as they already have access to water through existing private and public facilities and do not want to make substantial investment for the same.

In view of the above, it is evident that there is no apparent demand among people for improved piped water supply services. Most of the schemes being constructed and proposed are basically supply driven with practically no manifest ownership of the schemes by their potential consumers. This also suggested the need to work on the demand side of the water supply services by promoting awareness about the critical

role of quality of water in determining the health status of people.

1.3 Social Assessment

The social assessment was carried out with a focus on the following key concerns:

Participation: people's involvement in planning and implementation of rural water supply and sanitation services at the community level in general and of socially and economically marginalised sub-groups such as scheduled castes and the poor in particular; and women's involvement in decision making in the planning and provision of RWSS services; there has been a special focus on the 'indigenous people' and the issue of their rights to their distinct social, economic and cultural resources.

Inclusion and equity: inclusion of the disadvantaged and marginalised including the scheduled caste (SC), scheduled tribe (ST), poor, women and children in the decision making processes at the planning and implementation level; and their equitable access to the RWSS services. Focus on 'indigenous people' continues as the central concern of inclusion and equity as well.

Decentralisation: decentralised management of RWSS services in line with the general policy direction in India and UP of decentralised governance of basic services; and the related role of Panchayati Raj Institutions (PRIs) in the planning and management of these services.

Institutional and human development: institutions and the people working therein at various levels play a major role in the planning, implementation and provision of RWSS services; and hence their capacities and skills are critical to the RWSS services, particularly in terms of quality of the services provided and their long term sustainability.

Participation, Inclusion and Equity

People, including the poor, in the study area have access to rural water supply services through private (shallow hand pumps) and public (India Mark II hand pumps). There has been practically no participation of people in the planning and implementation of rural water supply schemes and services created by the government at the village level. These include both piped water supply schemes and public stand posts established by UP Jal Nigam and schemes built under Government of India's national Swajaldhara programmes.

While UPJN has traditionally functioned in a top down and supply driven mode, Swajaldhara was supposed to be based on community participation including partial capital cost sharing (10-20%) and total sharing of the operation and maintenance cost of the schemes built. And this was to be done by every individual household benefiting from the scheme. But this has not happened on the ground, as in most of the cases, a few individuals have contributed the total 10-20% of the capital cost for the project. This has included people both working in the spirit of charity (in a few

cases) or out of personal interest in getting the project to the village/GP.

Despite the past experience of a highly successful World Bank assisted Swajal (1996-2001) project in the undivided state of UP based on community participation, there is practically no institutional memory or legacy of implementing community based and demand responsive RWSS projects efficiently and effectively.

Inclusion of women

Women are largely excluded from decision making processes and are practically invisible through out the entire chain of planning and implementation of rural water supply and sanitation schemes and services on the ground. Given the fact that **women are the primary stake holders by dint of their roles and responsibilities as providers of water at the household level, their exclusion from planning and implementation processes is likely to adversely impact the long term sustainability of the services created.** The project has to address this challenge up-front for the following two reasons: One, to make the project efficient and effective in terms of not only delivering the improved water supply services to people but also for making it sustainable over time and ; second, to help women participate in planning and management processes as the most important stakeholders, as a matter of right, in for the purpose of making the project sustainable and successful.

Inclusion of the marginalized

The case of Musahars, a highly marginalized scheduled caste community, (as available in the Box 1 in Social Assessment Section), suggests that it is quite likely to have situations where highly marginalized communities such as SCs can end up having very unequal access to available water supply services. And moreover, their needs are likely to be **neglected even by the gram panchayat.** In order to make sure that this kind of exclusion of marginalized groups does not take place at all and certainly not on scale, it is important to ensure that the members of SC community have a **very strong and effective representation within the decision making bodies** such as jalprabhandan samiti (JPS) and VWSC.

The social assessment tried to find out the nature and extent of participation of people in the planning and provision of RWSS services. Assessment makes it clear that there has been no substantive participation of people in terms of their involvement in decision making including choice of service level and fixing up of user fees. Only a few have participated out of their own personal interest. This does not apply to the ‘indigenous people’, as there are none in the Eastern UP as per the understanding of OP 4.10 of the World Bank.

Indigenous Peoples

As per definition provided in the Bank’s OP 4.10, the ‘Indigenous Peoples’ refer to a distinct, vulnerable, social and cultural group possessing the following characteristics in varying degrees:

- a) Self-identification as members of a distinct indigenous cultural group and recognition of this identity by others;

- b) Collective attachment to geographically distinct habitats or ancestral territories in the project area and to the natural resources in these habitats and territories;
- c) Customary cultural, economic, social, or political institutions that are separate from those of the dominant society and culture; and
- d) An indigenous language, often different from the official language of the country or region.

There are no communities in the proposed project districts which could be termed as Indigenous Peoples as per the above definition. Hence, OP 4.10 does not come into play in the context of the proposed RWSSP-LIS in UP.

Motipur Kalan in Sirsi Block of Shrawasti has been the only tribal (Tharu tribe) GP of the 20 study GPs visited across the five study districts, but they also do not qualify as the ‘Indigenous Peoples’, as they are largely integrated in the mainstream. The village is governed by an elected Gram Panchayat, and not the traditional Tharu leadership, which has weakened over the years.

Most of the households in the village have their own shallow hand pumps, besides having access to 10 public stand posts and 7 open dug wells. A Jal Nigam scheme for piped water supply in the village is proposed. The detailed project report (DPR) is in the process of being prepared and the GP has offered to provide land for the purpose free of cost.

As per the evidence from the ground so far, there do not seem to be any issues related to OP 4.10 of the World Bank, which is not applicable in this case.

Securing lands

Securing land for the purpose of constructing RWSS services could be potentially invasive of the rights of some of the socially and economically disadvantaged groups. But consultations at the state headquarters of UP Jal Nigam in Lucknow and investigations across 5 sample study districts in the field suggest that all land used so far for the construction of rural water supply schemes on the ground have been voluntarily given either by the concerned Gram Panchayat or donated by private individuals. No case of purchasing or procuring land against compensation has been reported from anywhere.

In all the schemes built by JN, land has been provided by Gram Panchayats free of cost. For Swajaldhara schemes, land has been provided either by Gram Panchayats or by private individuals free of cost. Getting land for water supply projects does not seem to be an issue in Uttar Pradesh so far.

OP/BP 4.12 is triggered when a Bank investment causes involuntary taking of land that results in direct social and economic impacts such as: loss of shelter leading to relocation, loss of assets or access to assets, loss of income sources or means of livelihood (whether or not the affected persons must move to another location). As no such thing was found across the five sample districts (Chandauli, Faizabad, Kaushambi, Kushinagar and Shrawasti) visited, **there are apparently no issues related to Bank’s OP 4.12 in Uttar Pradesh.**

Decentralisation and Panchayati Raj Institutions

In view of the overall policy commitment of decentralized governance of basic

services in the state, the piped water supply schemes built by Jal Nigam are supposed to be transferred to Gram Panchayats (GPs) for operation and maintenance in UP. There are following three types of scenarios on the ground as regards this transfer:

1. RWS schemes are built by Jal Nigam and are transferred to GP.
2. Schemes are built and proposed to be transferred to GPs, but GPs are not willing to take over these schemes: In Kushi Nagar 35 and in Kaushambi 18 such built up schemes are awaiting transfer to GPs, which are apparently not willing to take over these schemes for various reasons including huge unpaid electricity bills already incurred and lack of any orientation and training to the GP members for operation and maintenance of these schemes.
3. More schemes are in the process of being built by Jal Nigam: like for example in Kushi Nagar 20 more (than the existing 35) schemes are in the process of being built on the basis of requests made by GPs, which have been obtained from them without any informed decision making at their level.

The current policy and practice around transfer of assets to GPs are marred with glaring capacity gaps related to their operation and maintenance at the GP level. There are practically no attempts to inform the GPs about the various dimensions of operation and maintenance and enhance their capacities to take care of technical, financial and managerial aspects of running a piped water supply scheme. As a result, GPs are often at a loss to understand the issues related to fixing and collection of user charges from the consumers, management of the pumping station, minor and major repairs and end up in a situation where transferred schemes fail to sustain themselves and get dysfunctional sooner than later.

The UP Panchayati Raj Act, 1947, amended most recently in 2007, gives the freedom to the state government of UP to make as many committees of the Gram Panchayat as required. In view of this provision of the Act, Jal Prabandhan Samiti (JPS), the committee for water and sanitation is supposed to be formed at each Gram Panchayat (GP). Village Water and Sanitation Committee (VWSC) is formed as a representative group of the users by co-opting 6-8 non-elected members from the user community.

‘Every committee constituted under sub-section (1) shall consist of a Chairman and six other members, who shall be elected by the members of the Gram Panchayat from amongst themselves in the prescribed manner; Provided that in each such committee there shall be at least one woman member, one member belonging to the Scheduled Castes or the Scheduled Tribes and one member belonging to backward classes; Provided further that the State Government may, by notification, direct that the Pradhan or Up-Pradhan or any other member of Gram Panchayat shall be the Chairman of any such committee.’

The UP Panchayati Raj Act 1947 (Amended 2007)

There is also a provision of joint committees, where committees from different GPs can join hands to transact business of common interest. This provision of the Act can be invoked by the state government for making a provision of scheme level committees (SLCs) that would be required in the case of multi-village/GP piped water supply schemes.

Institutional and Human development

Institutions, particularly community institutions, are critical to the effective provision of RWSS services at the community level. Besides the GP, self-help groups of women and other community groups also play a critical role at the village level.

Jal Prabandhan Samiti and VWSCs at the village level are found to be more notional than real. But for one GP, in none of the 20 GPs visited GP members could tell the names of the JPS members. People, including the GP members, are equally vague and ignorant about the presence of a VWSC even in Swajaldhara villages.

Training and capacity building activities being currently organized for the elected representatives of GPs are limited to one or two day's orientation on their roles and functions at the block level. Most of the GP representatives, who have attended these events, are barely aware of what happened during the orientation training. Moreover, as this is a one-time activity with no follow-up and with no organic link with the actual work being carried out by the GP on the ground, they do not really result into any substantive capacity building at the GP level.

In order to make the GPs play a central role in the management of RWSS schemes, their capacities will need to be built considerably. Current capacity levels are limited and inadequate to ensure the effective management of RWSS schemes and services. Regular meetings of the GPs are not held; Gram Sabhas i.e. community wide meetings are rarely held in their true spirit and are mostly shown to be held on paper to fulfil the requirement of GS meetings every six months. Decisions are taken by the Gram Pradhan/Panchayat President or a small coterie of his confidants, if the president is a male. In case of women Panchayat Presidents, many a time their husbands or in one case (Fatehpur Bangai GP in Shravasti) father-in-law were found to be functioning as one on their behalf. People at large are usually not aware of the decisions taken at the Panchayat level, as they are rarely a part of the process and there is often no attempt on the part of the GP to inform them of the decisions taken.

The biggest challenge is to make GPs function in a transparent and inclusive manner with substantive involvement of the larger community. This will include ensuring that the major decisions regarding the schemes are taken in community wide meetings during Gram Sabhas using a consultative process. The Jal Prabandhan Samiti (JPS), the committee of the GP, responsible for managing water supply and sanitation issues, needs to be more real than virtual in order to be truly effective. As required, Village Water and Sanitation Committees (VWSCs) should be formed through a participatory process and it must be ensured that the co-opted members of VWSC enjoy the confidence of the larger community and represent their best interests.

1.4 Capacity Building

Capacity has emerged as the biggest challenge in ensuring equity, inclusion, cohesion and accountability in the implementation of water supply and sanitation initiatives in UP in general and Eastern UP in particular. Capacities to implement participatory demand driven water supply and sanitation services are limited and inadequate across all the levels including state, district and GP/village levels.

- Key decision-makers at the district level feel that the government set-up is not fit for implementing participatory projects as by default it works in supply driven mode.
- NGO staff in earlier participatory projects such as Swajaldhara were not appropriately trained: trainings were not linked to scheme cycle in most of the cases; change in NGO staff due to delays in implementation and; new staff was often untrained in participatory processes
- Training of VWSC members being conducted by regional institutes of rural development is also a standalone activity not linked to the processes actually being carried out on the ground: there is no mechanism to know as to how the training benefitted the implementation process.
- In all the study districts except Chandauli, functionaries had no idea about community led total sanitation approach. In Chandauli, where the District Project Coordinator (Sanitation) knew about it, never applied it on the ground.
- Most people feel that communities are divided on caste, religious and political lines and Gram Panchayats are at times unfair when it comes to dealing with different subgroups. Moreover, people see Gram Panchayats as incapable and weak to handle piped water supply schemes efficiently; lack of dialogue with larger community found in almost all the villages visited which resulted in lack of trust on GPs and its committees; people feel that technical guidance and monitoring by knowledgeable government functionaries and direct conversation with larger community to ensure transparency and timely decisions and avoid delays is critical.

A capacity building strategy aimed at building capacities at the state, district and GP/village levels is suggested to be implemented throughout the project period to help ensure required systems strengthening and enhancing the quality of human resource available in the sector

The proposed strategy is to create a robust institutional arrangement for designing and undertaking capacity building interventions and tracking their results to meet the RWSSP-LIS objectives. This would be done in view of the following:

- Focus on communities and PRIs

- UPJN to be involved in a big way as the lead engineering institution
- Critical mass of trainers
- Technical assistance for standardized training manuals
- Planning for regular improvements in capacity building
- Needs assessment in every phase and batch
- Periodic Impact Assessments
- Mentoring in the field and dissemination of learning
- CLTS as entry point activity
- WSSO to manage rather than directly implement training
- Decentralized delivery of training

The two alternative models along with their respective merits and demerits have been presented to choose from in order to put this strategy into action. The centralized model of management of training, though adds to the overall work burden of SWSM/SPMU, carries the promise of uniformity in planning and implementation of training activities and better quality control on their outcomes. The out sourcing model of training management, though providing breathing space to SWSM/SPMU, calls for appropriate management/monitoring of performance contract of the hired training institutions in order to ensure that they deliver the desired outputs with quality and in time.

1.5 Communications Strategy

The current communication practices in the provision of water and sanitation services in the state are limited to one way production and dissemination of messages envisaged to be carrying the potential to trigger behaviour change among the intended target audience.

The common terminology prevalent to refer to these practices is known as information, education, and communication (IEC). This one way process largely led by WSSO at the state level has been one of top-down sanitation and hygiene behaviour teaching, using traditional ways of communication such as wall paintings, pamphlets, meetings, street plays etc. IEC activities around water have been limited and ineffective so far, as most of the respondents at the community level have not really been aware of what these schemes have to offer and why.

The fact that despite these IEC activities being organised and undertaken over last many years, there has been no substantive difference in the hygiene behaviour of people in study villages suggests that this has not worked as intended.

In view of the large scale failure of the conventional type of IEC campaigns and activities mounted under TSC over the years, there is a need to explore more effective ways of getting sanitation communication messages across to people. The new strategy has to focus on sustainable sanitation behaviour change at the household and community level.

1.6 Social and Project Risk Mitigation Action Plan

| S.N. | Issues/Risks | Mitigation Action |
|------|---|--|
| 1 | A routine supply driven construction program of water supply and sanitation facilities without effective demand from user communities for improved services | <ul style="list-style-type: none"> (i) Creating demand for improved piped water supply services with innovative communication campaigns involving the use of participatory methodologies such as Participatory Rural Appraisal (PRA), Participatory Learning and Action (PLA), Community Led Total Sanitation (CLTS) and Community Led Action for Sanitary Surveillance (CLASS) (ii) Re-defining the functional goals and strategies of key sector institutions of SWSM, Jal Nigam, Panchayati Raj and WSSO. (iii) Re-articulating their respective roles and responsibilities in the context of the WB supported project in Eastern UP |
| 2 | Lack of ownership of the constructed schemes by Gram Panchayats (GPs) | <ul style="list-style-type: none"> (i) Ensuring the substantive involvement of GPs at all stages of project planning and implementation beginning from the feasibility study stage itself (ii) Training the GP members in general and Jal Prabandhan Samiti (JPS) members in particular about the project design, scheme cycle and the implementation strategy and plan along with their roles and functions in all of these |

| | |
|--|---|
| <p>3 Exclusion of poor and the marginalised, particularly women, from project processes</p> | <p>(i) Ensuring substantive, rather than the notional, involvement of the poor and women in project planning and implementation by ensuring their active involvement in taking key decisions related to project planning and implementation on the ground.</p> <p>(ii) Engaging community based organisations such as self-help groups (SHGs) of women and joint liability groups (JLGs) of men for various project related tasks such as feasibility study, site selection, determining the service level, fixing up the user charges etc.</p> |
| <p>4 Lack of transparency in project planning and implementation</p> | <p>(i) All the key decisions related to the size of the scheme, villages/GPs to be involved, service level, payment of user charges are taken in community wide meetings called Gram Sabhas, and not by the executive body of the GP</p> <p>(ii) Details about project expenses are subject to periodic social audit, which is carried out in community wide meetings/Gram Sabhas</p> |
| <p>5 Lack of accountability in case of time and cost over runs of the schemes</p> | <p>(i) Processes for preparation and approval of detailed project reports (DPRs) are designed so as to minimise the delay without compromising on the quality of the end outcome</p> <p>(ii) Responsibility, authority, and accountability are located strategically and evenly</p> <p>(iii) Capacities of all the institutional and individual stakeholders are built through training and re-training throughout the project cycle</p> <p>(iv) Training programs are designed in view of clearly identified training needs of various stakeholders at different stages of the scheme cycle.</p> |

- | | |
|--|--|
| <p>6 Sanitation remains a poor add on to the overall project with its primary focus on water supply: and as a result, water supply and safe sanitation do not get addressed as an integrated issue having a major bearing on the quality of water and the resultant health status of people</p> | <ul style="list-style-type: none"> (i) Safe sanitation in terms of open defecation free (ODF) communities/GPs is made into an incentive for improved water supply services (ii) Water supply and safe sanitation are offered as an integrated service with emphasis on communication and capacity building for effective sanitation and hygiene behaviour change at the community level. |
|--|--|

In view of the above, it is clear that the possible ways to mitigate these risks is to invest in large scale and intensive communication and capacity building of stakeholders, particularly of user communities and GPs.

Findings and Recommendations

1 Key Findings and Recommendations

1.1 Findings

A. Rural Water Supply and Sanitation (RWSS) services

Water and Sanitation

- More than 90% people in rural areas in Eastern UP have access to water through private (shallow hand-pumps dug at the first strata at 25-60 feet) or/and public (India Mark II hand-pumps dug at the second strata at 100-150 feet) facilities: as a result, people in general are not willing to pay any money for sharing the capital cost of the water supply schemes under the proposed World Bank assisted project; however, most of the people are open to paying user charges (5-50 rupees per month) for improved piped water supply services.
- There is close to 100% open defecation in most of the villages: only a few households (not more than 2% of the households) in any of the villages visited have their own individual household latrines that they have constructed and use; most of the toilets constructed under TSC are either abandoned and unusable or are used by the family members during emergencies including illness, rains etc.
- Only a couple of Swajaldhara schemes studied were found to be functional on the ground: more than 90% of the schemes are either incomplete or non-functional due to paucity of funds; schemes are non-functional as there is no payment of user charges by people; users have been generally not involved in the planning and implementation of these schemes.
- Jal Nigam schemes are functional in most of the cases, but collection of user charges is a real challenge: GPs in general are not willing to take up the operation and maintenance of the schemes constructed by Jal Nigam.

ODF villages and incentives for hardware

- Being open defecation free (ODF) is one of the qualifying criteria for Nirmal Gram Puraskar (NGP), the national award instituted by Government of India for rewarding clean and fully sanitised villages. But as per the feedback from the study districts, almost 100% of the NGP awarded villages are not actually ODF: either they were never ODF in the first place; or they have slipped back.
- There are mixed views on use of subsidy to promote sanitation: some district officials are of the view that subsidy for toilets in the name of incentives is a barrier in achieving the goal of sanitation, many others feel that subsidy must be retained, as this will help people adopt sanitation..

Drainage

- Piped water supply without drainage facilities has resulted in increase in waste water across many villages across study districts.

Integration of water and sanitation

- There is practically no integration in planning of rural water supply and sanitation programmes, primarily because the two are being dealt with two different departments, rural water supply by rural development and sanitation by Panchayati Raj having no real communication with each other in the planning and implementation of programmes.
- NBA subsidy has been released to GPs selected by Panchayati Raj department and rural water supply villages may not be the same.
- There is no such decision, even at the district level, that rural water supply money would be spent in villages where sanitation money is given or vice versa. But everyone felt that water is necessary for ensuring toilets to be used and maintained properly. Drainage for waste water must be taken up on a priority basis in villages where piped water supply is given as there is a substantial increase in generation of waste water.
- At the block level, ADO (Panchayat) has a separate set-up with loose connection with the coordinating officer, the BDO and is linked to DPRO directly, who looks after his establishment and pays his salary.

1.2 Social Assessment

- People, including the poor, in the study area have access to rural water supply services through private (shallow hand pumps) and public (India Mark II hand pumps). There has been practically no participation of people in the planning and implementation of rural water supply schemes and services created by the government at the village level. These include both piped water supply schemes and public stand posts established by UP Jal Nigam and schemes built under Government of India's national Swajaldhara programmes.
- Women are largely excluded from decision making processes and are practically invisible through out the entire chain of planning and implementation of rural water supply and sanitation schemes and services on the ground. Given the fact that women are the primary stake holders by dint of their roles and responsibilities as providers of water at the household level,

their exclusion from planning and implementation processes is likely to adversely impact the long term sustainability of the services created. The project has to address this challenge up-front for the following two reasons: One, to make the project efficient and effective in terms of not only delivering the improved water supply services to people but also for making it sustainable over time and ; second, to help women participate in planning and management processes as the most important stakeholders as a matter of right and not only for the purpose of making the project sustainable and successful.

- The case of Musahars, (a highly marginalized scheduled caste community), as available in the box 1, suggests that it is quite likely to have situations where highly marginalized communities such as SCs can end up having very unequal access to available water supply services. And moreover, their needs are likely to be neglected even by the gram panchayat. In order to make sure that this kind of exclusion of marginalized groups does not take place at all and certainly not on scale, it is important to ensure that the members of SC community have a very strong and effective representation within the decision making bodies such as jal prabandhan samiti (JPS) and VWSC.
- There has been no substantive participation of people, particularly women, in terms of their involvement in decision making including choice of service level and fixing up of user fees in almost all of the government schemes. Only a few have participated out of their own personal interest. **This does not apply to the ‘indigenous people’, as there are none in the Eastern UP as per the understanding of OP 4.10 of the World Bank.**
- **There are no communities in the proposed project districts which could be termed as Indigenous Peoples as per the above definition. Hence, OP 4.10 does not come into play in the context of the proposed RWSSP-LIS.**
- In all the schemes built by JN, land has been provided by Gram Panchayats free of cost. For Swajaldhara schemes, land has been provided either by Gram Panchayats or by private individuals free of cost. Getting land for water supply projects does not seem to be an issue in Uttar Pradesh so far.
- OP/BP 4.12 is triggered when a Bank investment causes involuntary taking of land that results in direct social and economic impacts such as: loss of shelter leading to relocation, loss of assets or access to assets, loss of income sources or means of livelihood (whether or not the affected persons must move to another location). As no such thing was found across the five sample districts (Chandauli, Faizabad, Kaushambi, Kushinagar and Shrawasti) visited, **there are apparently no issues related to Bank’s OP 4.12 in Uttar Pradesh.**

Decentralisation and Panchayati Raj Institutions

- The current policy and practice around transfer of assets to GPs are marred with glaring capacity gaps related to their operation and maintenance at the GP level.
- There are practically no attempts to inform the GPs about the various dimensions of operation and maintenance and enhance their capacities to take

care of technical, financial and managerial aspects of running a piped water supply scheme. As a result, GPs are often at a loss to understand the issues related to fixing and collection of user charges from the consumers, management of the pumping station, minor and major repairs and end up in a situation where transferred schemes fail to sustain themselves and get dysfunctional sooner than later.

Institutional and Human development

- Jal Prabandhan Samiti and VWSCs at the village level are found to be more notional than real. But for one GP, in none of the 20 GPs visited GP members could tell the names of the JPS members. People, including the GP members, are equally vague and ignorant about the presence of a VWSC even in Swajaldhara villages.
- Training and capacity building activities being currently organized for the elected representatives of GPs are limited to one or two day's orientation on their roles and functions at the block level. Most of the GP representatives, who have attended these events, are barely aware of what happened during the orientation training. Moreover, as this is a one-time activity with no follow-up and with no organic link with the actual work being carried out by the GP on the ground, they do not really result into any substantive capacity building at the GP level.
- In order to make the GPs play a central role in the management of RWSS schemes, their capacities will need to be built considerably. Current capacity levels are limited and inadequate to ensure the effective management of RWSS schemes and services. Regular meetings of the GPs are not held; Gram Sabhas i.e. community wide meetings are rarely held in their true spirit and are mostly shown to be held on paper to fulfil the requirement of GS meetings every six months. Decisions are taken by the Gram Pradhan/Panchayat President or a small coterie of his confidants, if the president is a male. In case of women Panchayat Presidents, many a time their husbands or in one case (Fatehpur Bangai GP in Shravasti) father-in-law were found to be functioning as one on their behalf. People at large are usually not aware of the decisions taken at the Panchayat level, as they are rarely a part of the process and there is often no attempt on the part of the GP to inform them of the decisions taken.
- The biggest challenge is to make GPs function in a transparent and inclusive manner with substantive involvement of the larger community. This will include ensuring that the major decisions regarding the schemes are taken in community wide meetings during Gram Sabhas using a consultative process. The Jal Prabandhan Samiti (JPS), the committee of the GP, responsible for managing water supply and sanitation issues, needs to be more real than virtual in order to be truly effective. As required, Village Water and Sanitation Committees (VWSCs) should be formed through a participatory process and it must be ensured that the co-opted members of VWSC enjoy the confidence of the larger community and represent their best interests.

1.3 Capacity Building

- Existing institutional capacity in the sector for capacity building is very limited and not at all adequate to address the emerging capacity building needs following the proposed changes in approach and strategy. For example, there is no sector specific departmental training institution for RWSS Sector in UP. Alternative institutional arrangements have been explored from time to time depending on the availability and guidelines of the funding institutions such as GoI and World Bank. These institutional arrangements include management of training by SPMU-SWSM and WSSO.
- SWSM, as it was constituted using the institutional infrastructure left behind by the earlier World Bank supported Swajal program in late 90s and at the turn of the millennium, carries some experience of designing and conducting trainings for reform programs (Sector Reform/Swajaldhara and TSC) in the sector. However, these constitute only a limited portion of the programs in the sector and the experience available is limited and inadequate. In view of the wide range of capacity building needs emerging in the sector, WSSO requires the capacity to manage large scale capacity building programs.
- The current WSSO has a small team with limited experience and skills in required disciplines such as project planning and management; community development; health and hygiene, etc.
- SWSM/WSSO has organized programs related to rural water supply systems, operation and maintenance of hand pumps, rural water quality monitoring and surveillance, and Nirmal Gram Puraskar. The training programs organized as part of Sector Reforms/ Swajaldhara were not linked to the scheme cycle and had no correlation with the results/ outcomes of the process to be adopted for a particular stage of scheme cycle. Most of these training activities (organized as awareness campaigns/ meetings) were primarily targeted towards informing people about the program guidelines and mobilization of capital contributions.
- Links between training and expected upgradation of knowledge and skills are weak, as there is no way to know whether training is leading to desired results in terms of improved performance.
- The programs under TSC, now Nirmal Bharat Abhiyan (NBA) have largely been based on traditional approach of focusing construction of individual toilets rather than behaviour change at the community level. Some community led total sanitation (CLTS) initiatives facilitated by Key Resource Centre (KRC) at Nainital such as in Saharanpur have demonstrated the efficacy of CLTS approach in getting faster results on the ground by facilitating collective local action. However, CLTS has yet to be adopted and used on a scale in the sector in the state. Multiple approaches are being used out of which CLTS seems to have shown encouraging early results. In view of the fact that other non-CLTS approaches have not shown any promising results so far, it may be a good idea to try out CLTS in a more intensive manner. Capacity building of facilitators at district and sub-district levels on CLTS approach would help in the functionaries' capacity to trigger communities and facilitate collective behaviour change at the community level.
- In general, training interventions are not yet linked to scheme cycle. To make

sure that training is linked to performance and results, it is important that training and technical assistance activities under the proposed project are linked to scheme cycle (both for SVS and MVS). For example, the facilitators should be trained on feasibility studies just before the process of selection of technology options is to be facilitated by them at the village level, so that they can make sure that only more feasible schemes are taken up. This would ensure both efficiency and effectiveness in sector functioning.

- The entire emphasis of training so far in the sector has been on meeting the expenditure targets under Swajaldhara and TSC rather than evolving a medium/ long-term strategy and plan for developing the capacities of the department and other key stakeholders.
- The training is not sufficiently institutionalized as a process for capacity building and institutional strengthening.
- Mechanism for monitoring the training and assessment of its impact as an input for designing and revising the training curriculum and training strategy for subsequent programs are practically non-existent.
- Different agencies such as SWSM, WSSO, SIRD and RIRD/DIRDs are engaged in organizing different types of training and orientation activities on the same theme following different approaches without much of dialogue between them. Inquiry revealed that agencies such as SWSM, WSSO and SIRD are not aware of each other's activities even though related to the same theme. Hence, there is a greater need to build synergies across agencies and approaches to optimize on the efforts made.
- The training programs/ activities are generally organized as one-off-events without an accompanying strategy for strengthening of skills on a continuous basis in the light of feedback from the participants.

This underlines the need to have mechanisms of handholding and sharing/cross learning for enhancing the efficacy of capacity building interventions and their impact.

1.4 Communications

- The current communication practices in the provision of water and sanitation services in the state are limited to one way production and dissemination of messages envisaged to be carrying the potential to trigger behaviour change among the intended target audience.
- The common terminology prevalent to refer to these practices is known as information, education, and communication (IEC). This one way process largely led by WSSO at the state level has been one of top-down sanitation and hygiene behaviour teaching, using traditional ways of communication such as wall paintings, pamphlets, meetings, street plays etc. IEC activities around water have been limited and ineffective so far, as most of the

respondents at the community level have not really been aware of what these schemes have to offer and why.

- The fact that despite these IEC activities being organised and undertaken over last many years, there has been no substantive difference in the hygiene behaviour of people in study villages suggests that this has not worked as intended.
- In view of the large scale failure of the conventional type of IEC campaigns and activities mounted under TSC over the years, there is a need to explore more effective ways of getting sanitation communication messages across to people. The new strategy has to focus on sustainable sanitation behaviour change at the household and community level.

1.5 Key Recommendations

Key recommendations are as follows:

- Detailed Project Reports (DPRs) are prepared in consultation with the concerned communities, particularly on the service level and people's willingness to pay for capital and operation and maintenance cost of the scheme.
- Jal Prabandhan Samiti (JPS)/Village Water and Sanitation Committee (VWSC) are actively involved throughout the entire project planning and implementation process starting with feasibility study and preparation of DPRs. and including construction supervision
- Written request from GPs for creation of piped water supply schemes is obtained only after facilitating a process of informed decision making at the village/GP level.
- Intensive orientation, training and capacity building activities are undertaken at the SWSM/SPMU, UPJN, PRD and GP levels before starting the project processes on the ground and throughout the project period on the basis of periodic (at the beginning of each scheme cycle) assessment of training and capacity gaps and needs at these levels.

Section 1

Introduction

1 Background

1.1 Global Perspective

The United Nations International Children's Emergency Fund (UNICEF) and the World Health Organisation (WHO) report³ that the MDG drinking water target has been reached: Over 2 billion people gained access to improved water sources from 1990 to 2010, and the proportion of the global population still using unimproved sources is estimated at only 11 per cent. This is less than half of the 24 per cent estimated for 1990. Almost 6.1 billion people, 89 per cent of the world's population, were using an improved water source in 2010.

The drinking water target has thus become one of the first MDG targets to be met. While this tremendous achievement should be applauded, a great deal of work remains. First, huge disparities exist at many levels – between developed, developing and least developed countries. Similar disparities are found within countries -- between the rich and poor and between those living in rural and urban areas. Second, complete information about drinking water safety is not available for global monitoring. Finally, more than 780 million people remain unserved. Although the MDG drinking water target has been met, it only calls for halving the proportion of people without safe drinking water.

More than one tenth of the global population still relied on unimproved drinking water sources in 2010. While almost half of the two billion people who have gained access to drinking water since 1990 live in China or India, it has also emerged that ten countries are home to two-thirds of the global population without an improved drinking water source, including China (119 million) and India (97 million).

1.2 National Context

Policy focus in the provision of rural drinking water supply in India has been through four distinct, but overlapping phases since 1970s. These include coverage, sustainability, quality, and security. It is important to recognise here that all these four policy focuses have been progressively inclusive of the preceding one.

Throughout 70s, 80s and 90s, focus was on coverage, which meant expanding the physical infrastructure for water supply by building more systems and schemes. With the launch of the Sector Reform Programme (SRP) in 1999, focus was shifted from coverage to sustainability, which accorded higher priority to ensuring the sustainability of sources, systems, and services. SRP, implemented on a pilot basis, aimed at institutionalising community participation and demand responsive approaches in order to ensure sustainability of systems and sources in the rural water supply programme.

National Rural Drinking Water Quality Monitoring and Surveillance Programme (NRDWQMS), launched in 2005, were based on the policy recognition of the crucial significance of quality in provision of drinking water to people in rural areas.

³ Progress on Drinking Water and Sanitation: 2012 Update, WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation

With the launch of the government's flagship National Rural Drinking Water Programme (NRDWP) in 2010, Government of India articulated its policy commitment to ensure safe water for all in the rural areas of the country. The major shift is in terms of focus on 'water security' as against only 'coverage and access' and on 'households', as against the earlier focus on 'habitations'.

In view of the essential linkages between poor sanitation and quality of water, a country wide initiative in the form of Nirmal Bharat Abhiyan (NBA), a modified version of the earlier Total Sanitation Campaign (TSC), was launched in April 2012 to create a Nirmal Bharat (Clean India) i.e. an open defecation free and fully sanitised India. The NRDWP guidelines emphasize the involvement of Panchayati Raj Institutions and communities in planning, implementing, and managing drinking water supply schemes.

The States are advised and incentivized to hand over management of their schemes to the panchayati raj institutions (PRIs). Funds for sustainability of schemes are to be provided on a 100 percent Central share basis. A separate component to fund IEC, HRD, MIS, Water Quality Monitoring and Surveillance and other support activities has also been introduced.

Recently, as part of the NRDWP, the Department of Drinking Water and Supply (DDWS) has prepared its long-term strategic plan (2011-2022) for ensuring drinking water security to all rural households. The strategic plan aims to cover 90 percent of households with piped water and at least 80 percent of households with tap connections during this period. The strategy offered by the long term strategic plan of DDWS is one of creating an enabling environment for the Panchayati Raj Institutions and local communities to manage rural drinking water sources and systems on their own. 'The strategy emphasizes achieving water security through decentralized governance with oversight and regulation, participatory planning and implementation of sources and schemes.'

It is envisaged that the capacity building programs will be required for communities to help them monitor and manage their water resources efficiently and effectively at the local level. Sustainable service delivery mechanisms are a central feature of the program, with State institutions or Zilla Panchayats implementing and managing large multi-village schemes, delivering bulk water to villages in water stressed areas, and GPs implementing and managing in-village and intra-Panchayat schemes. 'The strategy highlights source sustainability measures, water quality safety, monitoring and surveillance, service agreements with operators, convergence of different development programs, and building professional capacity at all levels.'

This also is largely in synch with India's recently announced (June 2012) Draft Water Policy which, apart from according sufficient emphasis to rural water supply, also recognises the need for concerted attention needed to address the present scenario and concerns of water resources and their management in the country including increasing water stress, which poses a threat to water security, issues related to water governance, the wide temporal and spatial variation in availability of water, which may increase substantially due to various factors including climate change, fragmented planning and implementation of water resources projects, etc. The new draft Water Policy also puts emphasis on reducing the large disparities between rural and urban contexts in terms of access to and use of piped water supply.

1.3 Uttar Pradesh Context

As against the national average of a little more than 30 percent of households with tap connections (including household and public taps)⁴, the percentage of coverage of households with taps in UP is the second lowest in the country at around 2 percent only. Bihar is the only state, which is lower than the UP average in tap connections.

The operations and maintenance of existing schemes is a major challenge due to a large number of dysfunctional or non-functional schemes in the state at any given point of time. Other than the chemical contamination of water in some parts, faecal contamination of water is rampant and there are many water quality affected habitations across the Eastern part of the state that require supply of water from distant safe sources. As such, there will be a separate component of NRDWP focusing on Uttar Pradesh with different allocation criteria and funding components, but implemented within the framework of NRDWP, supporting the following key elements of the reform program:

- Placing GPs and communities in the central role, supported by higher levels of PRIs, the State government and the local non-governmental and private sector, for facilitating, planning, implementing, monitoring and providing a range of O&M back-up services.
- Using sustainable, community or local government managed models for intra-GP RWSS schemes and using State-PRI partnership models for multi-GP schemes.
- Putting water resources security as a core theme of the new model, including increased community management of scarce resources.
- Moving the RWSS sector to recovery of at least 50 percent O&M and replacement costs and initiating contribution to capital costs keeping affordability and inclusiveness in mind.
- Moving towards metered household connections, with 24/7 water supplies where feasible, as a level of service.
- Promoting professionalized service provision management models, and/or back-up support functions, for the different market segments (simple/small single village/GP schemes; large single village/GP schemes; multi village/GP schemes).
- Integrating water supply and sanitation, with effective sanitation promotion programs for achieving “clean villages.”
- Establishing M&E systems with independent reviews and social audits.
- Water and sanitation are state subjects. But in view of their critical importance, Government of India has been playing a very central role both in the rural drinking water supply and sanitation sector, with the launch of Accelerated Rural Water Supply Programme (ARWSP) in 1972-73 and Central Rural Sanitation Program (CRSP) in 1986. While the aim of CRSP was to increase sanitation coverage in the rural areas, the major focus of ARWSP was coverage, which meant expanding the infrastructure of water supply systems and facilities across the rural areas of the country to cover all not covered and partially covered habitations. This was done mainly through the public health engineering

⁴ Source: Twelfth Five-Year Plan-2012-2017; Report of the Working Group on Rural Domestic Water and Sanitation.

departments in most of the states. In Uttar Pradesh, the state level department handling drinking water is Jal Nigam.

- The key issue and upfront challenge around water in Uttar Pradesh is not only of achieving universal coverage, (which is currently around 82 percent as against more than 90 percent of the national average), but also of ensuring access and quality on the one hand and preventing slippage on the other. Continuous slippage can and does affect effective coverage and access and has major implications both for equity and sustainability of the water delivery services.
- There are primarily two types of factors leading to slippage from effective coverage that include: (i) factors related to effective functioning of water supply systems and sources, and (ii) factors related to water quality, where availability and access are not the issues.
- Hence the pathway to improved water security in the state has to address both these sets of factors upfront. Slippage can be prevented by ensuring improved water quality and better management of the assets created. While water quality and poor operation and maintenance of created assets are reported to be the primary reasons of slippage, there are other contributory factors as well. These are: aging of supply systems and sustainability of institutional arrangements.
- Slippage in effective coverage due to water quality problems is also related to safe sanitation and hygiene practices by people. This requires end of open defecation as one of the primary preconditions for ensuring the quality of water. The most lethal and widespread water quality issue in UP is of bacteriological, and not chemical contamination, as in most states. Water free from faecal contamination can take care of a substantial part of the water quality issue in UP. Open defecation is unmistakably one of the biggest contributors. Lack of hand washing before eating and after defecation is certainly another factor, joined in by factors like unsafe storage and usage of water at the household level.
- Bacteriological (mainly faecal) contamination of water seems to be near universal due to the widespread practice of rampant open defecation across all the districts in the state. Incidence of diarrhoea, which is caused primarily due to faecal contamination of water, is fairly high in the state of UP.
- This underlines the need to forge effective convergence between water and sanitation programs at the district and village level, with sufficient policy, planning, and funds' support from the state level.
- As far as chemical contamination is concerned, 1038 habitations in UP are affected with water quality (chemical) with a population of 8.75 lakh at risk, as on 01.04.2012 (There are a total of 260110 habitations and 1570.42 lakh rural population in UP). Out of the 60 districts that are most seriously affected by Japanese Encephalitis (JE) and Advanced Encephalitis Syndrome (AES) in the 5 states of the country, 20 belong to UP and 14 of them are from eastern UP (Azamgarh, Bahraich, Ballia, Balrampur, Basti, Deoria, Gonda, Gorakhpur, Kushinagar, Mahrajganj, Mau, Sant Kabir Nagar, Shrawasti and Siddharth Nagar).

A more detailed analysis of UP and the special context of Eastern UP is given in Section/Chapter 3, Social Assessment.

Study Approach and Methodology

2 Study Approach and Methodology

The broad approach for carrying out the assignment has been one of participatory research, action learning, and collaborative strategy development. This entailed widespread stakeholder consultation; participatory needs assessment involving communities, sector institutions, and panchayati raj institutions (PRIs) besides secondary literature survey including desk/web research and a workshop to share the draft report. The following were undertaken to carry out the tasks related to the set of assessment and analysis exercise proposed to be undertaken as part of the assignment:

State level interviews and consultations: in-depth interviews and discussions were held at the SWSM and WSSO levels to understand the state perspective on on-going initiatives in the water and sanitation sector and the rationale of the proposed World Bank assisted project.

This also included discussions with senior engineers from Jal Nigam at the state level. The purpose of this exercise has been to map out the perceptions, perspectives, practices and priorities of the key stakeholders from the line department.

Field consultations entailed field visits to 20 GPs across five sample districts. These districts have been selected through a purposive sampling method and are representative of the different regions across 28 districts of Eastern Uttar Pradesh (table below).

Table 1 : The Sample Study Districts

| Category (As per composite Index*) | Districts | Sample District | District Name | Agro-climatic Zone | Composite Index | Japanese Encephalitis disease occurrences | Water Quality – Arsenic |
|------------------------------------|-----------|-----------------|---------------|------------------------|-----------------|---|-------------------------|
| Very Low | 13 | 2 | Shrawasti | Northern Eastern Plain | 75.4 | Yes | No |
| | | | Kushinagar | Northern Eastern Plain | 73.69 | Yes | No |
| Low | 10 | 2 | Kaushambi | Central Plain | 82.46 | No | No |
| | | | Chandauli | Vindhyan | 85.15 | No | Yes |
| Moderate | 5 | 1 | Faizabad | Eastern Plain | 96.41 | No | No |
| Total | 28 | 5 | | | | | |

Note: Area Planning Division, State Planning Institute, Planning Department, Government of Uttar Pradesh has published a Planning Atlas, Uttar Pradesh, 2010 which categorises districts on the basis of a composite index of development (CID), based on 36 important indicators in the areas of agriculture, industrial infrastructure, economic infrastructure and social infrastructure such as per capita production of food grains, livestock density, intensity of cropping, number of small scale industries per lakh of population workers, percentage of electrified villages to total inhabited villages, number of LPG consumers per lakh of population, credit deposit ratio, per capita income at current prices, literacy percentage, gender gap in literacy, sex ratio etc. (Details available in annexure 3)

While selecting the sample GPs for the study, efforts were made to ensure inclusion of Jal Nigam schemes (single and multi-village; run by Jal Nigam or transferred to GP), Swajaldhara. (List of GPs visited is available as annexure 2)

The process usually began with interactions and interviews with the district collectors, chief and district development officers, and Jal Nigam engineers and District Panchayati Raj Officers at the district level.

Field visits to GPs involved interactions and interviews with PRI members and focus group discussions (FGDs) with community members, particularly women, and their self-help groups (SHGs), as end users of water supply and sanitation services. The purpose of this exercise has been to map out the implementation challenges on the ground in ensuring equitable and sustainable water supply and sanitation services. This exercise has yielded valuable information, ideas, and insights into sector capacities and constraints at the cutting edge level in providing the services.

This consultation also involved brainstorming for identifying the various elements of a sound strategy to ensure equitable and sustainable water supply to people in the light of available experiences and ground realities, specifically to address already identified concerns.

A state level workshop was held at Lucknow on 23rd January 2013. A presentation of preliminary observations, findings and recommendations of the study was presented during this workshop to a wider group of stakeholders including SWSM, Jal Nigam, WSSO, World Bank and community members.

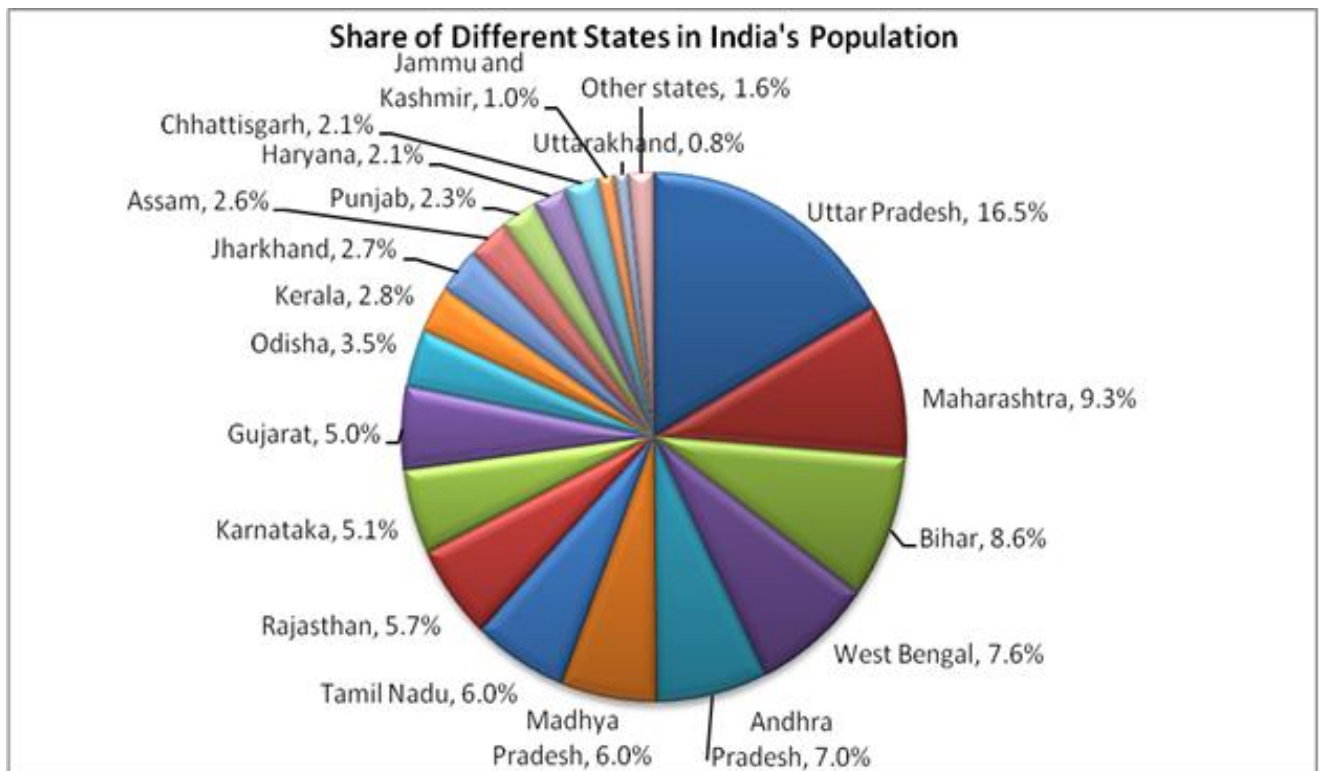
3 Baseline: UP and Eastern UP

The baseline for the study has been developed tapping both secondary as well as primary sources. The secondary sources were explored to indicate situations at the state or project district level whereas household survey was used to collect primary information at Gram Panchayat level from 5 sample districts covering maximum diversity and situations obtaining across the identified 28 project districts.

Demographic Features of the State

Uttar Pradesh is the most populated state in India with 16.6% of India’s population residing in the state (refer figure below). As per Census 2011, Uttar Pradesh has a population of 19.95 Crore, an increase from figure of 16.62 Crore in 2001 census. The growth rate of the population of Uttar Pradesh is about 20% (including Uttarakhand) which is higher than the national growth rates of around 17%. Total population of Uttar Pradesh as per 2011 census is 199,581,477 of which male and female are 104,596,415 and 94,985,062 respectively. According to the Uttar Pradesh Census 2011, the population density of Uttar Pradesh is 828 people per square kilometer which is more than double of the national average of about 380 and is a major cause of concern. The sex ratio as of 2011, at 908 women to 1000 men, is lower than the national figure of 933.

Figure 1



Uttar Pradesh has a large number of people living below the poverty line. Estimates released by the Planning Commission for the year 2004-05 reveal that Uttar Pradesh has 59 million people below the poverty line, the most for any state in India. The literacy rate of the state according to the 2011 Census is 70%, which is below the national average of 74%. While the literacy rate for men is at 79%, it is 59% for women.

Uttar Pradesh has been one of the oldest states in the country and in every single way reflects the life and culture of India as a whole. Spread over an approximate area of 240000 Sq. km. the state has many places of strategic and cultural significance. The languages spoken in the Uttar Pradesh state includes Hindi and Urdu. In total Uttar Pradesh (UP) state comprises 312 Tehsils in 71 districts.

Table 2: Number of Administrative Units in Uttar Pradesh, 2011

| | |
|------------------------|-----------|
| Districts | 71 |
| Tehsils | 312 |
| Statutory Towns | 648 |
| Census Towns | 267 |
| Villages | 1.06 Lakh |

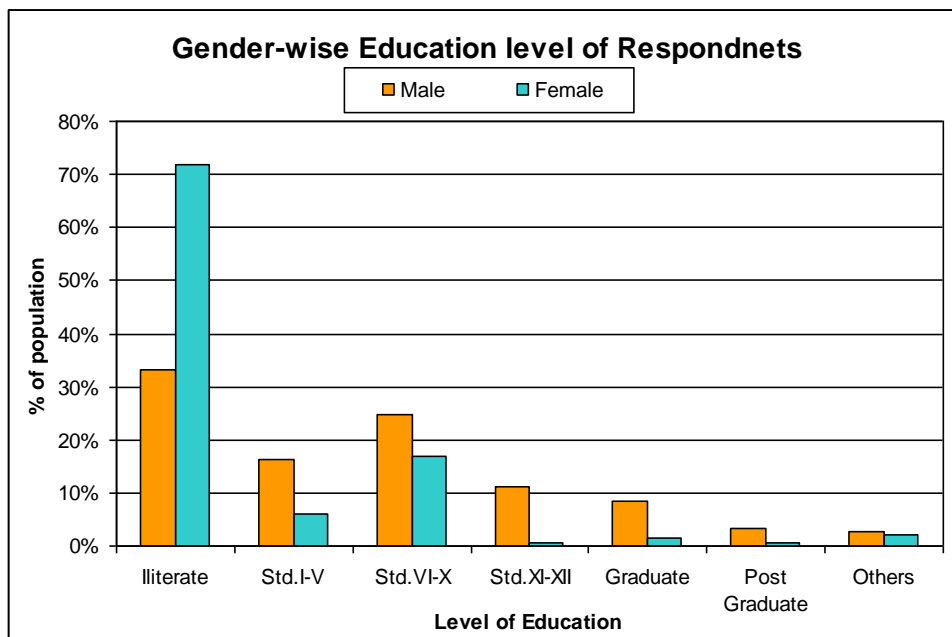
The majority of the state's population lives in rural areas. The rural settlements are characterized by groupings of hamlets in the eastern part, and a combination of the two in the central part. A traditional village in Uttar Pradesh is a cluster of mud huts with roofs made of thatch (such as straw) or clay tiles and few amenities of modern living. Villages near the cities, however, are likely to have cement-plastered homes, paved roads, and electricity.

1. Profile of the Respondents

254 households were interviewed from the five districts of eastern Uttar Pradesh. Number of households selected for the study ranges between 45 and 55 from each of the selected districts (refer appendix 1). All the respondents selected for the study were above 18 years and efforts were especially made to interact with the female members of the house. Therefore, about 54 percent of the total respondents were female and remaining 46 percent were males.

Literacy among the respondents is very poor as only 46 percent of the respondents are literate and rests 54 percent are illiterate. Illiteracy is quite higher among the female respondents as 72 percent of the female respondents are illiterate whereas only 33 percent of the male respondents are illiterate. Among the literates also, only 9.2 percent of the population have continued their studies after intermediate (12th standard).

Figure 2



It is also ensured that various communities residing in the selected GPs should be covered during the selection of the households. Hindus are the dominant population in all the selected sixteen GPs for the study, only 6 GPs have considerable number of Muslim population. Therefore, few Muslim households from the six GPs are selected for the study (refer Appendix 1 for the list of sample households). As per the available data, about 90.6 percent of the households were Hindu, 9.1 percent were Muslim and rests were from other religions.

Many studies have established that access to basic needs is poor among the socially and economically backward communities. Therefore most of the households selected for the study are from backward communities. About 39 percent of the households selected were Scheduled castes (SC), 32.5 percent were from Other Backward Castes (OBC), about seven percent were Scheduled Tribes, and rests 12.3 percent were from General category. Muslim households (about 9%) are not categorized into any caste.

Table 3: Religion and Caste of the Respondents

| District | Religion | | | | Caste-category | | | | | |
|--------------|--------------|-------------|-------------|-------------|----------------|--------------|--------------|--------------|----------------|-------------|
| | Hindu | Muslims | Others | Total | ST | SC | OBC | General | Not applicable | Total |
| Chandauli | 46 | 9 | 0 | 55 | 1 | 23 | 18 | 3 | 9 | 54 |
| Faizabad | 41 | 8 | 0 | 49 | 1 | 23 | 5 | 12 | 8 | 49 |
| Kaushambi | 54 | 0 | 0 | 54 | 1 | 24 | 21 | 8 | 0 | 54 |
| Kushinagar | 43 | 5 | 0 | 48 | 2 | 14 | 20 | 6 | 5 | 47 |
| Shravasti | 46 | 1 | 1 | 48 | 12 | 15 | 18 | 2 | 1 | 48 |
| Total | 230 | 23 | 1 | 254 | 17 | 99 | 82 | 31 | 23 | 252 |
| % | 90.6% | 9.1% | 0.3% | 100% | 6.7% | 39.3% | 32.5% | 12.3% | 9.1% | 100% |

2. Profile of the Respondents Household

2.1. Family structure / size

Average Family size of the sample households is 8.11 which is higher than the national mean household size which is 5 persons/households (Census 2011)⁵. Mean household size is less than 8 persons in Kausambhi and Kushinagar, whereas it is higher in other three districts.

Sex ratio is used to describe the number of females per 1000 males. As per the population Census of 2011, sex ratio of India and Uttar Pradesh is 940⁶ and 908⁷ females per 1000 males, respectively. However, our sample reveals much lower sex ratio in the selected districts. The table below shows that number of girls in the age group of 5-18 years is less than the number of boys in the same age in four districts (other than Shravasti). Similarly in the age group of above 18 years, number of females is lower than the males in all the districts. Other than Kaushambi where per 1000 boys (in the age group of less than 5 years) there are just 465 girls, number of girls is higher than boys in the age group of less than 5 years. Sex ratio in the age group of above 18 years is 897 females per 1000 males, and sex ratio between 5 to 18 years is 859 females per 1000 males.

Table 4: Gender wise Population and Sex-ratio of Selected Households

| District | Male (above 18 yrs) | Female (above 18 yrs) | Boys (5-18 yrs) | Girls (5-18 yrs) | Boys (< 5 years) | Girls (<5 years) | Mean Household size |
|------------------|---------------------|-----------------------|-----------------|------------------|------------------|------------------|---------------------|
| Chandauli | 131 | 116 | 73 | 60 | 37 | 45 | 8.40 |
| Faizabad | 132 | 113 | 75 | 57 | 25 | 29 | 8.80 |
| Kaushambi | 104 | 98 | 74 | 65 | 43 | 20 | 7.48 |
| Kushinagar | 107 | 96 | 60 | 48 | 19 | 27 | 7.44 |
| Shravasti | 91 | 84 | 73 | 75 | 34 | 48 | 8.44 |
| Total | 565 | 507 | 355 | 305 | 158 | 169 | 8.11 |
| Sex Ratio | 897.3 | | 859.2 | | 1069.6 | | |

2.2. Average Income and Population below the Poverty Line

An average monthly income of the selected households is RS.4540/month. However, variation in family income is quite high among the selected districts. An average family income in Faizabad is Rs.7535/month whereas it is Rs.2436/month in Shravasti. Similarly, per capita income in Faizabad is Rs.792/head/month whereas it is just Rs.298/head/month in Shravasti.

As per Planning Commission (March 19, 2012), individual above a monthly income of Rs.672.8 in rural areas is not considered poor⁸. On the basis of

⁵ www.censusindia.gov.in/Tables_Published/HH-Series/hh_series_tables_20011.aspx

⁶ www.census2011.co.in/sexratio.php

⁷ www.census2011.co.in/census/state/uttar+pradesh.html

⁸ <http://ibnlive.in.com/news/indias-poverty-line-now-lowered-to-rs-28-per-day/240737-3.html>

Tendulkar Committee methodology which includes spending on health and education besides the calorie intake, 34.47 crore population of India in 2009-10 was below the poverty line (BPL).

As per our findings, about 76% of the population in sample households is BPL. In Shravasti, about 94% of the population is BPL whereas in Faizabad, 49% of the population is below the poverty line. This data certainly does not give the figures for the district as we have selected socially and economically poor households for our study.

Table 5: Economical Status of the Selected Households

| District | Family Income (in Rs. per month) | Per Capita Monthly Income (in Rs.) | % of BPL population |
|--------------|----------------------------------|------------------------------------|---------------------|
| Chandauli | 5100.00 | 609.78 | 76.4 |
| Faizabad | 7534.88 | 792.18 | 48.8 |
| Kaushambi | 3111.54 | 407.56 | 86.5 |
| Kushinagar | 4876.60 | 640.22 | 70.2 |
| Shravasti | 2436.46 | 297.58 | 93.8 |
| Total | 4540.00 | 551.50 | 75.9 |

2.3. Occupation of the selected households

Perception of the respondents is considered to decide the primary and secondary occupation of the selected households. Even if 61 percent of the households own agricultural land, only 54 percent of the households considered agriculture as primary source of income followed by daily wage labourer (37%).

Primary income source for the rest nine percent of the households is either small businesses or government services. In Kausambi and Kushinagar district, about 69 and 77 percent of the households, respectively, are engaged with agriculture. This shows the overdependence of households on agriculture in these districts.

Table 6: Primary Income Source of the Selected Households

| District | Primary Source of income | | | | | | Total |
|--------------|--------------------------|---------------------|----------------|----------------|----------------|----------------|------------------|
| | Agriculture | Daily wage labourer | Govt. service | Local shop | Small business | Others | |
| Chandauli | 17 (30.9) | 33 (60) | 2 (3.6) | 0 | 3 (5.5) | 0 | 55 |
| Faizabad | 23 (46.9) | 16 (32.7) | 2 (4.1) | 2 (4.1) | 1 (2) | 5 (10.2) | 49 |
| Kaushambi | 37 (68.5) | 17 (31.5) | 0 | 0 | 0 | 0 | 54 |
| Kushinagar | 37 (77.1) | 7 (14.6) | 1 (2.1) | 1 (2.1) | 1 (2.1) | 1 (2.1) | 48 |
| Shravasti | 23 (47.9) | 22 (45.8) | 1 (2.1) | 0 | 0 | 2 (4.2) | 48 |
| Total | 137 (53.9) | 95 (37.4) | 6 (2.4) | 3 (1.2) | 5 (2) | 8 (3.1) | 254 (100) |

Numbers in parenthesis are percentage

Other than primary occupation, about 81 percent of the households are engaged with secondary occupation. About 48 percent of the households are working as wage labourer to add up their family income. For many households, who own small piece of agricultural land, consider income from agriculture as secondary source.

Table 7: Secondary Income Source of the Selected Households

| District | Secondary Source of Income | | | | | | Total |
|------------|----------------------------|-----------------------|---------------|------------|----------------|----------|-----------|
| | Agriculture | Wage earner/ labourer | Govt. service | Local shop | Small business | Others | |
| Chandauli | 13 (25.5) | 28 (54.9) | 2 (3.9) | 1 (2) | 3 (5.9) | 4 (7.8) | 51 (100) |
| Faizabad | 8 (28.6) | 7 (25) | 1 (3.6) | 1 (3.6) | 4 (14.3) | 7 (25) | 28 (100) |
| Kaushambi | 15 (33.3) | 26 (57.8) | 0 | 0 | 2 (4.4) | 2 (4.4) | 45 (100) |
| Kushinagar | 6 (13.3) | 19 (42.2) | 1 (2.2) | 7 (15.6) | 9 (20) | 3 (6.7) | 45 (100) |
| Shravasti | 18 (48.6) | 18 (48.6) | 0 | 0 | 0 | 1 (2.7) | 37 (100) |
| | 60 (29.1) | 98 (47.6) | 4 (1.9) | 9 (4.4) | 18 (8.7) | 17 (8.3) | 206 (100) |

* Numbers in parenthesis are percentage

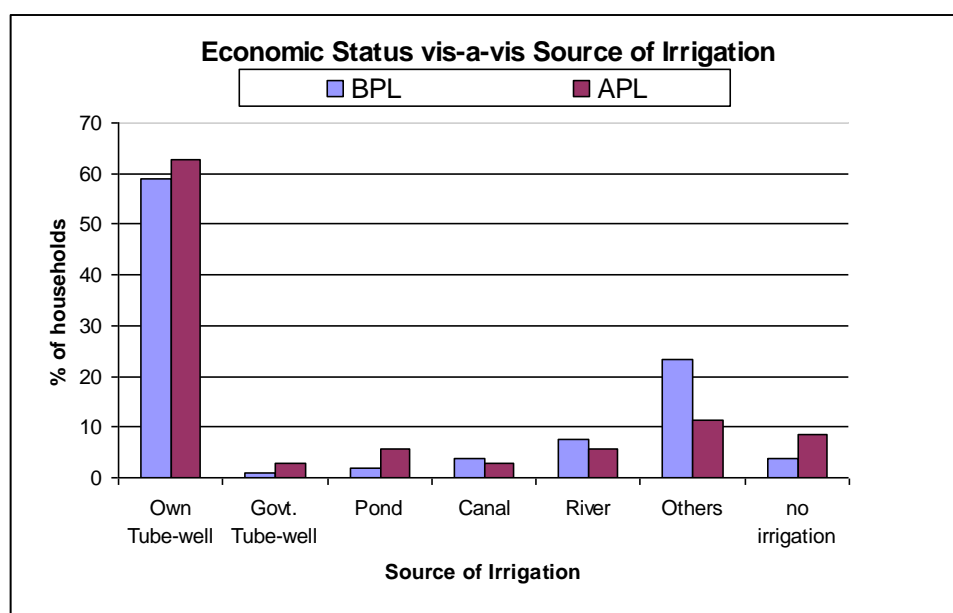
2.4. Ownership of Agricultural Land and Livestock

It is often understood that BPL households do not own agricultural land. However, our study finding reveals that 61 percent of the BPL households own land. Thus, there is no direct relationship with ownership of land and income. It is the land holding size and irrigation facilities that correlates with income. However, our study findings revealed that irrigation have no correlation with economic status of the households. Percentage of APL households without irrigation facility is higher than BPL households. (refer figure 2)

Table 8: Ownership of Agricultural Land vis-à-vis Economic Status

| Land ownership status | BPL HHs | | APL HHs | | Total | |
|------------------------------|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| | Number of households | % of Households | Number of households | % of Households | Number of households | % of Households |
| Owns agricultural land | 107 | 61.1 | 33 | 56.9 | 140 | 60.1 |
| Do not own agricultural land | 68 | 38.9 | 25 | 43.1 | 93 | 39.9 |
| | 175 | 100 | 58 | 100.0 | 233 | 100.0 |

Figure 3



About 61 percent of the households own some variety of livestock, mostly small stocks like goat, pig, hen etc. Around 45% households have reported having separate space for keeping animals.

2.5. Housing and household amenities

97% of the selected households are living in their own houses and the remaining 3% are living either in their relative's house or in rented premises. 'Type of house' of the households is another indicator of the poor economic status of the households as more than half of them are living in *kuchha* houses followed by 34 percent of the households who are living in *pucca* houses and 15 percent of the households who are living in semi-*kuchha* houses. Here, *pucca* houses are houses with concrete walls and roofs, semi-*kuchha* are those which have concrete/brick walls but with a tin/asbestos/fiber roof, and *kuchha* house are those which have mud walls and thatched/tarpaulin roof.

Table 9: Roof of the House

| District | Roof of the house | | | Total |
|-------------------|-------------------|-------------------|------------------|------------|
| | <i>Pucca</i> | <i>Semi-pucca</i> | <i>Kuchha</i> | |
| Chandauli | 19 | 5 | 30 | 54 |
| Faizabad | 24 | 5 | 18 | 47 |
| Kaushambi | 7 | 16 | 29 | 52 |
| Kushinagar | 25 | 5 | 18 | 48 |
| Shravasti | 9 | 6 | 31 | 46 |
| Total | 84 (34%) | 37 (15%) | 126 (51%) | 247 |

As said above, the average household size is more than eight persons but 59

percent of the households are living either in one or two room house which excludes a kitchen space. Forty one percent of the households are living in three rooms (excluding kitchen space) and just one household from Faizabad district has said that their house comprises of more than three rooms. Only nine percent of the households have complained about the road poor access to their house.

Table 10: Number of Rooms in a House

| District | Number of Rooms in a house | | | | Total |
|-------------------|----------------------------|-----------------|-----------------|-----------------|------------|
| | One room | Two rooms | Three rooms | More than three | |
| Chandauli | 18 | 13 | 20 | 0 | 51 |
| Faizabad | 12 | 12 | 22 | 1 | 47 |
| Kaushambi | 10 | 25 | 17 | 0 | 52 |
| Kushinagar | 3 | 15 | 28 | 0 | 46 |
| Shravasti | 16 | 16 | 11 | 0 | 43 |
| Total | 59 (25%) | 81 (34%) | 98 (41%) | 1 (0.4%) | 239 |

2.6. Access to Toilet and Bathroom Facility

According to Ministry of Drinking Water and Sanitation (MDWS), about 83.5 percent of households in UP have toilet facility within the premises (as on 10/02/2013) whereas the study reveals that only 17.7 percent of the households have toilet. If we compare the BPL households from both the sources then as per MDWS 95 percent of the BPL households have toilet whereas our findings suggest that only 12.2 percent of the households have toilet within their premises. This reveals the gap between the coverage data provided by MDWS and ground reality. Even the Census 2011 figure shows that in rural UP only 21.8 percent of the households have toilet.

During our visit to the GPs we observed that many of the toilets are defunct or not in use. Usually the toilets constructed under TSC/NBA are not in use (or used for different purposes) and remained neglected for a long time which consequently falls apart.

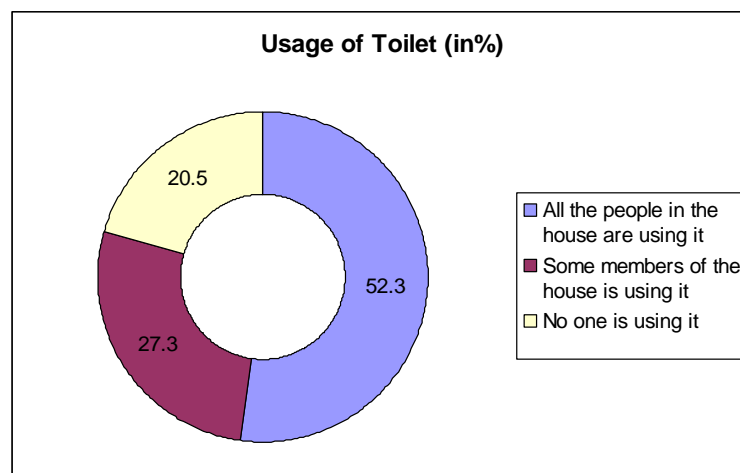
In Kausambi, Chandauli and Shravasti, only 7.7 percent, 7.3 percent and 10.6 percent, respectively, households have in-house toilet facility. Highest number of households with toilet facility is found in Faizabad district (45%).

Table 11: Access to Toilet: MDWS vis-à-vis Household Survey

| District | As per MDWS ⁹ | | As per our sample | |
|-------------------|---------------------------------|-----------------------------|---------------------------------|-----------------------------|
| | % of BPL households with toilet | % of households with toilet | % of BPL households with toilet | % of households with toilet |
| Chandauli | 100 | 90.8 | 7.14 | 7.3 |
| Faizabad | 97.9 | 93.4 | 30 | 44.7 |
| Kaushambi | 96.8 | 76.2 | 4.65 | 7.7 |
| Kushinagar | 81.5 | 84.9 | 18.75 | 21.3 |
| Shravasti | 93 | 87.3 | 11.36 | 10.6 |
| Total | 95 | 83.5 | 12.15 | 17.7 |

Among the households with the toilet facility, about half of them (52%) accepted that all the members of the household are using it. Another 27.3 percent of the households said that elderly and female members of the households are using it, and rest 20.5 percent of the households accepted that they are not using the toilet.

Figure 4



District * Toilet facility Crosstabulation

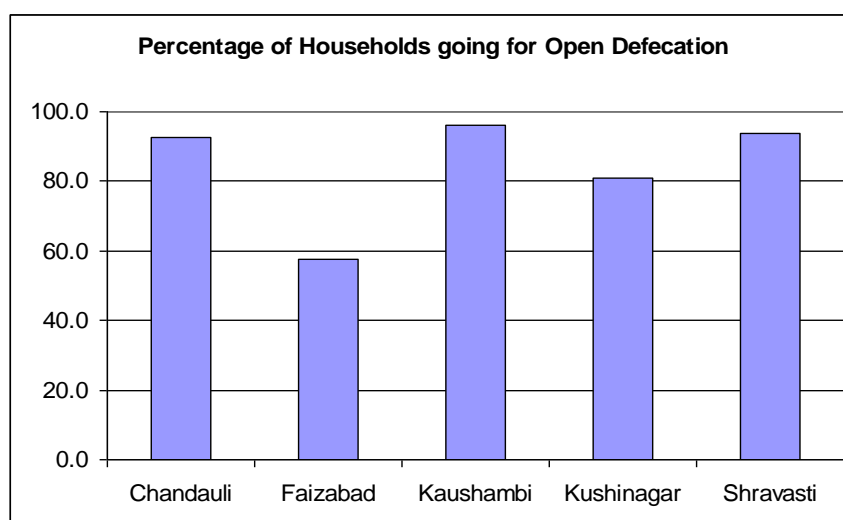
The number of households going for open defecation can be arrived at by adding the total number of households without toilet and the households with toilet but not using it. As per the study, around 84.7 percent of the households are going for open defecation. This is slightly higher than the Census 2011 figure of households without toilet (78.2) in the state.

As per the study findings, about 96.2 percent of the households are going for open defecation in Kausambhi district. Percentage is also high in Shravasti, Chandauli and Kushinagar districts, 93.6, 92.7 and 80.9 percent respectively. Among the

⁹ tsc.gov.in/tsc/Report/Physical/StateWisePerAch_OnlyTSC_net.aspx?id=Home

selected five districts for the study, Faizabad have the lowest percentage of households going for open defecation.

Figure 5



Under the TSC, dry single pit and twin pit toilets have been promoted. Therefore, about 84% of the BPL households, who have toilet, have dry pit toilet. Only 16 percent of the BPL households have pour-flush toilets whereas 55 percent of APL has pour-flush toilets.

Table 12: Economic Status of Households vis-à-vis Type of Toilet

| Type of Toilet | Districts | Economic Status of the Households | | Total |
|--------------------|------------|-----------------------------------|------------------|------------------|
| | | BPL | APL | |
| Dry Single pit | Chandauli | 1 | 1 | 2 |
| | Faizabad | 3 | 3 | 6 |
| | Kaushambi | 1 | 0 | 1 |
| | Kushinagar | 2 | 0 | 2 |
| | Shravasti | 3 | 0 | 3 |
| Total | | 10 (52.6) | 4 (22.2) | 14 (37.8) |
| Dry twin pit | Chandauli | 2 | 1 | 3 |
| | Faizabad | 0 | 1 | 1 |
| | Kushinagar | 4 | 2 | 6 |
| Total | | 6 (31.6) | 4 (22.2) | 10 (27) |
| Pour flush | Faizabad | 2 | 8 | 10 |
| | Kaushambi | 1 | 0 | 1 |
| | Kushinagar | 0 | 2 | 2 |
| Total | | 3 (15.8) | 10 (55.6) | 13 (35.1) |
| Grand Total | | 19 | 18. | 37 |

Numbers in parenthesis are percentage

About 67 percent of the households have built concrete superstructure toilet. Not much difference is found among the BPL and APL households as regards the construction of concrete superstructure toilet, and also with the other toilet superstructures, i.e. superstructures with or without roof.

Table 13: Economic Status of the Households vis-à-vis Superstructure of the Toilet

| Type of Toilet | Districts | Economic Status of the Households | | Total Toilet |
|--|------------|-----------------------------------|------------------|------------------|
| | | BPL | APL | |
| Concrete superstructure | Chandauli | 2 | 1 | 3 |
| | Faizabad | 4 | 8 | 12 |
| | Kaushambi | 2 | 0 | 2 |
| | Kushinagar | 3 | 3 | 6 |
| | Shravasti | 1 | 0 | 1 |
| Total | | 12 (63.2) | 12 (70.6) | 24 (66.7) |
| Concrete superstructure with asbestos roof | Faizabad | 0 | 1 | 1 |
| | Kushinagar | 3 | 0 | 3 |
| Total | | 3 (15.8) | 1 (5.9) | 4 (11.1) |
| Concrete superstructure without roof | Chandauli | 1 | 0 | 1 |
| | Faizabad | 0 | 1 | 1 |
| | Kushinagar | 0 | 1 | 1 |
| | Shravasti | 1 | 0 | 1 |
| Total | | 2 (10.5) | 2 (11.7) | 4 (11.1) |
| Others | Faizabad | 2 | 2 | 4 |
| Total | | 2 (10.5) | 2 (11.7) | 4 (11.1) |
| Grand Total | | 19 | 17 | 36 |

* Numbers in parenthesis are percentage

Only 16 percent of the households have reported having bathroom facility with them. Only 12.4 percent of the BPL households have reported having bathroom facility whereas 25.4 percent of the APL households have reported having the same.

Table 14: Economic status vis-à-vis Households with Bathroom Facility

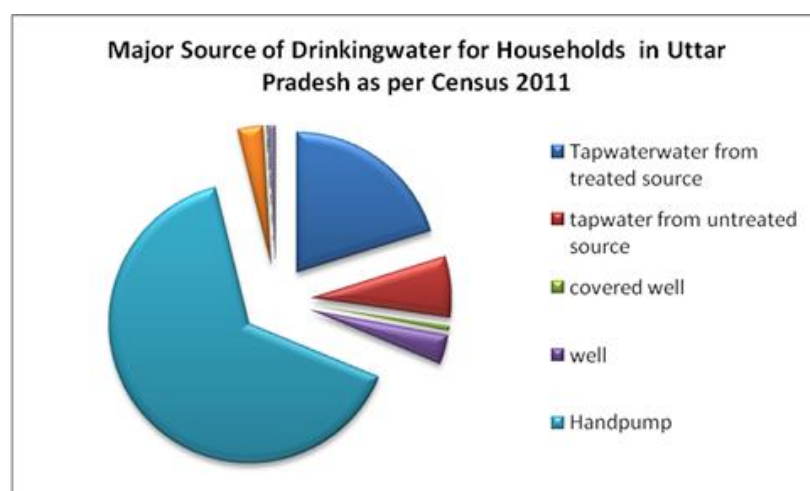
| Districts | Economic Status of the Households | | Toilet |
|--------------|-----------------------------------|------------------|------------------|
| | BPL | APL | |
| Chandauli | 3 | 1 | 4 |
| Faizabad | 1 | 9 | 10 |
| Kaushambi | 8 | 2 | 10 |
| Kushinagar | 7 | 3 | 10 |
| Shravasti | 4 | 0 | 4 |
| Total | 23 (12.4) | 15 (25.4) | 38 (15.5) |

Numbers in parenthesis are percentage

2.7. Source of Drinking Water supply and its Quality

The respondents of household survey were asked to share details about all the drinking water sources accessed by them across different seasons over a year. As per the findings, most of the households depend on more than one water sources. Typically, a household would use shallow hand pump for nine to ten months. Once these hand pumps dry up (usually February – March end), people access community hand pumps or ponds for water. So the total number of ‘sources of drinking water from different sources for the selected households’ add up to more than 100.

Hand pumps are the major source of drinking water in the state as 73.2 percent of the households access drinking water from it (Census 2011). As per the findings of the study, accessibility to drinking water is not an issue with most of the households in the selected Gram Panchayats as 60 percent of the selected households access water from their own hand-pumps. As per our discussion with the communities, we found that these are shallow hand-pumps with a depth of 40 to 60 meters. Construction of these hand-pumps cost around 2000-3000 rupees and maintenance cost is negligible or very low.

Figure 6

Source: Census of India, 2011

Community hand pumps are the major source of drinking water for 66 percent of the households in the selected GPs. These hand pumps are deeper than 100 meters and are constructed by the state government. These hand pumps are the only source of water for many households; also many households with private hand pumps depend on community hand pumps during summers as water in their hand pumps dries up by the end of March. As per the discussion with the BDO of Suhawal Block, Faizabad district, minimum difference between these hand pumps should be 100 meters but in many cases the distance was found to be less than that as was found in Raunai GP of Suhawal Block, Faizabad district.

On the other hand in Niyamtabad GP of Chandauli district, just three hand pumps were found be serving around 80 households. This shows that the norms have not always been followed in deciding the spot for installing the hand pumps. During community discussions, people complained that the spot of installation of hand pumps is decided as per the direction of the local MLA or the influential people of the village like *sarpanch*.

In Shravasti 7 percent of the households and in Kushinagar 38 percent of the households have in-house (piped water) drinking water connections. In other three districts, about 17 to 18 percent of the households are covered through pipe water schemes. About 22 percent of the households are collecting water from the public stand post. Most of the piped water schemes (either in-house connection or stand post), are constructed and maintained by the Jal-Nigam of the state, but in few cases the small scale drinking water schemes are constructed through the Swajaldhara schemes which are maintained by the beneficiaries only.

However, there is a need to plan piped water supply schemes along with proper drainage facilities (refer the case in Box 1) so as to avert the avoidable situations of water logging and ensuing mosquito menace and the resultant diseases such as malaria and dengue.

All the beneficiaries of piped water scheme have to pay a user fees for accessing the facility. But as per the study finding only 9 percent of the households are paying the user fees, while the remaining 11 percent of the beneficiaries are not paying it at all. Inconsistency and non-payment of user fees has resulted in lack of maintenance fund which is likely to affect the operation and maintenance of the scheme adversely in near future. It is important to mention here that the households with piped water connection are not representative of the districts or the state as we have purposively selected the GPs which have been given in-house piped water supply through Jal-Nigam and Swajaldhara.

In view of the above, the number of households with piped water connection in the state would be quite low. As per Census

Box 1: Unintended consequences of a functioning piped water supply scheme

In the Fatehpur Bangai GP, in Kushi Nagar, where a Jal Nigam piped water supply scheme has recently been constructed and commissioned, it was found that due to abundant availability of water in the village Bangai of the GP (to around 250 households) and lack of any drainage facility, a new problem of water logging at various places, mainly near the public stand posts has cropped up. This has also reportedly led to stagnant water pools at many places in the village and breeding of mosquitoes resulting in malaria and dengue cases.

2011, 20.2 percent of the rural households access drinking water from tap water (includes treated and untreated sources). However, the Census figure does not provide information about the households accessing water from private and public tap water connection. Hence, the Census figure (20.2%) includes households accessing tap water from public as well as private tap connections.

About 28 percent of the households have identified wells or various surface water sources as their drinking water source. In many cases, the households have to depend on surface water when all the ground water sources dry up.

Table 15: Source of Drinking Water for the Selected Households (in %)

| District | Public stand-post | In-house connection (piped water) | Hand-pump (Community) | Hand-pump (Private) | Wells/Dug wells | Surface water (rivers/pond etc.) |
|-------------------|-------------------|-----------------------------------|-----------------------|---------------------|-----------------|----------------------------------|
| Chandauli | 24% | 18% | 67% | 25% | 18% | 2% |
| Faizabad | 0 | 17% | 81% | 89% | 0 | 8% |
| Kaushambi | 13% | 17% | 94% | 27% | 2% | 0% |
| Kushinagar | 33% | 38% | 52% | 81% | 0 | 48% |
| Shravasti | 22% | 7% | 39% | 78% | 15% | 28% |
| Total | 22% | 20% | 66% | 60% | 9% | 19% |

About 24.3 percent of the APL households have access to in-house piped water connection whereas only 19 percent of the BPL households have reported such access. However, the difference between APL and BPL households is not much. The fact that in-house water supply is provided under the government schemes with very low user-fees (less than Rs.30/month) could be instrumental in reducing this difference. But at the same time it is important to recognize that half of the users in the villages in Eastern UP don't pay the user fees for water.

About 56 percent of the BPL households and 69 percent of the APL households have hand pumps within their house. On the other hand, 66 percent of the BPL and 67 percent of APL households are accessing water from public hand pumps.

Table 16: Economic Status of the Households vis-à-vis Source of Water

| Districts | Households with in-house connections | | Households accessing water from public handpumps | | Households with private handpumps | |
|--------------|--------------------------------------|-----------------|--|------------------|-----------------------------------|------------------|
| | BPL | APL | BPL | APL | BPL | APL |
| Chandauli | 7 | 2 | 27 | 9 | 11 | 2 |
| Faizabad | 0 | 2 | 9 | 8 | 12 | 15 |
| Kaushambi | 6 | 1 | 38 | 4 | 6 | 3 |
| Kushinagar | 13 | 4 | 16 | 7 | 25 | 13 |
| Shravasti | 3 | 0 | 15 | 1 | 34 | 1 |
| Total | 29 (19) | 9 (24.3) | 105 (65.6) | 29 (67.4) | 88 (56) | 34 (69.4) |

Numbers in parenthesis are percentage

Only 33.3 percent of the surveyed households are storing water for household purpose, rest 66.7 percent of the households do not feel the necessity to store water due to their proximity from water source. All the households, who are accessing water from spring, surface water and water tanker, have to store water for various household consumptions. However, only 17.6 percent and 19.7 of the households, who are accessing water from dug well and Private hand pump, respectively, are storing water.

Table 17: Source Vis-à-vis Water Storage

| Source of Water | HHs storing water for consumption (number of households storing water/source of connection) (%) |
|---|---|
| In-house connection | 26.3 |
| Dug well | 17.6 |
| Common HP | 39.0 |
| Private HP | 19.7 |
| Other sources (spring, surface water and water tanker) | 100 |

Of the households 33 percent of the households, who store water for household purpose, 78 percent stores in vessels/pots, 10 percent of the households stores water in drum and rest 12 percent in other storing systems.

Table 18: Method of Storing Water by the Selected HHs

| District | Water storage method | | | | | Total |
|--------------|----------------------|---------------|----------------|-------------------|---------------|-----------|
| | Vessels/Pots | Drums | Overhead tanks | Underground tanks | Other methods | |
| Chandauli | 12 | 2 | 0 | 0 | 1 | 15 (21.7) |
| Faizabad | 10 | 0 | 1 | 0 | 2 | 13 (19.3) |
| Kaushambi | 37 | 2 | 0 | 1 | 1 | 41 (21.3) |
| Kushinagar | 5 | 4 | 0 | 0 | 1 | 10 (18.9) |
| Shravasti | 0 | 0 | 3 | 0 | 0 | 3 (18.9) |
| Total | 64 (78) | 8 (10) | 4 (5) | 1 (1) | 5 (6) | 82 |

Numbers in parenthesis are percentage

Around 65 percent of the households are satisfied with the quantity of water being provided, but the percentage differs among the selected districts. About 85 percent

of the households are satisfied with the quantity of water they are receiving throughout the year in Chandauli district whereas only 33 percent of the households are satisfied in Shravasti district. It is important to mention here that most of the households in Shravasti district are dependent on the shallow hand pumps which are not able to meet the needs of the households, especially during summers.

We have included the respondent's perception to judge the quality of drinking water. In many cases we have found that source of drinking water accessed by the respondents are not clean but they have no problems with the quality of the water. Therefore, we have diligently ignored these aspects while filling the household questionnaire. These aspects have been covered in FGD and observation of the villages. As per our findings, only 37 percent of the households are satisfied with the quality of the drinking water. Most of the households have complained about the muddy water during monsoons. Satisfaction level regarding quality of water differs among the selected districts also. About 66 percent of the households are satisfied with the quality of water in Shravasti districts whereas only 9 percent households are satisfied in Chandauli district.

Table 19: Quantity and Quality of Drinking Water (in %)

| District | Satisfied with the quantity of water | Water is available throughout the year | Satisfied with water quality |
|-------------------|--------------------------------------|--|------------------------------|
| Chandauli | 85% | 81% | 9% |
| Faizabad | 70% | 91% | 30% |
| Kaushambi | 79% | 73% | 21% |
| Kushinagar | 48% | 67% | 63% |
| Shravasti | 33% | 76% | 66% |
| Overall | 65% | 77% | 37% |

2.8. Disease Burden of the Respondents and their Family Members in Last One Year

In order to have a sense of the health profile and status of the selected households, the respondents of the household survey were asked to share information about any major disease/illness that any of the family members had suffered during last one year (survey period December 2012/ January 2013). About 49 percent of the households reported that they or their family members had suffered from various ailments in last one year. About 15.3 percent of the households shared that they or their family members had suffered from diarrhea in last one year. Diarrhea is followed by malaria (11.4%), Tuberculosis (3.9%), Encephalitis (3.1%) and Dengue (0.8%).

About 17 percent of the households responded that they suffered from various ailments other than these four. Incidence of Diarrhea was the highest in Sravasti (25%), followed by Faizabad (around 20%) and Kushinagar (around 19%). Other water borne disease affecting the selected households is Malaria; about 28 percent of the households in Kausambi and 15 percent households in Kushinagar had suffered from Malaria in last one year. Encephalitis is only registered in Kushinagar district where 16.7 percent of the respondents have mentioned that they or their family

members had suffered from it in last one year.

Table 20: Type of Illness Registered among the Selected Households (in %)

| District | Malaria | Dengue | Encephalitis | Tuberculosis | Diarrhoea | Other diseases |
|-------------------|------------------|----------------|----------------|-----------------|------------------|------------------|
| Chandauli | 3 (5.6) | 0 | 0 | 0 | 4 (7.3) | 11 (20) |
| Faizabad | 2 (3.7) | 0 | 0 | 3 (6.1) | 10 (20.4) | 12 (24.5) |
| Kaushambi | 15 (27.8) | 0 | 0 | 1 (1.9) | 4 (7.4) | 17 (31.5) |
| Kushinagar | 8 (14.8) | 1 (2.1) | 8 (16.7) | 4 (8.3) | 9 (18.7) | 3 (6.25) |
| Shravasti | 1 (1.9) | 1 (2.1) | 0 | 2 (4.2) | 12 (25) | 0 |
| Overall | 29 (11.4) | 2 (0.8) | 8 (3.1) | 10 (3.9) | 39 (15.3) | 43 (16.9) |

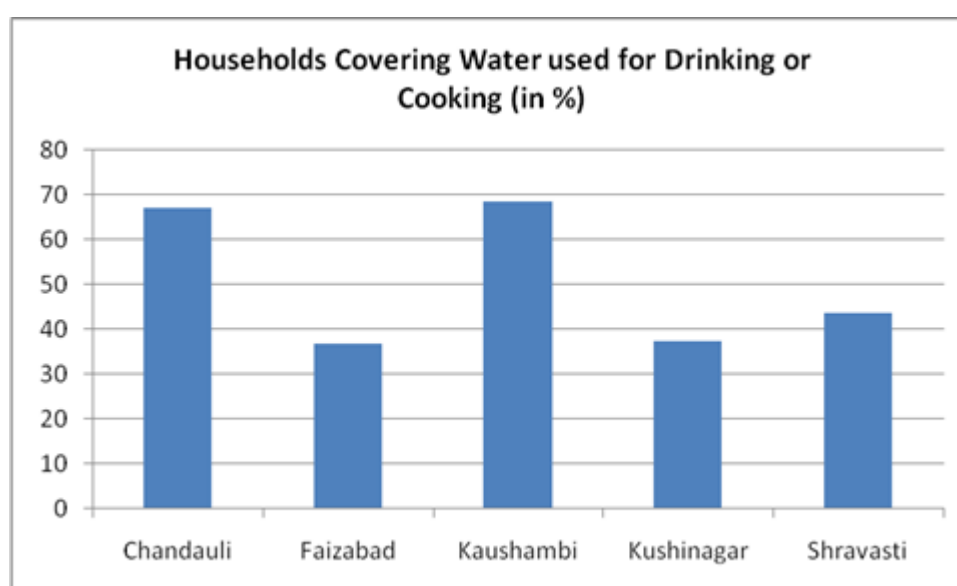
Numbers in parenthesis are percentage

On an average, 49 percent of the respondent families (who have suffered from some ailment in last one year) have spent about Rs.11457/- on treatment, which ranges between Rs.40/- to Rs.3,15,000/-.

2.9 Hygiene Practices

One of the major reasons for occurrence of water borne diseases is poor hygienic practices. We enquired about hand washing practices and method used for maintaining the water quality with the respondents. As per the findings, about 51.6 percent of the households are covering water vessels used for drinking or cooking purposes. About 68.5 percent of the households from Kaushambi and 67 percent of the households from Chandauli are covering their vessels whereas less than 50 percent of the households from Shravasti, Kushinagar and Faizabad districts are practicing the same.

Figure 7



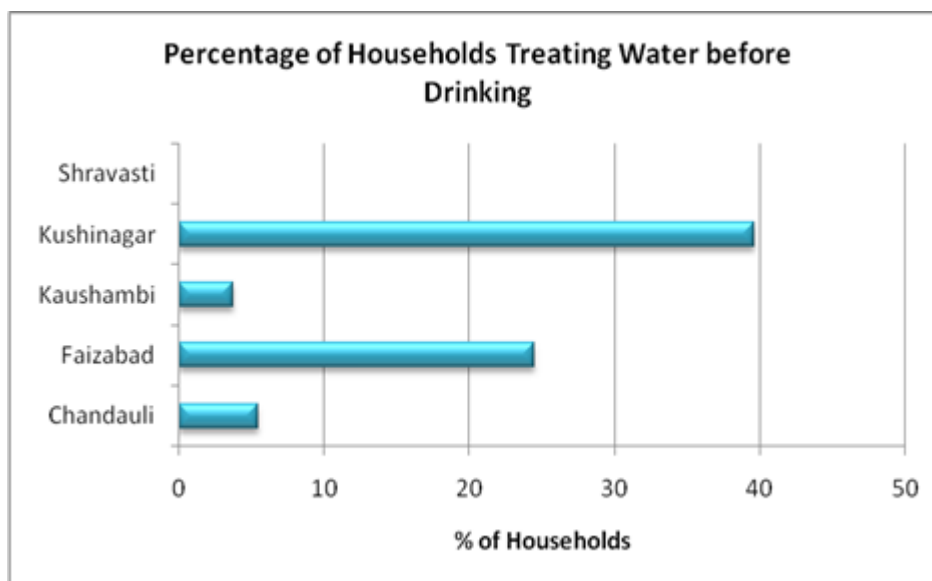
Proper method of taking out drinking or cooking water from vessel is to use vessel with handle or use vessel with tap. In short there should not be any hand and water contact. As per findings, only 50 households (total of vessels with handle, tapped vessel and tilting the vessel) who are storing few vessels of water for drinking or cooking purpose are using safer method to take out water from the vessel.

Table 21: What is Used for Taking Water from Water Vessels

| District | Means Used for taking water from Water Vessels (in number of HHs) | | | | |
|--------------|---|---------------|--------------------|---|-----------|
| | Safe Method | | | Unsafe Method | |
| | Vessels with handle | Tapped vessel | Tilting the vessel | Glass/ any other utensil without handle | Other way |
| Chandauli | 4 | 0 | 5 | 36 | 0 |
| Faizabad | 2 | 2 | 1 | 4 | 2 |
| Kaushambi | 1 | 0 | 1 | 44 | 2 |
| Kushinagar | 5 | 7 | 0 | 3 | 0 |
| Shravasti | 5 | 17 | 0 | 0 | 0 |
| Total | 17 | 26 | 7 | 87 | 4 |

Most of the households are accessing drinking water from hand pumps, wells/dug well and surface water sources. It is recommended that water from these sources should be treated before using it for drinking and cooking. However, only 14.2 percent of the households are either boiling or using basic water treatment procedure, like filtering with cloth while filling the vessel, before using water for drinking or cooking purpose. None of the households from Shravasti district is treating drinking or cooking water. Compare to other districts, percentage of households treating their water before use are higher in Kushinagar (39.6%) and Faizabad (24.5%) districts. Only 3.7 percent of the households from Kausambhi and 5.5 percent of the households from Chandauli are treating their water.

Figure 8



In 1847, Hungarian physician Dr Ignatz Semmelweis found that 'child bed' (or puerperal) fever could be transmitted through poor hand hygiene, and that good handwashing practice amongst medical staff helped limit infection. Since then WHO is promoting handwashing as one of the most effective means of preventing diarrhoeal diseases, along with safe disposal of faeces and an adequate household water supply. It can significantly reduce the two biggest causes of childhood death- diarrhoeal disease and acute respiratory infections such as the flu.

Every year more than 3.5 million children do not live to celebrate their fifth birthday because of diarrhoea and pneumonia. Available UN information indicates that, Hand-washing with soap at critical times can reduce the incidence of diarrhoea by up to 47 per cent. The WHO maintains that the integrated approach of providing water, sanitation and hygiene reduces the number of deaths caused by diarrhoea diseases by an average of 65%. Despite its life saving potential, hand washing with soap is seldom practiced and not always easy to promote. (Source: <http://whp.org.in/Handwashing>)

As per the findings, 75.6 percent of the respondents have said that they wash hands before having their meals. Other than Shravasti, more than 5 percent of the households from all the districts have said that they wash hands before meals. In Shravasti, only 21 percent of the households are practicing the same.

Table 22: Are You Washing Hands Before Meals?

| Wash Hands Before Meals | |
|-------------------------|--------------------------------|
| Districts | HHs washing Hands Before Meals |
| Chandauli | 89.1 (49) |
| Faizabad | 89.8 (44) |
| Kaushambi | 88.9 (48) |
| Kushinagar | 85.4 (41) |
| Shravasti | 20.8 (10) |
| Total | 75.6 (192) |

Numbers in parenthesis are number of HHs

It is important to wash hand with soap before meals, however, this is seldom practiced. As per the findings, only 92 percent of the households are using soap to wash hands before meals. Majority of the households are using only water to wash hands.

Table 23: Hand Washing Practices before Meals

| District | Object Used for Washing Hands Before Meals | | | | | Not Washing Hands |
|--------------|--|----------------|----------------|-------------------|----------------|-------------------|
| | Soap | Ash | Mud | Water | Other | |
| Chandauli | 21.8 | 7.3 | 0.0 | 60.0 | 0.0 | 10.9 |
| Faizabad | 24.5 | 0.0 | 0.0 | 65.3 | 0.0 | 10.2 |
| Kaushambi | 4.1 | 2.0 | 0.0 | 81.6 | 0.0 | 12.2 |
| Kushinagar | 33.3 | 4.2 | 4.2 | 31.3 | 12.5 | 14.6 |
| Shravasti | 11.6 | 0.0 | 0.0 | 0.0 | 0.0 | 88.4 |
| Total | 19.3 (47) | 2.9 (7) | 0.8 (2) | 49.2 (120) | 2.5 (6) | 25.4 (62) |

Numbers in parenthesis are number of households

Table 24: Extent of Hand Washing after Defecation

| District | Wash hands after defecation | |
|--------------|-----------------------------|------------------|
| | Yes | No |
| Chandauli | 81.8 (45) | 18.2 (10) |
| Faizabad | 87.8 (43) | 12.2 (6) |
| Kaushambi | 79.6 (43) | 20.4 (11) |
| Kushinagar | 89.6 (43) | 10.4 (5) |
| Shravasti | 72.9 (35) | 27.1 (13) |
| Total | 82.3 (209) | 17.7 (45) |

Numbers in parenthesis are number of HHs

Table 25: Hand Washing Practices after Defecation

| District | Object Used for Washing Hands After Defecation | | | | Not Washing Hands |
|-------------------|--|-----------------|------------------|-----------------|-------------------|
| | Soap | Ash | Mud | Water | |
| Chandauli | 14.5 | 12.7 | 52.7 | 1.8 | 18.2 |
| Faizabad | 63.3 | 2.0 | 22.4 | 0.0 | 12.2 |
| Kaushambi | 31.5 | 5.6 | 40.7 | 1.9 | 20.4 |
| Kushinagar | 41.7 | 8.3 | 18.8 | 20.8 | 10.4 |
| Shravasti | 39.6 | 18.8 | 8.3 | 6.3 | 27.1 |
| Total | 37.4 (95) | 9.4 (24) | 29.5 (75) | 5.9 (15) | 17.7 (45) |

Numbers in parenthesis are number of HHs

2.10. Infrastructure and Services Available in the Village:

As per the survey, availability of basic infrastructure like PHC, services of ANM,

Primary School, Post Office and Police Station, is better in Kushinagar district, followed by Faizabad district. Basic infrastructures are in very poor state in Shravasti district. Less than 50 percent of the respondents from Shravasti district had said that services of PHC, Post office and police station are not available in their village.

As per the survey, primary schools (84.3) are available in most of the selected villages, followed by Post Office (76.8) and services of ANM (75.6). About 62 percent of the respondents had said that services of police station are available in their village whereas only 57 percent of the respondents have said that for PHC, which was not expected at all.

Table 26: Availability of Infrastructure and services in the selected GPs (in %)

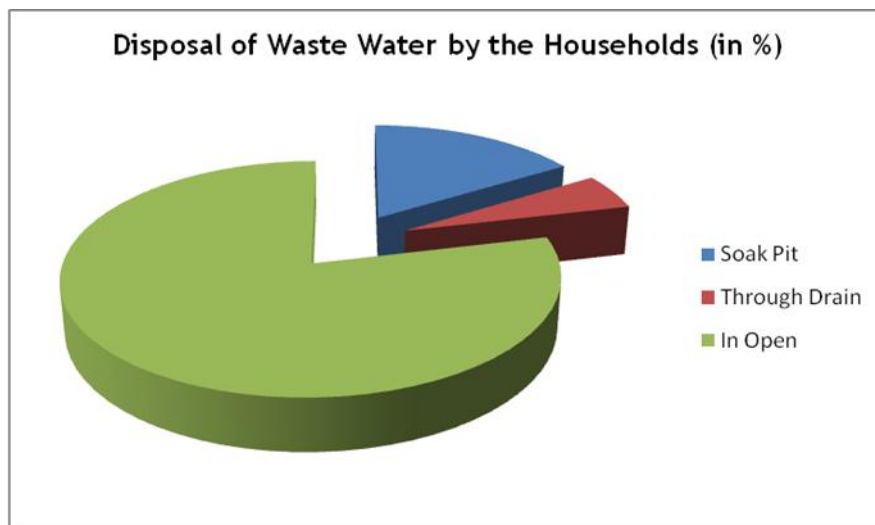
| District | PHC | ANM | Primary School | Post office | Police Station | GP Bhavan | Access to Block Office |
|----------------|-------------|-------------|----------------|-------------|----------------|-------------|------------------------|
| Chandauli | 36.4 | 85.5 | 85.4 | 69 | 27.3 | 52.7 | 14.5 |
| Faizabad | 75.5 | 95.9 | 93.9 | 95.9 | 85.7 | 89.8 | 73.5 |
| Kaushambi | 40.7 | 37.0 | 94.4 | 77.8 | 70.8 | 85.2 | 70.4 |
| Kushinagar | 93.7 | 81.3 | 89.6 | 93.8 | 91.7 | 91.7 | 89.6 |
| Shravasti | 43.7 | 81.3 | 56.3 | 47.9 | 37.5 | 45.8 | 31.3 |
| Overall | 57.1 | 75.6 | 84.3 | 76.8 | 61.8 | 72.8 | 55.1 |

As discussed above, many households had suffered from water borne diseases in last one year. Major reasons for water borne diseases are stagnant water and improper disposal of waste water and garbage. As per our findings, about 78.7 percent of the households dispose their waste water in open.

Table 27: Disposal of Waste Water by the Selected Households

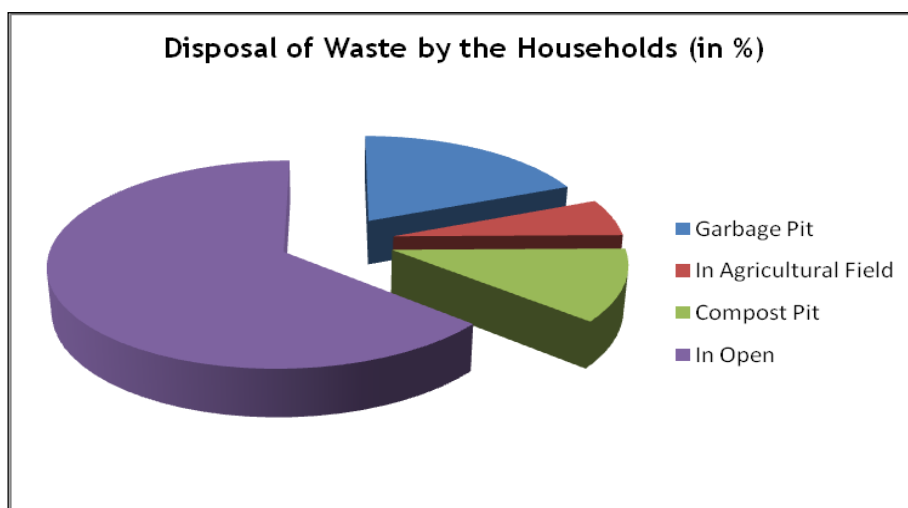
| District | Soak pit | | Through drain | | In open | |
|------------|----------|------------|---------------|------------|---------|------------|
| | Number | Percentage | Number | Percentage | Number | Percentage |
| Chandauli | 6 | 10.9 | 2 | 3.6 | 47 | 85.5 |
| Faizabad | 4 | 8.2 | 7 | 14.3 | 38 | 77.6 |
| Kaushambi | 23 | 42.6 | 4 | 7.4 | 27 | 50.0 |
| Kushinagar | 6 | 12.5 | 0 | 0.0 | 42 | 87.5 |
| Shravasti | 2 | 4.2 | 0 | 0.0 | 46 | 95.8 |
| Total | 41 | 16.1 | 13 | 5.1 | 200 | 78.7 |

Figure 9



Similarly, about 64 percent of the households are disposing garbage in open. About 19 percent of the households dispose their garbage in the garbage pit, 6 percent in their agricultural field and rest 11 percent disposes in compost pit.

Figure 10



Other than Kausambi, situation is quite grim in rest of the districts as more than 70 percent of the households are disposing waste water and garbage in open. In Shravasti district, 96 percent of the household disposes waste water and 85 percent of household disposes garbage in open areas. It is important to mention again that cases of dengue are recorded highest in the Shravasti district.

Table 28: Disposal of Garbage by the Selected Households

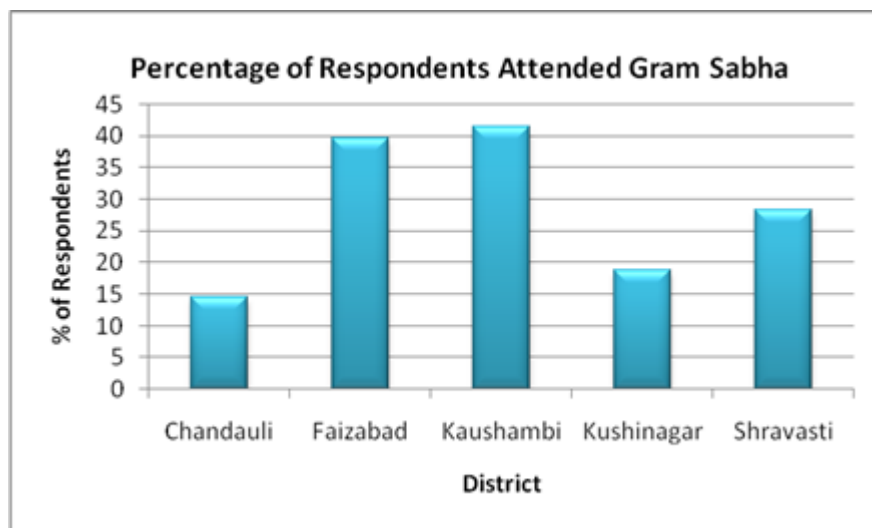
| District | Garbage Pit | | In Agricultural Field | | Compost Pit | | In Open | |
|-----------|-------------|------|-----------------------|-----|-------------|-----|---------|------|
| | Number | % | Number | % | Number | % | Number | % |
| Chandauli | 7 | 12.7 | 2 | 3.6 | 3 | 5.5 | 43 | 78.2 |

| | | | | | | | | |
|--------------|-----------|-------------|-----------|------------|-----------|-------------|------------|-------------|
| Faizabad | 6 | 12.2 | 1 | 2.0 | 7 | 14.3 | 35 | 71.4 |
| Kaushambi | 25 | 46.3 | 12 | 22.2 | 12 | 22.2 | 5 | 9.3 |
| Kushinagar | 8 | 16.7 | 0 | 0.0 | 2 | 4.2 | 38 | 79.2 |
| Shravasti | 2 | 4.2 | 0 | 0.0 | 5 | 10.4 | 41 | 85.4 |
| Total | 48 | 18.9 | 15 | 5.9 | 29 | 11.4 | 162 | 63.8 |

2.11. Community Participation:

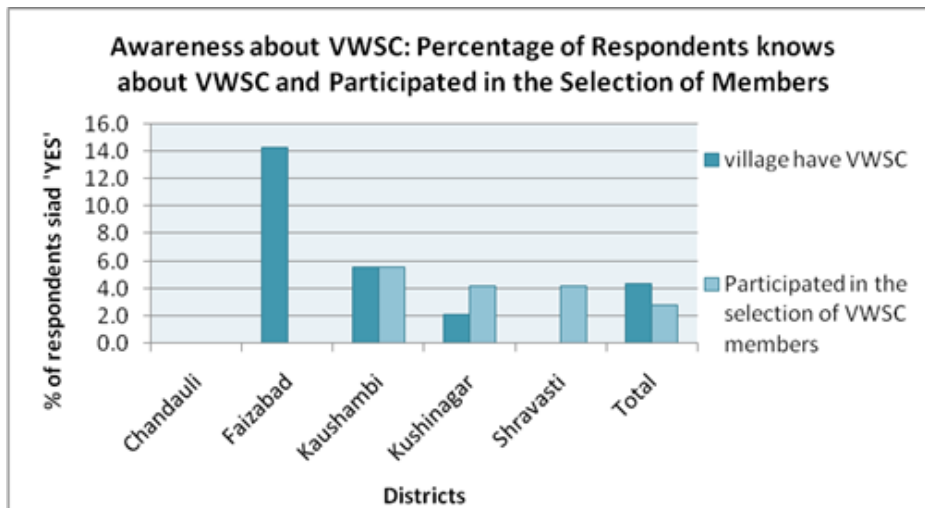
Participation of people is very poor in Gram Sabha as only 28 percent of the total respondents attend it. In Compare to other selected districts, participation is better in Kausambhi (41.5%) and Faizabad (39.65) districts. In Chandauli, only 14.5 percent of the respondents said that they attend the Gram Sabha and in Shravasti participation is only 18 percent.

Figure 11



Poor attendance in the Gram Sabha meetings results in lack of knowledge about the decisions taken in the meeting. Only 4.5 percent of the total respondents were aware of the Village Water and Sanitation Committee (VWSC), and only 3 percent of the respondents had participated in the selection of members for VWSC. In Chandauli, none of the respondents were aware of the VWSC and had never participated in the selection of the members for VWSC. In Faizabad, more than 14 percent of the respondents were aware of VWSC but none of them participated in the selection of members. In Kausambi, about 6 percent of the respondents were aware of VWSC and had participated in the selection of members for VWSC. In Kushinagar and Shravasti, 4 percent of respondents from each district had said that they had participated in the selection of members for VWSC. However, in Kushinagar only half among them and in Shravasti all of them had said that they were not aware whether the VWSC is still active in their village.

Figure 12



However, about 12.6 percent of the respondents had said that they were aware about the discussion made at the Gram Sabha meeting about the drinking water supply in their village.

Table 29: Population Aware about the Decision made in the GP Meeting about Drinking Water Supply

| Percentage of Population Aware about the Decision made in the GP Meeting about Drinking Water Supply | |
|--|-------------|
| Chandauli | 3.6 |
| Faizabad | 16.7 |
| Kaushambi | 11.3 |
| Kushinagar | 10.4 |
| Shravasti | 13.0 |
| Total | 12.6 |

About 37 percent of the respondents had said that they are aware of existence of community based organizations in their village. According to them, about 64 percent of these CBOs are SHGs, two percent are youth clubs and rest 34 percent are other kind of CBOs, like kisan sangh, JLGs etc. In Chandauli and Faizabad districts, 31 and 34 percent of the respondents, respectively, have said that their village have CBOs; whereas in Shravasti, Kushinagar and Kausambi only 13 percent, 13 percent and 10 percent of the respondents, respectively, knows about existence of CBOs.

Section 2

Social Assessment

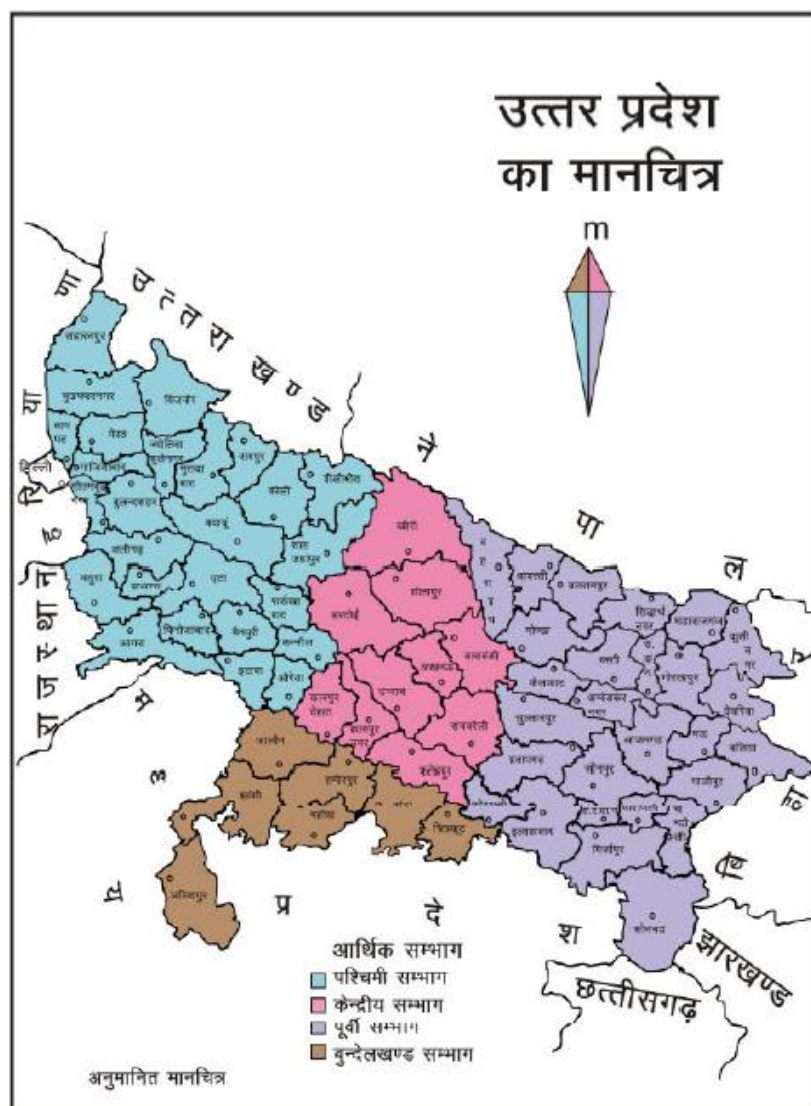
4 Social Assessment

4.1 Beneficiary Assessment

Socioeconomic Profile

UP is a land locked state comprising of eighteen (18) Mandals, seventy five (75) districts, three hundred twelve (312) sub-districts/tehsils, six hundred forty eight (648) statutory towns, two hundred sixty seven (267) census towns and one lakh six thousand seven hundred and four (1,06,704) villages after freezing administrative boundaries by the State Government before Census 2011.

Figure 13: Map of UP showing its different economic regions



The population of UP enumerated during Census 2011 has been 199,581,477 persons, out of which 155.11 million are rural and 44.47 million urban respectively. In

percentage term, 77.72 per cent population resides in villages whereas 22.28 per cent in towns. There is a net addition of 33,383,556 persons in relation to Census 2001 figures, which are 166,197,921. In percentage term, there is a decrease of 1.50 per cent point in rural population during 2001-11. The state has the largest share of rural population, i.e., 18.62 per cent of the country rural population, during this decade.

The population of UP has registered a growth of 20.09 per cent during 2001-11 decade, which is lower by 5.76 per cent point from 1991-2001 decade. In respect of rural and urban decadal growth, it is recorded as 17.81 per cent and 28.75 per cent respectively. Among the districts, the highest and the lowest percentage decadal growth rate of rural population is noticed in Shrawasti (30.82 per cent) and Ghaziabad (1.28 per cent) districts respectively.

In UP the proportion of rural and urban population during Census 2011 is 77.72 per cent and 22.28 per cent respectively. There is a decrease of 1.50 per cent point in rural population whereas the same per cent point (1.50) is added to urban population. Among the districts, the largest percentage share of rural population is recorded in Shrawasti (96.55 per cent) district whereas urban share goes to Ghaziabad (67.46 per cent) district during Census 2011.

Key economic and human development indicators for the State as well as a comparison with the corresponding figures for India are given below:

Table 30: Key economic and human development indicators for UP¹⁰

| Indicators | | UP | India |
|------------------------------|--|---------|---------|
| Demographic Indicators | | 2001 | 2011 |
| 1 | Total Population (In Millions) | 199 | 1210 |
| 2 | % Contribution to national population | 16.49 | 100 |
| 3 | Sex Ratio (females per 1000 males) | 908 | 940 |
| 4 | Under 6 sex ratio (females per 1000 males) | 899 | 914 |
| Economic Indicators | | 2009-10 | 2009-10 |
| 5 | Net domestic Product (at factor cost) (Rs crores) (For state) | 316905 | 4493743 |
| | Gross Domestic Product (at factor cost) (Rs crores) (For India) | | |
| 6 | Contribution of Agriculture to NSDP/GDP (%) | 25.01 | 14.62 |
| 7 | Contribution of Industry to NSDP/GDP (%) | 14.66 | 20.16 |
| 8 | Contribution of Services to NSDP/GDP (%) | 60.34 | 65.22 |
| 9 | Per Capita Net State Domestic Product (factor cost) (Rs) (for State) | 16182 | 33731 |
| | Per Capita Net National Product (factor cost) (Rs) (For India) | | |
| 10 | NDP Growth rate (%) (for State) | 7.13 | 8 |
| | GDP Growth Rate (%) (For India) | | |
| Human Development Indicators | | 2007-08 | 2007-08 |
| 11 | Human Development Index Value (HDI) | 0.380 | 0.467 |

¹⁰ Sources: Indicators 1-4, 20-22 -- Census of India 2011, Provisional Tables, Registrar General of India, http://www.censusindia.gov.in/2011-prov-results/prov_results_paper1_india.html; indicators 5-10 -- RBI Handbook of Statistics on Indian Economy and Economic Survey of India 2010-11 <http://www.rbi.org.in/scripts/AnnualPublications.aspx?head=Handbook%20of%20Statistics%20on%20Indian%20Economy>; indicators 11-12 -- India Human Development Report 2011, IAMR and Planning Commission; indicators 13-16 -- Gendering Human Development Indices: Gendering Human Development Indices: Recasting the Gender Development Index and Gender Empowerment Measure for India, Ministry of Women and Child Development, GOI http://undp.org.in/sites/default/files/GDI_and_GEM_Report.pdf; indicators 17-19 -- Inequality Adjusted Human Development Index for India's States 2011, UNDP, www.undp.org.in/sites/default/files/reports_publication/IHDI_India.pdf; indicators 23-24 -- Tendulkar Committee Report 2009, Planning Commission, http://planningcommission.gov.in/reports/genrep/rep_pov.pdf; indicators 25-27 -- MPI data and updates for 2011, OPHI, <http://www.ophi.org.uk/policy/multidimensional-poverty-index/mpi-data-methodology>; indicators 28-31 -- India State Hunger Index 2009, IFPRI, <http://www.ifpri.org/publication/comparisons-hunger-across-states-india-state-hunger-index>

| | | | |
|---|--|---------|---------|
| 12 | HDI Rank (out of 23) | 18 | |
| | | 2006 | 2006 |
| 13 | Gender Related Development Index (GDI) | 0.509 | 0.590 |
| 14 | GDI Rank (out of 35) | 34 | 122 |
| 15 | Gender Empowerment Measure (GEM) | 0.452 | 0.497 |
| 16 | GEM Rank (out of 35) | 22 | |
| | | 2011 | 2011* |
| 17 | Inequality Adjusted Human Development Index Value (IHDI) | 0.307 | 0.343 |
| 18 | Inequality Adjusted Human Development Index Rank (out of 19) | 15 | |
| 19 | Loss in HDI due to Inequalities (%) | 34.47 | 32 |
| 20 | Literacy Rate (%) | 69.72 | 74.04 |
| 21 | Male Literacy Rate (%) | 79.24 | 82.14 |
| 22 | Female Literacy Rate (%) | 59.26 | 65.46 |
| * Values differ from India IHDI in Global HDR 2011 due to different data sources. | | | |
| Poverty and Hunger Indicators | | 2009-10 | 2009-10 |
| 23 | Poverty Headcount Ratio (%) | 37.7 | 29.8 |
| 24 | Total number of poor (in millions) | 73.79 | 354.68 |
| | | 2005 | 2005 |
| 25 | Multidimensional Poverty Index (MPI) | 0.369 | 0.283 |
| 26 | Multidimensional Poverty Headcount (%) | 68.1 | 53.7 |
| 27 | Number of Multidimensional Poor (in millions) | 126.9 | 612 |
| | | 2007 | 2007 |
| 28 | Global Hunger Index (GHI) | 22.13 | 23.3 |
| 29 | GHI Rank (out of 17) | 9 | |
| | | 2005-06 | 2005-06 |
| 30 | Prevalence of calorie undernourishment (%) | 14.5 | 20 |
| 31 | Prevalence of Underweight Children under 5 years of age (%) | 42.3 | 42.5 |

It can easily be seen from the above that for many developmental/socio-economic indicators, UP ranks/scores lower in relation to the overall India scores, as well as in comparison to the other Indian States.

4.2 Eastern UP Context

As is the case with many of India's states, UP too have significant intra-state regional disparities. Of the four economic regions of the State (see Figure 1 above), Eastern UP (also known as Purvanchal) comprising 28 districts and the Budelkhand region comprising seven districts (see Table 3 below) are more backward/less developed than the Western or Central Regions of the State.

Table 31: Districts of Purvanchal and Bundelkhand

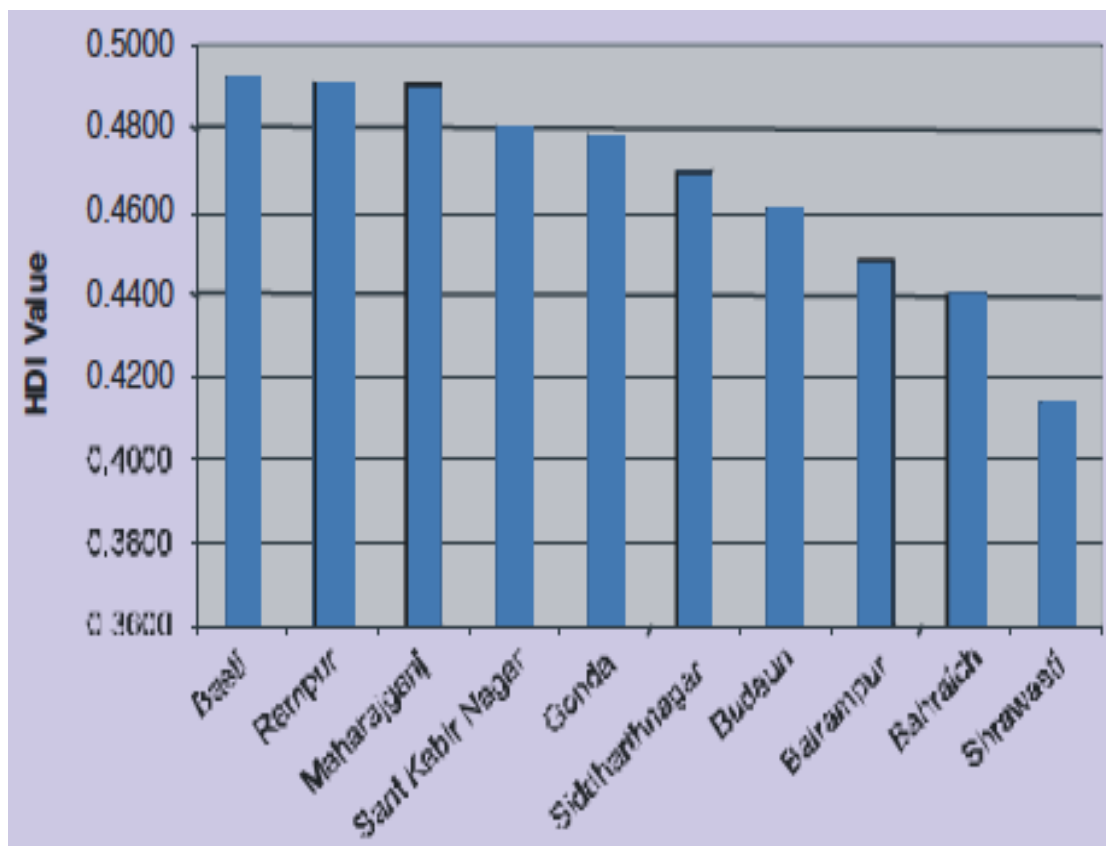
| Purvanchal (Eastern UP) | | Bundelkhand | |
|----------------------------|-------------------|--------------|----------|
| District | District | District | District |
| 1 Allahabad | 2 Fatehpur | 1 Jhansi | |
| 3 Pratapgarh | 4 Varanasi | 2 Lalitpur | |
| 5 Ghazipur | 6 Jaunpur | 3 Jalaun | |
| 7 Mirzapur | 8 Sonebhadra | 4 Banda | |
| 9 Santravidas nagar Bhadoi | 10 Basti | 5 Hamirpur | |
| 11 Siddharthnagar | 12 Santkabirnagar | 6 Mahoba | |
| 13 Gonda | 14 Bahraich | 7 Chitrakoot | |
| 15 Balrampur | 16 Shravasti | | |
| 17 Gorakhpur | 18 Mahrajganj | | |
| 19 Kushinagar | 20 Azamgarh | | |
| 21 Ballia | 22 Mau | | |
| 23 Faizabad | 24 Sultanpur | | |

| Purvanchal (Eastern UP) | | | | Bundelkhand | |
|-------------------------|---------------|----|-----------|-------------|--|
| 25 | Chandauli | 26 | Kaushambi | | |
| 27 | Ambedkarnagar | 28 | Deoria | | |

Eastern UP lies largely on the Indo-Gangetic plain, and together with western Bihar is one of the most densely populated areas of India, and is characterized by frequent natural disasters such as floods. Agriculture is a predominant activity -- Eastern UP leads the tally¹¹ in the state with highest percentage of agricultural land holdings below one hectare, which classifies a farmer as marginal. The region tops with over 84 percent of land holdings below one hectare. Lower land holdings make farm mechanization rather uneconomical and the farmer is unable to reap the full benefits of economies of scale.

The State Human Development Report 2007 (HDR) also highlights the developmental disparities of Eastern UP vis-à-vis UP as a whole. Among the bottom ten districts in terms of the human development index (HDI), eight belong to the Eastern UP. On the other hand, from the Eastern region districts like Varanasi, Chandauli, Allahabad, Gorakhpur, and Mau have relatively higher ranks in HDI.

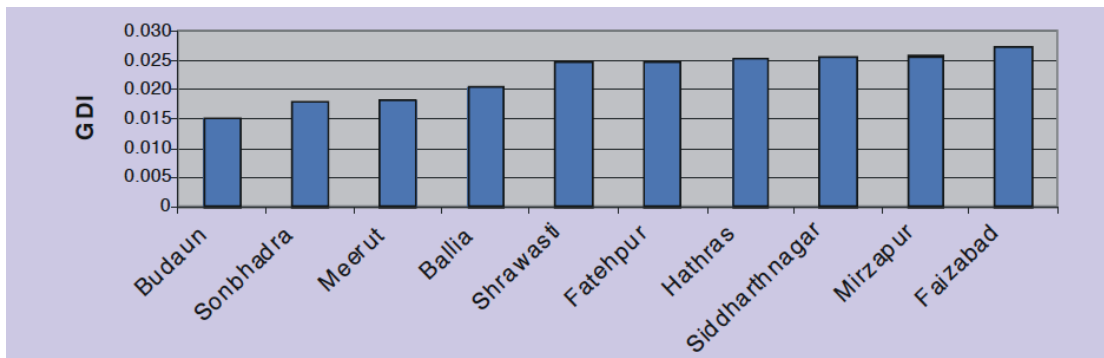
Figure 13: 10 worst performing districts in HDI terms in 2005 in UP



As many as 15 districts show a slow improvement of less than 0.03 in GDI over the period 2001-2005, and ten of these districts belong to Eastern Region.

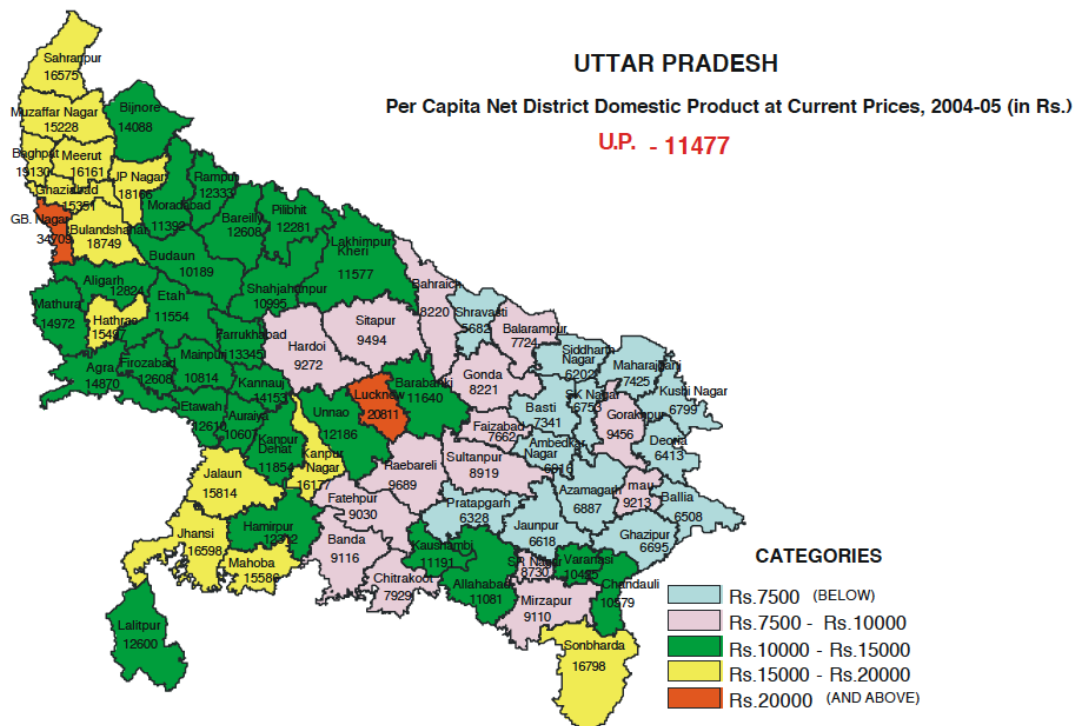
¹¹ Business Standard, Lucknow January 06, 2012

Figure 14: Districts showing least improvement in GDI (2001-2005)



The UP HDR also shows that considerable variations in poverty levels are observed across regions of the state. The relatively developed Western region has a lower incidence of poverty, while Eastern region had much higher incidence of poverty. Commercial banks too have been mandated to take steps to improve the credit deposit ratio (CDR) in the state, which stands at around 48 percent, and launch special drives in Eastern UP, where the CDR stands at 27 percent.

Figure 15: Per capita NDSP at current prices, 2004-5



The State also clearly recognizes the differentials¹², and therefore Special Areas Incentive Package for Bundelkhand & Poorvanchal. Industries play a pivotal role in the overall development of the State. Small scale industries, handicrafts and agro based industries have an important role along with medium and heavy industries in

¹² See, for example: Critical Gaps in Bundelkhand and the Eastern Region, Planning Department, Government of UP (available online at the Department's website)

industrialization and employment generation. An analysis of different Five Year Plan periods indicates that despite having growth of more than 5.7 percent in 5th to 7th Plan Period, the growth during the rest of the Plan Periods has been of the lower side. The growth in the 9th Plan Period was 3 percent against the targeted growth of 7 percent and in the 10th Plan Period till 2006 growth has been 4.6 percent against the targeted growth 8 percent. About 69 percent industries are located in the Western region of the State especially at Ghaziabad and Noida due to its proximity to Delhi, and Eastern UP, which is comparatively a thickly populated area, has only 28 percent. The following gives a brief overview of different parameters of Purvanchal in comparison to India, and the rest of UP:

Table 32: Comparison of different (selected) development parameters

| Item | Unit | Base Year | India | UP | Purvanchal |
|--|-----------|-----------|---------|---------|---------------|
| Per Capita State Domestic Product | Rs. | 2003-04 | | 4142.13 | 658.65 |
| Density of Population | Per sq Km | 2001 | | 690 | 776 |
| Percentage of urban population to total population | %age | 2001 | 27.8 | 20.8 | 11.8 |
| Literacy Rate | %age | 2001 | 64.8 | 56.27 | 54.27 |
| Percentage of total workers to total population | %age | 2001 | 41.8 | 32.48 | 33.44 |
| Per capita consumption of electricity | Kwh | 2004-05 | 411 | 202 | 101 |
| No. of working facilities per lakh of population | No. | 2002-03 | | 2.9 | 1.1 |
| No of average workers per day in registered factories | No. | 2002-03 | 747 | 305 | 106 |
| Consumption of electricity in industries to total consumption | %age | 2004-05 | | 18.7 | 12.1 |
| State Domestic Produce of industrial sector at current prices | %age | 2003-04 | | 11.36 | 8.65 |
| Per capita SDP from industrial sector at current prices | Rs | 2003-04 | | 1161.69 | 658.65 |
| Length of pucca roads per lakh of population | Km | 2004-05 | 136.9 | 69.34 | 68.44 |
| Length of pucca roads per '000 sq. km of area | Km | 2004-05 | 432.2 | 504.42 | 560.39 |
| IEM/LOI submitted in GOI to set up medium and heavy industries | No. | 1991-07 | 74333 | 6516 | 695 |
| Proposed investment in IEM/LOI | Rs in Cr. | 1991-07 | 2713813 | 167456 | 44129 |

It is evident from the above that the progress of industrialization and infrastructure in Purvanchal is negligible as compared to UP as a whole. The infrastructure deficit is especially worrying, as deficits in these, especially for example power/electricity supply can have serious implications for delivery of basic services, particularly drinking water supply. Although the State is already making efforts for the development of Purvanchal and Bundelkhand Regions there is a need to consider these areas as special areas and enhance the scale and scope of developmental efforts.

According to the Planning Atlas Uttar Pradesh, 2010 there are 5 districts under 'very high' Composite Development Index (CDI). Similarly, there are 18 districts that have 'high' CDI. None of these districts belong to Eastern UP. There are 15 districts having medium CID, out of which, only 5 belong to Eastern UP. The number of districts having 'low' CDI are 17 of which 10 fall in Eastern UP. Lastly, there are 15 districts having 'very low' CDI of which 13 belong to Eastern UP (See Annex 2 for the Planning Atlas Uttar Pradesh, 2010).

Table 33 Categorization of Eastern UP Districts as per CID

| Category (As per composite Index*) | Total Districts | Districts in Eastern UP | Name of the Eastern UP Districts |
|------------------------------------|-----------------|-------------------------|---|
| Very Low | 15 | 13 | Mau, Jaunpur, Balia, Bahraich, Ghazipur, Deoria, Maharajganj, Shravasti, Ajamgarh, Balrampur, Mirzapur, Kushinagar, Sant Kabirnagar |
| Low | 17 | 10 | Allahabad, Ambedkar nagar, Sultanpur, Chandauli, Gonda, Basti, Siddharthnagar, Sant Ravi Dasnagar, Kaushambi, Pratapgarh |
| Medium | 15 | 5 | Sonbhadra, Faizabad, Gorakhpur, Varanasi, Barabanki |
| High | 18 | 0 | |
| Very High | 5 | 0 | |
| Total | 70 | 28 | |

4.3 Project Beneficiaries' Assessment

The brief socio-economic analyses presented above for UP and especially the Eastern UP context forms a basis for the project beneficiaries assessment. In specific water supply terms, key data for drinking water supply in the State (by source) as tabulated by the 2011 Census Household Tables is given in Table 4. This gives a comparative snapshot of access by all households (HH) in UP, all rural HH, all Scheduled Caste (SC) HH, and all Scheduled Tribe (ST) HH.

4.4 Social Assessment

The social assessment was carried out with a focus on the following key concerns:

Participation: people's involvement in planning and implementation of rural water supply and sanitation services at the community level in general and of socially and economically marginalised sub-groups such as scheduled castes and the poor in particular; and women's involvement in decision making in the planning and provision of RWSS services; there has been a special focus on the 'indigenous people' and the issue of their rights to their distinct social, economic and cultural resources.

Inclusion and equity: inclusion of the disadvantaged and marginalised including the scheduled caste (SC), scheduled tribe (ST), poor, women and children in the decision making processes at the planning and implementation level; and their equitable access to the RWSS services. Focus on 'indigenous people' continues as the central concern of inclusion and equity as well.

Decentralisation: decentralised management of RWSS services in line with the general policy direction in India and UP of decentralised governance of basic services; and the related role of Panchayati Raj Institutions (PRIs) in the planning and management of these services.

Institutional and human development: institutions and the people working therein at various levels play a major role in the planning, implementation and provision of RWSS services; and hence their capacities and skills are critical to the RWSS

services, particularly in terms of quality of the services provided and their long term sustainability.

Participation, Inclusion and Equity

People, including the poor, in the study area have access to rural water supply services through private (shallow hand pumps) and public (India Mark II hand pumps). There has been practically no participation of people in the planning and implementation of rural water supply schemes and services created by the government at the village level. These include both piped water supply schemes and public stand posts established by UP Jal Nigam and schemes built under Government of India's national Swajaldhara programmes.

While UPJN has traditionally functioned in a top down and supply driven mode, Swajaldhara was supposed to be based on community participation including partial capital cost sharing (10-20%) and total sharing of the operation and maintenance cost of the schemes built. And this was to be done by every individual household benefiting from the scheme. But this has not happened on the ground, as in most of the cases, a few individuals have contributed the total 10-20% of the capital cost for the project. This has included people both working in the spirit of charity (in a few cases) or out of personal interest in getting the project to the village/GP.

Despite the past experience of a highly successful World Bank assisted Swajal (1996-2001) project in the undivided state of UP based on community participation, there is practically no institutional memory or legacy of implementing community based and demand responsive RWSS projects efficiently and effectively.

Inclusion of Women

Women are largely excluded from decision making processes and are practically invisible throughout the entire chain of planning and implementation of rural water supply and sanitation schemes and services on the ground. Given the fact that women are the primary stake holders by dint of their roles and responsibilities as providers of water at the household level, their exclusion from planning and implementation processes is likely to adversely impact the long term sustainability of the services created. The project has to address this challenge up-front for the following two reasons: One, to make the project efficient and effective in terms of not only delivering the improved water supply services to people but also for making it sustainable over time and ; second, to help women participate in planning and management processes as the most important stakeholders, as a matter of right, and for the purpose of making the project sustainable and successful.

Inclusion of the Marginalized

The case of Musahars, a highly marginalized scheduled caste community, (as available in the Box 2), suggests that it is quite likely to have situations where highly marginalized communities such as SCs can end up having very unequal access to available water supply services. And moreover, their needs are likely to be neglected even by the gram panchayat. In order to make sure that this kind of exclusion of marginalized groups does not take place at all and certainly not on scale, it is important to ensure that the members of SC community have a very strong and effective representation within the decision making bodies such as jalprabhandan samiti (JPS) and VWSC.

The social assessment tried to find out the nature and extent of participation of people in the planning and provision of RWSS services. Assessment makes it clear that there has been no substantive participation of people in terms of their involvement in decision making including choice of service level and fixing up of user fees. Only a few have participated out of their own personal interest. This does not apply to the 'indigenous people', as there are none in the Eastern UP as per the understanding of OP 4.10 of the World Bank.

Indigenous Peoples

As per definition provided in the Bank's OP 4.10, the 'Indigenous Peoples' refer to a distinct, vulnerable, social and cultural group possessing the following characteristics in varying degrees:

- e) Self-identification as members of a distinct indigenous cultural group and recognition of this identity by others;
- f) Collective attachment to geographically distinct habitats or ancestral territories in the project area and to the natural resources in these habitats and territories;
- g) Customary cultural, economic, social, or political institutions that are separate from those of the dominant society and culture; and
- h) An indigenous language, often different from the official language of the country or region.

There are no communities in the proposed project districts which could be

Box 2: Neglected Musahar Community in Bishampur GP, Chakiya Block Chandauli

There are 150 families in Musahar basti of Bishampur GP. This hamlet has 5 Hand Pumps out of which 2 are not working. Pradhan was requested to get them repaired but he did not pay any heed to it. There is no electricity in the Musahar Basti. "Pradhan does not listen to us" the women said.

They are willing to pay water tax if they get water tap in their houses. But they insist that "the tax should be collected every month otherwise we would not be able to pay big amounts if they get accumulated."

There is a soak pit near one Hand Pump. There is also an open well in the hamlet. People drink water from this well too. The women also shared that they do not have toilets and therefore defecate in the open. Malaria and diarrhoea are common diseases that occur in the village, particularly during monsoons.

termed as Indigenous Peoples as per the above definition. Hence, OP 4.10 does not come into play in the context of the proposed RWSSP-LIS.

Motipur Kalan in Sirsi Block of Shrawasti has been the only tribal (Tharu tribe) GP of the 20 study GPs visited across the five study districts, but they also do not qualify as the 'Indigenous Peoples', as they are largely integrated in the mainstream. The village is governed by an elected Gram Panchayat, and not the traditional Tharu leadership, which has weakened over the years.

Most of the households in the village have their own shallow hand pumps, besides having access to 10 public stand posts and 7 open dug wells. A Jal Nigam scheme for piped water supply in the village is proposed. The detailed project report (DPR) is in the process of being prepared and the GP has offered to provide land for the purpose free of cost.

As per the evidence from the ground so far, there do not seem to be any issues related to OP 4.10 of the World Bank, which is not applicable in this case.

Securing lands

Securing land for the purpose of constructing RWSS services could be potentially invasive of the rights of some of the socially and economically disadvantaged groups. But consultations at the state headquarters of UP Jal Nigam in Lucknow and investigations across 5 sample study districts in the field suggest that all land used so far for the construction of rural water supply schemes on the ground have been voluntarily given either by the concerned Gram Panchayat or donated by private individuals. No case of purchasing or procuring land against compensation has been reported from anywhere.

In all the schemes built by JN, land has been provided by Gram Panchayats free of cost. For Swajaldhara schemes, land has been provided either by Gram Panchayats or by private individuals free of cost. Getting land for water supply projects does not seem to be an issue in Uttar Pradesh so far.

OP/BP 4.12 is triggered when a Bank investment causes involuntary taking of land that results in direct social and economic impacts such as: loss of shelter leading to relocation, loss of assets or access to assets, loss of income sources or means of livelihood (whether or not the affected persons must move to another location). As no such thing was found across the five sample districts (Chandauli, Faizabad, Kaushambi, Kushinagar and Shrawasti) visited, **there are apparently no issues related to Bank's OP 4.12 in Uttar Pradesh.**

The UP Panchayati Raj Act, 1947, amended most recently in 2007, gives the freedom to the state government of UP to make as many committees of the Gram Panchayat as required. In view of this provision of the Act, Jal Prabandhan Samiti (JPS), the committee for water and sanitation is supposed to be formed at each Gram Panchayat (GP). Village Water and Sanitation Committee (VWSC) is formed as a representative group of the users by co-opting 6-8 non-elected members from the user community.

'Every committee constituted under sub-section (1) shall consist of a Chairman and six other members, who shall be elected by the members of the Gram Panchayat from amongst themselves in the prescribed manner; Provided that in each such committee

there shall be at least one woman member, one member belonging to the Scheduled Castes or the Scheduled Tribes and one member belonging to backward classes; Provided further that the State Government may, by notification, direct that the Pradhan or Up-Pradhan or any other member of Gram Panchayat shall be the Chairman of any such committee.’

The UP Panchayati Raj Act 1947 (Amended 2007)

There is also a provision of joint committees, where committees from different GPs can join hands to transact business of common interest. This provision of the Act can be invoked by the state government for making a provision of scheme level committees (SLCs) that would be required in the case of multi-village/GP piped water supply schemes.

Institutional and Human development

Institutions, particularly community institutions, are critical to the effective provision of RWSS services at the community level. Besides the GP, self-help groups of women and other community groups also play a critical role at the village level.

Jal Prabandhan Samiti and VWSCs at the village level are found to be more notional than real. But for one GP, in none of the 20 GPs visited GP members could tell the names of the JPS members. People, including the GP members, are equally vague and ignorant about the presence of a VWSC even in Swajaldhara villages.

Training and capacity building activities being currently organized for the elected representatives of GPs are limited to one or two day’s orientation on their roles and functions at the block level. Most of the GP representatives, who have attended these events, are barely aware of what happened during the orientation training. Moreover, as this is a one-time activity with no follow-up and with no organic link with the actual work being carried out by the GP on the ground, they do not really result into any substantive capacity building at the GP level.

In order to make the GPs play a central role in the management of RWSS schemes, their capacities will need to be built considerably. Current capacity levels are limited and inadequate to ensure the effective management of RWSS schemes and services. Regular meetings of the GPs are not held; Gram Sabhas i.e. community wide meetings are rarely held in their true spirit and are mostly shown to be held on paper to fulfil the requirement of GS meetings every six months. Decisions are taken by the Gram Pradhan/Panchayat President or a small coterie of his confidants, if the president is a male. In case of women Panchayat Presidents, many a time their husbands or in one case (Fatehpur Bangai GP in Shravasti) father-in-law were found to be functioning as one on their behalf. People at large are usually not aware of the decisions taken at the Panchayat level, as they are rarely a part of the process and there is often no attempt on the part of the GP to inform them of the decisions taken.

The biggest challenge is to make GPs function in a transparent and inclusive manner with substantive involvement of the larger community. This will include ensuring that the major decisions regarding the schemes are taken in community wide meetings during Gram Sabhas using a consultative process. The Jal Prabandhan Samiti (JPS), the committee of the GP, responsible for managing water supply and sanitation issues,

needs to be more real than virtual in order to be truly effective. As required, Village Water and Sanitation Committees (VWSCs) should be formed through a participatory process and it must be ensured that the co-opted members of VWSC enjoy the confidence of the larger community and represent their best interests.

Table 34: Key data for drinking water supply in UP (by source) from Census 2011, Household Tables

| Total number of households | Tap water from treated source (%) | Tap water from untreated source (%) | Covered well (%) | Un-covered well (%) | Hand pump (%) | Borehole (%) | Spring (%) | River/Canal (%) | Tank/Pond/Lake (%) | Other (%) | Source of drinking water |
|----------------------------|-----------------------------------|-------------------------------------|------------------|---------------------|---------------|--------------|------------|-----------------|--------------------|-----------|----------------------------|
| All Households | | | | | | | | | | | |
| 3,29,24,266 | 20 | 7 | 1 | 3 | 65 | 3 | 0 | 0 | 0 | 1 | Total |
| 1,70,94,941 | 29 | 8 | 0 | 1 | 57 | 5 | 0 | 0 | 0 | 0 | Within the premises |
| 1,18,57,526 | 11 | 7 | 1 | 6 | 73 | 1 | 0 | 0 | 0 | 1 | Near the premises |
| 39,71,799 | 8 | 5 | 1 | 8 | 74 | 1 | 0 | 0 | 0 | 3 | Away |
| All Rural HH | | | | | | | | | | | |
| 2,54,75,071 | 13 | 7 | 1 | 4 | 73 | 1 | 0 | 0 | 0 | 1 | Total |
| 1,12,24,023 | 15 | 7 | 19 | 1 | 57 | 1 | 0 | 0 | 0 | 0 | Within the premises |
| 1,06,68,526 | 9 | 7 | 1 | 6 | 76 | 0 | 0 | 0 | 0 | 1 | Near the premises |
| 35,82,522 | 7 | 4 | 1 | 8 | 76 | 1 | 0 | 0 | 0 | 3 | Away |
| All Rural SC HH | | | | | | | | | | | |
| 65,36,077 | 11 | 7 | 1 | 4 | 76 | 0 | 0 | 0 | 0 | 1 | Total |
| 19,92,049 | 18 | 9 | 0 | 1 | 71 | 1 | 0 | 0 | 0 | 0 | Within the premises |
| 33,61,509 | 9 | 6 | 1 | 5 | 78 | 0 | 0 | 0 | 0 | 1 | Near the premises |
| 11,82,519 | 7 | 4 | 1 | 7 | 78 | 1 | 0 | 0 | 0 | 2 | Away |
| All Rural ST HH | | | | | | | | | | | |
| 3,59,499 | 14 | 7 | 1 | 9 | 66 | 1 | 0 | 1 | 0 | 1 | Total |
| 1,11,116 | 23 | 8 | 1 | 2 | 65 | 1 | 0 | 0 | 0 | 0 | Within the premises |
| 1,68,760 | 12 | 8 | 1 | 10 | 68 | 0 | 0 | 0 | 0 | 1 | Near the premises |
| 79,623 | 7 | 4 | 1 | 15 | 68 | 0 | 1 | 3 | 0 | 3 | Away |

5 Stakeholder Analyses

A comprehensive mapping of the key stakeholders in the planning and provision of rural water supply and sanitation (RWSS) services was carried out as the basis for the stakeholder analyses undertaken as a part of the study. This also entailed an analysis of the differential roles, responsibilities, needs, challenges and expectations of the stakeholders involved. Their capacities and constraints are discussed separately in the ‘capacity building’ section of the report.

Communities are undeniably the primary and most important stakeholders in the provision of water supply and sanitation services. Given the current policy focus on decentralization of these services, Panchayati Raj Institutions (PRIs), particularly Gram Panchayats (GPs) are critical stakeholders who are supposed to be actively involved in the planning and management of these services. Jal Nigam schemes are being transferred to the GPs for operation and maintenance.

UP Jal Nigam (UPJN), the line department for rural water supply in the state, are the most important stakeholders on the government side, as they have been mandated to plan, design and build the schemes all these years and carry the required technical expertise to do this.

State Water and Sanitation Mission (SWSM) has been implementing Swajaldhara schemes in the state since its inception in 2002. WSSO has been taking care of the IEC activities and water quality monitoring aspects related to these services.

NGOs functioning as support organisations for facilitating the critical interface between community and the government in the context of Swajaldhara have been responsible for community mobilization and their participation in planning and implementation of these schemes.

Panchayati Raj Department in the state is responsible for implementing Nirmal Bharat Abhiyan (NBA), the Government of India’s national sanitation programme.

The study results suggest that the involvement of communities in the planning and management of water supply and sanitation services has been practically non-existent in the study districts. This is primarily because of an utter lack of any substantive interface between people as consumers and government line departments as service providers. NGOs, as facilitating agencies in the case of Swajaldhara, also have been largely ineffective particularly because of lack of proper orientation and training of the staff involved and change of staff due to inordinate delays in the completion of these schemes ranging from 2-5 years.

Time over run has resulted in cost escalation of the approved schemes resulting in a number of incomplete and abandoned schemes for want of adequate resources. There do not seem to be any accountability mechanisms in place to fix accountability for time and cost escalations. As a result, communities as the primary stakeholders are the ones who get neglected the most in the process.

Different stakeholders are driven by their varying interests, which are often short term and do not result in the common good of people’s access to improved quality of services. Investments do not lead to expected returns, as a large number of schemes end up being dysfunctional and abandoned for lack of ownership and resources to run the schemes constructed.

The following table presents the details of the primary and secondary stakeholders in terms of their profile, needs and challenges:

Table 35: Key Stakeholders: their nature, profile, needs and challenges

| S.N | Key Stakeholders | Nature of the stakeholder | Profile, Needs and Challenges |
|-----|------------------|---------------------------|--|
| 1 | User Communities | Primary | <p>Most of the people (almost 100%) in user communities across the villages in study districts in Eastern UP have access to water supply services through private and public facilities: hence, people in general are not willing to make any cash contribution towards the capital cost of proposed schemes; though, people are open to paying towards the operation and maintenance of these schemes by way of user charges, if improved water supply services are available.</p> <p>Sanitation is a bigger challenge, as a large number of constructed toilets (around 48%) are not being used by people at all, as there is lack of awareness about the linkages between lack of sanitation and poor health and an absence of any felt need for safe sanitation: as a result, there was not a single open defecation free (ODF) village in the study sample of 20 villages chosen randomly; this included even declared Nirmal Gram Puraskar (NGP) villages.</p> |

| | | | |
|---|---|-----------|--|
| 2 | Gram Panchayats (GPs) | Primary | <p>Gram Panchayats (GPs) in general do not carry any interest and orientation to take care of the operation and management of water supply schemes without availability of funds to go with it.</p> <p>There are major training and capacity building gaps and needs to be addressed at the GP level before transferring the constructed schemes to them for their subsequent operation and management: appropriate technical, managerial and financial skills need to be built at the GP level through training, technical assistance and hand holding.</p> |
| 3 | State Water and Sanitation Mission (SWSM) | Secondary | <p>SWSM has the mandate to provide policy guidance and planning support in the provision of water supply and sanitation services at the state level: however, SWSM has been actually engaged in the implementation of Swajaldhara scheme of Government of India as an implementation arm of the state government since 2002.</p> <p>Role of SWSM will need to be clearly defined and delineated within the sector space so as to minimise overlapping of roles and responsibilities of other sector institutions, mainly Jal Nigam and WSSO.</p> |

| | | | |
|---|---------------------------|-----------|---|
| 4 | UP Jal Nigam (UPJN) | Secondary | <p>UPJN has been traditionally involved in planning and construction of water supply schemes in the rural areas, as also in operation and maintenance of these schemes till recently</p> <p>Given the technical expertise of the UPJN, they will need to play the lead role in construction of large multi-village piped water supply schemes under the project, but with community mobilisation, communication and capacity building support from other sector institutions including SWSM and WSSO.</p> |
| 5 | Panchayati Raj Department | Secondary | <p>Panchayati Raj Department of Government of UP is responsible for implementation of Government of India's Nirmal Bharat Abhiyan (NBA): they work in isolation and are in no way linked to the water supply initiatives of SWSM and UPJN.</p> <p>Water supply and sanitation services are not integrated and are planned, designed and delivered as isolated services not organically linked to each other: to make it an integrated initiative is a huge and veritable challenge of the proposed WB project</p> |
| 6 | WSSO | Secondary | <p>WSSO is responsible mainly for capacity building and information, education and awareness (IEC) initiatives at the state level, besides taking care of water quality testing facilities and operations.</p> <p>But WSSO's capacities are limited and need to be considerably enhanced in order to help it perform as expected. WSSO's capacity needs have to be assessed and addressed on a regular basis.</p> |

| | | | |
|---|--|-----------|--|
| 7 | Line departments at the district level | Secondary | <p>The district establishments of the concerned line departments including Jal Nigam and Panchayati Raj in particular are the key instruments of project implementation on the ground.</p> <p>The key officials of this set-up working as managers in the WB project need to be trained to function as per the agreed project design and implementation strategy</p> |
| 8 | World Bank | Secondary | <p>World Bank's primary interest will be in ensuring that the project is implemented in an equitable and inclusive fashion within an operating environment of cohesion and accountability.</p> |

The table above presents the broad categories of stakeholders, which are characterised by a range of internal differentiation mediated by multiple factors and needs that need to be considered in ensuring their effective participation in project planning and implementation processes.

Table 36: Key/Critical Stakeholders: Status, Needs and Expectations

| S.N | Key/Critical Stakeholders | Status and Needs | Expectations |
|-----|---|---|---|
| 1 | <p>User Communities</p> <p>Women are the most primary stakeholders</p> <p>Children are the most vulnerable stakeholders because of their susceptibility to water borne illnesses more than the adults</p> | <p>Rural communities are divided along caste, class and gender lines: women as the primary collectors and providers of water at the household level are the most primary stakeholders; but they are generally outside the decision making process related to provision of water supply and sanitation services; for example they have no say in where the hand-pumps are to be installed or how much should be the user charges etc; this will need to be addressed by having a separate component of women empowerment and not allow it to be subsumed within the overall community mobilisation and development agenda.</p> | <p>No great expectations and no manifest demand for improved piped water supply services, as almost everyone, including the poor, have access to water supply through private and public facilities: as a result, people are not willing to share any capital cost for piped water supply; though they are willing to pay for operation and maintenance once the improved services are available.</p> |

| | | | |
|----------|--|---|--|
| <p>2</p> | <p>Gram Panchayats (GPs)</p> <p>Members of the Jal Prabandhan Samiti (JPS), which is responsible for handling water supply and sanitation issues at the GP level are critical stakeholders</p> <p>But members of the village water supply and sanitation committee (VWSC), which represents the users, are the most critical stakeholders at the GP level as they are directly responsible to the users.</p> | <p>JPS members across study villages were generally found to be unaware of their roles and responsibilities.</p> <p>JPS members need to be trained and re-trained throughout the project duration in order to help them discharge their roles and responsibilities as intended.</p> <p>VWSC members also need to be trained and engaged in project planning and implementation at the village/GP level.</p> | <p>GPs expect to be involved in the planning, design and implementation of the RWSS schemes built by UP Jal Nigam</p> <p>GPs also expect to have on-site training for the operation and maintenance of the piped RWSS schemes before they are transferred to them.</p> |
|----------|--|---|--|

| | | | |
|----------|---|--|---|
| <p>3</p> | <p>State Water and Sanitation Mission (SWSM) SWSM, being the top advisory body, is a major stakeholder at the state level</p> | <p>SWSM's roles and responsibilities need to be clearly defined: SWSM is best positioned to function as the State Project Management Unit (SPMU) for the World Bank assisted project</p> <p>SPMU could be located within SWSM as a separate entity, though could be headed by the same person.</p> | <p>SWSM expects the SPMU to be fully equipped and staffed with key professionals.</p> <p>SWSM/SPMU functionaries expect to be trained on various aspects of project planning and management at premium training institutes in India and abroad, besides having exposure visits to successful projects of a similar nature in India and outside.</p> |
|----------|---|--|---|

| | | | |
|----------|---|---|---|
| | <p>UP Jal Nigam (UPJN)</p> <p>UPJN is a major stakeholder as the agency with the maximum technical and engineering skills to construct water supply schemes on scale.</p> | <p>UPJN is best positioned to function as the lead technical agency responsible for preparing the detailed project reports (DPRs) and managing the construction of planned water supply facilities; construction of sanitary toilets has to be the overall responsibility of the concerned communities within the overall supervision of the Panchayati Raj Department.</p> | <p>UPJN expects to be actively involved in project planning and management as a major stakeholder and not only as a technical service provider for preparation of DPRs</p> <p>UPJN expects its senior engineers to be included in the management teams at SPMU and DPMUs: and if possible, DPMUs to be headed by senior and experienced UPJN engineers.</p> <p>Intensive training for UPJN engineers associated with the project in participatory methodologies, community mobilisation tools and techniques, community based demand responsive RWSS services and supportive supervision.</p> |
| <p>5</p> | <p>Panchayati Raj Department (PRD)</p> <p>Panchayati Raj Department is critical to the success of the sanitation component of the project</p> | <p>Panchayati Raj Department of Government of UP will have to be suitably re-oriented to appreciate and apply the demand driven approaches to rural sanitation in order to make the sanitation outcomes real and sustainable.</p> | <p>PRD expects to be included in the project planning and management team at SPMU and DPMU levels.</p> <p>They expect to be trained in management of participatory project planning and management.</p> |

| | | | |
|---|---|--|---|
| 6 | <p>WSSO</p> <p>WSSO is the biggest capacity building stakeholder in the sector at the state level</p> | <p>WSSO has a huge communication and capacity building responsibility in the sector, but their own capacities are limited and need to be enhanced.</p> <p>WSSO has to be better tuned to the emerging sector needs and plan and undertake its activities accordingly.</p> | <p>WSSO expects to get strategic support under the project for its internal capacity building to be able to anchor the capacity building efforts in the RWSS sector in the state.</p> |
| 7 | <p>Line departments at the district level</p> <p>Success of the project depends to a large extent on the motivation and capacities of the line departments at the district level.</p> | <p>As the implementing partners on the ground, the line departments (UPJN, Panchayati Raj Department) at the district level have to be well-equipped to ensure an efficient and effective implementation of planned project activities.</p> <p>Their capacity needs have to be re-assessed at the beginning of each phase and batch of the WB project.</p> | <p>There is an expectation of the district level functionaries of UPJN and PRD to have adequate incentives and capacities to function as project managers on the ground.</p> |
| 8 | <p>World Bank</p> <p>World Bank will have a major stake in learning in its unique position as a Knowledge Bank besides being a lending agency</p> | <p>World Bank needs to invest in strategic learning at each stage of project design, planning and implementation.</p> | <p>Expectation is to help poor rural communities in districts of Eastern UP have inclusive and equitable access to improved piped water supply services.</p> |

6 Impact Assessment

The proposed World Bank assisted RWSS-LIS project seeks to deliver improved water supply services largely through multi-village piped water supply schemes. However, the project is also open to single village and single habitation schemes in certain cases, if required.

The likely impact of the project on people can be assessed in the light of learning from past schemes that have aimed at improving people's access to water supply services. There have been two types of schemes which have been studied in order to assess the likely impact of the proposed project.

6.1 Swajaldhara in Eastern UP

Most piped water supply schemes under Swajaldhara are incomplete, delayed by 2-5 years and are largely non-functional across all the districts visited. The following features are common across most of the schemes studied:

- Schemes are planned without generating community demand for higher service level; most people have access to hand-pumps and hence unwilling to pay for piped water.
- Lack of accountability at state, district and GP/village levels
 - Inordinate delays between DPR preparation and release of funds for implementation causing high cost escalations, non-completion of schemes and frustration about the handling of the scheme by the nodal government department
- Low level of community involvement in planning and management of the schemes in most cases
 - Most people are not involved in selection of VWSC and hardly know about their members; in cases, even a VWSC member did not know about his being a VWSC member and some, who did, could not list the names of all the members.
 - People have no idea as to why a particular option was selected: technology options and their merits and limitations have not been discussed with people in any of the cases
 - A couple of VWSC members got the scheme constructed along with NGO representative without any serious community consultation
 - Barring a couple of exceptions, O&M collection is also not received in all the cases.
 - Schemes are designed covering few HHs in an arbitrary and ad hoc manner with no discussion on who should be included and why.
- Lack of transparency and manipulation in the process of planning and implementation of the schemes, for example:

- No discussion has been held during the preparation of DPR with the community. In many cases, DPRs of the schemes are not available with the VWSC
 - People in general have no knowledge about income and expenditures under the scheme, both about the capital and O&M costs
 - Capital cost contribution deposited by a few elite (and shown as contribution from larger community) in order to get the scheme sanctioned in most cases
 - In many cases, there are no legal electric connections and theft of electricity is being done to run the scheme.
 - People felt that NGO representatives did not try to involve larger community
- Lack of orientation and capacity to facilitate participatory projects in the government/PRI officials led Swajaldhara become worse than a supply driven project. In fact, hardly any elements of community driven development are seen in the Swajaldhara projects visited.

6.2 Jal Nigam Schemes in Eastern UP

- Lack of participatory processes has apparently resulted in lesser number of private connections in JN schemes; many people prefer to have their own hand-pumps rather than take private connections from JN schemes. One of the reasons stated for this preference has been the availability of water round the clock in hand-pumps as also the factor that water is warm during winters and cold during summer. On the other hand, piped water is available for few hours and the water is cold during winters and warm during summer.
- Some people want connections but distribution system is not covering their areas.
- Tariff fixed by JN is too less (Rs. 20/month) to meet O&M costs; the tariff has not been revised by JN for decades together; even though the tariff is very low, the recovery is between 50-70%.
- GPs are unwilling to take over single village JN schemes, due to huge arrears of electricity bill accrued during testing of pipeline.
- The scheme taken over by GP (in Uchcharawan village, in Kaushambi district), has mixed response in terms of its functioning:

- (i) GP gave connections without ferule which resulted in lack of pressure in many places, appointed an in-experienced operator resulting in frequent breakdowns and hence users were highly dissatisfied.
 - (ii) When the same GP had a turn-key contract with an experienced operator, people paid higher tariff (Rs. 40 instead of Rs. 20).
- People unaware about Arsenic and, therefore, low numbers of private connections were taken from the JN piped water supply scheme instead people preferred to have private hand-pumps. Another reason was lack of information to people about the process and requirements of getting a connection; no attempt to organize cluster level meetings made by the JN to promote it.

6.3 Likely Impact of the Proposed RWSS-LIS Project

In view of the RWSS sector experience regarding UPJN and Swajaldhara schemes on the ground, the proposed WB assisted project in UP needs to have a special focus on communication and capacity building in order to avoid negative impacts of the project in general and on people in the user communities in particular. This will be of critical significance for ensuring that the projects are based on substantive community participation and the schemes undertaken ensure equity in planning and provision of RWSS services.

Any failure in ensuring the active involvement of participating communities in project planning and implementation as the primary stakeholders is likely to adversely impact the sustainability of constructed schemes and services for want of ownership by people. While participation of people in single village/habitation schemes could be relatively easier, it will call for more strategic planning and preparation to ensure community involvement in multi-village schemes because of the number of different communities involved.

The project is likely to have a positive impact on rural communities and households, particularly the poor households, in terms of facilitating their access to improved water supply services through piped water supply schemes. However, this will be critically dependent on the quality of project planning and implementation with substantive community involvement in decision making at each stage right from feasibility studies to the eventual operation and maintenance of the constructed schemes.

In case of a failure to involve communities effectively, as has happened in the case of Swajaldhara schemes in the state, the project benefits are most likely to be skewed to

begin with and unsustainable over the long term: this may also result in a colossal waste of time and resources with many schemes becoming defunct and dysfunctional over time, as is the case in many Swajaldhara and a few Jal Nigam schemes on the ground in the region currently.

7 Institutional Analyses

There are multiple institutional actors involved in the planning and management of water supply and sanitation services in the state of UP. These include: Rural Development Department (RDD), SWSM, WSSO, UP Jal Nigam (UPJN), and Panchayati Raj Department (PRD). This adds to the complexity of interactions between different institutional actors particularly in view of the fact that the coordinating mechanisms are not fully evolved and functional. Territorial boundaries of different institutions function as barriers to effective communication and co-ordination across different institutional agencies and slow down the process of planning and implementation.

7.1 Background: Evolution of the Institutional Structure

Prior to the launch of the reform process in the rural water and sanitation sector, the planning and execution of infrastructure as well as the O&M functions of water supply in Uttar Pradesh (UP) was almost exclusively the responsibility of UP Jal Nigam. On the other hand sanitation, which was limited to the construction of household toilets under the Central Rural Sanitation Programme (CRSP), was the responsibility of the Panchayati Raj Department. The interventions in both cases were supply driven with the state agencies taking decisions on the type of systems and structures, its location, numbers and selection of beneficiaries.

In 1996, when the World Bank supported SWAJAL was started in the Bundelkhand and the hill districts of the then undivided UP, a paradigm shift in both approach and institutional structure was initiated to facilitate integrated service delivery that included drinking water, sanitation and hygiene promotion, effective community participation and long term sustainability of facilities, services and the overall sector in terms of effective policies and institutions. SWAJAL also envisaged setting into motion the decentralised process as envisaged in the 73rd Constitutional Amendment.

Under SWAJAL at the community level the Village Water and Sanitation Committees were the key institutions. Initially delinked from the constitutionally mandated Gram Panchayats (GPs), subsequently, they were brought within the scope of GPs through a government order, although still outside the constitutional framework. The institutional structure for project planning and management was built around an independent body registered under the Societies Registration Act. This body functioned as the Project Management Unit (PMU) under which seven District Project Management Units (DPMU) were established. Both the PMU and the DPMUs were populated by professionals from various disciplines from the public as well as the private sector. The PMU and the DPMUs were responsible for the planning and management of the project, including co-ordination and monitoring the progress of the project. Additionally, independent service agencies were contracted as Support Organisations for periodic monitoring and evaluation of the project, while NGOs provided community development and capacity building support. It is to be noted that

both water supply and sanitation services were delivered through the same structure.

Three years after SWAJAL, in 1999 the Sector Reforms Pilot Project for water supply was launched in selected districts across the country, including UP. This was an outcome of a growing concern about the status of the sector and an assessment conducted jointly by GoI, the World Bank and several other donor agencies. The assessment had concluded that there was a need to establish an enabling environment; ensure institutional sustainability by supporting the process of decentralization and devolution of responsibilities for water and sanitation to the PRIs and users and strengthening the advisory capacity of existing sector agencies; ensure financial viability and sustainability; and protect the water resources. The experience and lessons from SWAJAL in UP also contributed to the development of the SRP approach.

In 2002 SRP was abruptly scaled up to a nation-wide Swajaldhara project, with similar approach and institutional structure. Hence, some of the key principles on which Swajaldhara was based included a greater role and responsibility for the gram panchayats and the community and an integrated service delivery approach. In order to create an enabling environment for this the PRIs were to be vested with functions and finances, and supported with functionaries to carry out the responsibilities of drinking water supply scheme planning, designing, implementation, operation, maintenance and management.

In UP the SRP was implemented in 5 districts (Agra, Chandauli, Lucknow, Mirzapur), initially through RDD and subsequently transferred to the SWAJAL PMU. However, a sector assessment (STEM 2005) undertaken in 2004 had observed gaps in implementation and had attributed it to a lack of understanding and internalisation of the principles and guidelines of the reform process across the institutional structure. The assessment further observed that neither the Zilla Parishad nor UPJN had been involved in the implementation of SRP.

With the SRP and its subsequent scaled up version, the Swajaldhara, a new institutional structure and delivery mechanism emerged at the national, state and district level. There was to be a State Water and Sanitation Mission (SWSM) chaired by the Chief Secretary/ Officer of Chief Secretary rank. The SWSM was to be a registered society and the state government was to provide necessary operational flexibility to it for integrated implementation of Swajaldhara and the Total Sanitation Campaign (TSC). Similarly, the Zilla Parishad(ZP) was to perform the role of a District Water and Sanitation Mission (DWSM), while a District Water and Sanitation Committee (DWSC) under the chairmanship of the CEO of the ZP or the District Collector was to facilitate the formulation, management and monitoring of Swajaldhara projects; approve schemes, build capacities, etc. Finally, the GP and Village Water and Sanitation Committees (VWSCs) at the village level were to actually prepare, implement and manage the schemes. The new structure was thus, not only an attempt to decentralise services and adopt a demand driven community based approach, but also an attempt to converge water and sanitation.

In UP however, in order to build on the capacities of SWAJAL, the state government designated the Project Management Unit (PMU) established under it as the State Water and Sanitation Mission for rural water and sanitation with the mandate to coordinate the then ongoing SRP and the newly launched Swajaldhara program. The Swajaldhara was however implemented only in a limited number of districts, while in the remaining districts UP Jal Nigam continued to execute projects with funds from the ARWSP. When Swajaldhara was finally phased out and ARWSP was modified as the National Rural Drinking Water Programme in 2010, the SWSM continued to function as an implementing arm of the RDD, this time however with technical support from UP Jal Nigam. On the other hand, TSC, or Nirmal Bharat Abhiyan as it is currently called, has not been included within the purview of SWSM and continues to be implemented almost in isolation by the Panchayati Raj Department (PRD).

Hence, today the rural water supply and sanitation sector in UP, appears to have come back in a full circle to where it began in 1999 with water and sanitation being implemented as separate projects under two different agencies and programmes, but this time with an additional player- the SWSM. The sector is thus, institutionally fragmented with multiple entities and overlapping responsibilities. Each has a history of its own and has evolved because of a combination of sector needs, programme mandate, and perhaps even political convenience. As a result, structures continue to exist with no apparent value additions.

7.2 Existing institutional structure and delivery mechanism

Currently, the key players in the rural water supply and sanitation sector in UP are thus, the SWSM and its district and village level counter parts under the Rural Development Department and UP Jal Nigam with its district offices under the Urban Development Department for water supply (NRDWP) and the Panchayat Raj Department for sanitation (NBA). In 2005 a Ministry of Water Supply and a Department under it was created but has become defunct over the years.

Apart from these, there are other state agencies that work on water as a natural resource or service. These include: the UP Agro Industries Corporation under the Agriculture Department, installs hand pumps in selected blocks; the Minor Irrigation Department constructs ground water conservation structures; the UP Water Management & Regulatory Commission, created by an Act of the UP Government functions under the Irrigation Department and is responsible for canal based irrigation; the Ground Water Directorate under the Minor Irrigation Department and the UP Remote Sensing Application Centre, under the Department of Science and Technology, are both technical resource groups.

The SWSM, a registered Society located within the RDD at the state level, and the DWSCs and DWSMs at the district level are currently responsible for the provision of water. However, as stated earlier, the DWSMs and the DWSCs have been formed only in those 44 districts where Swajaldhara was implemented; and here too their existence, was fragile and almost virtual and continues to be so. A study undertaken for Unicef in 2008 had observed that Swajaldhara had failed to make a mark in UP because there were fundamental institutional gaps, namely the lack of technical capacity of the SWSM and DWSC in addition to their weak capacities to support and monitor a community based service delivery project. Moreover, while the Support Organisations that were hired to facilitate community mobilisation as well as to prepare DPRs and facilitate execution of the projects were themselves inadequate and their contracts poorly managed, the lack of technical staff within DWSC and SWSM led to inadequate appraisal of the DPRs and subsequent poor supervision of the scheme. The study had recommended that SWSM and the DWSCs should be strengthened with dedicated technical support from UPJN (through its Project and Development Wing) or through capable private sector organisations for the remaining duration of Swajaldhara.

When NRDWP was launched in 2010 and a Water and Sanitation Support Organisation (WSSO) set up under it with the earlier established Capacity Development and Communication Unit (CCDU) relocated within the WSSO, it was expected that much of the anomalies within SWSM would get corrected. And to a certain extent it did with technical support being provided by UP Jal Nigam and communication and capacity building across interventions and stakeholders being provided by the WSSO. However, several factors have not allowed the institutional structure to function with full efficiency and effectiveness:

- i. The SWSM's mandate is to provide policy guidelines, ensure effective convergence between water and sanitation projects, co-ordinate between departments, monitor progress, ensure integration of communication and capacity development interventions and maintain and auditing accounts. However, in UP the SWSM functions more as the operational arm of RDD and in the process appears to have significantly diluted its profile and role as a policy making and co-ordinating body. It does not have the strength and capacity of a higher level state Mission to which all participating departments are accountable.
- i. The SWSM until recently had limited capability and experience to discharge its functions. However, recently its capacities have been strengthened to some extent with the contracting of professionals with experience of having worked in SWAJAL and similar community based, demand driven programmes. However, the DWSC and DWSMs, wherever formed, have almost disappeared with their functions being discharged by line departments. Obviously, they do not function as a vibrant institution dedicated to a specific sector, but as one of many projects to be monitored by the CDO/DDO of the district.

- ii. Block and Cluster Resource Centres, as mandated under NRDWP have not been set up as yet and in the absence of these and support organisations like NGOs, Village Water and Sanitation Committees are being created by the Pradhans of the Gram Panchayats, similar to in states like Jharkhand. This approach limits any scope of building awareness in the community as a process leading to the creation and capacity building of VWSCs. Instead it makes the creation of the VWSCs vulnerable to vested interests. Moreover, the VWSCs are constitutionally not a sub- committee of the Panchayat; however, the Jal Prabandak Committee under the panchayat Act has been extended to co-opt members from the community and to form the VWSCs.

- iii. As mentioned the Block and Cluster level Resource Centres are yet not in place- recruitments of persons/ agencies are reported to be in progress. The WSSO finds it difficult to recruit Block Co-ordinators at such low remunerations (Rs. 5000?) On the other hand the fact that UP is large and consists of 70 Districts, 814 Blocks and 52,905 Gram Panchayats, necessitates a strong institutional structure that can reach out to the village level at scale.

- iv. The SWSM has also been plagued by a lack of continuity in the leadership. Frequent changes have resulted in interventions being implemented on a routine basis lacking innovation and initiatives as well as sustainability, as priorities keep changing with a change in leadership. Currently the SWSM does not have a full-time executive head. Its Executive Director is also a Joint Secretary in RDD.

- v. The lack of technical capacities within SWSM and the failure of Support organisation in effectively designing and supervising the execution of projects under Swajaldhara has compelled SWSM to seek the support of UP Jal Nigam. As a result of this dependency, 90 percent of the NRDWP funds in 2010-11 and 2011-12 have been spent through UPJN. However, the fact that UP Jal Nigam is located under the Urban Development Department and SWSM under the rural, makes it difficult for the latter to hold the former accountable.

- vi. The WSSO, the other critical part of the SWSM structure is now fully staffed at the state level. However, its functions and capacities are still limited to organising routine trainings, workshops and developing IEC materials, all of which appear to be isolated activities, independent of the project needs and design. The WSSO is severely constrained by the fact that it works under the directions of the SWSM with limited decision making powers and financial control. Besides, the WSSO has no connection or truck with the CCDU created under NBA in the PRD, although the NRDWP states that even where sanitation and water are under two separate departments and where hence two separate CCDUs have been set up, these should work in close coordination

with a single WSSO.

- vii. A State Technical Agency, as mandated by NRDWP does not seem to exist, nor is the State Level Scheme Sanctioning Committee effectively functional. In fact the current process is for districts to send in their request for schemes and for DPRs to be prepared by UP Jal Nigam and submitted to the SWSM for approval and funding. As there is no structured and regular need assessment and surveys undertaken, the tendency appears to be to prepare annual budgets based on the past years budget and expenditures.

UP Jal Nigam is the other key agency in the sector and is responsible for formulation, execution, promotion and financing for implementation of water supply, sewerage, sewage treatment and disposal projects. It is also responsible for fixing standards and norms for water supply and sewerage services as also for fixing tariffs and works across the state in both rural and urban areas.

Set up in the mid-1970s as a Public Sector Undertaking under a World Bank funded urban water supply and sanitation programme, UP Jal Nigam has always been organically linked to the Urban Development Department and hence reports to it. In recent years it's institutional profile has changed from that of a Corporation to a Local Authority under a Minister, however, with no commensurate changes in structure, roles and responsibilities. In fact over the last 10 years UPJN has been divested of its near monopoly in the water and sanitation sector and reduced in both size and responsibilities. However, there has been no planned re-definition or re-organisation of its structure and role, leaving it to struggle for survival.

Though UPJN works in both the rural and urban sector, there is no clear division of a similar kind within the organisation or a separation of functions. It has zonal and district level offices and although there has been a freeze on recruitments currently UP Jal Nigam is manned by a huge workforce of around 18000 employees, including around 12000 work-charges and daily wage employees. The number of engineers alone stand at 4200, out of which 1200 are Civil and Mechanical engineers, while the remaining are diploma Engineers.

Although an engineering organisations, UP Jal Nigam has some experience of having worked with community based projects under the erstwhile Dutch assisted programme in rural water supply and sanitation in the 1990s. In the course of this programme, UPJN also worked intensively with an NGO (PSU Foundation) for implementing a sanitation component in the districts of Varanasi and Raibareli and set up a dedicated Rural Sanitation Division (RSD) for the purpose. When the Dutch programme came to an end, the RSD was converted into the Community Participation Unit (CPU) under the administrative control of the Director of the State HRD Cell in UP JN and headed by a Joint Director with the rank of a Superintending Engineer. The CPU now implements UNICEF supported projects as well as the national WQM project. UPJN has also collaborated with UNICEF and the Dutch assisted programme to develop

models for community based O&M (Lalitpur and Eastern UP). However, the UP Jal Nigam did not have the capacity to scale up these models across the state. Currently, it does not have any defined or formal role in the NRDWP and in spite of its experience of having worked with community based projects continues to be a hard core engineering organisation. This is also evident from its successive and failed attempts to effectively transfer responsibilities of O&M of hand pumps to the PRIs.

The Panchayati Raj Department is responsible for the implementation of NBA and works through its district, block and village level panchayats. A District Sanitation Committee headed by the DM / DPRO has been formed in a way equivalent to the DWSC. Although a CCDU has been formed it neither has the requisite manpower and professionals nor resources. While the NRDWP guidelines indicate that the funds for a separate CCDU for sanitation also needs to be appropriated from the funds that are allocated under NRDWP, apparently this does not happen. Hence, the CCDU in PRD is non- functional. Besides, the PRD also does not engage NGOs for community mobilisation and awareness generation. Hence, mobilisation and community activities are completely dependent on the gram panchayats, which does not have the requisite capacities.

7.3 Key issues and recommendations

The key issues that emerge from the above is the lack of a cohesive integrated structure and capacities to effectively implement water and sanitation as an integrated component. While NRDWP and NBA are under two different departments, the SWSM functions like the implementation arm of RDD. Further, UP Jal Nigam, that provides technical support, reports to the Urban Development Department and the PRD lacks both manpower and capacity to implement a demand driven sanitation and hygiene project. The SWSM is not structured to function as an apex body that provides policy guidelines and oversight. Hence, there is no effective coordinating mechanism.

Planning of water and sanitation are undertaken as independent activities and not integrated at the GP level. The NGOs contracted by SWSM are only responsible for generating water safety plans. Further, monitoring and MIS of NRDWP is undertaken by UP Jal Nigam instead of the WSSO. The WSSO in turn is only partially effective with its functioning constrained because of its lack of independence and flexibility to function independent of SWSM. Hence, each critical activity is implemented almost as an independent activity by different agents and without a long term or holistic perspective.

Hence, the greatest risk is that proposed interventions will be implemented as any other project without bringing about any significant improvement in the sector or service levels, until and unless the organisational structure is revisited across all levels and requisite capacities developed.

While, a separate and integrated Department of Water and Sanitation, as has been established at the national level would be the long term answer to resolve the current institutional muddle, the process of re-organisation in the immediate future could begin with restructuring the SWSM as a vibrant body under the active supervision and guidance of the Chief Secretary and with adequate professionals and sustained leadership. While the SWSM can continue to be located within the RDD, it should be provided the status of a Special Purpose Vehicle, like the erstwhile PMU under SWAJAL, in order to allow it to function with strength and innovation and bring together the PRD and UP Jal Nigam, and with it integrate NRDWP and NBA. Further, the WSSO needs to be given sufficient independence, flexibility and funds to provide support for communication, capacity building and monitoring across the two programmes. The DWSM and DWSCs need to be formed in all the districts with adequate capacity to plan and monitor, and the BRCs fully staffed to support the VWSCs.

8 Risk Assessment

The study findings suggest that given the current sector scenario and practices around constructing water supply and sanitation services in the rural areas of the state, the proposed World Bank assisted project runs multiple risks. In order to make sure that risks do not turn into realities, thereby adversely affecting project outcomes, effective mitigation measures need to be thought through and incorporated in the project design and its implementation strategy and plan at the very outset.

Of the many risks that the project runs, the primary risk is of the entire project turning into a typical supply driven program of physical construction of water supply systems and sanitation facilities without sufficient and effective demand from people for improved water supply and safe sanitation services.

This risk looks fairly real in view of the fact in all the 10 schemes (5 Jal Nigam and 5 Swajaldhara) studied across five study districts, there was no substantive involvement of people as potential users of the services being offered by these schemes. As a result, barring a couple of exceptions, people in general did not pay up their user charges in any of these schemes. And the services were not in response to express demand from people, but were basically driven by the exigencies of the projects/programmes to which they belonged, mainly Jal Nigam and Swajaldhara schemes.

Another related risk of the project is the lack of ownership of the proposed schemes by the GPs. This risk has the potential of derailing the general policy direction of decentralised provision and management of basic services including water and sanitation services to people. In most of the schemes transferred to GPs, no one at the GP level was aware of their roles and responsibilities in the matter. In Shravasti, there were 35 Jal Nigam schemes, which were to be transferred to the GPs, but none of the concerned GPs were willing to take it over. This situation suggested a huge capacity need to re-orient and train the GPs to appreciate and undertake the operation and management of schemes constructed by Jal Nigam.

Other risks related to project planning and implementation, besides the project design, are underlined in the following table:

This table underlines the issues/risks and their suggested mitigation measures:

Table 37: Social and Project Risk Mitigation Action Plan

| S.N. | Issues/Risks | Mitigation Action |
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| 1 | A routine supply driven construction program of water supply and sanitation facilities without effective demand from user communities for improved services | (iv) Creating demand for improved piped water supply services with innovative communication campaigns involving the use of participatory methodologies such as Participatory Rural Appraisal (PRA), Participatory Learning and Action (PLA), Community Led Total Sanitation (CLTS) and Community Led Action for Sanitary Surveillance (CLASS) |
| | | (v) Re-defining the functional goals and strategies of key sector institutions of SWSM, Jal Nigam, Panchayati Raj and WSSO. |
| | | (vi) Re-articulating their respective roles and responsibilities in the context of the WB supported project in Eastern UP |
| 2 | Lack of ownership of the constructed schemes by Gram Panchayats (GPs) | (iii) Ensuring the substantive involvement of GPs at all stages of project planning and implementation beginning from the feasibility study stage itself |
| | | (iv) Training the GP members in general and Jal Prabandhan Samiti (JPS) members in particular about the project design, scheme cycle and the implementation strategy and plan along with their roles and functions in all of these |

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| <p>3</p> | <p>Exclusion of the poor and the extremely marginalised, SCs, poor and women, from project processes</p> | <p>(iii) Ensuring substantive, rather than the notional, involvement of the extremely marginalised (such as the Musahars), other SCs, poor and women in project planning and implementation by ensuring their active involvement in taking key decisions related to project planning and implementation on the ground.</p> <p>(iv) Engaging community based organisations such as self-help groups (SHGs) of women and joint liability groups (JLGs) of men for various project related tasks such as feasibility study, site selection, determining the service level, fixing up the user charges etc.</p> |
| <p>4</p> | <p>Lack of transparency in project planning and implementation</p> | <p>(iii) All the key decisions related to the size of the scheme, villages/GPs to be involved, service level, payment of user charges are taken in community wide meetings called Gram Sabhas, and not by the executive body of the GP</p> <p>(iv) Details about project expenses are subject to periodic social audit, which is carried out in community wide meetings/Gram Sabhas</p> |
| <p>5</p> | <p>Lack of accountability in case of time and cost over runs of the schemes</p> | <p>(v) Processes for preparation and approval of detailed project reports (DPRs) are designed so as to minimise the delay without compromising on the quality of the end outcome</p> <p>(vi) Responsibility, authority, and accountability are located strategically and evenly</p> <p>(vii) Capacities of all the institutional and individual stakeholders are built through training and re-training throughout the project cycle</p> <p>(viii) Training programs are designed in view of clearly identified training needs of various stakeholders at different stages of the scheme cycle.</p> |

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| <p>6 Sanitation remains a poor add on to the overall project with its primary focus on water supply: and as a result, water supply and safe sanitation do not get addressed as an integrated issue having a major bearing on the quality of water and the resultant health status of people</p> | <p>(iii) Safe sanitation in terms of open defecation free (ODF) communities/GPs is made into an incentive for improved water supply services</p> <p>(iv) Water supply and safe sanitation are offered as an integrated service with emphasis on communication and capacity building for effective sanitation and hygiene behaviour change at the community level.</p> |
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In view of the above, it is clear that the possible ways to mitigate these risks is to invest in large scale and intensive communication and capacity building of stakeholders, particularly of user communities and GPs.

Section 3

Capacity Building

9 Capacity Building

9.1 Overview

At a macro sectoral level, capacity can be defined as the combined ability of different key sector institutions (SWSM, SPMU, WSSO, UPJN, and PRD) to plan, design and implement single village and multi-village piped water supply schemes and safe sanitation services efficiently and effectively in their respective domains. This implies that the project activities are planned and undertaken in a timely manner as per the agreed scheme cycle and the schemes are completed and commissioned in time with desired quality standards and with effective forward linkages for their sustained functioning. This also pre-supposes effective follow-up steps to ensure the sustainability of the schemes and services created along with a clearly defined protocol for carrying out operation and maintenance of the schemes led by the GPs and Jal Prabandhan Samiti (JPS).

Despite the experience of Swajal (1997-2001), the World Bank assisted rural water supply and sanitation project in the undivided state of UP, capacities to plan and manage community based and demand responsive projects on the ground in the state are severely limited.

Capacity constraints are both at the institutional and human resource levels. Capacities required for ensuring piped water coverage in Uttar Pradesh in general and Eastern UP in particular are currently not there. Key sectoral institutions, particularly UPJN and PRD are poorly staffed and equipped. Moreover, people in general are untrained and not oriented to facilitating community led demand driven processes of planning and management on the ground.

Given the huge capacity gaps, particularly in terms of required institutional and technical and managerial human capacity at the State, district, block, and GP levels, there is a need to design and follow a sound training and capacity building strategy. All the training, technical assistance, hand holding and other capacity building activities need to be based on this strategy.

The capacity gaps to be addressed include: institutional capacity for ‘involving community and Panchayats in planning, implementing and managing their own drinking water supply schemes; and technical capacity of the State Rural Water Supply Departments for supporting and implementing the decentralization program.’

The World Bank supported project in Eastern UP seeks to ensure water security of rural communities, particularly in terms of their access to safe, reliable and sustainable water supply and sanitation services in this region of the state. Decentralised management of these services is the key focus of this Bank supported initiative. It is envisaged that the concerned communities would be actively involved in planning, design and implementation of single village and multi village schemes under the program.

The understanding is that this would ensure effective operation and maintenance and sustainability of schemes and services. This change is in line with the basic intent and tenets of the National Rural Drinking Water Programme (NRDWP) and represents a fundamental shift in sector functioning. But at the same time it presents many challenges, particularly in terms of capacity building of managers and functionaries

involved at various levels.

As water quality has emerged as the biggest concern within the overall policy paradigm of water security as embodied in the NRDWP, this calls for special training and capacity building efforts at various level. WSSO is currently taking care of communication and capacity building needs for ensuring a safe water quality regime in the state, but their capacities are limited and inadequate to meet the challenge. A look at the available options and their informed understanding have to form the basis of the training and capacity building efforts related to water quality. The options are as follows:

- There are two broad ways to solve the problem of water quality: one, providing safe drinking water by taking recourse to appropriate treatment methods, both for chemical and faecal contamination; two, getting safe water from safe source and protecting the water sources from being contaminated. While treatment option provides at best only short term or medium term solution, having a safe and protected source is a relatively longer-term solution. Moreover, a safe source is not a onetime event or entity; it is dynamic and critically dependent on its protection from contaminants and its continued recharge. Hence, the suitability of either of the solutions can be determined only in view of the local conditions and adopted management practices. In view of this, there seems to be a compelling reason to work towards the solution to the problem of faecal contamination of water by focussing on safe sanitation based on the elimination of the practice of open defecation.
- In order to apply either of the two solutions of treatment and protection effectively, building local capacity, particularly PRI and community capacity is of seminal significance. Centralised management practices have failed to create the required ownership at the local level so far in the state. Though the actual management is proposed to be decentralised with its transfer to the PRIs, the experience in Uttar Pradesh has not been very encouraging so far. PRIs in general and Gram Panchayats in particular are seen to be fairly weak in the state. This calls for a strategy to enhance the capacities of PRIs by ensuring the effective transfer of funds, functions, and functionaries at their level and by undertaking appropriate capacity building activities.
- In this context, the NRDWP places special emphasis on development of District Water Security Plans and Village Water Security Plans. These plans have to be made through a multi-stakeholder consultation process involving PRIs, communities, and other grassroots civil society institutions such as self-help groups (SHGs) of women. This has to be undertaken with utmost sincerity and care. Uttar Pradesh has already initiated the process of preparing these water security plans, which intend to combine three critical policy concerns of access, quality, and sustainability. However, the study revealed that even the senior officers and Engineers interviewed at the district were unaware of the concept of 'Water Security Plans.'

In order to design appropriate capacity building interventions for the frontline functionaries and sector managers at various levels, a capacity needs assessment has been undertaken to inform the ensuing capacity building strategy and plan for the RWSSP-LIS.

10 Capacity Building Needs Assessment

The field study has clearly brought out that UP Jal Nigam, which is the major player in rural water supply in the state, has been functioning essentially as an engineering outfit engaged in construction of water supply schemes largely in a top-down and supply driven manner. On the other hand, the schemes built under Government of India's national Swajaldhara programme had limited, mainly notional community involvement and outreach and have failed to achieve the intended objective of participatory decentralized management of water supply schemes and services so far.

The proposed project intends to provide lead role to communities in decision-making. This requires a substantial shift in thinking and action regarding the project processes at various levels within the state. The capacity building needs have, therefore, been articulated in view of the envisaged roles and functions of stakeholders at various levels on the basis of the consultations held as part of the field study.

A note on Training institutions in UP and their potential/ possible role in RWSSP-LIS, is available as Annexure 6

STATE LEVEL

The capacity building needs at the state level are further divided into four sub-categories, namely, (a) Policy and Governance, (b) Operations and Program Management, (c) Capacity Building and Training Institutions and (d) Service Agencies.

A. Policy and Governance Level

This level would include primarily the policy makers (both political and beaurocratic), opinion makers (electronic media, print media, State Level NGOs, multilateral/ bilateral agencies operating in UP), SWSM and all elected representatives (MPs/MLAs/MLCs). All these stakeholders have a critical role in supporting the NRDWP and NBA in general and RWSSP-LIS project in particular in an indirect manner. The training/ capacity building needs along with the intervention needed for capacity building is given in Table below.

Table 38: Capacity Building Needs at Policy and Governance Level

| S. No. | Expected Function | Role/ | Capacity Building Needs | Capacity Building Intervention |
|--------|--|-------|---|---|
| 1 | Advocacy for promoting policies conducive for NRDWP and NBA in general and RWSSP-LIS project in particular | for | <p>Knowledge about NRDWP and NBA in general and RWSSP-LIS project in particular.</p> <p>Knowledge about experiences in RWSS Sector Reforms in other states.</p> <p>Sensitisation for participatory and innovative approaches in RWSS and other development sectors.</p> | <p>Policy Workshops</p> <p>Observation Study Tours (learning based on participant observation) to successful projects in India and abroad</p> |

B. Operations and Program Management Level

The **State Project Management Unit (SPMU), WSSO staff, and the selected departmental staff of UPJN and Panchayati Raj** at state level would constitute this group. The training/ capacity building needs along with the intervention needed for capacity building is given in Table below.

Table 39: Capacity Building Needs at Operations and Program Management Level

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|---|--|---|
| 1 | Provide inputs to state government for review and revisions in the policies related to NRDWP and NBA in general and RWSSP-LIS project in particular based on feedback from the field units. | <p>Knowledge about innovations in RWSS and other development sectors especially about the participatory projects</p> <p>Skills in policy analysis, policy planning, getting feedback, analysing feedback and application of feedback for policy design.</p> | <p>Exposure visits to other projects in India and abroad</p> <p>Specialised training programs for senior management in the SPMU, UPJN and Panchayati Raj on policy planning and management</p> |
| 2 | Timely procurement of goods, services and works as per operational requirements from time to time and compliance to World Bank Loan agreement | <p>Knowledge about World Bank procurement procedures and systems</p> <p>Skills in financial management for participatory projects particularly on evolving mechanisms for improved efficiency in payments for goods, services and works</p> <p>Skills in community procurement</p> | <p>Specialised training programs for senior management (heads of different units and finance staff of SPMU, UPJN) on World Bank procurement procedures and systems</p> |

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| 3 | Contract management with various agencies providing different services including NGOs, individuals, private firms and the user groups | <p>Knowledge about the legal provisions on contracts</p> <p>Skills in drafting contracts for various types of services</p> | Training on contract management for senior management (heads of different units of SPMU) and finance staff |
| 4 | Providing leadership in the management of RWSSP-LIS and ensure effective monitoring of district units | Skills in program management, participatory decision making, effective communication, resource planning and time management | Skill development and motivation training workshops for all SPMU officials and selected state level staff of UPJN and Panchayati Raj |
| 5 | Managing the capacity building and communication interventions (for building capacities of district level stakeholders) including contract development, contract monitoring and contract management for training activities | Skills in training needs assessment (TNA), design of training (DoT), management of training (MoT), evaluation of training and training impact assessment (EoT/TIA) | <p>Training programs for officers in the WSSO within the SWSM on TNA/CNA, DoT, MoT, EoT/TIA</p> <p>Exposure visits to successful WSSOs in the country.</p> |
| 6 | Monitoring and evaluation of program interventions including processes, outcomes and impacts | <p>Knowledge about project M&E system</p> <p>Skills in analysing data generated by the M&E system, developing terms of reference for process monitoring and impact evaluations</p> | Training program on Project M&E system for all officials of SPMU and selected staff of UPJN and Panchayati Raj |

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| 7 | Training DPMUs in selection of villages in the start of each batch of project implementation | Knowledge about village selection criteria, checking of pre-feasibility and site appraisal reports | Workshop on village selection methodologies including pre-feasibility and site appraisals for technical and community development staff |
| 8 | Piloting community based systems for water quality monitoring and surveillance in few villages and using them as models for training district units | Skills in transferring various community based water testing systems in the field and setting-up the processes and systems for community management of water quality | Action Research (Pilot Project) on community based water quality monitoring and surveillance for technical and community development staff |
| 9 | Act as provider of technical assistance/ services to support and empower PRIs and communities | Appreciation of the NRDWP and NBA in general and RWSSP-LIS project in particular and its intent Attitude towards accepting the changing role | Motivational workshops for appreciation of new roles for all SPMU staff, selected staff of UPJN and Panchayati Raj and also including aspects related to self development |
| 10 | Ensure morale boosting of field units | Skills in designing effective organizational systems for appreciation and incentive for recognising good work | Annual staff retreat for SPMU and DPMUs/ UPJN and Panchayati Raj staff |
| 11 | Ensure cross-learning amongst districts through sharing of best practices on a quarterly basis | Skill in writing case studies Skills in documentation and presentation of best practices | Training program on Case study development for community development and technical staff of DPMUs |

C. Training Institutions Level

Though, the training institutions to be hired are supposed to have required skills and competence in training and capacity building, orienting and enhancing the capacities and skills of the master trainers of the nodal institution and the specialized training institutions for technical training on RWSSP-LIS would be critical. The training/ capacity building needs along with the intervention needed for capacity building for developing the capacities of Master Trainers is given in Table below.

Table 40: Capacity Building Needs of Master Trainers of Nodal and Specialized Training Institutions

| S. No. | Expected Function | Role/ | Capacity Building Needs | Capacity Building Intervention |
|--------|---|-------|--|---|
| 1 | Build capacities of trainers for training of the grass root level functionaries, PRIs and communities | | <p>Knowledge about NRDWP and NBA in general and RWSSP-LIS project in particular.</p> <p>Knowledge about experiences in RWSS Sector Reforms in other states.</p> <p>Knowledge about innovations in RWSS and other development sectors especially about the participatory projects</p> | <p>Orientation workshop on NRDWP and NBA in general and RWSSP-LIS project in particular .</p> <p>Exposure visits to other states with similar projects for enhancement of understanding and developing case studies of successful practices</p> |

D. Service Agencies

Certain specialized agencies would need to be hired for specialized tasks required from time to time such as process monitoring, construction supervision, auditing etc. The training/ capacity building needs along with the intervention needed for capacity building of service agencies is given in Table below.

Table 41 : Capacity Building Needs of Service Agencies

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|--|---|--|
| 1 | Provide various types of support services for the project such as auditing, process monitoring, construction supervision etc | Knowledge about NRDWP and NBA in general and RWSSP-LIS project in particular. | Orientation workshop on approach, principles and components of NRDWP and NBA in general and RWSSP-LIS project in particular. |

DISTRICT LEVEL

The capacity building needs at the district level are further divided into three sub-categories, namely, (a) Governance & Administration (DWSM/DWSC/ZP Members/ District Level Officials/ Opinion Makers), (b) Project Management (DPMU and Training Institutions), (c) Operations (UPJN Division/ Sub-division, block officials of RD and Panchayati Raj, Service Agencies, SOs

A. Governance and Administration Level

This level would include primarily the **members of DWSM, DWSC, ZP Members, district level officers related to other development sectors and opinion makers (electronic media, print media and NGOs operating in the district)**. Most of them, even if not directly involved, have a critical bearing on the success of the project. The implementation of RWSSP-LIS would require inter-sectoral coordination as well; therefore, their presence on board is important. The training/ capacity building needs along with the intervention needed for capacity building is given in Table below.

Table 42: Capacity Building Needs at Governance and Administration Level

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|---|---|--|
| 1 | Advocacy for mobilising support for NRDWP and NBA in general and RWSSP-LIS project in particular. | Knowledge about NRDWP and NBA in general and RWSSP-LIS project in particular. Sensitisation for participatory and innovative approaches in RWSS and other development sectors. | Project Launching Workshop for all the listed stakeholders Observation Study Tours (learning based on participant observation) to successful projects in the district and outside for ZP/ DWSM/ DWSC Members, media persons |
| 2 | Review of project implementation in district as being carried out by DWSC/ DPMU | Knowledge about RWSSP-LIS project in particular. (including approach, principles, components and other related guidelines). | Training workshop on RWSSP-LIS components for DWSM members |

B. Project Management Level (DPMU/ Training Institutions)

This level would primarily include the **entire staff of DPMU and the trainers from various training institutions at the district level**. The capacity building needs along with the intervention needed for capacity building is given in Table below.

Table 43: Capacity Building Needs at DPMU Level

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|--|--|---|
| 1 | Provide assistance/ technical advice to DWSM/DWSC for decision-making and implement the decisions of DWSM/DWSC | Knowledge about project activities and implementation procedures | Orientation workshop on project structures and implementation guidelines for DPMU professionals |

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| 2 | Selection of villages in the start of each batch of project implementation and training of staff at operational levels for carrying out pre-feasibility and site appraisal | Knowledge about village selection criteria, checking of pre feasibility and site appraisal reports | Workshop on village selection methodologies including pre-feasibility and site appraisals for the technical and community development staff of DPMU and trainers of training institutions |
| 3 | Act as facilitators and trouble-shooters for project activities undertaken by GPs, VWSCs, SOs and SAs as per the provisions of contracts/ MoUs with them | Belief in community based participatory approaches, willingness to devolve implementation responsibilities to VWSCs and GPs Knowledge about provisions for community contracting | Training on project management for all the DPMU professionals |
| 4 | Establish a system for distribution of area-wise responsibilities for monitoring project progress | Knowledge about contractual arrangements with SOs / SAs Knowledge about Project M&E Systems | Training on Project M&E systems and contract management for all the DPMU professionals |
| 5 | Selection of SOs for facilitating project processes at village level | Knowledge about criteria and procedure for selection of SOs | Workshop on selection of SOs for all the DPMU professionals |
| 6 | Training of SOs on Community Led Total Sanitation (CLTS) | Knowledge about CLTS approach Skills in facilitating CLTS Approach at community level Willingness to help communities for achieving open defecation free and fully sanitised environment | Training of trainers workshop on CLTS Follow-up visits and refresher workshops for all DPMU Professionals and trainers of training institutions |

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| 7. | Training of SOs on community action planning and monitoring | <p>Knowledge about the process for preparation of community action plans</p> <p>Skills in using participatory methodologies/ tools for preparation of community action plans</p> <p>Skills in direct training</p> | <p>Training of trainers on community action planning and monitoring</p> <p>Training on direct trainers skills (DTS) for all DPMU professionals and trainers of training institutions</p> |
| 8. | Training of technical staff of SOs on feasibility study and design of schemes | <p>Ability to develop and present technology options as per local conditions for helping community to make informed choice</p> <p>Willingness to design on the basis of community preferences</p> <p>Knowledge about design criteria</p> | <p>Training of trainers on feasibility studies and design of schemes for technical Staff of DPMU and trainers of training institutions</p> |

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| <p>9.</p> | <p>Training of community development staff of SOs on community empowerment plan (CEP)</p> | <p>Knowledge about components of CEP (which would include sub-plans related to sanitation and hygiene promotion, initiatives for women involvement in the program, management of activities during construction and post-construction phases including mobilisation of community contribution for capital and O&M costs)</p> <p>Skills in mobilising communities to participate in CEP preparation and implementation</p> | <p>Training of Trainers on community empowerment plan for community development staff of DPMU and trainers of training institutions</p> |
| <p>10.</p> | <p>Training of technical staff of SOs on construction technologies and community procurement</p> | <p>Knowledge about community procurement systems</p> <p>Knowledge about appropriate construction technologies including user friendly and cost effective technologies and optimum use of material</p> | <p>Training of trainers on construction technologies and community procurement for technical staff of DPMU</p> |
| <p>11.</p> | <p>Supervise the works of service agencies for construction supervision (UPJN or private agency, if hired)</p> | <p>Knowledge about ToR and contract of service agency</p> | <p>Training on construction supervision for technical staff of DPMU</p> |

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| 12. | Training of staff of SOs on establishment of O&M Systems | <p>Knowledge about components of O&M system</p> <p>Skills in facilitating setting-up of O&M systems through community consultative process</p> | <p>Training of Trainers on ‘Establishing O&M Systems’ for technical and community development staff of DPMU and trainers of training institutions</p> |
| 13 | Training of technical staff of SOs on source sustainability through source and catchment protection | <p>Knowledge about technological options for source and catchment protection including water recharging and other water harvesting structures</p> | <p>Training of trainers program on source and catchment protection for technical Staff of DPMU</p> |
| 14 | Piloting community based systems for water quality monitoring and surveillance in few villages and using them as models for on-the-job training of SOs (1 village per /SO) | <p>Skills in transferring various community based water testing systems in the field and setting-up the processes and systems for community management of water quality</p> | <p>Action research (pilot project) on community based water quality monitoring and surveillance for technical and community development staff of DPMU</p> |
| 15 | Training of staff of SOs on technologies related to solid waste and waste water management | <p>Knowledge about innovative techniques in solid waste and waste water management systems</p> | <p>Training of trainers program on management of solid waste and waste water for technical and community development staff of DPMU and trainers of training institutions</p> |

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| 16. | Monitoring the project progress in the villages and report progress to DWSC and SWSM/SPMU on a continuous basis as per the designed M&E system and take corrective measures for areas of concern as per the guidance from DWSC/ SPMU/ SWSM | <p>Knowledge about MIS and M&E systems</p> <p>Skills for continuous updating of information on project progress</p> | Workshop on Project M&E systems for DPMU professionals |
| 17. | Manage training support for SOs/ Service Agencies who in turn would build capacities of VWSCs and PRIs as per the stages of scheme cycle | <p>Knowledge about scheme cycle and training required at each stage of scheme cycle</p> <p>Knowledge about roles and responsibility of various stakeholders in scheme cycle</p> <p>Skill in developing training implementation plans in consonance with batches and scheme cycle</p> | Training on preparing training implementation plan and management of training for DPMU professionals |
| 18. | Manage project finances as per project rules and regulations | <p>Knowledge and skills for financial planning and management</p> <p>Skills in preparing formats related to financial information for compliance of World Bank Loan Agreement</p> | Training on financial systems and procedures of the project for finance/ accounts staff and project manager of DPMU |
| 19 | Conduct periodic sustainability monitoring exercise | Skill in executing sustainability monitoring exercise | Workshop on conducting sustainability monitoring exercise for all the DPMU Staff and trainers of training institutions |

C. Operations (UPJN Divisions/ Sub-divisions/ block officials of RD and Panchayati Raj / SOs)

This level would primarily include the technical staff of UPJN deployed at Division/ Sub-division, block officials of RD and Panchayati Raj and/ or staff of SOs, if any. The training/ capacity building needs along with the intervention needed for capacity building is given in Table below.

Table 44: Capacity Building Needs at Operations Level

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|---|---|--|
| 1 | Carrying out pre-feasibility and site appraisal for selection of villages | <p>Knowledge about village selection criteria</p> <p>Skill in conducting pre-feasibility and site appraisals and preparing reports as per format</p> | <p>Training on village selection methodologies including pre-feasibility and site appraisals for the UPJN engineers at division/sub-division levels, SOs</p> |
| 2 | Facilitate Community Led Total Sanitation (CLTS) at village level | <p>Knowledge about CLTS approach</p> <p>Skills in facilitating CLTS approach at community level</p> <p>Willingness to help communities for achieving open defecation free and fully sanitised environment</p> | <p>Training of trainers workshop on CLTS</p> <p>Follow-up visits and refresher workshops for UPJN engineers at sub-division/ division level/ block level staff of RD and Panchayati Raj/SOs</p> |
| 3. | Facilitating community action planning and monitoring at community level | <p>Knowledge about the process for preparation of community action plans</p> <p>Skills in using participatory methodologies/ tools for preparation of community action plans</p> | <p>Training on ‘Community Action Planning and Monitoring’ for UPJN engineers at sub-division/ division level/ block level staff of RD and Panchayati Raj/SOs</p> |

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| 4. | Facilitate Feasibility Study and Design of Schemes | <p>Ability to develop and present technology options as per local conditions for helping community to make informed choice</p> <p>Willingness to design on the basis of community preferences</p> <p>Knowledge about design criteria</p> | Training on feasibility studies and design of schemes for UPJN engineers at sub-division/ division level/ SOs |
| 5. | Facilitate development of community empowerment plan (CEP) at village level | <p>Knowledge about components of CEP (which would include sub-plans related to Sanitation and hygiene promotion, initiatives for women involvement in the program, management of activities during construction and post-construction phases including mobilisation of community contribution for capital and O&M costs)</p> <p>Skills in mobilising communities to participate in CEP preparation and implementation</p> | Training on community empowerment plan for UPJN engineers at sub-division/ division level/ SOs |
| 6. | Share information regarding construction technologies and facilitate community procurement at village level | <p>Knowledge about community procurement systems</p> <p>Knowledge about appropriate construction technologies including user friendly and cost effective technologies and optimum use of material</p> | Training on construction technologies and community procurement for UPJN engineers at sub-division/ division level/ SOs |
| 7. | Construction supervision of schemes | Knowledge about requirements of construction supervision components for community based projects | Training on construction supervision for technical staff of UPJN at division level/ supervision agency, if any |

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| 8. | Facilitate establishment of O&M Systems at village level | <p>Knowledge about components of O&M system</p> <p>Skills in facilitating setting-up of O&M systems through community consultative process</p> | <p>Training on establishing O&M systems UPJN engineers at sub-division/ division level/SOs</p> |
| 9. | Facilitate source sustainability through source and catchment protection at village level | <p>Knowledge about technological options for source and catchment protection including water recharging and other water harvesting structures</p> | <p>Training on source and catchment protection for UPJN engineers at sub-division level and technical staff of SOs</p> |
| 10 | Implementation of community based systems for water quality monitoring and surveillance at village level | <p>Skills in transferring various community based water testing systems in the field and setting-up the processes and systems for community management of water quality</p> | <p>On-the-job training on community based water quality monitoring and surveillance for UPJN engineers at sub-division level and technical staff of SOs</p> |
| 11 | Sharing information on technologies related to solid waste and waste water management at village level as per community demand | <p>Knowledge about innovative techniques in solid waste and waste water management systems</p> | <p>Training on management of solid waste and waste water for UPJN engineers at sub-division level and technical staff of SOs</p> |

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| 12. | Monitoring the project progress in the villages (for SHS, SGS, small MVS and large MVS) and report progress to DPMU on a continuous basis as per the designed M&E system and take corrective measures for areas of concern as per the guidance from DPMU | Knowledge about MIS and M&E systems Skills for continuous updating of information on project progress | Workshop on Project M&E systems for UPJN engineers at sub-division level and technical staff of SOs |
| 13. | Train the community in managing accounts as per project rules and regulations and auditing requirements of the project | Knowledge about financial rules and systems for the project Skills to maintain books of accounts as per project guidelines | Training on financial systems and procedures of the project for UPJN engineers at sub-division/ division level and selected staff of /SOs |
| 14. | Conduct periodic sustainability monitoring exercise | Skill in executing sustainability monitoring exercise | Workshop on conducting sustainability monitoring exercise for technical staff at division level |
| 15. | Planning, designing and construction of MVS | Knowledge about institutional arrangements for multi village water supply schemes | Orientation program on institutional arrangements for RWSSP-LIS particularly with regard to the roles and responsibilities in context of MVS for UPJN technical staff at Division Level |

| | | | |
|-----|--|---|--|
| 16. | Collection of water tariff from the GPs and ZPs served by the MVSs | Knowledge about revenue fixation including water tariff and skills for collection of the tariff | Training program on tariff fixation and recovery mechanisms and O&M systems for MVS for UPJN technical staff at Division Level and SO staff |
|-----|--|---|--|

D. GP/ VWSC Level

Capacity Building Needs of GPs

The training/ capacity building needs along with the intervention needed for capacity building of GPs is given in the following Table.

Table 45: Capacity Building Needs at GP Level

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|--|--|--|
| 1 | Overall project monitoring and supervision and facilitation during various phases of scheme cycle and reporting to the project authorities | Knowledge about project objective, project components, sub components and scheme cycle | Orientation program on RWSSP-LIS and roles and responsibilities of GP/ VWSC and other stakeholders for the Members of GP, Panchayat Secretary |
| 2. | Constitution of village water and sanitation committee (VWSC) and ensuring that all sections are represented in it | Knowledge about procedure and rules for VWSC constitution and their roles and responsibilities | To be covered under Program shown at Sl. No. 1 |

| | | | |
|----|--|---|---|
| 3. | Provide capacity building support to VWSC through SOs | <p>Knowledge about SO members and their role in imparting VWSC/ community level trainings and facilitating project process at the village level</p> <p>Knowledge about various training activities to be conducted during the planning, implementation and O&M phases for VWSC/ community</p> | Orientation program on planning and management for SVS (SHS and SGS) and intra village facilities for MVS for the members of GP, Panchayat Secretary |
| 4 | Approval of byelaws prepared by VWSCs including those on fixation/ revisions of water tariff | <p>Knowledge about the best practices in tariff fixation and collection procedures</p> <p>Knowledge and skills to frame byelaws and advocacy for its adoption at GP Level</p> | Workshop on preparation of VWSC bye laws and tariff fixation/ revision for the members of GP, Panchayat Secretary |
| 5. | Resolving source ownership issues and other community conflicts | <p>Knowledge about legal ownership issues related to water sources</p> <p>Knowledge about role of GP in conflict resolution</p> | Group meeting facilitated by SOs |
| 6. | Manage the funds for Intra Village Works under MVS (small and large) from DWSC for GP | <p>Knowledge about procedures for transfer of funds</p> <p>Knowledge about requirements of compliance reports/ statements/ utilization certificates for the funds received under the project</p> | Training on financial systems and book keeping in RWSSP-LIS Project in phases as per the scheme cycle for Gram Pradhan and Panchayat Secretary |

| | | | |
|----|---|---|---|
| 7. | Ensure timely audit of accounts of VWSCs and GP and Integration of accounts of VWSCs with GPs and sharing the account details in Gram Sabha | Knowledge about provision of statutory audit and its time line as per the financial guidelines of RWSSP-LIS Project | Part of the trainings shown in above point |
| 8. | Supervision of procurement of construction material and services of contractors by VWSC | Knowledge on community procurement methods for construction materials, goods and services Knowledge about check list for monitoring the procurements by VWSC | Part of the trainings shown in above point |
| 9. | Ensure O&M and cost recovery of the schemes | Willingness to supervise implementation of VWSC bye-laws and ensuring O&M of schemes including collection of O&M charges through VWSC | Orientation on O&M related issues for Gram Pradhan, GP Members and Panchayat Secretary |

E. Capacity Building Needs of VWSCs

The training/ capacity building needs along with the intervention needed for capacity building for VWSCs is given in Table below.

Table 46: Capacity Building Needs at VWSC Level

| S. No. | Expected Role/ Function | Capacity Building Needs | Capacity Building Intervention |
|--------|--|--|---|
| 1. | Conduct participatory situation analysis on water supply and sanitation of the village | Knowledge on water resources management, environmental issues etc. | Training on development and evaluation of technical options |

| | | | |
|----|---|---|---|
| 2. | Sensitising community members on adverse health impacts and ill effects of open defecation and need to achieve open defecation free and fully sanitised village | Knowledge about CLTS willingness to mobilise community for achieving open defecation free status | Participate in CLTS process at the village level being conducted by the SOs follow-up with community members |
| 3. | Conducting detailed analysis of alternate solutions for solving the water supply and sanitation problems of the village | Skills in use of participatory tools and group facilitation | Training on development and evaluation of technical options |
| 4. | Ensure inclusion of source and catchment protection measures in the design of water supply scheme | Knowledge about alternative methods of source and catchment protection Skill in identifying appropriate source and catchment protection activities | Training on source and catchment protection |
| 5. | Create awareness amongst community members for SLWM | Knowledge about SLWM | Training program on SLWM |
| 6. | Mobilizing capital contribution from members and depositing the collected amount in bank account opened for the purpose | Skills in mobilising community contribution Knowledge about bank account opening and bank transactions | Training on financial systems and book keeping in planning phase |

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|----|---|--|---|
| 7. | Preparing detailed proposal for implementing water supply schemes and sanitation facilities for SVS (SHS and SGS) | <p>Knowledge on social, technical, environmental and financial aspects alternate solutions available to solve water supply and sanitation problems.</p> <p>Skills in data collection, surveying, preparation of estimates, documentation etc.</p> <p>Skills in comparing feasibility of alternatives</p> | Training on development and evaluation of technical options |
| 8. | Preparation of community works plan (CWP) and community empowerment plan (CEP) for SVS | Knowledge and skills for preparation of CWP and CEP | <p>Training on preparation of community works plan - water supply plan (WSP), environmental sanitation plan (ESP) and catchment area management plan (CAMP).</p> <p>Preparation of community empowerment plans - which would include sub-plans related to Sanitation and hygiene promotion (SHP), women development initiative (WDI), management plan (MAP) comprising management of construction, O&M and M&E.</p> <p>Promotional booklets on community empowerment.</p> |
| 9. | Take decisions regarding procurement of material as per the VWSC bye-laws | Knowledge about formation of purchase committee, procurement procedures for non - local and local material, process of ratification and ensuring transparency in the procurement | Training on community procurement with special focus on transparency |

| | | | |
|-----|---|--|--|
| 10. | Invite tender and award the contract for various water supply and sanitation schemes | Knowledge about the tendering process, skills for technical evaluation of tenders and ensuring transparency in the procurement process | Training on community procurement with special focus on transparency |
| 11. | Undertake construction supervision and quality control of water supply schemes | Knowledge and skills to supervise implementation of water supply component of CWP to ensure quality of construction | Training on construction supervision of water supply scheme |
| 12. | Supervise implementation of source protection and conservation measures | Knowledge and skills to supervise implementation of source and catchment protection component of CWP to ensure quality of construction | Training on construction supervision of source and catchment protection measures |
| 13. | Ensure implementation of measures proposed as part of community empowerment plan | Knowledge about mobilising resources (agencies/ finance/ individuals/ skills) for implementation of CEP components | Workshop on CEP implementation |
| 14. | Liase with the GP for transfer of project funds as per guidelines and submit necessary compliance documents to GP | Knowledge about the transfer mechanism of project funds from GP to VWSC | Thematic booklet on financial procedures and compliance requirement |
| 15. | Make payments for various works undertaken through project as per guidelines | Knowledge and skills regarding procedures for payments related to project | Training on work accounting and physical progress documentation |
| 16. | Disburse incentive to the households as prescribed in the project guidelines | Knowledge about project guidelines regarding incentives offered for various sanitation facilities and the methods for releasing the incentives | Thematic booklet on guidelines for incentives |

| | | | |
|-----|--|--|--|
| 17. | Prepare the completion certificates including utilisation certificate for each scheme and send to GP/DWSC for approval | Skills for conducting joint inspections with the SO/UPJN Engineer and issuing completion certificate for approval by DWSM | Training on work accounting and physical progress documentation |
| 18. | Facilitate audit consultants of DPMU for getting the accounts audited or through statutory audit as prescribed in the project guidelines | Knowledge about facilitating and ensuring timely audit of its accounts by statutory auditors | Training on financial systems and book keeping in implementation phase |
| 19. | Present audited accounts before the GP/ Gram Sabha every year | Knowledge about provisions for placing audited accounts before the Gram Panchyat and Gram Sabha | Training on financial systems and book keeping in implementation phase |
| 20. | Prepare VWSC byelaws including those on fixation/ revisions of water tariff | Knowledge and skills to frame byelaws and advocacy for its adoption at GP Level Knowledge about the best practices in tariff fixation and collection procedures | Workshop on preparation of VWSC bye laws and tariff fixation/ revision |
| 21. | Compile and report its activities to the GP on a regular basis and conduct habitation level meetings | Skills of conducting participatory meetings Methods and skills of reporting | On-site learning by doing in real life situation at the village level |
| 22. | Responsible for installation and administration of house service connections for water supply | Knowledge about preparation of terms and condition for installation of house connection Skills for ensuring enforcement of the provisions | Workshop on O & M phase activities and role & responsibilities of VWSC and GP. |

| | | | |
|-----|---|--|--|
| 23. | Undertake the O&M of all existing and new public water supply and environmental sanitation scheme | Knowledge and skills pertaining to technical, financial and administrative aspects of operation and maintenance | Training on operation of scheme and preventive and breakdown maintenance |
| 24. | Ensure collection of O&M charges as per bye-laws and credit to the O&M account | Knowledge about accounts book keeping and operation of O&M accounts | Refresher on financial management, accounting systems and book keeping |
| 25. | Ensure regular chlorination of water supplied | Skills related to ensuring proper and effective chlorination along with O&M of dosing systems | Training on water quality monitoring and surveillance |
| 26. | Ensure regular water quality testing | Knowledge about difference in safe water and plain water, interrelationship between health and safe water and skills for methods of water quality monitoring and recording of the same | On site training programme on water quality monitoring and surveillance |

F. Community Level

The training/ capacity building needs along with the intervention needed for capacity building for community members and others is given in Table below.

Table 47: Capacity Building Needs at Community Level

| S. No. | Expected Function | Role/ | Capacity Building Needs | Capacity Building Intervention |
|-------------------------------|---|-------|---|--------------------------------|
| A. Women Groups (SHGs) | | | | |
| 1 | Advocate for participation in the project | | Knowledge and appreciation of project principles and approaches | Pamphlets/ brochures |

| | | | |
|---------------------------|--|---|--|
| 2 | Act as internal change agent and motivator for GP | Knowledge and skills for acting as pressure group for decision making at GP/ VWSC level | Pamphlets/ brochures |
| 3 | Sensitise community members in each household for adopting sanitary and hygienic practices and water conservation measures | Knowledge about healthy and hygienic practices and their impacts on health | Women's Development Initiative (WDI) - awareness creation and preparation and implementation of WDI Plan |
| 4 | Engage in strengthening of micro credit activities (Self Help Groups) so as to empower the members | Knowledge about SHG formation and SHG functioning | Women's Development Initiative (WDI) - awareness creation and preparation and implementation of WDI Plan |
| B. Youth Groups | | | |
| 1 | Undertake village clean-up campaign, environmental sanitation activities and water conservation measures | Knowledge about activities to be undertaken for environmental sanitation and water conservation | Group meetings and awareness campaign |
| 2 | Encourage demand for catchment area protection and management | Knowledge of catchment protection measures and voluntary labour contributions | Group meetings and awareness campaign |
| C. School Children | | | |
| 1 | Act as change agents for achieving open defecation free village and adoption of Hygienic practices | Knowledge about ill effects of open defecation and its impact on health of human beings especially children | Participatory CLTS exercises, village processions/ cleanliness march/ slogan shouting |
| 2 | Undertake Village/ School Clean Up Campaign | Motivation and knowledge for conducting school clean up campaign and environmental sanitation | Village processions/ cleanliness march/ slogan shouting |

| | | | |
|-------------------------------|---|---|---|
| 3 | To act as a messenger of water conservation awareness in the community | Knowledge about water conservation practices | Village processions/ cleanliness march/ slogan shouting |
| D. Masons and Plumbers | | | |
| 1. | Construct various environmental sanitation facilities (structures) as per alternate designs for low cost sanitation options which are user and environment friendly | Knowledge and skills about construction techniques for alternate designs for low cost sanitation options which are user and environment friendly such as latrines, SLWM including drains and lane improvements and etc. | Training of masons on sanitation construction works |
| 2. | Laying pipeline, repair and maintenance of water supply systems at village level | Knowledge and skills for laying the pipe lines and O&M of water supply systems | Training of plumbers on piped water supply |

Conclusion

In summing up, the key stakeholders to be engaged in the implementation of RWSSP-LIS, their current and envisaged roles, and their resultant learning requirements are presented in the following table.

Table 48 : Key Stakeholders and their Learning Requirements

| Stakeholder Institution | Current Role | Expected Role | Learning Requirements |
|---|---|---|--|
| State Level | | | |
| State Water and Sanitation Mission (SWSM) | Implementing agency for Swajaldhara and the anchor agency for setting up the SPMU for RWSSP-LIS | Policy guidelines Periodic review of implementation Coordination with other departments | Working out the implications of RWSSP-LIS for sector policy and practice |

| | | | |
|--|--|---|--|
| SPMU | Facilitating formulation of RWSSP-LIS Project. | Planning and management of the RWSSP-LIS programme at the state level | Program management including functions related to operations, technology, HRD, procurement, finance and M&E |
| WSSO | IEC, HRD and M&E for NRDWP | Capacity Development for RWSSP-LIS sector program in the state | Capacity needs assessment, training management and impact evaluation |
| UPJN | Planning, design and construction of Multi Village Schemes (MVS) and O&M of common facilities of MVS and; Single Village Schemes (SVS), if demanded by GP. | Act as facilitator and provide technical inputs to PRIs | Art of facilitation and technical assistance with a focus on strengthening of PRIs and communities |
| Training Institutions/ Service Agencies | There is no current role as they would be engaged as per future requirement | Build capacities of trainers for training of the grass root level functionaries, PRIs and communities Provide various types of support services for the project such as auditing, process monitoring, construction supervision etc | Orientation to the RWSSP-LIS and assessment of capacity needs at various levels |
| District Level | | | |
| District Water and Sanitation Mission (DWSM) | Policy guidelines and overseeing the planning and implementation of the NRDWP and NBA at the district level | Policy guidelines and overseeing the planning and implementation of the NRDWP, NBA and RWSSP-LIS at the district level | Understanding the shift in the sector functioning and its implications for actual program implementation on the ground |

| | | | |
|---|--|---|---|
| District Water and Sanitation Committee (DWSC) | provide day-to-day support to the execution of NRDWP and NBA | provide day-to-day support to the execution of NRDWP, NBA and RWSSP-LIS at the district level | Program management including functions related to operations, technology, HRD, procurement, finance and M&E at the district level |
| DPMU | | RWSSP-LIS project management at the district level under the guidance of DWSC | Program management and facilitation skills to assist in the decentralized management of RWSS schemes in the district |
| UPJN (Operations Units like Divison/ Sub-division) | Planning, design and construction of Multi Village Schemes (MVS) and O&M of common facilities of MVS and; Single Village Schemes (SVS), if demanded by GP. | Act as facilitator and provide technical inputs to PRIs | Art of facilitation and technical assistance with a focus on strengthening of PRIs and communities |
| Capacity Building Institutions/ Individuals/ Service Agencies | There is no current role as they would be engaged as per future requirement | Build capacities of trainers for training of the grass root level functionaries, PRIs and communities Provide various types of support services for the project such as auditing, process monitoring, construction supervision etc | Orientation to the sector program and assessment of capacity needs at various levels |

| | | | |
|--|---|--|---|
| Scheme Level Committee (Envisaged for MVS) | There is no current role as SLCs are yet to be formed | choosing technological options for MVS, mobilizing funds and responsible for O&M of the facility. address the issues related to co-ordination of VWSCs, conflicts and inter village issues amongst GPs/ VWSCs | Knowledge about role of various agencies for intra and inter village facility establishment and operation and maintenance including cost recovery and tariff fixation |
| GP/Village Level | | | |
| GP | Operation and management of SVS and intra village facilities of MVS | Providing capacity support to the VWSC for planning, implementation and O&M of SVS and O&M of intra-village facilities of MVS | Planning and management of RWSS schemes Strategy and mechanisms for cost recovery |
| VWSC | Notional role in planning and management of SVS and intra-village facilities of MVS | Real role as the representative committee of users in planning and management of SVS and intra-village facilities of MVS | Social, institutional, financial, and technical aspects of scheme planning and management including hiring of contractors |
| Women groups | Largely not involved in RWSS in any significant sense | Act as advocates and internal change agents for safe water and sanitation at the community level through self-help | Knowledge and appreciation of safe water and sanitation practices and their implications on health and productivity |
| SO (envisaged to be deployed) | There is no current role as they are yet to be formed | Act as catalyst to facilitate the process of scheme planning and management at GP/village level | Facilitation and training skills with required domain knowledge of decentralized planning and management of RWSS schemes |

The capacity building interventions, based on identified needs and learning requirements, would form the core of the RWSSP-LIS framework. The types of capacity building needs that have emerged as an outcome of the study need to be converted into implementation plan based on logical sequencing of training programs at various levels. The capacity building strategy shall take into account the large quantum of the task and effective and efficient utilisation of existing resources (both human and financial) for achieving the program objectives.

Some of the districts may have problems of language and literacy. This will call for development of training material in local language and laying major thrust on audio visual aids. Activities like dubbing of good films on sanitation and community based management would play a critical role in improving the effectiveness of community awareness and action.

11 Capacity Building Strategy and Plan

11.1 CAPACITY BUILDING STRATEGY

Rationale

The RWSSP-LIS seeks to promote decentralized service delivery arrangements in the participating states with increased participation by the PRIs and communities, improved financial sustainability and enhanced accountability at all levels. The demand-responsive approach will be followed for identifying the Gram Panchayats (GPs) and habitations to be covered under the project. The major shift will be the decentralization of RWSS service delivery responsibility to the District Water and Sanitation Mission (DWSM) and Gram Panchayats.

This shift calls for institutional changes on the one hand and capacity development interventions on the other. Both these are linked as capacity development requires sound institutional support to make it happen.

As per stakeholder consultation and analysis undertaken during the study, the following issues emerged to be of importance for designing the CB strategy:

- Existing institutional capacity in the sector for capacity building is very limited and not at all adequate to address the emerging capacity building needs following the proposed changes in approach and strategy. For example, there is no sector specific departmental training institution for RWSS Sector in UP. Alternative institutional arrangements have been explored from time to time depending on the availability and guidelines of the funding institutions such as GoI and World Bank. These institutional arrangements include management of training by SPMU-SWSM and WSSO.
- SWSM, as it was constituted using the institutional infrastructure left behind by the earlier World Bank supported Swajal program in late 90s and at the turn of the millennium, carries some experience of designing and conducting trainings for reform programs (Sector Reform/Swajaldhara and TSC) in the sector. However, these constitute only a limited portion of the programs in the sector and the experience available is limited and inadequate. In view of the wide range of capacity building needs emerging in the sector, WSSO requires the capacity to manage large scale capacity building programs.
- The current WSSO has a small team with limited experience and skills in required disciplines such as project planning and management; community development; health and hygiene, etc.
- SWSM/WSSO has organized programs related to rural water supply systems, operation and maintenance of hand pumps, rural water quality monitoring and surveillance, and Nirmal Gram Puraskar. The training programs organized as part of Sector Reforms/ Swajaldhara were not linked to the scheme cycle and had no correlation with the results/ outcomes of the process to be adopted for a particular stage of scheme cycle. Most of these training activities (organized as awareness campaigns/ meetings) were primarily targeted towards informing

people about the program guidelines and mobilization of capital contributions.

- The programs under TSC, now Nirmal Bharat Abhiyan (NBA) have largely been based on traditional approach of focusing construction of individual toilets rather than behaviour change at the community level. Some community led total sanitation (CLTS) initiatives facilitated by Key Resource Centre (KRC) at Nainital such as in Saharanpur have demonstrated the efficacy of CLTS approach in getting faster results on the ground by facilitating collective local action. However, CLTS has yet to be adopted and used on a scale in the sector in the state. Multiple approaches are being used out of which CLTS seems to have shown encouraging early results. In view of the fact that other non-CLTS approaches have not shown any promising results so far, it may be a good idea to try out CLTS in a more intensive manner. Capacity building of facilitators at district and sub-district levels on CLTS approach would help in the functionaries' capacity to trigger communities and facilitate collective behaviour change at the community level.
- In general, training interventions are not yet linked to scheme cycle. To make sure that training is linked to performance and results, it is important that training and technical assistance activities under the proposed project are linked to scheme cycle (both for SVS and MVS). For example, the facilitators should be trained on feasibility studies just before the process of selection of technology options is to be facilitated by them at the village level, so that they can make sure that only more feasible schemes are taken up. This would ensure both efficiency and effectiveness in sector functioning.
- The entire emphasis of training so far in the sector has been on meeting the expenditure targets under Swajaldhara and TSC rather than evolving a medium/ long-term strategy and plan for developing the capacities of the department and other key stakeholders.
- The training is not sufficiently institutionalized as a process for capacity building and institutional strengthening.
- Mechanism for monitoring the training and assessment of its impact as an input for designing and revising the training curriculum and training strategy for subsequent programs are practically non-existent.
- Different agencies such as SWSM, WSSO, SIRD and RIRD/DIRDs are engaged in organizing different types of training and orientation activities on the same theme following different approaches without much of dialogue between them. Inquiry revealed that agencies such as SWSM, WSSO and SIRD are not aware of each other's activities even though related to the same theme. Hence, there is a greater need to build synergies across agencies and approaches to optimize on the efforts made.
- The training programs/ activities are generally organized as one-off-events without an accompanying strategy for strengthening of skills on a continuous basis in the light of feedback from the participants. The training interventions are largely inspired by rapid intuitive assessment of training requirements rather than systematic training needs assessment. As a result, links between training and expected upgradation of knowledge and skills are weak, as there is no way to know whether training is leading to desired results in terms of

improved performance.

In view of the above, the training and capacity building interventions need to be based on a systematic approach to training (SAT) cycle, which includes training needs assessment (TNA), designing the training, implementation of training and training evaluation as an on-going cycle. As the experiences across the project districts are likely to be different with some districts doing better than the others, an effective capacity building strategy will need to have mechanisms also for handholding and sharing/cross learning for enhancing the efficacy of capacity building interventions and their impact across districts.

Strategy

In view of the fact that elements of community driven development in Swajaldhara schemes have not worked well in the state so far and there is a low level of appreciation of participatory projects by the decision-makers at the district/block level, there is a need to develop a strategy to restore the confidence that implementing participatory projects is feasible in the government set-up.

This implies that there is a need to sensitize the district administration about the efficacy, feasibility and desirability of participatory planning and management of water and sanitation projects. Creating a few successful pilots to begin with right at the outset of the project could be considered. This could be initiated by organizing cluster level meetings for identifying the issues in taking over of the schemes already built by UPJN and as to how these could be addressed. A systematic action plan to implement the actions so envisaged would need to be followed up to complete a successful project operated and maintained by the concerned GP.

UP is almost saturated with hand-pumps and there is hardly any perceived need of water in many cases. The realization of benefits of improved water supply through piped water supply (PWS) system is generally missing among people and therefore creating the demand for a higher service level of water supply (private connections from PWS) would require evolving innovative ways of creating demand. Some of these are discussed in the point below.

As the communities are socially diverse and divided along caste, class and gender lines and different groups have low level of trust and interaction among each other, there is a need to bring people on a common platform before any participatory project could be initiated. Innovative ways of doing this would need to be constantly evolved. Once a certain degree of cohesion is created through these activities, dialogue on water supply could be initiated. This would obviously mean that at least 6 months are kept for creating a certain degree of community cohesion before the actual planning and implementation of the project is undertaken. A couple of interventions that could be tried out as entry point activities (the activities to be undertaken before initiating dialogue on water supply project) are suggested as follows:

Community Led Action for Sanitary Surveillance (CLASS) and Community Led Total Sanitation (CLTS) are powerful participatory methodologies that focus on community led initiatives for ensuring water security and an open defecation free living environment at the village level. Both these approaches and methodologies can trigger communities on the issues of water quality and open defecation. These approaches also help improve social solidarity and cohesion by bringing people

together as a collective to address their water and sanitation needs. However, CLTS in particular is generally successful in no subsidy regime and therefore could be tried out where the district administration is willing to hold NBA subsidy till the village becomes ODF and the same is verified through a rigorous process developed for the purpose.

Celebrating the success achieved in pilot villages to spread the message in project villages. These occasions would also provide opportunity to sensitize government functionaries about the efficacy of participatory interventions.

The proposed strategy is to create a robust institutional arrangement for designing and undertaking capacity building interventions and tracking their results to meet the RWSSP-LIS objectives. This would be done in view of the following:

- **Focus on communities and PRIs**
- **UPJN to be involved in a big way as the lead engineering institution**
- **Critical mass of trainers**
- **Technical assistance for standardized training manuals**
- **Planning for regular improvements in capacity building**
- **Needs assessment in every phase and batch**
- **Periodic Impact Assessments**
- **Mentoring in the field and dissemination of learning**
- **CLTS as entry point activity**
- **WSSO to manage rather than directly implement training**
- **Ensuring the outreach of training programmes up to the district and GP levels**

The details of each of the elements is described below:

Focus on communities and PRIs

The **focus** of all capacity building effort in RWSSP-LIS has to be **on building the capacity of communities and their institutions, including Panchayat Raj Institutions**, to undertake the responsibility in planning and management of RWSS schemes as envisaged in the project.

- **UPJN to be involved in a big way as the lead engineering institution in the water supply sector**

UPJN would be involved in the project for the following functions:

- Jal Nigam will depute officers as the Scheme Management Consultant for SPMU/DPMU.
- Detailed Project Report (DPR) preparation and implementation for MVS
- Preparation of bill of quantities of various items related to Multi GP scheme up to the entry point of GP.

- Preparation of bid document based on bill of quantities for inviting bid proposals.
- Facilitate DPMU in floating tender and award of contract for MVS up to the entry point of GP.
- Supervise the construction work of contractor during construction period of Multi GP and large Multi GP schemes up to entry level of GP and providing common facilities like rising main and OHT at GP entry level. All intra GP level work will be done by VWSC.
- Verify the running bills of contractor for the quantities of work executed by the contractor.
- Prepare the Implementation Phase Completion Report (IPCR) based on the final bill of the contractor including the inventory of the scheme for handing over to the VWSC/GP.

Critical mass of trainers

The key strategy to achieve this, would be to create a critical mass of trainers at state, district and village levels. The purpose of building the capacity of **all other stakeholders at various levels, therefore**, is to help them achieve the objective of capacity building of communities and PRIs, either by **acting as facilitators in creating a critical mass of trainers** or by **creating an enabling environment through building a policy regime conducive to RWSSP-LIS** on a continuous basis.

Technical assistance for standardized training manuals

Another important component of the capacity building would be to **provide technical assistance as per emerging requirements such as developing standardised training manuals** related to various capacity building activities as per various project processes.

Planning for regular improvements in capacity building

Undertaking **capacity building needs assessment at the start of every phase** of each batch of the project as also **impact assessment of trainings conducted after every batch** of the scheme cycle would also be critical in improving capacity building interventions by providing necessary information to take up corrective measures for future interventions.

Mentoring in the field by undertaking follow-up visits shall also be an important activity once a training is imparted as part of capacity building requirement for a task to be accomplished in the scheme cycle. This would be undertaken by DPMUs and WSSO on a regular basis. Specific learning from these visits would be documented as quarterly news bulletins and shared with all the key project functionaries.

CLTS as entry point activity

Community Led Total Sanitation (CLTS) shall be used as entry point activity, primarily because of its transforming potential in enabling them to take collective

decision and initiate collective action. It helps communities (i) to think laterally and break the status quo (ii) to enhance unity and cohesion within the community for working together on issues of common interest (iii) identify spontaneous leaders within the community who undertake all future actions at the community level.

WSSO to manage rather than directly implement training

In view of the large quantum of training and capacity building activities envisaged under RWSSP-LIS, the first critical step would be to streamline the role of WSSO (as capacity building wing of SPMU). Given the existing capacities of WSSO, it would not be possible for them to conduct training programs on their own. **The suggested role for WSSO is that instead of entering into conducting training programs, it shall focus primarily on**

- **training management functions** such as contract management of training institutions,
- developing/ facilitating **development of standardised training manuals**,
- **monitor the trainings** conducted by the institutions hired for the purpose,
- contract management for training **impact assessment studies**,
- review the feedback of training programs from the participants and suggest corrective measures for improvement in the training schedules/ modules,
- follow-up visits to project districts and assessment of transfer of learning at the field level,
- coordinating with the district units and training institutions to ensure that trainings are conducted as per the requirements and timings of the scheme cycle.
- ensure **carrying out the training needs assessment** on a continuous basis at the beginning of each phase of each batch and prepare action plans for trainings at various stages of the scheme cycle.

Though the SPMU through WSSO shall undertake the above activities initially on its own, gradually it would endeavour to decentralise its functions by ensuring greater involvement of DPMUs under its overall supervision.

The following section presents the possible capacity building delivery (CBD) models in the sector.

Ensuring the outreach of training programmes up to the district and GP levels

Out reach of training would be one of the key elements of the proposed capacity building strategy. The RD department has regional and district level institutes in the state. The institutions in eastern UP could be utilised for logistics support for training at decentralised levels. In addition, the faculty at some of these institutions could also be developed as trainers for implementing the training at district/ sub-district levels.

Engineering colleges in the region could also be used for the purpose.

Capacity Building Delivery (CBD) Models

These models are based on the common contention that all capacity development initiatives have to be based on clearly identified needs and should aim at developing specific competencies of individuals and institutions leading to defined results. Moreover, given the policy commitment to decentralized management of RWSS services, the CBD models would need to focus on strengthening of ZPs and GPs.

The possible capacity building delivery models are as follows:

Capacity Building Delivery (CBD) Model 1:

This model is based on an integrated institutional arrangement with a unified pyramid like management structure. SWSM, as the state level agency at the top, would be responsible for planning and managing all capacity building interventions at the state level. SWSM would carry out these functions with the help of State Project Support Unit (SPMU) and Water and Sanitation Support Organization (WSSO) working within and under the guidance and supervision of SWSM. SPMU would be responsible for all contract management related to procurement of training and capacity building services from outside agencies. WSSO would provide all the technical assistance and supervision both for hiring and implementing capacity building services at the state and district levels.

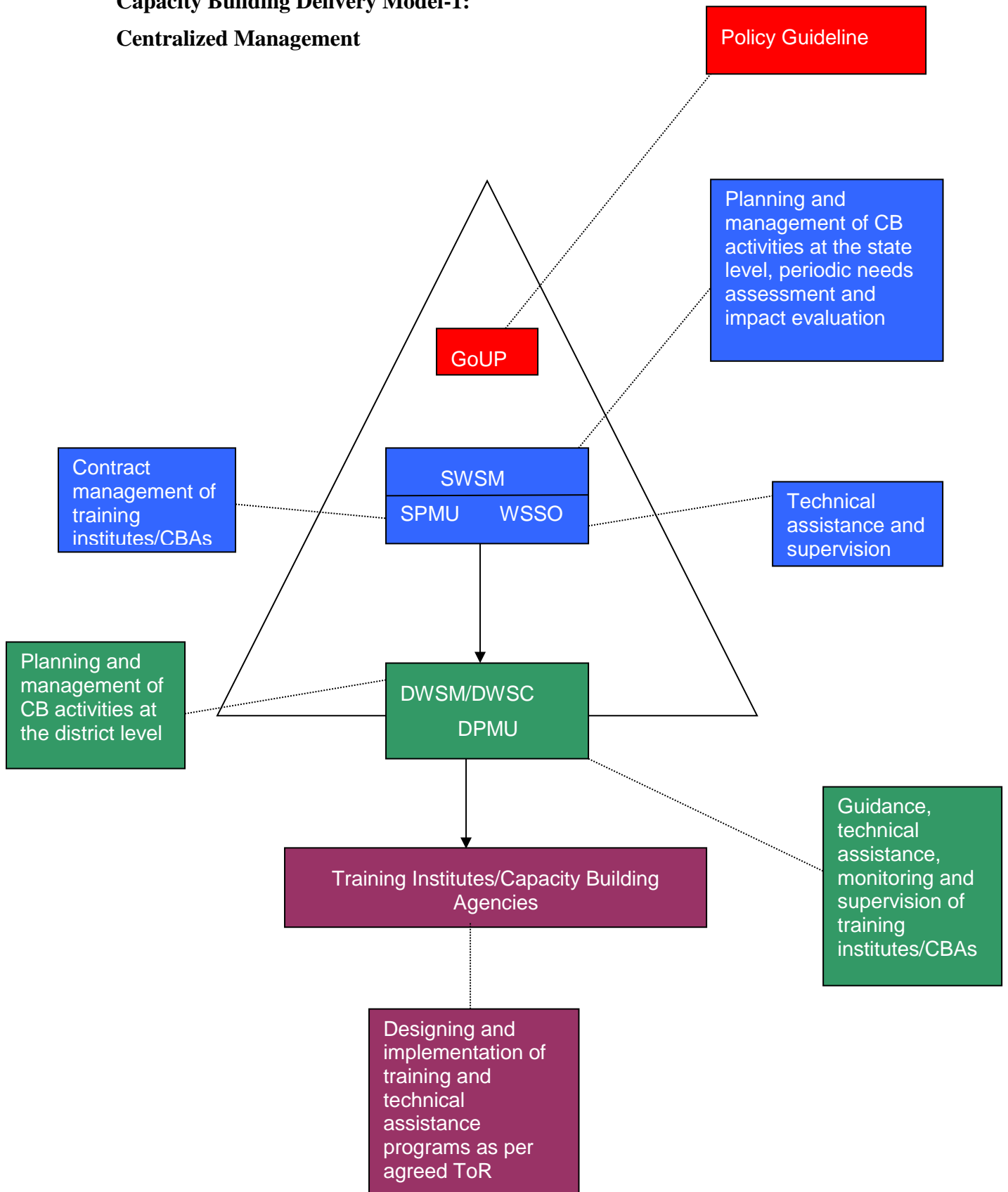
Capacity building (CB) activities would include information, education, and communication (IEC) campaigns, training needs assessment for stakeholders at various levels, designing and conducting training programs, undertaking impact evaluation exercises to assess the efficacy of training interventions in developing the required competencies and generating the desired results. Any required study or applied research to support and strengthen these activities would also be considered CB activities.

In order to make sure that all CB activities are undertaken as per a uniform strategy and in synch with the agreed scheme cycles for SVS and MVS, suitable regional institutions/capacity building agencies (CBAs) would be identified and engaged. Their terms of reference would include preparing annual training calendars for the districts and GPs to be served by them and designing and conducting the programs as per the calendar. SWSM would undertake a rapid needs assessment (RNA) exercises at the beginning of each fresh scheme cycle and accordingly involve training institutes/CBAs to conduct programmes to address the emerging needs.

As there are 896 GPs and 5349 habitations to be covered under the project over 6 years (August 2013-July 2019), they would be taken up in 3 Batches in a phased manner. This would practically mean that many of these CB activities would run in parallel most of the time. This would require sound planning and organization of CB activities. Hence, it is proposed that nodal persons for CB activities would be designated within SWSM, SPMU, WSSO, and DPMUs. The same would be done for all the regional institutions/CBAs involved in delivering capacity building services at the regional level; a region would include 3-5 districts on an average. However, for the management purposes, work of regional institutes/CBAs would be supervised and monitored by DPMUs designated for the purpose at the local level.

Figure 16

**Capacity Building Delivery Model-1:
Centralized Management**



It would be the responsibility of SWSM including SPMU and WSSO to orient all the engaged agencies and individuals to the capacity building strategy for NRDWP and NBA in general and RWSSP-LIS in particular.

Capacity Building Delivery (CBD) Model 2

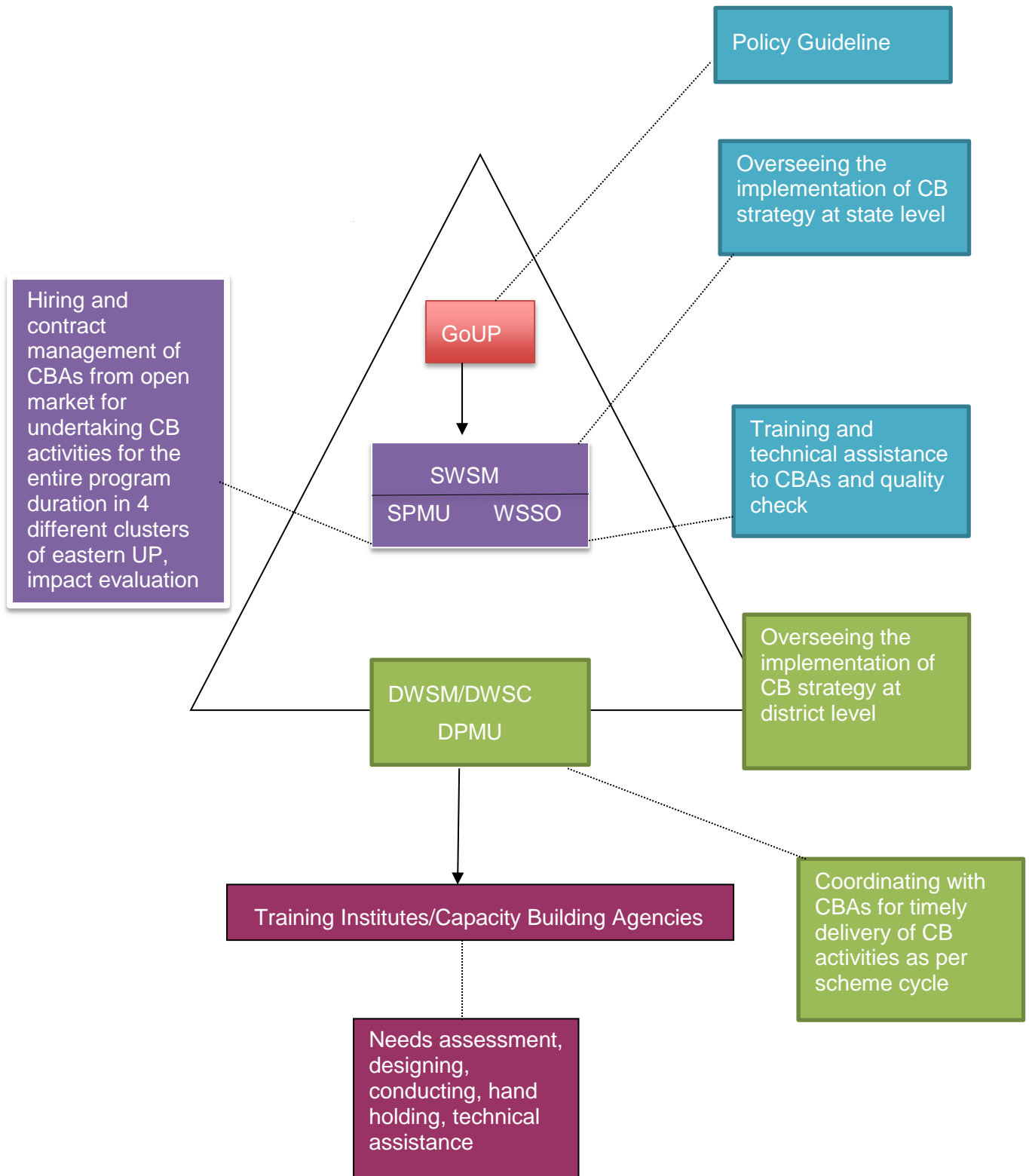
This model is based on public private partnerships. In this SPMU would be primarily in a contracting, facilitating and guiding role. SPMU would select four training institutes/capacity building agencies (CBAs) from the open market through a transparent competitive open bidding process. The selected agencies would be contracted for a three to six year period to provide capacity building services on a turn-key basis in the districts allocated to them for the purpose. The turn-key basis would essentially mean that they would be responsible for undertaking the entire range of CB activities from needs assessment to design and delivery of training, technical assistance, supportive supervision, and handholding services as per emerging requirements and demands. The project has 10 districts which can be geographically grouped in 4 clusters with 2-3 districts in each cluster (1) Gorakhpur, Kushinagar and Deoria (2) Gonda, Bahraich and Basti (3) Balia, Ghazipur (4) Sonbhadra, and Allahabad. Thus, 4 agencies-one each for each cluster would be selected.

The agencies could be hired on the basis of a performance contract with clearly defined milestones to be achieved as per the RWSSP-LIS and agreed scheme cycles of SVS and MVS. This would help SPMU ensure that the required capacity building services are delivered in time and with desired quality standards; this would also help replace the non-performing agencies with good reason and in time.

This arrangement has been tried out with partial success in Maharashtra, Kerala and Karnataka in varying ways and degrees. The key involvement of related sector institutions, mainly SPMU and WSSO, would be in terms of procurement and monitoring of services and outputs.

Figure 17

**Capacity Building Delivery Model-2:
Outsourcing on a turn-key basis**



Comparative assessment of proposed CBD Models

The two CBD models described above have been compared on various aspects as given in the following comparison matrix. Merits and demerits of the models have also been included in the matrix.

Table 49: Comparison matrix of CBD models

| Aspect of comparison | CBD models | |
|--|---|--|
| | Model 1: Centralized management | Model 2: Outsourcing on a turn-key basis |
| Policy guideline | GoUP | GoUP |
| Planning and management of CB activities | SWSM and DWSM at the state and district levels respectively | SWSM and DWSM at the state and district levels respectively |
| Periodic CB needs assessment (in the beginning of each phase of each batch/scheme cycle) | SWSM | Training institution/capacity building agency hired on a turn-key basis |
| Hiring and contract management of training institutions/capacity building agencies | SPMU with the assistance of WSSO | SPMU with the assistance of WSSO |
| Duration of contract | Annual | Long-term (3-6 years) |
| Type of training institutions/ capacity building agencies | Likely that regional and local agencies come forward | Likely that regional and outside agencies join due to long term contract |
| Technical assistance and orientation of training institutions/capacity building agencies | WSSO | WSSO |
| Quality check | WSSO | WSSO |

| | | |
|---|---|--|
| Coordination with training institutions/capacity building agencies for timely delivery of CB activities | SPMU and DPMU at state and district levels | SPMU and DPMU at state and district levels |
| Designing, conducting, handholding, technical assistance | Regional training institutions/capacity building agencies | Regional and outside training institutions/capacity building agencies |
| Impact evaluation of CB activities | SWSM | SWSM |
| Merits | <p>Uniformity in CB interventions due to state's control on needs assessment, design, procurement and impact evaluation of trainings;</p> <p>Strong check on quality of CB interventions</p> <p>Could prove to be a good model after one or two years of intervention when the state has acquired some experience by using CBAs on a turn-key basis</p> | <p>Availability of full-time turn-key agencies provide breathing space to state and district level implementers to manage other aspects and provide only strategic inputs on CB activities</p> <p>Good in the initial stages where capacity is minimal at all levels and involvement of outside CBAs would bring in new ideas.</p> |
| Demerits | <p>District specific requirements could get neglected due to centralized planning of CB activities</p> <p>District level may lose interest in monitoring as the agencies not hired by them</p> | <p>There is a risk of loss of institutional memory as all the key interventions are being planned and implemented by outside agencies and not the department.</p> |

Sample contract document for hiring nodal training institute/ Capacity Building Agency along with Terms of Reference is attached as Annexure 7

11.2 Capacity Building Plan

The proposed capacity building plan basically consists of a number of programmes intended to address the differential capacity needs of different stakeholders. The needs for stakeholders at various levels have been articulated keeping in view their envisaged roles and functions based on the stakeholders consultations as described in the earlier chapters, as also on the basis of assumed scheme cycles for SVS and MVS.

The following table lists out the capacity building programmes for various stakeholders at different levels. The numbers of programmes have been calculated on the basis of the scope of the project in terms of proposed coverage of 5349 habitations including covering 896 GPs with 128 SHS, 624 SGS, 32 Small MVS and 3 large MVS.

While training institutions/capacity building agencies (CBAs) would be engaged for providing capacity building services at state, district and intermediary levels, village level CB activities would mainly be conducted by Support organizations (SOs) that would be deployed for the purpose of facilitating project processes at the village level. Besides, proposed training programmes, lump sum provision of Rs. 60 Lakh/year has also been made for international trainings, specialized trainings, technical assistance and hand-holding requirements that would emerge during the course of project implementation. A provision of Rs. 30 Lakh for mid-term evaluation of the impact of CB interventions has also been suggested.

**Table 50: CAPACITY BUILDING PLAN-RWSSP-LIS in UP
(Aug2013-July 2019)**

| S.N. | Name of Training Programme | Category (TOT/Direct) | Target Group | Responsibility | Duration in Days | Total No. of Participants | No of progs. | Trainees /prog | Resource Institution |
|------|--|-----------------------|--|-----------------------------|------------------|---------------------------|--------------|----------------|---------------------------|
| A | STATE LEVEL-(Governance level) | | | | | | | | |
| | PRE-PLANNING PHASE | | | | | | | | |
| 1 | Policy Workshop: Understanding about RWSSP-LIS project approach, concept & principles. | Direct | Members of SWSM, opinion makers, training institutions | SWSM/Principal Secretary RD | 3 | 150 | 3 | 50 | Training Institution/ CBA |
| | PLANNING PHASE | | | | | | | | |
| 2 | DWSC Orientation | ToT | Selected DWSC members | SWSM/Principal Secretary RD | 2 | 360 | 12 | 30 | Training Institution/ CBA |
| | IMPLEMENTATION PHASE | | | | | | | | |
| 3 | DWSC experience sharing and review workshop | Direct | Selected members of DWSC, SO, VWSC, SLC | SWSM/Principal Secretary RD | 1 | 360 | 12 | 30 | Training Institution/ CBA |

| B STATE LEVEL- (Operational level) | | | | | | | | | |
|---|--|--------|---|-----------------|---|-----|----|----|---|
| 4 | Observation study tours to other successful RWSS Projects in India | Direct | Members of SWSM, opinion makers, SPMU, UPJN engineers, PR officers, DPMU, DWSM,SO, VWSC | SWSM/SPMU/ WSSO | 5 | 250 | 25 | 10 | RWSS projects/ program mes of selected states |
| 5 | Observation study tours to other successful RWSS Projects abroad | Direct | Members of SWSM, opinion makers, SPMU, UPJN engineers, PR officers, DPMU, DWSM,SO, VWSC | SWSM/SPMU/ WSSO | 7 | 80 | 10 | 8 | To be identified |
| 6 | World Bank Procurement Procedures and Systems | Direct | Senior management in SPMU/UPJN | SPMU/WSSO | 5 | 5 | 1 | 5 | Administrative staff college of India |
| 7 | Monitoring and evaluation | Direct | SPMU/DPMU Staff | SPMU/WSSO | 2 | 350 | 10 | 35 | M&E Specialist |
| SKILL UPGRADATION TRAININGS | | | | | | | | | |
| 8 | Computers | Direct | Relevant Staff of SPMU/DPMU | SPMU/WSSO | 5 | 50 | 2 | 25 | Computer staff |
| 9 | Financial Mgmt and Accounting | Direct | Relevant Staff of SPMU/DPMU | SPMU/WSSO | 3 | 50 | 2 | 25 | Financial Specialist |
| 10 | MIS | Direct | Relevant Staff of SPMU/DPMU | SPMU/WSSO | 3 | 75 | 3 | 25 | MIS specialist |
| MOTIVATIONAL TRAININGS | | | | | | | | | |
| 11 | Staff Retreat | Direct | SPMU/DPMU staff | SPMU/WSSO | 3 | 300 | 5 | 60 | Training Institution/ CBA |
| C DISTRICT LEVEL/ INTERMEDIARY LEVEL | | | | | | | | | |
| PRE-PLANNING PHASE | | | | | | | | | |
| 12 | Understanding of demand responsive and decentralized service delivery approaches in the context of RWSSP-LIS | Direct | Members of DWSM, DPMU Staff | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| 13 | Contract Management and Selection of SOs | ToT | DPMU Staff | SPMU | 3 | 120 | 4 | 30 | Training Institution/ CBA |

| | | | | | | | | | |
|-----------------------|---|--------|---|------|---|-----|----|----|---------------------------|
| 14 | Workshop on Village Selection Methodologies including pre-feasibility and site appraisals | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ CBA |
| PLANNING PHASE | | | | | | | | | |
| 15 | Training of Trainers on CLTS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 5 | 900 | 30 | 30 | Training Institution/ CBA |
| 16 | ToT on community action planning and monitoring | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 5 | 900 | 30 | 30 | Training Institution/ CBA |
| 17 | ToT on Feasibility Studies, engineering survey and design | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 8 | 900 | 30 | 30 | Training Institution/ CBA |
| 18 | ToT on Source and Catchment Protection | ToT | Community Development staff of DPMU, training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| 19 | ToT on Community Empowerment Plan | ToT | Community Development staff of DPMU, training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| 20 | Training on planning and design of MVS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| 21 | Training on SLWM | Direct | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ CBA |
| 22 | Financial Systems and Procedures | Direct | Finance/Accounts staff of SOs | DPMU | 2 | 450 | 15 | 30 | Training Institution/ CBA |

| | | | | | | | | | |
|-----------------------------|---|--------|--|-----------|---|------|-----|----|---------------------------|
| 23 | Project M&E Systems | Direct | UPJN Engineers at division/ sub-division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ CBA |
| IMPLEMENTATION PHASE | | | | | | | | | |
| 24 | Training on Construction Technologies and Community Procurement | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| 25 | Training on Contracting Arrangements for Hiring Consultancy for MVS | Direct | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| 26 | Water quality monitoring and surveillance | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ CBA |
| 27 | Training on Management and Supervision of Service Agencies for Construction Supervision Works | Direct | DPMU Technical Staff | SPMU/WSSO | 3 | 450 | 15 | 30 | Training Institution/ CBA |
| 28 | Progress tracking/experience sharing workshop | Direct | Selected DPMU staff, UPJN engineers at divisional/ sub division levels, SOs, VWSCs | DPMU | 1 | 3600 | 120 | 30 | Training Institution/ CBA |
| O&M PHASE | | | | | | | | | |
| 29 | ToT on Establishment of O&M Systems for SVS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ CBA |
| 30 | ToT on Establishment of O&M Systems for MVS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ CBA |
| D | VILLAGE LEVEL | | | | | | | | |
| PLANNING PHASE | | | | | | | | | |

| | | | | | | | | | |
|-----------------------------|--|--------|-------------------------------------|-----|----|---------|------|----|-----|
| 31 | Orientation Program on RWSSP-LIS Project and Roles and Responsibilities of GP/VWSC and other stakeholders | Direct | Members of GP, Panchayat Secretary | SOs | 2 | village | 5349 | | SOs |
| 32 | Cross Visits to Other Villages | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs |
| 33 | Training Program on SLWM | Direct | Selected Members of GP/ VWSC | SOs | 2 | village | 5349 | | SOs |
| 34 | Campaign to Clean UP School/Village | Direct | School Children | SOs | 1 | village | 5349 | | SOs |
| 35 | Training Program on Strengthening micro credit activities (Self Help Groups so as to empower the members | Direct | Women Members | SOs | 2 | 80235 | 5349 | 15 | SOs |
| 36 | SLC Formation | Direct | Members of GP/ VWSC | SOs | 15 | 16475 | 659 | 25 | SOs |
| 37 | Training on Water Quality Testing and remedial actions | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs |
| 38 | Training on Preparation of Detailed Proposal for Implementing Water Supply Schemes and Sanitation Facilities | Direct | Selected Members of VWSC | SOs | 2 | 16050 | 535 | 30 | SOs |
| 39 | Training on Preparation of Community Works Plan (CWP) and Community Empowerment Plan (CEP) | Direct | Selected Members of VWSC | SOs | 2 | village | 5349 | | SOs |
| IMPLEMENTATION PHASE | | | | | | | | | |
| 40 | Training on Financial Systems and Book Keeping in RWSSP-LIS Project | Direct | GP Sarpanch and Panchayat Secretary | SOs | 3 | 10698 | 5349 | 2 | SOs |
| 41 | Training on Community Procurement | Direct | Selected Members of GP/ VWSC | SOs | 2 | village | 5349 | 5 | SOs |
| 42 | Work Accounting and physical progress documentation of construction works | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs |
| 43 | Training of masons on sanitation construction works | Direct | Masons | SOs | 6 | 10698 | 5349 | 2 | SOs |
| 44 | Training of plumbers on piped water supply | Direct | Plumbers | SOs | 2 | 10698 | 5349 | 2 | SOs |
| 45 | Training on Construction Supervision | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs |
| O&M PHASE | | | | | | | | | |

| | | | | | | | | | |
|----|---|---------|------------------------------|-----|---|-------|------|---|-----|
| 46 | Workshop on Preparation of VWSC Bye Laws and Tariff Fixation/Revision | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs |
| 47 | Training on Operation of Scheme and Preventive and Breakdown Maintenance | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs |
| 48 | Untied fund at SWSM for international programs and specialised trainings, technical assistance, needs assessment and handholding @ Rs. 60 Lakh/year | Lumpsum | | | | | | | |
| 49 | Mid term evaluation | Lumpsum | | | | | | | |

International programs

International exposure is always useful in terms of broadening of perspectives and mental horizons for appreciating the imperatives of a reform initiative. This may include exposure visits to different demand responsive, community based and decentralized RWSS programs and projects in different regions of Asia, Africa and Latin America such as WSLIC Project in Indonesia. This could also include training programs conducted by international agencies such as IRC, WEDC, Netwas International.

Project Costs

Project costs have been worked out on the basis of scope of the project to cover 5349 habitations during the period 2013-19. The details are given in **Annexure 8**, which presents the capacity building plan for the project duration.

Table 51 : Estimated capacity building cost (August 2013-July 2019)

| Level | Cost (Rs.) | Number of Units | Per Unit Cost (Rs.) |
|---|--------------------|-----------------|---------------------|
| State-Governance/Apex level | 50,80,500 | 1 | 50,80,500 |
| State-Operational/strategic level level | 360,41,250 | 1 | 360,41,250 |
| District/Intermediary level | 892,14,000 | 10 | 89,21,400 |
| Village level | 1441,02.550 | 5349 | 26,940 |
| Untied fund at SWSM for international programs and specialised trainings, technical assistance, needs assessment and mentoring @ Rs. 60 Lakh/year | 360,00,000 | | |
| Mid-term evaluation | 30,00,000 | | |
| Grand Total | 3134,38,300 | | |

Section 4

Communications (IEC)

12 Communications (IEC)

There is a global consensus that a sound communications strategy is the key to effective implementation of any development initiative. This is true of the water and sanitation sector as well. The study suggests that the current communications practices in the sector in UP are narrowly confined to information, education and awareness (IEC) regime that aims at creating awareness and demand among the people for improved water supply and sanitation services.

The underlying assumption is that awareness creates demand. But this assumption is not substantiated by evidence from the ground. Field study across five districts suggested that people know about good and bad or safe and unsafe practices around the handling and use of water and sanitation and hygiene behavior. This apparent success can be attributed to IEC campaigns over the years aimed at raising awareness about the adverse consequences of poor sanitation and hygiene and benefits of safe sanitation and hygiene practices.

But the fact that this knowledge and awareness has failed to trigger corresponding change in the sanitation behavior of people in villages goes to suggest that awareness in itself does not always result in a sustainable change of behavior. Despite more than 10 years of IEC under Government of India's Total Sanitation Campaign (TSC), the extent of open defecation across study districts was found to be alarmingly high. This calls for critical reflection and radical re-orientation of the sector approach to communication strategies and practices.

WSSO is a state level organization that is solely dedicated to promoting this along with handling water quality monitoring in the state.

But the fact that Swajaldhara and TSC (now Nirmal Bharat Abhiyan-NBA), which have been the major reform initiatives of Government of India in the sector over last more than a decade, have not yielded the desired results indicate that there are serious gaps in the current communication strategies. Some of the observations around communications strategy in the sector in UP are as follows:

- Most of the communication activities and processes are unidirectional and aim at creating awareness and demand among the people.
- The means of communication involved include pamphlets, posters, wall writing, folk theatre, street plays, and inter-personal interaction. But inter-personal interaction, despite its growing recognition of being more effective, has yet to be adequately included and addressed in the IEC campaigns and activities mounted in the state.
- There is no practice of carrying out communication needs assessment to inform IEC strategies and campaigns.
- There are no existing mechanisms to assess the efficacy of the IEC activities undertaken in terms of the results achieved.
- Stakeholders other than the communities have yet to be considered as the target audience of the IEC strategies
- There is very little appreciation and use of participatory methodologies such as

PRA and CLTS as part of communication strategies.

In view of the above, there is an urgent need to develop a robust communication strategy that seeks to address the communication needs of all the stakeholders in the sector as per their clearly identified communication needs.

As the PRIs, particularly GPs, are mandated to take over the planning and management of the water supply and sanitation services at the village level, assessing their communication needs is of critical importance.

Use of mobile phones was found to be wide spread in all the study districts and hence the mobile phones could be used as an important means of communication with frontline functionaries at the village and GP levels.

Communication needs of various stakeholders that will have to be addressed in order to make the project functioning efficient and effective are as follows:

Table 52: Key/Critical Stakeholders: Communication Needs

| S.N | Key Stakeholders | Critical Stakeholders | Communication Needs |
|-----|------------------|---|--|
| 1 | User Communities | <p>Women are the most primary stakeholders</p> <p>Children are the most vulnerable stakeholders because of their susceptibility to water borne illnesses more than the adults</p> | <p>User communities in general and women and children need to know about the critical linkages between safe water, sanitation, hygiene and health.</p> <p>However, these needs have to be re-articulated and presented as compelling experiences aimed at behaviour change</p> |

| | | | |
|---|---|---|--|
| 2 | Gram Panchayats (GPs) | <p>Members of the Jal Prabandhan Samiti (JPS), which is responsible for handling water supply and sanitation issues at the GP level are critical stakeholders</p> <p>But members of the village water supply and sanitation committee (VWSC), which represents the users, are the most critical stakeholders at the GP level as they are directly responsible to the users.</p> | <p>JPS members across study villages need to know about their roles and responsibilities.</p> <p>VWSC members also need to know about their specific roles and responsibilities at the village/GP level.</p> |
| 3 | State Water and Sanitation Mission (SWSM) | SWSM, being the top advisory body, is a major stakeholder at the state level | SWSM will need to have reliable feedback on various aspects of project functioning related to planning, training and implementation from the project districts in real time so as to be able to help them guide as the State Project Management Unit (SPMU) for the World Bank assisted project. |
| 4 | UP Jal Nigam (UPJN) | UPJN is a major stakeholder as the agency with the maximum technical and engineering skills to construct water supply schemes on scale. | UPJN engineers associated with the implementation of the WB project will need to know about the overall project design, its agreed implementation strategy and approach |

| | | | |
|---|--|--|---|
| 5 | Panchayati Raj Department | Panchayati Raj Department is critical to the success of the sanitation component of the project | Panchayati Raj Department of Government of UP will need to know about the overall project design and implementation strategy, particularly in terms of ways to create a synergy between the water supply and sanitation components of the project. |
| 6 | WSSO | WSSO is the biggest capacity building stakeholder in the sector at the state level | WSSO will need to have open communication channels with other key sector actors, particularly SWSM, UPJN and Panchayati Raj Department. |
| 7 | Line departments at the district level | Success of the project depends to a large extent on the motivation and capacities of the line departments at the district level. | The line departments (UPJN, Panchayati Raj Department) at the district level have to have a robust two-way communication system at that level in order to be linked with frontline functionaries on the one hand and state level institutions on the other. |
| 8 | World Bank | World Bank will have a major stake in learning in its unique position as a Knowledge Bank besides being a lending agency | World Bank needs to have a robust monitoring and learning mechanism in place: so that they can get a reliable feedback on the project functioning at regular intervals; this will help them keep a track of the progress of project implementation on the ground and offer strategic advice and help as required. |

The broad communication needs will need to be further un-packed in order to create specific communication packages for different stakeholders at different stages of project planning and implementation.

On the basis of the communication needs of different stakeholders identified during the study, a broad outline of a communications strategy for the state of UP in general and Eastern UP in particular is suggested, which is as follows:

Table 53: Communications Strategy: An Outline

| Components | Description |
|------------------------|---|
| Aim | <p>Create awareness and a felt need at the household and community level for safe water and a shit free living environment</p> <p>Trigger a perceptible behavior change in terms of safe handling and usage of drinking water and safe sanitation practices including: end of open defecation; safe solid and liquid waste management; and hand washing at critical times, particularly before eating and after defecation.</p> |
| Central Message | <p>Safe drinking water is essential for health and productivity. And sanitation is a matter of dignity and self-esteem. In order to drive this central message home to the concerned people, it is proposed to use participatory methodologies (PM) that address people as a collective rather than as individuals and make them engage in self-analysis and local action. The conventional IEC campaign with its activities like pamphlets, posters, wall writing etc. does not seem to have worked so far. Hence, the manner of delivery of this central message needs to be built on PM in view of the local context and conditions. The actual communications strategy to be employed has to be worked out during the actual design and execution of the communications campaign. Some of the key questions that have to be central to this exercise are:</p> <ol style="list-style-type: none"> 1. Are you healthy? 2. If not, is this due to bad water and the practice of open defecation 3. Do you know that the water you drink is mixed with shit and unsafe for consumption? 4. If yes, then what will you do? |

| | |
|---------------------------------------|--|
| Key messages | <p>The key messages would basically be designed to cover various aspects of the central message and seek to induce desired behavioural changes among the groups of concerned people. The key messages could be as follows:</p> <ul style="list-style-type: none"> • Is the source of your drinking water, mode of storage and usage safe? • Who uses water and who is affected most by the quality of water? • Community led monitoring and surveillance is the key to safe water • Open defecation (OD) essentially means eating each other's shit (message not delivered but arrived at by the community itself through a collective process of participatory analysis of their own sanitation situation as in the community led total sanitation-CLTS-methodology); other related messages that OD leads to illness, polluted air and polluted water • Lack of attention to the safety of water leads to illness in the household and fall in productivity and reduction in income |
| Message design and positioning | <ul style="list-style-type: none"> • Hazards of consuming unsafe water shall be focused with emphasis on adverse effects on health of children and women in particular. • Bacteriological contamination of water and its roots in the practice of open defecation as a state wide water security problem/issue will be highlighted. • Safe water as symbol of status/self-respect will be promoted. • Risks of water borne diseases and the expenses it entails will to be conveyed • Highlighting periodic sanitary surveys, water testing and protection of water sources by the users. • Creating awareness on precautions related to safe handling, storage and usage of water • Engaging users in the analysis of current situation by asking questions such as 'Do adults and children in your family often fall ill?' |
| Target audience | <p>Primary – Women and adolescent girls, school going children, heads of families</p> <p>Secondary – Members of the Gram Panchayat, Influential persons (Anganwadi Workers, ANMs, Dais, Teachers, Religious leaders), Youth Organisations and Self Help Groups</p> |

| | |
|---------------------------------------|---|
| <p>Suggested approach</p> | <p>Community Led Action for Sanitary Surveillance (CLASS) and Community Led Total Sanitation (CLTS): CLASS and CLTS are participatory methodologies that aim at engaging communities in participatory self-analysis and collective local action to ensure the use of safe water and safe use of water on the one hand and end of open defecation on the other.</p> |
| <p>Medium of communication</p> | <p>Focus will be on interpersonal communication and experiential learning. However, mass media, folk media, wall writings and print media can also be used as reinforcing media. Participation of users shall be ensured in wall writings by involving them in developing messages, and also in wall writing/painting. As far as possible wall writings shall be pictorial with minimum text.</p> <p>Inter-personal communication – personal contact by government and non-government organisations using participatory methodologies</p> <p>Folk Arts – Street Play/ Nautanki/ Folk Songs</p> <p>Mass Media – 60 seconds of broadcast of messages by radio during the prime time – 8.00 a.m. and 9.00 p.m., Video Van in every block once in a month</p> <p>Wall writing – At prominent places in every hamlet within the Gram Panchayat (GP)/village and in the places of local weekly markets (<i>Hat</i>)</p> <p>Print Media – Newspapers, magazines, Flip book, Flash Card, Sticker etc</p> |

| | |
|--|--|
| <p>Institutional arrangements</p> | <p>State level – WSSO responsible for message dissemination through electronic media, print media, and design and production of IEC material.</p> <p>Rural Development Department (RDD), UP Jal Nigam (UPJN), Panchayat Raj Department (PRD), Health Department (HD), UP Academy of Administration (UPAA), and State Institute of Rural Development (SIRD) could provide support and assistance in these endeavours.</p> <p>District level – Exhibition, Fair and Festival by District Water and Sanitation Mission (DWSM)</p> <p>Block level – Strategy for folk art programmes, awareness camps, pictorial wall writing by the Block Development Officer (BDO), District Project Management Units (DPMUs)</p> <p>Village level – Jal Prabandhan Samiti (JPS), motivators, members of Gram Panchayat, self-help groups (SHGs) and teachers to be actively involved in communication campaigns</p> |
| <p>Strategy statement</p> | <p>Safe water and sanitation is the key to a happy and healthy life.</p> <p>Motivating mothers, children, adolescent girls and heads of families to monitor and conduct surveillance of water quality by themselves and develop the practice of using safe water through village-to-village awareness campaign.</p> |

Annexure1

List of 28 districts in Eastern UP

Allahabad
Ambedkarnagar
Azamgarh,
Ballia,
Balrampur,
Chatrapati Shahuji Maharaj Nagar (Amethi)
Basti
Bahraich
Chandoli
Deoria
Faizabad
Ghazipur
Gonda
Gorakhpur
Jaunpur
Kaushambi
Kushinagar
Maharajganj
Mau
Mirzapur
Pratapgarh
Sant Kabir Nagar
Shrawasti
Siddharth Nagar
Sonbhadra
Sant Ravi Das Nagar
Sultanpur
Varanasi

Annexure 2**List of sample Gram Panchayats and villages visited for the study**

| S.N | Gram Panchayat | Village | Block | District | Remarks |
|-----|-------------------|-----------------|------------|------------|--|
| 1 | Rampur Dhamawa | Rampur Dhamaw | Sirathu | Kaushambi | Swajaldhara scheme village (reportedly the best swajaldhara village of the district) |
| 2 | Bhelkha | Bhelkha | Manjanpur | Kaushambi | More than 5000 population village plus swajaldhara village |
| 3 | Keseriya | Keseriya | Kada | Kaushambi | Part of Jal Nigam multi village scheme (Siha Kamasin) |
| 4 | Ucharawan | Ucharawan | Kada | Kaushambi | Single GP Scheme constructed by Jal Nigam handed over to GP for O&M also reportedly nitrite affected village |
| 5 | KudhaKeshavpur | KudhaKeshavpur | Pura Bazar | Faizabad | Swajaldhara scheme and also purposed Jal Nigam scheme |
| 6 | Taarun | Taarun | Taarun | Faizabad | Swajaldhara scheme village |
| 7 | Raunahi uperhaar | Raunahikas | Sohawal | Faizabad | Purposed project village with population more than 5000 |
| 8 | Pilkhawan | Pilkhawan | Sohawal | Faizabad | Purposed project village with population more than 5000 |
| 9 | Bhishampur | Bhishampur | Chakiya | Chandauli | Village having Jal Nigam scheme under construction and also one habitation of Musehar community |
| 10 | Palia | Palia | Chahaniya | Chandauli | Arsenic detected village |
| 11 | Fatehpur | Fatehpur | Niyamtabad | Chandauli | Part of Jal Nigam multi village Sahupur scheme |
| | Mannapur | Mannapur | Niyamtabad | Chandauli | Part of Jal Nigam multi village Sahupur scheme |
| 12 | Sikanderpur | Sikanderpur | Chakiya | Chandauli | Swajaldhara village and also part of multi village jal Nigam scheme |
| 13 | Barwa Raja pakkad | Barwa Rajpakkad | Tamkuhij | Kushinagar | Jal Nigam scheme |
| 14 | Jataha | Jataha Bazar | Vishanpura | Kushinagar | Swajaldhara village |

| | | | | | |
|----|-----------------------|-----------------------|----------|------------|---|
| 15 | Katai Bharpurva | Katai Bharpurva | Khaddha | Kushinagar | Population more than 5000 |
| 15 | Katai Bharpurva | Katai Bharpurva | Khaddha | Kushinagar | Population more than 5000 |
| 16 | Khutohi | Khutohi | Ramkola | Kushinagar | Jal Nigam scheme |
| 17 | Fatehpur Bangi | Fatehpur Bangi | Jamunaha | Shrawsti | Single village scheme by Jal Nigam |
| 18 | Haridutt Nagar Girant | Haridutt Nagar Girant | Jamunaha | Shrawsti | Largest panchayat having around 52 purva(hamlet); SC dominated population; selected under MSDP;Two OHT/Tube-well purposed |
| 19 | Ikauna Dehat | Ikauna Dehat | Ikauna | Shrawsti | Scheme under construction; two OHT/Tube-well completed |
| 20 | Motipur Kalan | Motipur Kalan | Sirsia | Shrawsti | ST dominated village(Tharu tribe); Sirsia is most backward block sharing international boundary with Nepal |

A Note on Villages visited**Annexure 3****Gram Panchayat Bhelka , Block Sirathu, District Kaushambi**

Bhelka GP has 3 hamlets, which are Bhelka, Nem ka Purva and Naun ka purva. The current population of the GP is estimated at around 8500 in 1200 Households. Half of the HHs in the GP belong to SCs, which is 600HHs. 125 HHs in the GP belong to Muslims. The village has a VWSC but the members are not aware of who the other members are. Jyothishi Devi is the only lady member in the VWSC, but she has apparently never attended a meeting. She sends her husband to attend the meeting on her behalf.

The village has 60 IMII hand pumps installed out of which 20 were reportedly defunct. The Swajaldhara scheme in the village was planned in 2009-10 and its first instalment of Rs 6,99,051 (40%) was received in August, 2011. The boring was completed in 2012, but the scheme does not have a sanctioned electric connection. However, the villagers complain that the scheme provides them water only when there is electric supply. Though they have been provided a generator for the purpose, because it calls for contribution of money to buy diesel, they wait for the electric supply and tap it illegally to pump the water. The over-head tank has not yet been constructed as the second instalment has not yet been released.

The common ailments in the village are diarrhoea, malaria, scabies and chicken pox.

The women in Passi basti were initially reluctant to assemble for a FGD and men in the basti were found to be discouraging the consultants from initiating the discussion with them as they were of the opinion that women were not capable of contributing to any discussions. However, once they assembled and started participating in the discussions they were found to be very articulate and capable of voicing their opinions and sharing their insights on the issue.

GP Keseriya, Block Kada, District Kaushambi

Keseriya village in Kada block is situated 15-17 Km from the district Head quarters. The population of the village is around 3,500 and has around 800 HHs. The village is inhabited by Kushwaha, Maurya, Patel, Kumhar, Yadav, Dhobi, Chamar, Passi,, Brahmin, Lohar and Nat castes. The remarkable feature of this village is that all the caste groups here live in complete harmony. The PWS here was constructed in 1981 under the multi village (15 village) scheme known as Siyah Kaasin PWS. 30 years ago, before the scheme came into being the village collected its water from one common well. The pradhan, when interviewed proudly shared that there has never been an incidence of any unrest or violence during any elections in the village.

9 out of the 15 villages (under the PWS) were still receiving water. The ground water here is available at 150 feet. There are 35 Hand pumps of which 1 is defunct in Keseriya, though people complained of low pressure especially during summers. The JN staff collects a monthly contribution of Rs 20 for O&M, from the users who own private connections. Only 10% HHs have toilets in the villages. The others resort to open defecation.

The main occupation of the people is agriculture and horticulture. They grow lemon and guava (this area is particularly known for its guavas). About 30% of the HHs have televisions in their houses, 25% have motor cycles and most HHs have at least 2 mobiles. 80% HHs have buffaloes and a few have local cows.

The women here were found to be aware, articulate and forth coming. Kalpana devi shared during the FGD that while paying the monthly contribution, to the JN employee she demanded supply of water in the evening also. She said, “ *paisa dete hain tho paani teek se do. Tab sham ko bhi aadha ghanta chod ne laga hai*” Meaning then he started supplying water in the evening also.

A lot of educated girls in their adolescence were found in the village. Kalpana devi shared that hand wash before meals and after defecation have become a practice with children ever since they started attending the English Medium school.

The common ailments in the village were found to be diarrhoea, jaundice, malaria, gastric disorder, etc. The people here go to Allahabad (55 Kms away) for treatment, as they do not trust the doctor at Sirathu.

GP Rampur Dhamawa Block Sirathu District Kaushambi

Rampur Dhamawa has 12 hamlets with a population 11000. The hamlets are Gaurahar, Chakia, Dadri, Alpikapura, Bhainsaha, Loharanpurwa, Saraiyan, Bhatpurwa, Kuchbanhiakadera, Rampur Dhamawa, Ram Ratanpurwa and Natankadera.

It is a multi caste village with Harijans, Sonkars, Thakurs, Pandits, Musilms, Lohars, Prajapati, Pal, Sahu, Kunwi, Darjee and Nats living in 700 HHs. In this GP visit to some of the purvas revealed that there was a complete absence of belongingness among various caste groups in the purva. This seemed an obvious deterrent in promotion of any community based activity. There seem to be strong divisions along caste lines causing indifference among groups. They reportedly neither cross caste line to exchange invitations during celebrations no do they visit people from other castes in case of death.

5 swajaldhara schemes have been sanctioned in 2003-04. Two of them are functional and the remaining three have not been completed due to non- release of the later stage fund. VWSC was constituted in 2003. The Treasurer and the Chair Person were still found to be active.

At present the functional Swajal dhara scheme near Deepak Singh Thakur’s house, is serving 8-10 HHs. The treasurer of VWSC is looking after the O&M of the scheme. The others collect water from Hand pumps installed by JN (10) or by individuals (12), a few of them (20 HHs) also depend on old multi village pipe water scheme of Sirathu, about 3 Kms away and collect water between 2-3am, when the water is supplied. None of the HHs were found to be using the dug well water. However, it was reported that some of the ‘influential’ HHs had locked up the hand pumps near their houses and the residents near by were forced to fetch water from far off places

Open defecation was found to be wide spread and hand wash practice unsafe. It was reported that after defecation a majority of the villagers used mud close to the

site of defecation to wash hands.

An FGD with women in Saraiya Purva where the swajal dhara scheme was found functional, revealed that 25 out of 100 HHs had bought private connections after paying Rs 1500. They are contributing Rs 50 per month towards O&M. The timings of supply of water however depended on supply of electricity, which was apparently erratic.

It was observed that with PWS reaching HHs, waste water around the village was found collecting puddles and making movement within the village difficult.

The common ailments are malaria and typhoid.

GP Ucharawan Block Kada District Kaushambi

Ucharawan has 3 purvas namely, Ucharawan, Maulvipur and Khadakpur. It is inhabited by Aheers, Dhobis (majority), Chamars, Passis, Brahmins and Baniyas.

Ucharawan is one of the villages where water quality (nitrite) issues have been detected. It has a JN's single village scheme (2008-09), which has been successfully handed over to GP for O&M. All the purvas have been covered under the scheme. Initially the GP gave connections and appointed a person to operate and maintain the scheme, and he failed at the job. The motor during the 4 month period, got burnt 11 times. Then the GP signed an O&M contract with Lalit Kumar Dwivedi alias Munna Pandit. He was an experienced mechanic and was involved in the construction of the scheme. He was authorised to collect monthly water tax from the users and take home the margin after expenses as his wages. The contract clearly mentioned that the GP would not provide any additional fund for the purpose. The contract is valid till the next GP elections.

The decision of the contract and award of O&M responsibility to Munna Pandit in an Open meeting of the Gram Sabha.

Of the total 140 connections initially given out, 113 are functional. The reason being, absence of ferule which regulates the pressure of water. The capacity of the OHT is 100KL. The people buy a connection for Rs 1100 and contribute Rs 40 per connection for O&M.

The health issues here are diarrhoea, vomiting, malaria, cholera. They have a jhola chaap doctor visiting them in case of emergency, because he is less expensive than the doctors at Sirathu, 3 Kms away.

GP Kudha Keshavpur, Block Pura Bazar, District Faizabad

Kudha Keshavpur GP has twelve hamlets. There are two water supply systems: one constructed under Swajaldhara, which has 6 schemes; and another bigger scheme in the process of being built by Jal Nigam. The case study titled 'No One's Baby' gives the story of Swajaldhara initiative.

Role of GP has been mainly in terms of providing and ensuring that the land is available for the schemes.

DPR was made available to VWSC chairperson after he had already purchased the construction material at a much higher cost than provided in the DPR. There was no support from the engineer of the NGO (Manav Seva Samiti, Mirzapur), who used to visit only the Vikas Bhawan and return from there.

'Ye to kahiye kee mistri achhe the to kam ho gaya.'

There are innumerable hand-pumps in the village as per the VWSC chairperson. 'There is no hamlet where there is a problem of water, if at all there is a problem that is of drainage and waste disposal.'

'Jab log apni bijli ka paisa nahin dete to pumphouse kee bijli ka paisa kahna se denge.'

'Janta jab kantiya laga kar bijli leti hai, connection nahin leti paisa dekar to pani ka paisa kaise denge.'

Hardly 20-25 % people in the GP have toilets. But for the Darshan Nagar market area, in all other hamlets 20-25% people have toilets, which are generally used by women only, while men go out in the open for defecation. Fresh faeces was seen all across the village roads.

Shilpkar Nagar has pattharkat caste community and is the filthiest part of the village.

GP Tarun, Block Tarun, District Faizabad

There are three revenue villages and 13 wards in GP. There are five schemes currently in the village that were proposed under SWAJALDHARA, one of them is functional, two have been completed but are not functioning due to unavailability of electricity connection, two schemes have not started due to insufficient budget as the costs have escalated now and also the payment conditions for the third installment are not fulfilled. There is no provision for inclusion of electrification costs/ charges in DPR for SWAJALDHARA project. Delays in release of funds were reported. In this village only 50% families have made contributions which is ranging from Rs. 100- Rs 500. No operation and maintenance fee is being collected by VWSC. Treasurer told that money is being collected in case of emergency but no record was found. In Yadavpur, which is a SC habitation only 5 families have toilet facility in their homes out of 55 families. Only women and children use this facility.

The village communities believe that deep bore pipe water is safer as compared to

the water from shallow hand pump. Shallow Hand pump water turns yellow after some time and the food cooked in that water smells bad. Most of the members are using dust to clean hands after defecation.

VWSC comprises six elected ward member and six co-opted member. The co-opted members are nominated in a highly organized and democratic manner which is based on the ability and willingness to contribute. Cluster meetings are held in each ward to form 13 Jal Shrot Samooh (Water source group). From these Jal Srot Samooh, 3 Upbhogta Samooh (consumers' group) are created which is one for each revenue village and from each UPBHOGTA SAMOOH two most respected and acceptable people are nominated to VWSC. The ex-president and treasurer of the VWSC received three days training at vikas bhawan on SWAJALDHARA. They did not disseminate the knowledge and awareness any further to any one else in the village. Gram Pradhan and GP members have hardly any knowledge about their roles in water supply and sanitation sector.

The DPR was prepared by the former VWSC but after the PRI elections the same scheme was implemented by the newly elected(current) VWSC who had no technical and financial know how about the scheme.

“samiti khanapurti hai bas .. aur kuch nahin...Kam ho tab to jimmedari aayee.. koi training ya jankari bhi nahin dee gai”..... “samiti sakriya kaise hooe...apnee ghar ki poonjee laga ke chalayan...kis se milen..kya karain” ...feeling of helplessness and frustration

The NGO staff received three days training on SWAJALDHARA. Out of those three days of training two days were completely devoted to DPR preparation and one day for software activities (PRA, IEC etc). Moreover, the NGO staff and member of VWSC received the training after completion of planning phase. The NGO was involved only till the Planning phase and after that had no role, but, in this case, later the NGO member who facilitated the DPR took the contract for implementation in individual capacity.

In one scheme in Yadavpur Taruni hamlet, where the scheme was built in 2007 but yet not commissioned, the people gave following reasons for disinterest of people in the scheme:

1. Most of the households have their own water resources and are satisfied with the quantity and quality of the water. These households are not willing to spend again to access another drinking water scheme.
2. The scheme was initiated and completed in 2007 but was never initiated, so belief on the sustenance of the scheme is very low. As said by one of the participant, “Jab tak toti nahin lagegi, chowki nahin banegei”. (we will construct platform only when they will install tap in or house).
3. This part of the village does not have electricity connection, so the generator has to be used to pump water from the ground to fill the tank. This will increase the operation cost of the scheme, which need to be paid by the beneficiary households.
4. The current panchayat member and VWSC are inactive and are not willing to complete the scheme initiated by the previous members and VWSC.

In this hamlet, the land for the scheme was provided by a private individual. The scheme is not working but the infrastructure like the room to install the tank and generator is in use. Generator is given on rent to people by the household who had given the land for the scheme.

GP Raunahi Uparhar, Block Sohawal, District Faizabad

The Raunahi GP has 15 hamlets with the current estimated population of around 15,000 living in 3200 households. There are 6500 voters in the GP. Raunahi Khas is the largest hamlet with a population of around 3000 and Pure Gharuk is the smallest with a population of around 100.

There are three habitations of scheduled caste: Nevati Tola Chamar Toliya (60 households); Nala Chamar Toliya (40 households); Khan Pur Chamar Toliya (40 households).

Hindus and Muslims constitute roughly 40% and 60% of the population of the GP respectively.

As per a survey undertaken in 2002, 560 BPL families in the GP are listed, but only 380 BPL cards have been issued so far, all of whom are not from the survey list of BPLs. No BPL cards have been received after the newly elected GP. Most of the BPL cards have expired, but are being used by the cardholders, as new cards have yet to be issued.

102 India Mark II hand-pumps are installed in the GP out of which 2 are reported to be non-functional. Besides, most of the households in the GP have shallow hand-pumps installed within the premises of their house. The cost of the installation of shallow hand-pumps is reported to be around 15,000 to 25,000 INR as the water table in the area is relatively low and the boring has to be 110-120 feet deep. Many household have their own small pumps fitted with their hand-pumps to draw ground water.

'Gandi Soch ho gayi hai, sab kuch sarkar kare. Khana bhi dede aur muhn men khila bhi de. Aur kha kar main sarkar per ahsan karoonga.' Saiyyad Mohammad Ghaus

'We cannot pay for construction. We can pay some user charges of 20-30 rupees.'

People are generally apprehensive that the contribution made by them will be used up by the Panchayat for other purposes. They say that they are already paying for repair and electricity charges for their pumps, so they do not mind paying for piped water supply.

'Earlier people were not willing to pay for electricity, but when some of us went for the electricity connection and paid for it, others followed.' Saiyyad Mohammad Ghaus

70-80% of the households have some kind of toilet, but in many households people go out for open defecation even after having the toilets.

50% of the drains in the village are pucca and the remaining 50% are kuchha or non-existent. Habitations with a pre-dominant SC population have hardly any

drainage.

There is no system of solid waste disposal in the village and there is a strong felt need for the same.

None of the newly elected Panchayat members of the GP of 2010 are aware of the Jal Prabandhan Samiti and their roles and functions. None of the elected members have received any training so far.

Diarrhea is rampant in the GP particularly towards the end of the summer and the beginning of the rainy season. Women in Newati Tola hamlet revealed that this hamlet has around 400 families. In each house there is a hand pump and around 30% have submersible pumps. One of the families in the area which has submersible pump in the house spends around Rs 1000 on diesel for running the generator to fill the tank. Hand pumps in this hamlet are installed at 120-140 ft. But it was told by the people that there is huge variation in water table in this village. In summers due to voltage water is slowly extracted. Also in summers there are huge power cuts. During summers the water level goes down. People are satisfied with the water quality. Also one lady quoted “ *ab sarkaari nal hota to shikayat hoti, ab to apna paisa hai apna paani*”. Every household has toilets with soak pit.

Women told that they do not know about VWSC. For the GP meeting the announcement is done but not so loudly. Women are called in the GP meeting only when some official from outside is coming to show him the representation. Also one female quoted “ *jab hum kahi jaati nahi hume kuch pata nahi hota*”. After the discussion one male member said to us “ *hamare yahan dastoor nahi hai ki auratein bahar ke logo se baat karein*”.

GP Pilkhawan, Block Sohawal, District Faizabad

This GP has 14 hamlets with a population of around 12000. There is an estimated number of around 1300 households. 90% of the houses have shallow hand-pumps. There are around 350 India Mark II handpumps installed by Jal Nagam, GP and other agencies over the years.

There is no shortage of water, as people get sufficient water from the hand-pumps even in summer months. Water table in the area is high, as this area falls between Saryu river (3 KM to the south of the village) and Sharda canal (1 KM in the north).

But people reported the bad quality of water in summer and rainy months, particularly from India Mark II handpumps. Possible reason mentioned for this was shallow boring of these hand-pumps as against the standard norm of tapping water from the second strata. Women reported that at times the water from the govt. hand pump turns yellow if kept for 5 minutes or is oily. It also contains sand particles.

PANI, an NGO based in Faizabad had promoted the use of water filter around 3 years back. Some people in the village bought these water filters.

On being asked about the willingness to pay for piped water, one woman said” agar paani ki suvidha ho jaye to hum taiyaar hai” whereas one said that why should we pay when it is easily available in my house. Another opinion was “ jo profit waale log hai wo to de denge” (people who have extra income can pay).

Only 10% people in the GP have individual household latrines. The remaining 90% defecate in the open. Latrines built in SC habitation with TSC support are used for storage and other purposes and not for defecation.

As regards the role of GP in the provision of water supply and sanitation services, one of the elected representatives, who has been an elected member for last 20 years and was also the Pradhan for one term said.

‘Panchayat acchha kam karti ha aur aage bhi karegi lekin karne diya jaye tab to Kam karne mein prashasanik, samajik aur vyavaharik samsyaein hain.’

On asking what these problems mean, the example given was as follows:

1. *‘If DPRO asks us to do something, Pradhan has to comply. Dustbins were put in the village which did not cost more than 100 rupees, but the Pradhan had to sign the bill of 1000 rupees.’*
2. *‘ Nobody asks the Pradhan, the hand-pump is installed where vidhayak (MLA) wants it to be installed.’*

Panchayat has only MNREGA work at the moment.

Around three years back two elected members of the Panchayat were trained in water and sanitation at the block level. No one else has received any training. None of the members know their roles and functions as elected representatives. Talking about the training, Sudhir Singh, the elected representative, who attended the training recalled that he was served samosa and chai and that he signed a paper. He does not remember anything else.

No community wide meeting or Gram Sabha meeting has ever taken place in the GP to discuss the issue of water and sanitation. People do not remember attending any Gram Sabha meeting. All the women present there said that they do not go to the panchayati meetings. Also they have no clue about VWSC. Only people from Paani Sanstha have come there and have told them about method to purify water.

GP Bhishampur, Block Chakia, District Chandauli

Bhishampur GP has two revenue villages: Bhishampur and Bandevi. The GP has 985 BPL families. Nobody was able to tell the number of APL families including the Gram Vikas Adhikari. MNREGA budget is Rs. 78.70 Lakh. There are 2 sanitation workers appointed by the GP. As the village is big, once in a week, the sanitation workers are able to clean up the village. There are 84 IMII hand-pumps and around 60% HHs have their own shallow hand pumps (30-5- feet deep). The taste of water of shallow hand pumps is not good. A scheme is under construction by JN, which is almost complete with pump house, OHT and 80% pipeline. Some 10 HHs in the Kadirganj hamlet drink water from wells. The village has good drainage system in the main village. This is underground and connected to ponds on two sides. Plastic garbage is seen near the ponds which makes it unsightly. Most people go for OD. About 150 HHs have toilets. Another 700 HHs have expressed their demand for toilets which has been sent to the district. When asked about the willingness of GP for management of water supply services, most people opined that it would not be possible. Only outside agencies can do it. Most people have no idea of committees of GP.

Village has electricity except in the Mushar basti. In records, the village has 36 people of ST but actually there is no ST. Of course, there are Mushars who live in a separate habitation and fall in SC category. There are around 150 families of Musahar community. This hamlet has 5 HPs out of which 2 are not working. There is a soak pit near one HP. There is 1 open well in the hamlet as well. People drink water from this well too. The women stated that they do not have toilets and therefore defecate in the open. Malaria, Typhoid and diarrhoea are common diseases that occur in the village, particularly during monsoons. Many children from Mushar community do not go to school.

GP Paliya, Block Chahaniya, District, Chandauli

Paliya GP has two revenue villages: Paliya and Sawopur. There are a total of 8 habitations and approximately 750 HHs. These are: Agarke pura (80 HHs), Ballipur (150 HHs), Baman chakwan (10 HHs), Sawopur (50 HHs), Chakayeen (110 HHs), Dhawal Dhamakka (no HHs), Gadahrapar (50 HHs), Paliya (250 HHs). Paliya village is inhabited by Dhobi, Maurya, Kumhar, Vishwakarma, Thakur and Dharkar castes. Every child in the village reportedly attends school; some of them do not take interest though. Only 5% people have toilets and remaining 95% go for OD. People are waiting for Rs. 10000 for toilet announced by the central government. Women asked for toilets. They felt that due to OD flies and mosquitoes are breeding and there is an increase in cases of diarrreaha and malaria.

This is an arsenic affected village but people had no idea about this. They only knew that water of shallow handpump is yellowish. They shared that earlier the water was good but later it became bad. Only 10 people in Chakayeen habitation (where the FGD was conducted) have taken water connection from the new pipe water scheme built by the JN. Rest get water from government or private hand-pumps. The JN piped water scheme has been commissioned just 2 months ago.

O&M is not being charged as the scheme is yet being tested and not properly

functioning due to frequent leakages.

Many pipeline leakages are happening due to less number of connections and electricity supply is erratic. Therefore, people are reluctant in taking water connections. People had no idea about the cost of the connection, which was explained by the AE, UPJN present in the meeting. Once they were told about the arsenic problem, the member of GP stated that he would discuss the issue in the Gram Sabha and motivate people for taking water connection. The JE informed that only 40 people have taken connection so far in whole GP.

One person from Ballipur known as Ghamandi stated that he wanted to take connection but fears that the influential landlord may break it as the pipeline passes through his field (“ Dar hai ki babu sahib pipe tod denge to kya hoga.”). The people present said when he had allowed the pipeline to be laid in his field he would not break the connection. But the guy was not convinced. Then one person suggested why not take connection from another point which is not in his field.

The member of the GP present during the discussions stated that the GP does the following works:

1. Pavement of roads through block, other kutchha works under MNREGS
2. Oversee distribution of scholarship in the school
3. Oversee the distribution of ration
4. Mid-day meal distribution in school
5. Committee formation for distribution of water for irrigation tubewell
6. Appointing Safai karmi (sanitation worker) for village cleaning

The member complained that the Pradhan has appointed safayee karmi only in 3 hamlets: 1 in Sawopur, 1 in Dhawal Dhamakka (where no one resides) and 2 in Palia. Therefore, nobody is there in Chakayeen. Gram Sabha has actually not met in last 3 years. The meetings of Gram Sabha happen only on paper.

The Gram Panchayat cannot handle water supply works, as nobody listens to anyone (Ye dehaat hai yahan koi kisi ka kuchh suntan bhi nahin hai. Sab apne man ke raja bane hain.”)

GP Fatehpur (Part of Sahupuri MVS of UPJN), Block Niyamtabad, District Chandauli

Fatehpur GP has two revenue villages, Fatehpur and Gauraiyya. Sahupuri, MVS of UPJN is supplying water to Fatehpur. A group of 8 women (who are agricultural labourer, bidi rollers and work in other informal sector) stated during FGD that their houses are located 40-50 meters away from the main pipeline and they are not able to bear the cost of the extension. Out of the 8 HHs, 05 are dependent on 3 private HPs to meet their water need; and rest 3 HHs are dependent on common well. They are not happy with the quality of water but are comfortable with the water availability. They recognize that a piped connection would be a better option, especially in terms of quality. However, they do not have enough money to avail piped water service. They would have to invest about Rs 3000-4000/HH to extend the connection. They are willing to pay the monthly

charges, but unable to put together the initial investments. The women also stated that they are defecating in the open and are facing the related challenges such as water logging in farms during monsoon compels them to defecate on open roads, which is very challenging for women. They also stated that incidence of dysentery and typhoid increases during monsoon season. The women also shared that the Gram Pradhan is corrupt and indulges in favouritism while selecting beneficiaries for government supported programs.

The husband of the Pradhan known as Iliyas complained that 2-3 hamlets are not getting water. These are Natan Basti, Ansari Basti and a small habitation of 25 HHs near Murgi farm in the Gaurraiya village. The scheme has about 700 connections. These include connections given under the Vyas Nagar scheme which are now covered by Sahupuri scheme.

Iliyas stated that he does not have a connection despite many attempts. His house is there in the Ansari Basti. The reason being that there is no distribution line in his vicinity. He has a private handpump with 80 feet bore for the water supply. The JE who was present on the occasion, stated that if at least 7 people apply connections from his area, he would construct the distribution line in the said area.

The IM II hand pumps are functional and repair is timely done by the GP. Main works done by the GP include Kharanja, drain etc under the MNREGS and state finance commission.

GP Mannapur (Part of Sahupuri MVS of UP JN), Block Niyamtabad, District Chandauli

Mannapur GP has three revenue villages: Mannapur, Khutaha and Govindpur. Mannapur and Fattepur are adjoining GPs. They are covered by Sahupuri scheme. Earlier they were served by Vyas Nagar Scheme. Now rarely people use wells. Most people use them for bathing and other purposes. However, there are two wells used by few people for drinking purpose. In cases, 4-5 households use one private connection.

The fitter of the scheme Lallu Ram stated that he repairs the pipeline of the UPJN Sahupuri scheme whenever there is a leakage. Information about leakages is generally received through public complaints. Some cases are directly noticed by the fitter during his routine checking. More leakages are noticed during winters as many people use less water during this season. This leads to increased pressure on the pipeline which bursts, as a result. Number of leakages ranges from 0-12 per month. For example in November and December, the number of leakages was 8 and 7 respectively. The last leakage was noticed on the last Friday (21 December 2012). The reason was a JCB machine which was digging mud and broke the pipeline in the process.

The fitter felt that Panchayats cannot do repair of the scheme as they are not skilled and this is a highly skilled job. *“Jab we hand pump nahin banwa paa rahe hain to pipe water supply kaise chala paayenge”*. If the Panchayats are provided material for repair from blocks and there is an administrative control from the block, then only the GPs could handle pipe water supply schemes.

Majority of people have shallow hand pumps and use them for all purposes. Many

of them have fitted device for pumping water from the hand pump. Some of them felt that water of shallow hand pump was not good, still they were not bothered and using the hand-pump water. (*Paani ganda dela, phir chalaane ke baad achchha awal ba.*)

People cited two reasons: (i) hand pump water is available all the time, while the scheme provides water on fix timings and at times it is not available due to breakdowns or lack of electricity (ii) water of hand pump is cold during summer and warm during winters while the temperature of scheme water is other way round.

Some people who had connection in the earlier Vyas Nagar Scheme, got it disconnected as they were not getting water for quite some time and had to pay the bills. They installed their own shallow hand pumps. (*Jab 7-8 saal pani theek se nahin aaya to connection katwa diya aur 2000 rupaya kharch karke chanpakal lagawa liya.....Jainuddin*)

Ram Sewak likes his Shallow hand pump

One person Ram Sewak shared that he got his connection disconnected when he sold his house 4-5 years ago and shifted on his field. He then spent rs. 2000 and installed a shallow hand pump (just 30 feet deep). He is satisfied with the quality of water. He says: *Nal ka paani aur chapakal ka paani milta-julta hi hai. Koi antar nahin hai.* Ram Sewak says some of the handpumps in the village provide salty water and at least 7-8 families take water from my hand pump as the water is sweet and cold during summers and hot during winters. There are a total of three persons in his family including his wife and daughter. The daughter is suffering from polio. (*Bechaari thoda loose hokar chalti hai.*)

Though he is not convinced that pipe water supply scheme provides better water, he stated that some people are interestd in connections but the scheme has left out some areas in Gauraiyya, Fattepur and Mannapur, (*Agar udhar bhi pipe daud jaata to log kafi connection le lete.*)

The people including Gram Pradhan had no idea about the Jal Prabandhan Samiti or Gram Peyjal Evam Swachchhata Samiti. Gram Pradhan confused this with a committee for irrigation tubewells. "*Is samiti mein Geeta Devi Adhyaksha hai, Ek upadyaksha bhi hai lekin yaad nahin hai kaun hai. Geeta devei tubewell ki chaabhi rakhti hai aur use kholti band karti hai.*"

However, he remembered two committes: Swasthya Samiti and Nirman Samiti. One villager added that there is a Shiksha Samiti as well. The Pradhan stated that there are some 5 committees but he was not remembering all of them. The secretary would know about them. (*Inka kachhu kamai nayee awat hai to yaad*

nahi rahal ba Gathan ke baad hi Samiti khatam ho jaati hai kyonki koi istemaal nahin hai.)

Pradhan said that works under MNREGS are the major works of GP. When asked as to what is the annual budget, the Pradhan stated as to why he should tell all this to everyone. However, he stated that there are a lot of restrictions now in its implementation. *(MNREGA mien 3-4 mahine se badi kadaayee ho gayee hai.)*

The Pradhan was unwilling to undertake the management of water supply schemes. People also felt that Government should run the scheme. *“Gaon ka private aadmi karega to maar hoi jayee. Sarkaari ka kuchh dar baa.”* However, some people stated that if the scheme is small and engineering support is provided the GP can do it.

Regarding toilets in the village, the people stated: *“Muslim mein koi baahar nahin jaata, Yadav 95% baahar jaate, Patel ka bhi wahi haal hai, Harihan bhi jyadatar baahar jaate hain, unka jitna sarkaar se banaa ek bhi chala nahin.”*

People felt the drainage is a big problem in the village. They felt that this would worsen if people take more water connections from the scheme.

GP Sikandarpur, Block Chakia, District Chandauli

Sikandarpur GP has only one revenue village. Population of the village was 7978 in 2001 and current population is 9100 as confirmed by Shiksha mitra who was present on the occasion. The number of voters in the GP is 5800. There are 80% weavers in this village who make Banarasi Sari. There is an organization “Sikandarpur Hathkargha Cluster Sansthan” in which 25 persons have received loan of Rs. 25000 each and another 9 would be getting it shortly. The organization has its own loom. Many others are weaving sari on labour basis and equipment are provided by the contractor.

This village has two schemes: one built by JN 28 years ago which is functional and the other built under Swajaldhara in 2008-09 which is not functional.

The Swajaldhara scheme was built during the regime of earlier Pradhan Khushbunnishan. Present Pradhan had no idea about the then VWSC. However, he stated that the husband of the previous Pradhan Mohd. Siddique was the treasurer. There were reportedly 6 stand posts. Four of them were seen on the spot and it was found that 3 of them (near Yakub, Badruddin and Shamsuddin’s house) were just not there and one which was in the house of Jalil was also not functioning. All of them were non-existent. The people stated that water actually hardly came as there were many leakages in the pipe line. Water tank has leakages as well. The mosque which is adjacent to the water tank however gets some water. As per report of the EE Jal Nigam, the Swajaldhara scheme in Sikandarpur was reported as functional but it was found almost defunct as explained above. As per the verification report of the JN, the scheme cost (estimated) of the swajaldhara scheme was Rs. 579355 and Rs. 505000 were released and Rs. 74355 were required to complete the remaining works.

Four people, who were earlier taking water from the stand post of Swajaldhara have now taken connection from the old JN scheme which is functional. There is a new VWSC in the village headed by Heerawati Devi, which is also there for name sake.

The JN scheme has 500 connections (Cost of a connection ranges between Rs. 1500-2500 depending upon the distance from the main line; this includes Rs. 590 which is the connection fee.). About 50% of them pay their monthly O&M charges regularly. Harijan Basti and Fakiraan Basti have very few connections. All other hamlets have a large number of connections but still many people do not have connections. Many of them have their own submersible pumps and many others prefer to take water from their shallow hand pumps or from the 84 IMII hand pumps installed by the government, as they are unwilling to pay money for water.

Around 80% people in the village defecate in the open. They prefer morning walk to the adjoining river in the morning and defecate there.

People feel that water is not a problem (occasionally it's a problem when electricity is not there due to transformer is burnt etc.) but drainage is a big problem in the village. The waste water of half of the villages go to one of the fields of the Gram Pradhan. Pradhan stated that big underground drainage system needs to be built for which government should provide money.

Typhoid and Malaria occurrences are common during monsoons.

Activities of GP include MNREGA works, mid-day meals in two schools (2 others are run by SHG) and distribution of scholarship. Open meeting of Gram Sabha happens 3-4 times in a year; 2 times it is fixed and 1-2 times, it happens to decide names for widow/ handicapped pension, housing etc.

According to the Pradhan, GPs can undertake water supply works, if the Pradhan is capable, a system is put in place, worker is appointed for O&M, selection of workers is done carefully so that they do their work properly, there is flexibility in purchase of material for O&M and the GP actively supervises the work. However, only partial cost recovery would be possible, as it happens in the case of JN.

GP Barwa Rajapakad Block Tamkuhiraj District Kushinagar

The village is scattered in about 6 kilometers and distributed in 22 hamlets. The population of the Gram Panchayat is 16000 living in about 4500 HHs spread across 22 hamlets. The Water supply scheme is a pumping scheme with an OHT of 225 KL and 14 meters staging. The pipeline is about 16.5 KM. The cost of the scheme in 2001-02 was Rs. 55.25 Lacs. There are 159 individual connections and 30 stand posts and a collection of Rs. 20 per month from Individual household connection is levied every month. The water supply is scheduled for 8 hours during the day. The O&M is done by Jal Nigam and two workers, pump operator & Fitter are being paid from Jal Nigam. The process of handing over is going on but the Gram Panchayat is reluctant to accept the responsibility of maintaining the present water supply scheme. A proposal for community Toilet complex is pending with DoRD and the land has been already identified for the same.

There are about 100-150 household have individual toilets and rest of the families defecate in the open. Hand washing is being done by only mud and water. The community claims to be aware of the health effects of open defecation, but was found relating it more to odour and nuisance rather than public health hazard.

According to the “Pradhan Pati”, Chandrashekhar Yadav (as his wife Bhagyamani Devi is the Pradhan), Gram Panchayat has all the necessary committees formed but none of them is functional.. The Gram Panchayat meeting is conducted as and when required and the formalities completed as and when needed.

The Water management is committee does not have any fund and therefore no responsibilities are being discharged (in absence of proper funds).

The current water supply is not providing water to 6-8 hamlets and about 30 % of the village families. The Gram Pradhan suggested to re-organise the water supply scheme (re-assess the water demand and upgrade the water supply scheme accordingly). He suggested that a separate OHT could also be planned for the remaining families in the Gram Panchayat.

The Pradhan Pati strongly felt that the Gram Panchayat should be involved from the planning of the water supply scheme stage, if the scheme is to be maintained by the Gram Panchayat at a later stage.

GP-Jataha Bazar Block-Vishanpura District Kushinagar

Total Population of the GP is 5050. The total number of HHs in the GP are 600, spread across three hamlets namely Jataha, Araadi and Nai Basti. The main occupation of the people are agriculture, labour (agricultural or otherwise) and petty business.

Shallow Hand pumps (a depth of 30-40 ft) are installed in most of the HHs and are the major source of drinking water. There are only 20 IM-II hand pumps in the entire GP out of which only 6 are in working condition. The villagers shared that the defunct hand pumps required re-boring. They complained that the water turns yellow in color after storing it in a container for an hour. It also smells like fish, more so during the monsoon season. Water quality test conducted on samples from these sources, declared the water infected but people continue to consume the same. There is no periodic water quality testing in the GP.

A water supply scheme of OHT of 170 KL was sanctioned in 2005 under SWAJALDHARA with an estimated cost of Rs.10 Lacs as per the DPR. But it was not constructed because of over-spending of Rs.9 Lacs by the former VWSC Chairperson and Treasurer. The revised DPR for the scheme is Rs.20 Lacs and is likely to start after the sanction from the GoUP.

The initial amount of Rs. 200 per family has already been collected against 10% community contribution amounting to Rs. 1.35 Lacs.

The major diseases prevalent here are Malaria, Typhoid and JE & AE (prevalent after Monsoon season) affecting 80% of families. The cost of treatment per year ranges between Rs. 4000 to Rs. 20000 per household. The main places approached for treatment are Padrauna, Gorakhpur and Lucknow. About 10 persons died in last one year. No financial support from Government is received on the death of the family members. The villagers shared that the cause of these deaths and diseases is polluted water.

The villagers expressed that they were willing to contribute Rs. 200 per family and also pay Rs. 50 towards O&M, for any other scheme providing them with safe drinking water.

There are about 25-30 families using toilets while remaining 95% resort open defecation. Only 2-4% families use soap for hand washing after defecation. Remaining 96% families use mud for washing hands.

The open meeting in the GP has never been conducted in the GP. Also the ward representatives said that they are not involved in any Gram Panchayat.

Gram Panchayat Katai Bharpurwa Block Khaddha District Kushinagar

The Gram Panchayat Katai Bharpurwa of Khaddha block has 62 hamlets (28 as per Government records) and a population of 16000 distributed in 7000 households. There are 15 +1 elected representatives in the Gram Panchayat. The committees have been formed but they are not actively discharging their duties in absence of any fund, said Mr. Nathu Prasad, Gram Pradhan.

There are 186 IM II hand pumps out of which 30 are not working. The Jal Nigam has erected Hand pumps at the depth of 50 to 85 feet depending upon the location. All the households are using shallow hand pumps to meet their water requirements. Generally in the habitations, the inhabitants themselves take care of repairs of the IM-II hand pumps as Gram Panchayat do not show any interest.

In the hamlet-Belvania inhabited by Mussahar, the IM-II was repaired by the community after waiting for two months for the repair from Gram Panchayat. There are two trained Hand pump mechanics that are available for undertaking repairs of IM-II hand pumps in the entire block. They have many complaints of repairs, most of them remain unattended. Due to pressure of time a complaint gets attended after 30-45 days when its turn comes, said the Gram Panchayat Secretary, Mr. Bhagwant Prasad.

Most of the IM-II hand pumps in the village were erected by Jal Nigam by traditional manual method of Dhekulia and draw water from 45-60 ft depth. The villagers informed that the water from IM-II hand pumps is also yellow in color like shallow hand pumps. There is no check of the water quality of the IM-II hand

pumps in the village.

The Gram Panchayat, Mr. Nathu Prasad shared that the repairs are largely undertaken by the villagers (collecting money from the users for meeting repair expenses) with the help of local mechanics only because of no response from the block level hand pump mechanics. It has been suggested by the Pradhan and other ward representatives to provide a team of trained hand pump mechanics to the Gram Panchayat through Block/ Nyaya Panchayat level, in the proposed Water supply project supported by the World Bank so that existing hand pump repairs could be handled at the village level. Also an outlet at block level for the spares and pipes of IM-II Hand pumps be planned so that spares & pipes can be procured at authentic source and at reasonable prices. This outlet could be managed by Jal Nigam.

There are about 350-400 families having toilets remaining 4500 families are going to the fields closer to the forest. The general hand washing practices are with mud and only with water. Soap is used in about 100 families for hand washing after defecation.

Current functioning of the Gram Panchayat and its sub-committees:

The Gram Pradhan Mr. Nathu Prasad shared that there has been one Gram Sabha meeting and two Gram Panchayats meeting in the year 2012. The Gram Pradhan has received a training at the block level and the ward representatives have not received any such training on their responsibilities in the Gram Panchayat functioning. The committees have been formed on paper as per the requirement of Panchayati Raj but the water management committee (six members are there) will be activated as soon as there are responsibilities and funds that are given to them.

Gram Panchayat Khutohi, block Ramkola, District Kushinagar

The Gram Panchayat-Khutohi is spread in the area of 5 kilometers with 56 Hamlets and a population of 14376 in 2001 census. The villagers shared that the water level is going down drastically by the sand extraction on the Gandak river about 500 meters from the hamlet. The extraction of sand from the river bed has reportedly created a cavity parallel to river course causing ground water streams flowing towards the gap causing decline in the water table. Now the water level goes down to 45-50 fts in summer than the earlier situation of 35-40 fts.

The village faced 52 child deaths due to JE (known as Nauki bimari). There is rampant open defecation in the village and about 96% villagers go to fields for defecation.

The villagers shared that the Household latrines under TSC of single pit were constructed but the quality of construction was such that they could not stand to the water logging in monsoon season and a good numbers out of them experienced collapsing of pit during flood situations. They also shared about the construction of single pit latrines worth Rs. 2000 which are only used as a place for storing fuel wood & cow dung cakes.

There is no practice of hand washing by soap & Ash in the village and about 95% households wash their hands by mud.

Gram Panchayat Motipur Klan Block Sirsia District Shrawasti

Sirsia is the most backward block of the district where acute crisis of drinking water is reported from some 14-15 gram panchayats, particularly during summer months; the India Mark II hand-pumps are not based on deep boring, due to stone layer. Most of the time second level strata is tapped for water, which dries out during summers

There are no industries in the district: literacy/ education level is very low, both birth rate and infant mortality rates are very high; many families in the villages especially in the foothills and near the forests depend on forest for fuel-wood to earn their livelihood.

Motipur klan GP is comprised of three purwas namely Motipur, Bangai and Masah inhabited by Tharus . There are about 30-35 families in Bangai and 72 families in Masah Purwa. There are another 7 Tharu villages around the Motipur Klan.

Generally, the Tharus live in joint families. One Mr. Jagga Malik from Masah purwa had largest family comprising of more than 30 members. The minimum land holding among the Tharu community is 2 Beegha and maximum is 20 Beegha. Villagers reported that unavailability of sufficient water for irrigation during summer is major problem.

Very few families have BPL cards as most of the families have more than 4-5 beegha agricultural land. Besides agriculture, wage labor is the major occupation of villagers. Most of the youth migrate to other states or countries like Bhutan in search of employment.

Both the Purwas have 10 India Mark hand pumps, 7 open well and about 40% families have private shallow hand pump which becomes dry and volume of water also become less in India mark during summer. Open wells are major source for water during summer as their water level remains constant.

Being a tribal community, government has supported more than 50 families for construction of Pucca house with toilet facility under Indira Awas Yojna. Only 10% families are using the toilets constructed under Indira Awas Yojana. Villagers reported that *“pit kewal 1 meter he gahra hai, barsat mai pani bhar jata hai, kaise use karaingey”*.

Fever, typhoid, malaria, diarrhea etc. are some of the common diseases people suffer from, particularly during the rainy season.

Gram Panchayat Ikona Dehat Block Ikona District Shrawasti

There are about 300-350 families in Natha Purwa dominated by Harijan castes; Kori, Pasi and chamar. Other religion/castes are Muslims, Ahirs, Lonias, Telis, Vishwakarmas, Dharkaruns and Brahmins.

The Purwa has about 70% private shallow hand pumps and 5 India mark II hand pumps out of which 3 are defunct. Also there are eight functional open wells. The families which have no private hand pumps are fetching water from either their neighbors' hand pumps, open well or India mark hand pump. The water of

Shallow hand pumps deep upto 50-60 feet, which is not safe. Water quality of some private hand pumps which are installed at 100 feet is also bad and water turns yellow after some time. But villagers do not consider it bad.

As per community members lack of drainage system is the biggest problem of the village. About 10% families have sanitary toilets. Village roads are full of human excreta, garbage and waste water. Pradhan deployed 'choukidar' to check open defecation on paths leading to school for two months but after that due to lack of funds scheme could not continue. Toilets constructed under Indira Awas Yojana are not in use. Beneficiaries told that the toilet cannot be used as it has only 1 meter deep pit.

Diarrhea, cholera, jaundice, malaria, Japanese encephalitis are some common diseases particularly during the rainy season.

Gram Panchayat Haridutt Nagar Block Jamunaha District Shrawasti

There are 40-45 families in Balidan Purwa and this purwa has a population of about 300. Yadav and Teli Gupta are the main caste in the Purwa. Four India Mark Hand pumps at a depth of 100-120 feet are installed and functional in this Purwa.

Out of four open wells, only two are functional (shallow 20 -25 feet wells), but are heavily contaminated and it has worms but villagers are still using the water for drinking purpose.

Most of the families have their own shallow hand pump within house which has been marked as unsafe and not fit for drinking purpose by health department but the villagers continue to use it for drinking purpose.

It is strange and rather alarmingly important lesson learnt for planning and policy formulation that in Balidan Purwa of Haridutt Nagar Girint GP there is a family whose sons are highly educated. One is a Physics Prof. at Lucknow University, others enrolled as a PhD student and the third son has completed his education in Lucknow and now is engaged as a teacher in a nearby school but still the family goes for defecating in open and uses these unsafe shallow handpumps for drinking water despite the warnings from the district administration.

Similarly another family of a retired govt. servant- Kaanoongo and two families of highly educated school teachers, the families of gram pradhan and a BDC member who has recently received a three day training on health and sanitation are engaged in open defecation besides using unsafe water for drinking.

Not a single family has toilet facility. There is no electricity in village, people using mobile phones pay an average amount of Rs 40-75/month for getting their phones charged from the local market which is almost 1 km away.

It is also strange that while people are paying 40-75 rupees to get their mobile phones charged they are not willing to pay even 20 rupees per month for water. They strongly feel that providing safe water is the responsibility of the Govt. On sensitization and strong triggering however, some people led by the person who had recently received a three day training on Sanitation at the district said that those who need safe piped water shall pay monthly and the installation charges. They also agreed to take up O & M through a community based committees. They

wish to take control of the situation for 'ensuring' better delivery of services.

Cholera and Diarrhea are the two most common diseases.

Gram Panchayat Fetepur Bangai Block Jamunaha District Shrawasti

There are total 5-6 Purwas in Fatepur Bangai GP. Bangai purwa has about 500 families with approximately 2400 population. The major religion and caste in the Bangai purwa are Muslims, Yadavs, Kurmis, Kumhars, Kanhars, Bhojs, Pasis, Basfors (chamar) and Brahmins.

Zilla Panchayat President Mrs Rukumani Devi belongs to Fetepur Bangai GP but does nothing...

Pipe water supply started in village in April-May 2012 by Jal Nigam. There are 45-50 stand post under the pipe water supply scheme in Bangai. There is no pipe water supply in ward no. 15, it was reported that some families are not willing to give land for the pipeline. Major problems are water logging associated with piped water and the fact that the cc road gets damaged in the process of laying the pipeline.

The Purwa has 25 IM-II hand pumps only 2 are functional. About 99% families have shallow hand pumps which give bad quality water, but people are still using that water for drinking purpose as shallow hand pumps are located within the house while the average distance of stand post is about 50 meter. The Purwa also has 10-12 open wells (15-20 meters deep) out of which only two are functional.

Only 25-30 families have toilets, which are used only by women and older member of household.

People observed that pipe water is safe and helpful in reducing Gastric diseases caused by drinking water from shallow hand pump. Malaria, dengue, diarrhea, cholera, gastro intestinal diseases are common particularly during monsoons. Villagers reported that hydrocele is also one of the major diseases observed in village which as per the villagers has linkages with bad quality of water.

Some FGD participants told that there is Jal Prabhandan Samitte in GP which exist only on papers, they were even not aware that scheme has been handed over to GP for maintenance purpose. Lack of proper drainage of waste water from household and stand post is major a environmental sanitation problem in the village which also leads to conflicts among community members. Women are particularly aggrieved due to this increased waterlogging associated with piped water wastage and leakage.

People want free water from the govt. and generally do not want to contribute even a single penny or even any kind of 'shramdan' for water. Also they do not want to take any kind of responsibility as well but after intense triggering and sensitization they understood that things improve only when they take charge and a common WATSAN committee is formed which has members from the actual user community.

Only 50 families have electricity in Bangai and 10 families have television.

Appendix 1

Households selected for study from selected villages

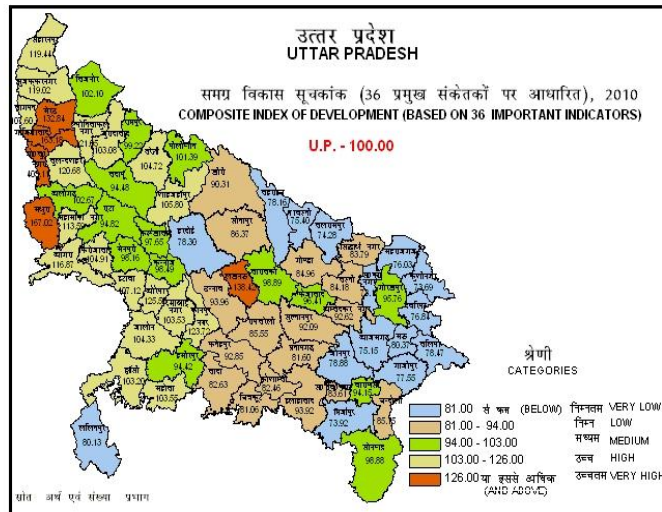
| District | Block | Gender | | Total |
|----------------|--------------|------------|------------|------------|
| | | Male | Female | |
| Chandauli | Chahaniya | 4 | 11 | 15 |
| | Chakiya | 12 | 17 | 29 |
| | Niyamtabad | 5 | 6 | 11 |
| | Total | 21 | 34 | 55 |
| Faizabad | Pura Bazar | 6 | 6 | 12 |
| | Suhawal | 15 | 10 | 25 |
| | Tarun | 5 | 7 | 12 |
| | Total | 26 | 23 | 49 |
| Kaushambi | Kada | 2 | 25 | 27 |
| | Manjhanpur | 4 | 9 | 13 |
| | Sirathu | 5 | 9 | 14 |
| | Total | 11 | 43 | 54 |
| Kushinagar | Khadda | 10 | 4 | 14 |
| | Ram Kola | 5 | 7 | 12 |
| | Tamkuhi Raj | 8 | 4 | 12 |
| | Visunpura | 6 | 4 | 10 |
| | Total | 29 | 19 | 48 |
| Shravasti | Ekowna | 9 | 4 | 13 |
| | Jamunaha | 16 | 7 | 23 |
| | Sirsiya | 6 | 6 | 12 |
| | Total | 31 | 17 | 48 |
| Overall | | 118 | 136 | 254 |
| % | | 46% | 54% | |

Appendix 2
Gender-wise Education level of respondents

| Education Status | Gender | | Total |
|--------------------------------|------------|------------|------------|
| | Male | Female | |
| No education | 39 | 97 | 136 |
| | 33.3% | 71.9% | 54.0% |
| Primary | 19 | 8 | 27 |
| | 16.2% | 5.9% | 10.7% |
| Higher Secondary (6-8th class) | 15 | 12 | 27 |
| | 12.8% | 8.9% | 10.7% |
| High School (9-10th class) | 14 | 11 | 25 |
| | 12.0% | 8.1% | 9.9% |
| Intermediate (11-12th class) | 13 | 1 | 14 |
| | 11.1% | .7% | 5.6% |
| Graduate | 10 | 2 | 12 |
| | 8.5% | 1.5% | 4.8% |
| Post-Graduate/ Ph.D | 4 | 1 | 5 |
| | 3.4% | .7% | 2.0% |
| Others | 3 | 3 | 6 |
| | 2.6% | 2.2% | 2.4% |
| Total | 117 | 135 | 252 |

Annexure 4

Planning Atlas Uttar Pradesh, 2010



समग्र विकास सूचकांक के अवरोही क्रमानुसार जनपदों का वर्गीकरण

CLASSIFICATION OF DISTRICTS IN DESCENDING ORDER OF COMPOSITE INDEX OF DEVELOPMENT

उच्चतम समग्र विकास सूचकांक (126.00 या इससे अधिक)

VERY HIGH COMPOSITE INDEX OF DEVELOPMENT

| क्र० सं० | जनपद | सूचकांक |
|----------|--------------------------------------|-----------|
| SL. NO. | DISTRICT | INDICATOR |
| 1 | गौतमबुद्ध नगर Gautam Buddha Nagar | 403.11 |
| 2 | मथुरा Mathura | 167.02 |
| 3 | गाजियाबाद Ghaziabad | 163.18 |
| 4 | लखनऊ Lucknow | 138.42 |
| 5 | मेरठ Meerut | 132.84 |

उच्च समग्र विकास सूचकांक (103.00-126.00)
HIGH COMPOSITE INDEX OF DEVELOPMENT

| क्र० सं० SL. NO. | जनपद DISTRICT | सूचकांक INDICATOR |
|---------------------|--|----------------------|
| 1 | औरैया Auraiya | 125.58 |
| 2 | कानपुर नगर Kanpur Nagar | 123.72 |
| 3 | ज्योतिबाफुले नगर Jyotibaphule Nagar | 121.05 |
| 4 | बुलन्दशहर Bulandshahar | 120.68 |
| 5 | सहारनपुर Saharanpur | 119.44 |
| 6 | मुजफ्फरनगर Muzaffar Nagar | 119.02 |
| 7 | आगरा Agra | 116.87 |
| 8 | महामाया नगर Mahamaya Nagar | 113.59 |
| 9 | बागपत Baghpat | 107.60 |
| 10 | इटावा Etawah | 107.12 |
| 11 | शाहजहाँपुर Shahjahanpur | 105.80 |
| 12 | फिरोजाबाद Firozabad | 104.91 |
| 13 | बरेली Bareilly | 104.72 |
| 14 | जालौन Jalaun | 104.33 |
| 15 | महोबा Mahoba | 103.55 |
| 16 | रमाबाई नगर Rama Bai Nagar | 103.53 |
| 17 | झाँसी Jhansi | 103.20 |
| 18 | मुरादाबाद Moradabad | 103.08 |

मध्यम समग्र विकास सूचकांक (94.00-103.00)

MEDIUM COMPOSITE INDEX OF DEVELOPMENT

| क्र० सं० | जनपद | सूचकांक |
|----------|------------|-----------|
| SL. NO. | DISTRICT | INDICATOR |
| 1 | अलीगढ़ | 102.67 |
| 2 | बिजनौर | 102.10 |
| 3 | पीलीभीत | 101.39 |
| 4 | रामपुर | 99.22 |
| 5 | बाराबंकी | 98.89 |
| 6 | सोनभद्र | 98.88 |
| 7 | कन्नौज | 98.49 |
| 8 | मैनपुरी | 98.16 |
| 9 | फर्रुखाबाद | 97.65 |
| 10 | फैजाबाद | 96.41 |
| 11 | गोरखपुर | 95.76 |
| 12 | एटा | 94.82 |
| 13 | बदायूँ | 94.48 |
| 14 | हमीरपुर | 94.42 |
| 15 | वाराणसी | 94.15 |

निम्न समग्र विकास सूचकांक (81.00-94.00)

LOW COMPOSITE INDEX OF DEVELOPMENT

| क्र० सं० SL. NO. | जनपद DISTRICT | सूचकांक INDICATOR |
|---------------------|--------------------------------------|----------------------|
| 1 | उन्नाव Unnao | 93.96 |
| 2 | इलाहाबाद Allahabad | 93.92 |
| 3 | फतेहपुर Fatehpur | 92.85 |
| 4 | अम्बेदकर नगर Ambedkar Nagar | 92.62 |
| 5 | सुल्तानपुर Sultanpur | 92.09 |
| 6 | लखीमपुर खीरी Lakhimpur Kheri | 90.31 |
| 7 | सीतापुर Sitapur | 86.37 |
| 8 | रायबरेली Raebareli | 85.55 |
| 9 | चन्दौली Chandauli | 85.15 |
| 10 | गोण्डा Gonda | 84.96 |
| 11 | बस्ती Basti | 84.18 |
| 12 | सिद्धार्थ नगर Siddharth Nagar | 83.79 |
| 13 | संत रविदास नगर Sant Ravidas Nagar | 83.61 |
| 14 | बाँदा Banda | 82.63 |
| 15 | कौशाम्बी Kaushambi | 82.46 |
| 16 | प्रतापगढ़ Pratapgarh | 81.60 |
| 17 | चित्रकूट Chitrakoot | 81.06 |

निम्नतम समग्र विकास सूचकांक (81.00 से कम)
VERY LOW COMPOSITE INDEX OF DEVELOPMENT

| क्र० सं० SL. NO. | जनपद DISTRICT | सूचकांक INDICATOR |
|---------------------|---------------------------------|----------------------|
| 1 | मऊ Mau | 80.37 |
| 2 | ललितपुर Lalitpur | 80.13 |
| 3 | जौनपुर Jaunpur | 78.88 |
| 4 | बलिया Ballia | 78.47 |
| 5 | हरदोई Hardoi | 78.30 |
| 6 | बहराइच Bahraich | 78.16 |
| 7 | गाजीपुर Ghazipur | 77.55 |
| 8 | देवरिया Deoria | 76.84 |
| 9 | महाराजगंज Maharajganj | 76.03 |
| 10 | श्रावस्ती Shrawasti | 75.40 |
| 11 | आजमगढ़ Azamgarh | 75.15 |
| 12 | बलरामपुर Balrampur | 74.28 |
| 13 | मिर्जापुर Mirzapur | 73.92 |
| 14 | कुशीनगर Kushi Nagar | 73.69 |
| 15 | संतकबीर नगर Sant Kabir Nagar | 73.17 |

जिला/सम्भागवार समग्र विकास सूचकांकों की गणना हेतु प्रयुक्त विकास संकेतकों की सूची

LIST OF INDICATORS USED FOR CALCULATING DISTRICT/REGION WISE COMPOSITE INDICES OF DEVELOPMENT

| क्र० सं० S.NO. | संकेतक LIST OF INDICATORS |
|-------------------|--|
| | कृषि Agriculture |
| 1 | प्रति हेक्टर सकल बोये गये क्षेत्रफल पर कृषि उपज का सकल मूल्य (₹) 'प्रचलित भावों पर', 2008-09 GROSS VALUE OF AGRICULTURAL PRODUCE PER HECT. OF GROSS AREA SOWN (RS.) AT CURRENT PRICES |
| 2 | प्रति ग्रामीण व्यक्ति पर कृषि उपज का सकल मूल्य (₹) 'प्रचलित भावों पर', 2008-09 GROSS VALUE OF AGRICULTURAL PRODUCE PER RURAL PERSON (RS.) AT CURRENT PRICES |
| 3 | वाणिज्यिक फसलों के अन्तर्गत क्षेत्रफल का सकल बोए गए क्षेत्रफल से प्रतिशत, 2008-09 PERCENTAGE OF AREA UNDER COMMERCIAL CROPS TO GROSS SOWN AREA |
| 4 | सकल सिंचित क्षेत्रफल का सकल बोये गये क्षेत्रफल से प्रतिशत, 2008-09 PERCENTAGE OF GROSS IRRIGATED AREA TO GROSS AREA SOWN |
| 5 | प्रति हेक्टर सकल बोए गए क्षेत्रफल पर कुल उर्वरक वितरण (कि०ग्रा०), 2008-09 DISTRIBUTION OF FERTILIZERS PER HA. OF GROSS AREA SOWN (Kgs.) |
| 6 | प्रति व्यक्ति खाद्यान्न उत्पादन (कि० ग्रा०), 2009-10 PER CAPITA PRODUCTION OF FOODGRAINS (Kgs.) |
| 7 | प्रति हजार हे० सकल बोये गये क्षेत्रफल पर पम्पसेटों की संख्या, 2009-10 NO OF PUMPSETS PER THOUSAND HECTARE OF GROSS CROPPED AREA |
| 8 | नलकूप से सिंचित क्षेत्र का शुद्ध सिंचित क्षेत्र से प्रतिशत 2008-09 PERCENTAGE OF AREA IRRIGATED BY TUBEWELLS TO NET IRRIGATED AREA |
| 9 | पशुधन घनत्व 2007 LIVESTOCK DENSITY |
| 10 | फसल सघनता 2008-09 INTENSITY OF CROPPING |

| क्र० सं० | संकेतक |
|--|---|
| S. NO. | LIST OF INDICATORS |
| औद्योगिक विकास Industrial Infrastructure | |
| 11 | प्रति लाख जनसंख्या पर लघु उद्योगों की संख्या, 2010-11 NO. OF SMALL SCALE INDUSTRIES PER LAKH OF POPULATION WORKERS |
| 12 | प्रति लाख जनसंख्या पर पंजीकृत कारखानों में कार्यरत व्यक्तियों की संख्या, 2007-08 NO. OF WORKERS ENGAGED IN REGISTERED FACTORIES PER LAKH OF POPULATION |
| 13 | औद्योगिक सेक्टर का शुद्ध जिला घरेलू उत्पाद से प्रतिशत 'प्रचलित भावों पर', 2008-09 PERCENTAGE OF INDUSTRIAL SECTOR TO NET DISTRICT DOMESTIC PRODUCT AT CURRENT PRICES |
| 14 | प्रति व्यक्ति औद्योगिक उत्पादन का सकल मूल्य (₹), 2007-08 PER CAPITA GROSS VALUE OF INDUSTRIAL PRODUCE (₹s.) |
| 15 | पंजीकृत कारखानों में प्रति श्रमिक आर्बिथ मूल्य (हजार ₹), 2007-08 VALUE ADDED PER WORKER IN REGISTERED FACTORIES ('000 ₹S) |
| 16 | प्रति लाख जनसंख्या पर पंजीकृत कार्यरत कारखानों की संख्या, 2007-08 NO. OF REGISTERED WORKING FACTORIES PER LAKH OF POPULATION |
| 17 | उद्योग में उपभुक्त विद्युत का कुल विद्युत उपभोग से प्रतिशत, 2010-11 PERCENTAGE OF CONSUMPTION OF ELECTRICITY IN INDUSTRY TO TOTAL CONSUMPTION |
| आर्थिक अवस्थापनायें Economic Infrastructure | |
| 18 | प्रति लाख जनसंख्या पर लाक निर्माण विभाग क अधीन पक्की सड़कों की लम्बाई (कि०मी०), 2009-10 LENGTH OF PUCCA ROADS UNDER P.W.D PER LAKH OF POPULATION (Km.) |
| 19 | प्रति हजार वर्ग कि० मी० पर लाक निर्माण विभाग क अधीन पक्की सड़कों की लम्बाई (कि०मी०), 2009-10 LENGTH OF PUCCA ROADS UNDER P.W.D PER THOUSAND SQ.KM. OF AREA (Km.) |

| क्र० सं० | संकेतक |
|---|--|
| S. NO. | LIST OF INDICATORS |
| 20 | प्रति व्यक्ति विद्युत उपभोग (कि०वा०घं०), 2010-11 PER CAPITA CONSUMPTION OF ELECTRICITY (K.W.H.) |
| 21 | विद्युतीकृत ग्रामों का कुल आबाद ग्रामों से प्रतिशत, 2010-11 PERCENTAGE OF ELECTRIFIED VILLAGES TO TOTAL INHABITED VILLAGES |
| 22 | प्रति लाख जनसंख्या पर डाक घरों की संख्या, 2010-11 NO. OF POST OFFICES PER LAKH OF POPULATION |
| 23 | प्रति लाख जनसंख्या पर एल०पी०जी० उपभोक्ता 2009-10 NO. OF L.P.G. CONSUMERS PER LAKH OF POPULATION |
| 24 | प्रति लाख जनसंख्या पर अनुसूचित वाणिज्यिक बैंकों की संख्या, 2010-11 NO. OF SCHEDULED COMMERCIAL BANKS PER LAKH OF POPULATION |
| 25 | ऋण-जमा अनुपात (प्रतिशत), 2010-11 CREDIT DEPOSIT RATIO (PERCENTAGE) |
| 26 | प्रति लाख जनसंख्या पर पंजीकृत मोटर वाहनों की संख्या, 2009-10 NO. OF REGISTERED MOTOR VEHICLES PER LAKH OF POPULATION |
| 27 | प्रति व्यक्ति आय (₹) प्रचलित भावों पर, 2008-09 PER CAPITA INCOME (₹S.) AT CURRENT PRICES |
| सामाजिक अवस्थापनायें Social Infrastructure | |
| 28 | साक्षरता प्रतिशत (कुल), 2011# LITERACY PERCENTAGE (TOTAL) |
| 29 | साक्षरता लिंगान्तर, 2011# GENDER GAP IN LITERACY |
| 30 | लिंगानुपात 2011# SEX-RATIO |

| क्र० सं० | संकेतक |
|----------|---|
| S.NO. | LIST OF INDICATORS |
| 31 | प्रति लाख जनसंख्या पर प्राथमिक विद्यालयों की संख्या, 2010-11 NO.OF PRIMARY SCHOOLS PER LAKH OF POPULATION |
| 32 | प्रति लाख जनसंख्या पर उच्च प्राथमिक विद्यालयों की संख्या, 2010-11 NO.OF UPPER PRIMARY SCHOOLS PER LAKH OF POPULATION |
| 33 | प्रति लाख जनसंख्या पर बहुधर्मों तकनीकी संस्थानों की संख्या, 2009-10 NO. OF POLYTECHNICS PER LAKH OF POPULATION |
| 34 | प्रति लाख जनसंख्या पर औद्योगिक प्रशिक्षण संस्थानों की संख्या, 2009-10 NO. OF I.T.Is. PER LAKH OF POPULATION |
| 35 | प्रति लाख जनसंख्या पर एलोपैथिक चिकित्सालयों/औषधालयों की संख्या (प्रति स्वा केंद्र सहित), 2009-10 NO. OF ALLOPATHIC HOSPITALS/DISPENSARIES PER LAKH OF POPULATION (INCLUDING P.H.Cs) |
| 36 | प्रति लाख जनसंख्या पर एलोपैथिक चिकित्सालयों/औषधालयों में शीय्याओं की संख्या(प्रति स्वा केंद्र सहित), 2009-10 NO. OF BEDS IN ALLOPATHIC HOSPITALS/DISPENSARIES PER LAKH OF POPULATION (INCLUDING P.H.Cs.) |

अवरहितम्

Annexure 5**Provisions related to VWSC in Panchayat Raj Act and GOs**

Provision in THE U.P. PANCHAYAT RAJ ACT, 1947 (U.P. Act No. XXVI of 1947) [As amended by U.P. Act No. 9 of 1994, 12 of 1994, 21 of 1995, 29 of 1995, 21 of 1998, 27 of 1999, 33 of 1999, 22 of 2001, 24 of 2001, 12 of 2004 and Act No. 44 of 2007 also Amended by Uttaranchal Amendment Act No. 7, 8 of 2002 Act No. 30 of 2005 and Act No. 5 of 2007]

¹ [29. **Committees** – (1) Notwithstanding anything to the contrary contained in any other provisions of this Act or the rules made thereunder, every Gram Panchayat shall constitute such committee or committees as may be notified by the State Government from time to time, to assist the Gram Panchayat in the performance of all or any of its functions and may delegate to such committee or committees such of its powers or functions as it may deem fit.

(2) Every committee constituted under sub-section (1) shall consist of a Chairman and six other members, who shall be elected by the members of the Gram Panchayat from amongst themselves in the prescribed manner; Provided that in each such committee there shall be at least one woman

member, one member belonging to the Scheduled Castes or the Scheduled Tribes and one member belonging to backward classes; Provided further that the State Government may, by notification, direct that the Pradhan or Up-Pradhan or any other member of Gram Panchayat shall be the Chairman of any such committee.]

30. Joint Committee – (1) Subject to such rules as may be prescribed, two or more ² [Gram Panchayat] may combine by means of a written instrument to appoint a joint committee consisting of other representatives, for the purpose of transacting any business in which they are jointly interested and may –

(a) delegate to such Committee Power, with such conditions as they may think proper to impose, to frame any scheme binding on each Gram Panchayat as to the construction and maintenance of any joint work and as to the power which may be exercised by any such Gram Panchayat in relation to such scheme; and

(b) frame or modify rules regarding the continuation of such committee and the terms of office of members thereof and the method of conducting proceedings and correspondence.

(2) If any difference of opinion arises between the Gram Panchayats acting under this section, it shall be referred to the prescribed authority whose decision thereon shall be final.

(3) Where the prescribed authority so directs, two or more Gram Panchayats shall appoint a joint committee under this section for the joint discharge of any of the functions specified in Sections 15 and 16.

¹ Subs. by U.P. Act No. 9 of 1994 again Subs. by U.P. Act No. 33 of 1999.

² Subs. by U.P. Act No. 33 of 1999

Government orders issued regarding formation of VWSC

(1) **The latest GO number 1710/38-5/2011 dated 6 September 2011 issued by NS Ravi, Principal Secretary, Rural Development, Government of UP to all ZP Chairman, DM, CDO, DDO.**

This GO refers to GO number 2211/38-5-10-30 Swajal/2010 (TC-A) dated 29.11.2010 and asks for constitution of DWSM, DWSC and VWSC as per provisions therein latest by 15.10.2011.

(2) **GO number 2211/38-5-10-30 Swajal/2010 (TC-A) dated 29.11.2010 issued by Manoj Kumar Singh, Secretary, RD, Government of UP to Executive Director SWSM** gives the composition and roles of DWSM and DWSC. It also refers to GO 820/38-5-04-sam/02/TC-II dated 13.05.2004 and states that VWSC formed under Swajaldhara will act as the GP's committee for implementation of NRDWP at GP level.

(3) **GO 820/38-5-04-sam/02/TC-II dated 13.05.2004** states that 6 committees of GP were formed through GO number 4077-33-2-99-48 G/99 dated 29 July 1999. One of these committees is Jal Prabandhan Samiti, which is responsible for operation and maintenance of tube-wells and drinking water supply schemes. This committee would be headed by one of the GP members and would act as Village Water and Sanitation Committee at the GP level.

Annexure 6

ASSESSMENT OF TRAINING INSTITUTIONS FOR RWSSP-LIS IN UTTAR PRADESH

Identification of Training Institutions

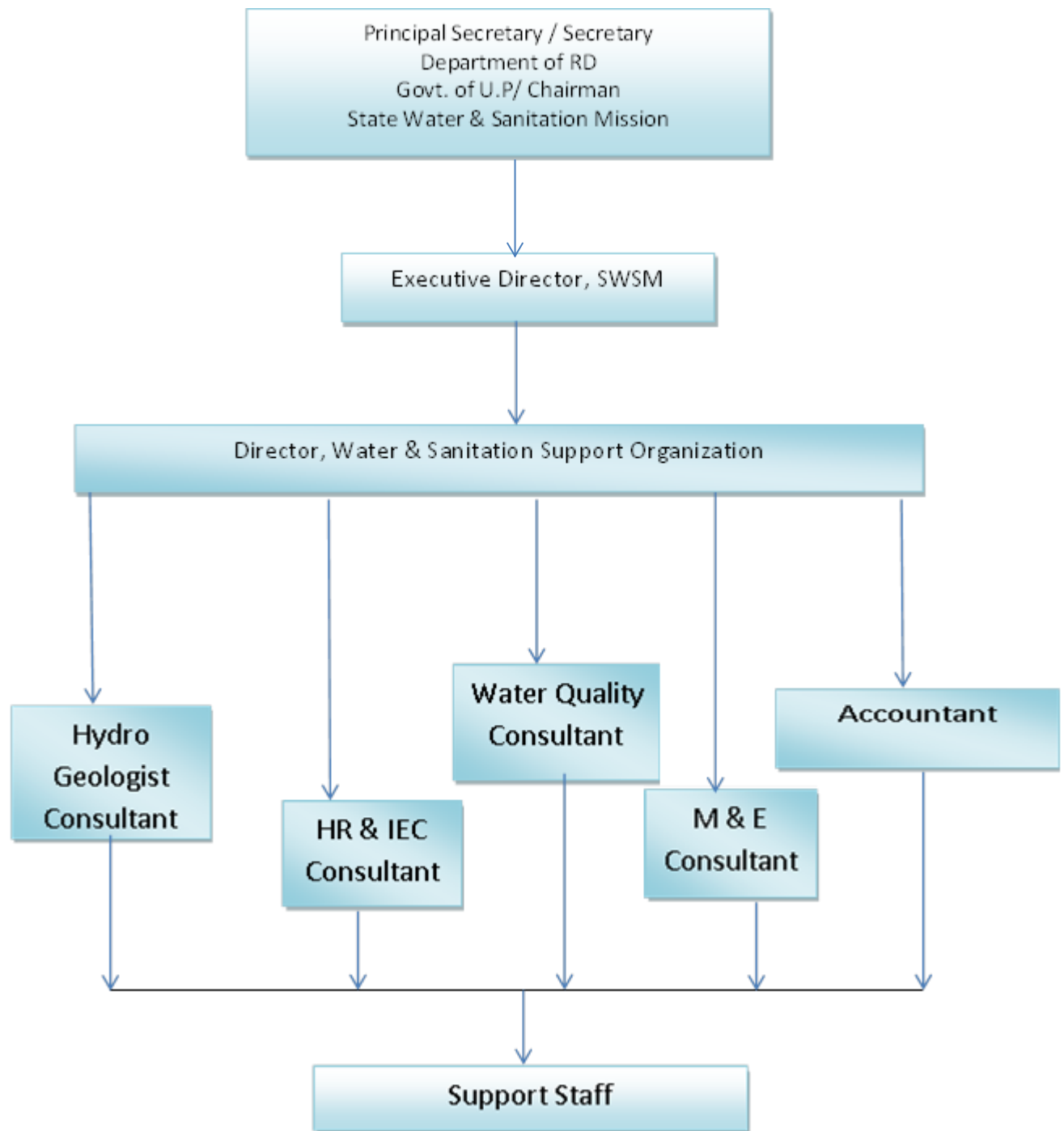
An inventory of existing institutions in the State was prepared with the objective of identifying institutions which can be engaged to undertake capacity building for the RWSSP-LIS project in UP. The list contains details of 81 institutions (Appendix A at the end of this text) based on information available from secondary sources and discussion with WSSO and training institutions. This list includes 51 training institutions of the Rural Development Department (1 State Institute, 17 Regional Institutes and 33 District Institutes).

Some of these institutions which have any experience in carrying out trainings in WATSAN sector were assessed for their capacity to provide trainings in RWSSP-LIS. The details are as follows:

| S.N | Name of the Institutions | Contact Details |
|-----|--|---|
| 1 | Water and Sanitation Support Organization, SWSM | Mrs. Meena Agarwal, Ph.No.07376889678 E mail : meena.03ag@gmail.com |
| 2 | Deen Dayal Upadhyaya State Institute of Rural Development, Bakshi Ka Talab, Lucknow. | Dr. D.C. Upadhyaya, Joint Director, Email: jddcu2012@gmail.com Ph.No.09935635737, 08765957403 |
| 3 | U.P. Academy of Administration and Management, Aliganj, Lucknow. | Mr. Markandeya Shahi, Joint Director, UPAA, Lucknow. Phone: +91-522-2335158-59 Email: upacademycc@yahoo.co.in , imdupcc@yahoo.co.in |
| 4 | Human Resource Development Cell, U.P. Jal Nigam. | Dr. S. R. Singh, Director HRD Cell, UP Jal Nigam, Ph.no.: +91-522-2202146; +91-9452086985 Email: srsingh_1234@rediffmail.com |
| 5 | Water and Land Management Institute, U.P.Irrigation Department, Utrethia, Lucknow. | Dr.O.P.Dubey, director Walmi, Ph.No. +919044461661; Email : opdubey11@gmail.com |
| 6 | UP State Institute of Health and Family Welfare, Indiranagar, Lucknow. | Prof. Nagendra Lal Shrivastava, E mail : nagendralal1958@gmail.com , Ph.No. +91- 9839774173 |

Water and Sanitation Support Organization (WSSO)

To support the existing State rural water supply and sanitation agencies, Water and Sanitation Support Organization, UP (WSSO, UP) has been set up in the State under the UP State Water & Sanitation Mission with the effect from June 04, 2010. The Organogram of WSSO is given below:



The functions of the WSSO were envisaged as:

- The organization would deal only with software aspect of RWS (Rural Water & Sanitation) sector and will not be involved in implementation of water supply and sanitation programme.
- The organization's main function would be to act as a facilitating agency and would function as a bridge between the implementing agencies viz. UP Jal Nigam, Jal Sansthan, UP Agro, Swajaldhara etc. and the Community Organizations on a selective basis.
- The WSSO would assist the PRIs (Panchayati Raj Institutions) and VWSCs (Village water & Sanitation Committee) to prepare village water security plans and implement RWS projects based on the village water security plan;
- Take up HRD and IEC activities to promote community participation and ensure water safety and security at grassroot level;
- Take up evaluation studies, impact assessment studies, R&D activities and share the finding with U.P. Jal Nigam for corrective action;
- Take up MIS and computerization programmes, GIS mapping and online monitoring systems, including those for water quality monitoring & surveillance.

However, its functions and capacities are still limited to organising routine trainings, workshops and developing IEC materials, all of which appear to be isolated activities, independent of the project needs and design. The WSSO is severely constrained by the fact that it works under the directions of the SWSM with limited decision making powers and financial control. Besides, the WSSO has no connection or truck with the CCDU created under NBA in the PRD, although the NRDWP states that even where sanitation and water are under two separate departments and where hence two separate CCDUs have been set up, these should work in close coordination with a single WSSO.

Thus, WSSO's role in RWSSP-LIS in UP would be to manage the contract of nodal training institutions rather than directly imparting training.

Deen Dayal Upadhyaya State Institute of Rural Development (SIRD), Bakshi Ka Talab, Lucknow

SIRD was originally established in 1954 and renamed as Deen Dayal Upadhyay State Institute of Rural Development in 1991. The Institute is an apex body of state government for imparting training, conducting research and providing consultancy. **It is an umbrella Institute of Department of Rural Development, Govt. of Uttar Pradesh, having 17 RIRDs and 33 DIRDs at district level.**

SIRD's mission is to 'enable people-centric, equitable development at grass-root level'. It recognizes that capacity building of institutions and individuals is critical for effective public service, the institute aims to achieve comprehensive augmentation of

skills of the human resource in various sectors at multiple layers of governance, including that of the elected representatives of local self-governments.

The Institute with its constituents (RIRDs/DIRDs) endeavors to promote and provide help in achieving development of rural communities, especially the rural poor. It carries years of experience and expertise of:

- Conducting training programs including conferences, seminars and workshops for senior and middle level development managers.
- Undertaking, aid, promoting and coordinating research.
- Providing Consultancy Services to Government and Non-government organizations and other agencies like Consumer Protection, Bureau of Indian Standards, ICDS, RTI, NACO, NIDM, UNICEF etc. in their work pertaining to Rural Development.
- Disseminating information through periodicals, papers and books in furtherance of the basic objectives of the Institute

SIRD reaches out through 17 Regional Institutes of Rural Development in 15 Districts, 33 District Institutes of Rural Development in 33 Districts and plans to further spread to 27 new districts, through the proposed 27 new DIRDs.

The infrastructure at SIRD is summarized in the table below:

Table: Infrastructure at SIRD

| | | | |
|----|---|---|--|
| 1. | Total Area of the Institute Premises | : | 13.5 Acre |
| 2. | Number of Buildings | : | 72 (Including Residential) |
| 3. | No. of Hostels with Capacity | : | 03 hostels with 170 beds |
| 4. | No. of Conference/ Auditorium halls with Capacity | : | 1 A.C. 200 Seats |
| 5. | No. of Lecture halls with Capacity | : | Lecture hall No.-1 AC-60 Capacity Lecture Hall No.-2 AC-30 Capacity Lecture Hall No.-3 AC-30 Capacity Lecture Hall No.-4 AC-30 Capacity |
| 6. | Details of the Recreation Facilities (Indoor/Outdoor) | : | Table Tennis Badminton Court Gymnasium Recreation room |
| 7. | Numbers of Staff Quarters | : | 54 |
| 8. | Stand by Generator Facility Available or Not | : | Available |
| 9. | Number of Computers | : | 55 |

| | | | |
|-----|---|---|---|
| 10. | Number of Vehicles with details Staff Bus Cars/Jeeps etc | : | a. Ambassador Car-02 b. Tempo Traveller-01 (to be condemned) c. Armada Jeep- 02 d- Toyota Qualis- 01 e- Toyota Innova-01 f- Mahindra Jeep-01 (to be condemned) |
| 11. | Details of AV Equipments | : | Video Camera-03 OHP-03 Still Cameras-04 LCD Projector-04 |
| 12. | Number of Xerox/Photocopy Machines | : | 02 |
| 13. | Library Facilities Number of Books No. of Journals & Periodicals etc. | : | Books-9825 Journals-30 Periodicals-09 News paper-12 Other-25 |

Infrastructure and Faculty position at RIRDs/DIRDs (Under Administrative control of SIRD) is given in the table below:

Table : Infrastructure and Faculty position at RIRDs/DIRDs

| S.No | Name of Institution | Participant's capacity for training (in nos.) | Infrastructure facilities | | Number of in-house faculties (RIRDs/DIRDs) |
|------|--------------------------------|---|---|---|--|
| | | | Availability of administrative and establishment facility | Accommodation capacity for trainees (in nos.) | |
| 1 | RIRD Afim ki kothi Pratapgargh | 250 | Available | 250 | 12 |
| 2 | RIRD Doharighat Mau | 80 | Available | 150 | 11 |
| 3 | RIRD Baraut Bagpat | 170 | Available | 120 | 14 |
| 4 | RIRD Badaun | 170 | Available | 90 | 07 |
| 5 | RIRD Raibarely | 140 | Available | 100 | 14 |
| 6 | RIRD Faizabad | 200 | Available | 160 | 16 |
| 7 | RIRD Kalakankar Pratapgargh | 190 | Available | 50 | 11 |

| | | | | | |
|----|-----------------------------|-----|-----------|-----|----|
| 8 | RIRD Gorakhpur | 250 | Available | 180 | 10 |
| 9 | RIRD Bulandshahar | 160 | Available | 100 | 08 |
| 10 | RIRD Mainpuri | 210 | Available | 175 | 08 |
| 11 | RIRD Lakhawati Bulandshahar | 180 | Available | 100 | 13 |
| 12 | RIRD Gazipur | 70 | Available | 175 | 10 |
| 13 | RIRD Etawah | 265 | Available | 120 | 10 |
| 14 | RIRD BKT Lucknow | 190 | Available | 150 | 16 |
| 15 | RIRD Agra | 160 | Available | 80 | 12 |
| 16 | RIRD Jhansi | 240 | Available | 108 | 10 |
| 17 | RIRD Saharanpur | 50 | Available | 170 | 11 |
| 18 | DIRD Dadri Gautambudhnagar | 50 | Available | 32 | 04 |
| 19 | DIRD Mujffurnagar | 100 | Available | 60 | 04 |
| 20 | DIRD Bareilly | 50 | Available | 30 | 04 |
| 21 | DIRD Shahajahanpur | 100 | Available | 48 | 04 |
| 22 | DIRD Bijnor | 35 | Available | 15 | 04 |
| 23 | DIRD Unnao | 80 | Available | 70 | 04 |
| 24 | DIRD Barabanki | 80 | Available | 80 | 05 |
| 25 | DIRD Baharaich | 60 | Available | 48 | 04 |
| 26 | DIRD Jaunpur | 100 | Available | 50 | 04 |
| 27 | DIRD Mirzapur | 50 | Available | 40 | 05 |
| 28 | DIRD Deoria | 60 | Available | 58 | 04 |
| 29 | DIRD Basti | 50 | Available | 24 | 04 |
| 30 | DIRD Kannauj | 150 | Available | 25 | 04 |

| | | | | | |
|----|----------------------|-----|-----------|-----|----|
| 31 | DIRD Lalitpur | 150 | Available | 26 | 04 |
| 32 | DIRD Aligargh | 100 | Available | 70 | 04 |
| 33 | DIRD Rampur | 50 | Available | 50 | 04 |
| 34 | DIRD Gonda | 100 | Available | 48 | 04 |
| 35 | DIRD Vanarasi | 50 | Available | 20 | 04 |
| 36 | DIRD Allahabad | 90 | Available | 100 | 04 |
| 37 | DIRD Banda | 200 | Available | 80 | 04 |
| 38 | DIRD Balia | 60 | Available | 30 | 05 |
| 39 | DIRD Kanpur | 90 | Available | 65 | 05 |
| 40 | DIRD Urai Jalaun | 200 | Available | 48 | 04 |
| 41 | DIRD Eatah | 50 | Available | 30 | 04 |
| 42 | DIRD Mathura | 100 | Available | 100 | 04 |
| 43 | DIRD Pilibhit | 150 | Available | 40 | 04 |
| 44 | DIRD Hardoi | 200 | Available | 60 | 04 |
| 45 | DIRD Sitapur | 200 | Available | 70 | 04 |
| 46 | DIRD Lakhimpur Khiri | 50 | Available | 30 | 04 |
| 47 | DIRD Sultanpur | 100 | Available | 80 | 04 |
| 48 | DIRD Fatehpur | 100 | Available | 50 | 04 |
| 49 | DIRD Hamirpur | 100 | Available | 50 | 05 |
| 50 | DIRD Moradabad | 50 | Available | 35 | 04 |

Core training programmes held at SIRD, RIRDs & DIRDs in 2012-13 include: (1) Foundation Courses for R.D. officials, (2) Decentralized Planning & Gender Budgeting, (3) Training of all functionaries including non-officials associated with R.D. schemes and Programmes, (4) Training of all tiers PRI representatives, (5) Planning and Execution of Poverty Alleviation Programmes, (6) Training of Trainers, (7) Women & Child Development schemes/programmes, (8) Effective Communication Tools & Management of Rural Development, (9) Role of NGOs in Rural Development, (10) Watershed Management, (11) Project Management, (12)

National Rural Drinking Water Programme (13) Disaster Management, (14) Lab to Land initiatives – BNVs

SIRD also organizes the following Rural Development Exposure programmes including: (1) 5 days programme for IAS probationers on Agrarian Structure & Rural Development in UP, (2) 5 days Rural Development Exposure programme for PCS probationers, (3) One week village attachment programme for Central Secretariat officers.

The SIRD has the faculties in Rural Development Administration, Rural Technology, Soil Conservation and Water Management, Agriculture and Animal Husbandry, Economic, Monitoring and Evaluation, Human Resource Development (HRD), Project Management and Women & Child Welfare.

The HRD Faculty focuses on following subjects regarding training, research and consultancy independently and jointly with others:

- Training Programmes of RD and PRIs.
- Education for all, Adult Education, Alleviation of illiteracy, Participatory Education, Gender issues in Education, trainings, research activities and impact studies in different areas regarding Education.
- **Programmes on TSC and National Rural Drinking Water.**
- **Formulation of I.E.C. Strategies on Rural Drinking Water**, Women PRIs and Family Welfare Issues.
- Programmes on SC/ST and Gender Issues.
- To arrange the trainings for SIRD/RIRD/DIRD faculties in different areas after assessing the training needs.
- **To conduct TOTs and all types of training courses under the programme of NRDWP for PRIs and grass-root level functionaries in every district of Uttar Pradesh.**
- Nomination of faculty members for Training Programmes in different Training Institutions.

In short, Human Resource Development faculty focuses mainly on policies, delivery systems and peoples participation relating to the macro level HRD interventions, namely PRIs, Rural Drinking Water, Environmental Sanitation, Rural Health Care, Education, Human Development, Woman Empowerment under Panchayati Raj structure, training and capacity building of PRIs Representatives, Governmental and Non-governmental functionaries.

At the grass-root level HRD faculty activities focus on organizational and behavioral development in the area of Health, Nutrition, Personal Hygiene, Environmental

Sanitation, Women Empowerment, Interpersonal Communication and HIV/AIDS, Primary Education, Safe Drinking Water, SC/ST Issues, Gender Issues and Community Driven Development Programmes, also focusing in the area of research and consultancy.

In the recent past years, HRD faculty has organized regular Training Programmes on Rural Development along with the training Programmes sponsored by the department of Panchayati Raj, State Mid-Day-Meal authority of U.P., Education, National commission for SCs/STs Government of INDIA, UNICEF, SWSM, WSSO and NIRD Hyderabad.

HRD Faculty has already developed training modules and study literature on Panchayati Raj (for all levels) subject under the 73rd amendment of constitution for elected Panchayat representatives and government functionaries for the P.R.I.s. HRD faculty organized 1231 Training courses and trained 36840 Panchayat Representatives through SIRD and RIRDs/DIRDs.

The HRD faculty conducted a very important Programme based on the components viz. Health, Nutrition, Personal Hygiene, Environmental Sanitation, Immunization, Women Empowerment, Interpersonal Communication and HIV/AIDS through the project "Behavior Change Communication" was supported by UNICEF Lucknow, implemented by Distt. Institute of Rural Development, Roda, Lalitpur at all the Blocks of Distt. Lalitpur for the newly elected Women Gram Panchayat Pradhans/ Representatives.

At present, a very useful training programme, for rural community, is running statewide by HRD faculty through RIRDs/DIRDs based on **National Rural Drinking Water Quality monitoring and** surveillance. In the past 3 years, in the first phase TOTs (Training of Trainers) were conducted at SIRD, Lucknow, which developed 181 Master Trainers. This was followed by two days training courses for Governmental and Non-Governmental functionaries (covering 1,94, 618 numbers) at community level, by RIRDs/DIRDs through state-wide in 53 districts of Uttar Pradesh. In every training course, 30 participants have been trained from 5 Gram Panchayats. Thus 6 persons (AWW, ANM/ASHA, Shiksha Mitra/Science Student of Intermediate passed, Gram Pradhan/Panchayat Ward Member, Member of VWSC, Panchayat Mitra/SGSY Motivator and Social Activist) have been trained from each Gram Panchayat in 53 Districts of U.P. Regarding the above said Training Programme, till today the physical achievement is 1,94,618 trained grass-root participants.

The second phase of the above programme has covered 4 TOTs at SIRD and developed 217 Master Trainers through these TOTs. After that 03 days training courses for 1 lack participants of community level (VWSC Members) are currently being organized in the RIRDs/DIRDs in the year of 2012-13. Holistically, the total target of 2, 60,000 grass-root participants (VWSC members) are to be trained under this training programme of NRDWP in three years. Other proposed programmes include: Training for all DWSC members of all Districts of U.P. at SIRD, BKT, Lucknow on "National Rural Drinking Water Programme" and repair of India Mark-II hand-pumps, a technical skill development training for Hand-pumps mechanics, to be organized at RIRDs/DIRDs.

To give impetus to Training, Research and consultancy activities, following initiatives

have been taken up by the SIRD:

A. Center for Development Action (CDA)

SIRD and its constituents Institutes being State Govt. department, financial and functional autonomy becomes difficult, which is so essential for the efficient functioning of education training and research Institutes. Against this backdrop, Center for Development Action (CDA) has been constituted and registered under the Societies Registration Act 1860. The Center is governed by a Board of Directors having experts and representative of other State level Training Institutes. With the establishment of CDA, necessary functional autonomy will be ensured.

B. Centers of Excellence

With a view to develop expertise and specialization in different areas of governance, keeping in view the changing needs of development administration and to equip Govt. machinery to cop up with the challenges of vagaries of sudden and extreme climatic changes and the management thereof, following centers of excellence have been established:

I. Center for Peoples Participation Transparency and Accountability:

To address the needs of capacity building for successful grass-root democracy.

II. Center for Health, Hygiene and Nutrition:

To cater to the needs of capacity building and awareness among general public regarding importance of hygiene and nutrition and management of public health.

III. Center for Environment and Sanitation:

To cater to the needs of capacity building, awareness and importance of safe and sustainable water resources and environmental sustainability.

IV. Center for Disaster Management:

To cater to the needs of capacity building, awareness among general public and government machinery to cop up with the challenges of sudden and extreme climatic changes and the management of thereof

V. Center for Watershed & Natural Resources Management:

To cater to the needs of capacity building and awareness for efficient and sustainable management of watershed and other natural resources.

C. Satellite communication (SATCOM) Network:

- With collaboration of ISRO and financial assistance of GOI, the SATCOM

Project is under implementation.

- Earth Station/hub and studio at SIRD and
- 10 SITs at district level are being established in the first phase.

With the facility two-way interactive virtual training programmes will be organized

D. National Key Resource Center for Drinking Water and Sanitation

The Ministry of Drinking Water and Sanitation Government of India has nominated SIRD, UP as National Key Resource Center in the field of Drinking Water and Sanitation.

The above note makes it clear that SIRD is one institution which has some experience of organizing programs in WATSAN sector and the institution is willing to undertake trainings in the RWSSP-LIS project in UP. It is, therefore, a probable nodal training institution for RWSSP-LIS; of course requisite strengthening support, in consultation with them, would be needed to enable them to act as nodal training institution.

Uttar Pradesh Academy of Administration and Management (UPAAM)

The Uttar Pradesh Academy of Administration and Management (UPAAM) is the premier training institute for the State and is responsible for training the human resources not only from various Government Departments but also from public and private sectors, corporate entities, voluntary organisations, and civil society representatives.

Areas of training

The UPAAM conducts various foundation and in service courses for PCS officers and institutional programmes for IAS and IFS officers. UPAAM has the experience of conducting programmes including DTS, DOT, MOT, TNA, right to information, public private partnership in service delivery, human rights, issues relating to family welfare- woman & child, Basic Computer Awareness, MS-WORD & MS-PPT, stress management, urban governance, human resource management, empowerment of women, training in earthquake disaster management for revenue officers, training of engineers in earthquake resistant construction techniques, training in fire disaster management, formulation of district disaster management plan, effective communication in government, innovation in administration for improving delivery service to the public-regional centre, financial management in govt. organization, minorities welfare, social & urban forestry, decentralized planning, climate change, double entry accounts systems.

The UPAAM has also three Cells within it. These are Disaster Management Cell (DMC), RTI Cell and DFID Cell.

The Disaster Management Cell (DMC) functions as the nodal agency for Human

Resource Development in the State, in the area of Disaster Mitigation and Response. It networks with DMCs of other States, State Institute of Rural Development, other Training Organizations set-up by other Departments, national NGOs and Community-based Organizations (CBOs) involved in the field of Disaster Management.

RTI Cell activities include Training Programmes, Workshops, Seminars related to RTI, RTI Training module for PIO/APIO, NGO and Appellate Authority.

Department for International Development (DFID) Project Cell is executing an externally aided project on Capacity Building for Poverty Reduction through improvement in Public Service Delivery system. This project is supported by DFID and is being centrally implemented by the Department of Administrative Reforms and Public Grievances. The Academy has selected two districts Sultanpur and Barabanki for implementation of this project and has further identified the service sectors of Revenue Administration for Barabanki and Rural Development for district Sultanpur.

Infrastructure

The Academy has well equipped lecture halls having Wi-Fi broadband Internet access facility, comfortable seating arrangement and digital LCD projectors, which provides standard and comfortable environment for study and training.

The Academy is equipped with two ultra-modern computer labs to impart training in computer application. One lab is equipped with twenty and the second lab is equipped with ten computers respectively.

The Academy has well equipped conference halls having Wi-Fi broadband Internet access facility, comfortable seating arrangement and digital LCD projectors. These provide standard and comfortable environment for study and training.

The Hostel of the Academy is within the Academy premises and has 56 double room bedded and 120 single bedded wall to wall carpeted and air-conditioned rooms with attached toilet and bath equipped with various kinds moderns gadgets and amenities of both Indian and western style to facilitate comfortable stay of the participants. In order to ensure stay arrangement befitting the status of the learned guest faculty, 4 special double bedded well-furnished fully air-conditioned rooms having attached toilet and bath facility are also available in the Hostel of the Academy. There is a permanent Mess arrangement with the cooking facility of North Indian, Chinese and Continental dishes according to the choice of the participants

UPAAM also has a centrally air conditioned auditorium with a capacity of more than 200 persons and all modern amenities with separate dining halls.

The above description makes it clear that the UPAAM has negligible experience in water and sanitation sector. However, it has the desired clout to ensure participation from different departments of the government in the state and other institutions in the country. It can also be thought of as a probable nodal training institution for the RWSSP-LIS project in UP.

State HRD Cell, U.P. Jal Nigam

Following the technical and financial sanction of Govt. of India for the establishment of HRD Cell and Conduct of Grass Root Level Training programmes in various themes, U.P. Jal Nigam vide its office order No. 116/Pra-1/HRD Cell/9 dated 13/5/96 established the HRD Cell within U.P. Jal Nigam with subsequent approval of the State Govt. vide its G.O. No. 1575/38-5-99-657/97 dated 26.4.99 for capability and capacity building of beneficiaries at grass root level, so that all the villages of the State of Uttar Pradesh may have skilled persons at their door steps for construction, operation and maintenance of infrastructures related to water supply and sanitation schemes.

The focal themes selected for training purpose are, hand pump mechanics (pipe line fitters for piped water supply systems, masons for construction of low cost latrines and other sanitation facilities, health & hygiene promotion and community participation. The norms of the mission suggest training at least one person from every village in one of the aforesaid focal themes. The Staffing pattern approved by State Government G.O. No. 1575/38-5-99-657/97 dated 26.4.99 is as follows:

Staff

| Sl. No. | Designation | Sanctioned By GOI/U.P. Govt. | Current status | Comments |
|---------|--------------------------------------|------------------------------|----------------|--|
| 1. | Executive Director | 1 | 1 | CE-Rural is ex-officio ED |
| 2. | Director | 1 | 1 | |
| 3. | Deputy director(Now Joint Director) | 2 | 1 | One post vacant. Post of Deputy Dir. Upgraded to J.D. and Asst. Director to DD by UPJN |
| 4. | Asst. Director(Now Deputy Director) | 6 | 2 | 4 positions vacant |
| 5. | Field officer | 12 | 4 | 8 positions vacant |
| 6. | Accountant | 1 | - | Position vacant |
| 7. | Accounts/Routine Clerks | - | 2 | |
| 8. | Steno-cum-PS | 4 | 2 | |
| 9. | Data entry operator | 2 | 1 | Contractual |
| 10. | Drivers | 4 | 1 | |
| 11. | Attendant | 4 | 3 | |

Water and Land Management Institute WALMI (Lucknow)

The WALMI came in to existence during 1984 under World Bank aided, Upper Ganga Irrigation Modernization Project. The basic objectives were to train farmers

and the line agency officials of the Irrigation Department Uttar Pradesh.

In the year 1998, Uttar Pradesh State Water Policy – 1998, was proclaimed. Consequently the WALMI became the hub of the training activities. Consequently many new activities sprouted in addition to the conventional activities. The new domain of activities was:

- Participatory Irrigation Management (PIM)
- Capacity Building of Water User Associations (WUA)
- Monitoring and Evaluation of PIM activities
- Monitoring and Evaluation of Water Resources projects

The above mentioned activities were utterly untried. The institute took the challenge to move abreast with the time honored demand. Consequently the institute left no stone unturned in meeting out the expectations. This was possible through mobilizing in house capability, hiring experts from open market and collaboration with other institutes.

Infrastructure:

The infrastructure at WALMI in Lucknow includes:

- 3 lecture halls (with capacity of seating 50, 30 and 30 persons) with basic facilities including air conditioners, overhead projector, laptop, sound system, white board, chairs etc.
- One conference hall with basic facilities including air conditioners, overhead projector, laptop, sound system, white board, round table and chairs etc.
- One auditorium with air conditioners, sound system, dias, change room, 4 toilets, serving stage, kitchen etc
- 60 (40 single and 20 double) rooms in the hostel of WALMI with basic facilities such as attached washroom with Geyser etc, double bed, Air Cooler/Air Conditioner (in few rooms), study table, chairs etc.. The hostels have 24 hours water and electricity supply, 24 hours two attendants for hostel assistance; and mess facility etc.
- A farm of 6.4 hectares for agriculture demonstration, adaptive trial and action research

WALMI has also a campus in OKHLA, New Delhi. This has one lecture hall for 35 persons and a hostel with 16 rooms.

Current Activities

Presently the institute is involved with a conglomeration of multifaceted activities. Some of the current activities structured by the WALMI are:

- Foundation Courses and refresher courses for Officials and officers
- Training in different domain of Water and Land Management to all the stake holders of Land and Water, for example, farmers, Water User Associations, Local government bodies, officials and officers of Irrigation Department, Agriculture Department, Command Area Development Authorities of the state of Uttar

Pradesh and NGOs

- Capacity Building of all the stake holders in relevant applied science and engineering aspects
- Sensitization of Water Resources Stake holders in PIM
- Conducting focused training program on Application of Computers
- Conducting focused training program in Remote Sensing and Geographical Information System
- Conducting Monitoring and Evaluation of Irrigation Projects
- Performance Evaluation of Water Resources Projects
- Providing consulting in various aspects of the land and water management and agricultural management to Ministry of water Resources (MoWR)
- Pilot Projects and Action Research Projects
- Socio Economic Surveys and Impact Assessment
- Environmental Surveys and Impact Assessment
- Organizing National Seminars and workshop for knowledge dissemination
- Development of training modules

From above description it is clear that the role of the WALMI is dynamic that is changing from time to time. From a modest beginning its role kept changing over time and now its role is multifaceted and specialized.

Plans for Activities

- Nodal Institute for Capacity building in Water and Land Sector Management
- Nodal Institute for organizing training program in applied Research in Land and Water sector
- Filling gap in the area of research and field application in land and water sector
- Water and Land Information system
- Nodal institute for development of Optimal Water and Land Management Plan
- Nodal Institute for carrying out Demonstration and adaptive trial studies
- Monitoring and Evaluation of Water Resources projects

State Institute of Health and Family Welfare (SIHFW)

State Institute of Health & Family Welfare (SIHFW), Uttar Pradesh, Lucknow is an apex institute of State for Training and Research in the area of Medical, Health and Family Welfare. The Institute was previously known as Population Centre and was established in the year 1973 - 74 under India Population Project – 1.

At present the Institute along with several types of training programmes for different levels of personnel working in the Health and Family Welfare Department, is also conducting research and evaluation studies. Of late the Institute has also been providing technical support to some private sector organizations and Non Government Organizations, working in the area of Health & Family Welfare. The institute provides technical support to a vast training infrastructure in the state i.e. 1 Tutor training center, 4 Health supervisors training centers, 11 Divisional Health and Family Welfare Training Centers and 70 district level training centers (ANM Training

Centre/ District Periphery Team).

Areas of training

The training programs conducted by SIHFW include: Foundation course for Medical Officers, ASHA district trainers ToT, workshop on training policy design, management development training for field level managers, material development and content finalization for Dai training, trainer's skill development, ToT on reproductive and child health, workshop on IEC/BCC, ToT on HIV/AIDS, orientation of AYUSH doctors, and hospital management etc. The SIHFW has also experience of conducting studies of different types, such as survey & fact finding, analytical studies, evaluation studies, experimental & case studies and opinion studies in the health sector.

Infrastructure

The Institute has its own campus which is located at Indira Nagar. It has an Administrative Block, Training Block, 2 Hostels, 1 Guest House and Library Building in addition to Residential area for its employees. SIHFW has one Conference Hall (having capacity of 100 people), one Seminar Room, and two Lecture Rooms (with a capacity of 40 participants each). The Institute has its own mess facility along with the hostel facility. At a time the hostels can accommodate about 85 participants.

The Institute has a recreation hall along with the facilities like Television, Table Tennis, Badminton, Chess, Carom Board etc. for the participants. The SIHFW has its own library, with more than seven thousand books and periodicals. There is a photography unit which helps in documentation of various activities. All these facilities provide a congenial atmosphere for the training.

Staff

Faculty (Training)

| Designation | Discipline | No. Sanctioned | No. in Position |
|---------------------|---|----------------|-----------------|
| Professor | -Education & Training -Community Health | 2 | 1 |
| Associate Professor | -Planning & Management -Statistics & Demography -Organizational Behaviour | 3 | 2 |

| | | | |
|---------------------|--|----|---|
| Assistant Professor | -Programme Evaluation -Communication -Health & Extension Education -Epidemiology -Training -Statistics & Demography -Social Science -Computer Science -Management & Public Health Administration. -Behavioral Science | 10 | 4 |
|---------------------|--|----|---|

Research Staff

| Designation | Number- Sanctioned | Number- in Position |
|-------------------------------|--------------------|---------------------|
| Joint Director | 1 | - |
| Assistant Director | 1 | 1 |
| Research Officer | 4 | 1 |
| Research Assistant | 15 | 3 |
| Investigator – Cum – Computer | 2 | 1 |

I.T. Staff

| Designation | No. Sanctioned | No. in Position |
|---------------------|----------------|-----------------|
| System Analyst | 1 | - |
| Computer Programmer | 2 | 2 |
| Machine Operator | 1 | - |
| Punch Operator | 2 | 1 |

Support Staff

| Section | Designation | No. Sanctioned | No. in Position |
|---------------|-------------------------------------|----------------|-----------------|
| Accounts | -Senior Finance & Accounts Officer | 1 | 1 |
| | -Asstt. Accountant | 1 | - |
| Establishment | -Dy. Director (Admn.) | 1 | - |
| | -Personal Assistant | 2 | 2 |
| | -Stenographer | 2 | 2 |
| | -Office Superintendent | 2 | 1 |
| | -Senior Assistant | 2 | 1 |
| | -Senior Clerk | 2 | 2 |
| | -Junior Clerk | 5 | 5 |
| Others | -Sr. Librarian | 1 | - |
| | -Librarian | 1 | - |
| | -Warden | 1 | - |
| | -Cataloguer | 1 | 1 |
| | -Photographer | 1 | 1 |
| | -Driver | 6 | 6 |
| | -Tubewell operator cum Electrician. | 1 | 1 |
| | -Mess Staff | 6 | 6 |
| | -Class-IV | 13 | 11 |
| | -Sweeper (Part Time) | 2 | 2 |

Engineering Institutions

Some of the engineering institutions in the state that are providing technical assistance in water supply in the state and working as STA (State Technical Agency) are as follows.

- Department of Civil Engineering (Environmental Engineering), IIT, Kanpur
- Training on Water Quality Assessment for Routine Parameters, Trace Level Metals & Organics from various water supply depts.
- Dept. of Civil Engineering (Environmental Engineering), Aligarh Muslim University, Aligarh
- Department of Civil Engineering (Environmental Engineering),
- Bundelkhand Institute of Engineering and Technology, Jhansi.
- Department of Civil Engineering (Environmental Engineering), Motilal Nehru

Institute of Technology, Allahabad.

- Madan Mohan Malviya Engineering College, Gorakhpur.
- Department of Civil Engineering (Environmental Engineering), Institute of Technology, Banaras Hindu University, Varanasi.

These institutions could possibly also provide technology related training for the project.

Relevant Institutions outside the state

Keeping in view availability of few institutions in the state, RWSSP-LIS project in UP would need to take the help of other specialized institutions in other states. Some of these are listed below:

1. Engineering Staff College of India (ESCI), Hyderabad
2. National Institute of Rural Development (NIRD)
3. Administrative Staff College of India (ASCI)
4. NIH, Roorkee
5. XLRI, Jamshedpur
6. AIPHH, Kolkata
7. IRMA, Anand, Gujarat
8. CEC, Chennai Change Management Workshop
9. CSE, New Delhi

CONCLUSION

In view of the large quantum of training and capacity building activities envisaged under RWSSP-LIS project in UP, the first critical step would be to streamline the role of WSSO (as capacity building wing of SWSM). It would not be possible for them to conduct a wide range of training programs requiring specialized inputs of varying duration on their own. Hence, it may be appropriate to position WSSO as the key agency at the state level for management of training and capacity development initiatives. This role for WSSO shall focus primarily on:

- training management functions such as contract management of training institutions,
- facilitating development of standardised training manuals,
- monitor the trainings conducted by the institutions hired for the purpose,
- contract management for impact assessment studies,
- review the feedback of training programs from the participants and suggest corrective measures for improvement in the training schedules/ modules,
- follow-up visits to project districts and assessment of transfer of learning at the field level,
- coordinating with the DPMUs and training institutions to ensure that trainings are conducted as per the requirements and timings of the scheme cycle.
- ensure carrying out the training needs assessment on a continuous basis at the beginning of each phase of each batch and prepare action plans for trainings at

various stages of the scheme cycle.

The institutional resource available within the state and their possible role in capacity development in RWSSP-LIS in UP is given in the Table below:

Table: Training institutions and their possible role

| Sl. No. | Training Institution | Possible Role |
|----------------|--|---|
| 1 | Deen Dayal Upadhyaya State Institute of Rural Development (SIRD) (along with RIRDs/DIRDs under their control) | conduct training of trainers, policy level workshops and develop standardised training manuals and materials for grass root level trainings; Can act as nodal training institution/capacity building agency |
| 2 | UP Academy of Administration and Management (UPAAM) | conduct training of trainers, policy level workshops, DoT, DTS, MoT and develop standardised training manuals and materials for grass root level trainings. Can act as nodal training institution/capacity building agency |
| 3 | HRD Cell, UP Jal Nigam | training of plumbers, mechanics, pump operators and masons, training on FTKs for water quality monitoring |
| 4 | Water and Land Management Institute (WALMI), U.P. Irrigation Department, Utrethia, Lucknow. | The institution could be used for accessing the logistics support for organising training events. |
| 5 | UP State Institute of Health and Family Welfare, Indiranagar, Lucknow. | The institution could be used for accessing the logistics support for organising training events. |

| | | |
|----|---|---|
| 6 | Department of Civil Engineering (Environmental Engineering), IIT, Kanpur | <p>State Technical Agency with following role:</p> <ul style="list-style-type: none"> • assisting in planning and design of scientifically sound and cost effective holistic rural water supply schemes with special emphasis on sustainability of sources and systems. • Evaluate technologies/DPRs/ Conduct Impact Assessment studies on specific cases • Supportive supervision (SS)/ 3rd Party monitoring • Advice for hiring the services of technical experts |
| 7 | Dept. of Civil Engineering (Environmental Engineering), Aligarh Muslim University, Aligarh | As above |
| 8 | Department of Civil Engineering (Environmental Engineering), Bundelkhand Institute of Engineering and Technology, Jhansi. | As above |
| 9 | Department of Civil Engineering (Environmental Engineering), Motilal Nehru Institute of Technology, Allahabad. | As above |
| 10 | Madan Mohan Malviya Engineering College, Gorakhpur. | As above |
| 11 | Department of Civil Engineering (Environmental Engineering), Institute of Technology, Banaras Hindu University, Varanasi. | As above |
| 12 | NIH, Roorkee | Functions of STA as above. Also, hydrology related issues |

| | | |
|----|--|--|
| 13 | Engineering Staff College of India (ESCI) | training of engineers on the technical aspects |
| 14 | National Institute of Rural Development (NIRD) | The experience and expertise of NIRD could be utilised/ accessed to undertake impact assessment of trainings conducted. They could also help in designing training courses. |
| 15 | Administrative Staff College of India (ASCI) | The institution offers training program on World Bank Procurement Systems and several other management development programs. In context of Human Resource Development, some of the programs are useful for senior project management, such as strategic human resource management, communication skills for managers, team building and conflict management etc. |
| 16 | XLRI, Jamshedpur | Participatory approaches in rural drinking water supply and sanitation |
| 17 | AIPHH, Kolkata | Water quality monitoring and surveillance |
| 18 | IRMA, Anand, Gujarat | Improving Managerial Skills of Drinking Water and Environmental Sanitation Functionaries |
| 19 | CEC, Chennai CSE, New Delhi | Community participation related trainings, Change Management Workshops |

List of training institutions in Uttar Pradesh

| S.N | District | Name and Address of the Training Institute |
|------------|-----------------|---|
| 1 | Lucknow | Deen Dayal Upadhyaya State Institute of Rural Development, Bakshi Ka Talab, Lucknow |
| 2 | Pratapgarh | Regional Institute of Rural Development, Afim ki kothi, Pratapgarh. |
| 3 | Mau | Regional Institute of Rural Development, Doharighat Mau |
| 4 | Bagpat | Regional Institute of Rural Development, Baraut Bagpat |
| 5 | Badaun | Regional Institute of Rural Development, Badaun |
| 6 | Raibareli | Regional Institute of Rural Development, Raibareli |
| 7 | Faizabad | Regional Institute of Rural Development, Faizabad |
| 8 | Pratapgarh | Regional Institute of Rural Development, Kalakankar Pratapgarh |
| 9 | Gorakhpur | Regional Institute of Rural Development, Gorakhpur |
| 10 | Bulandshahar | Regional Institute of Rural Development, Bulandshahar |
| 11 | Mainpuri | Regional Institute of Rural Development, Mainpuri |
| 12 | Bulandshahar | Regional Institute of Rural Development, Lakhawati Bulandshahar |
| 13 | Ghazipur | Regional Institute of Rural Development, Ghazipur |
| 14 | Etawah | Regional Institute of Rural Development, Etawah |
| 15 | Lucknow | Regional Institute of Rural Development, BKT Lucknow |
| 16 | Agra | Regional Institute of Rural Development, Agra |
| 17 | Jhansi | Regional Institute of Rural Development, Jhansi |
| 18 | Saharanpur | Regional Institute of Rural Development, Saharanpur |
| 19 | Gautambudhnagar | District Institute of Rural Development, Dadri Gautambudhnagar |
| 20 | Mujaffarnagar | District Institute of Rural Development, Mujaffarnagar |
| 21 | Bareilly | District Institute of Rural Development, Bareilly |
| 22 | Shahajahanpur | District Institute of Rural Development, Shahajahanpur |
| 23 | Bijnor | District Institute of Rural Development, Bijnor |
| 24 | Unnao | District Institute of Rural Development, Unnao |
| 25 | Barabanki | District Institute of Rural Development, Barabanki |

| | | |
|----|-----------------|--|
| 26 | Baharaich | District Institute of Rural Development, Baharaich |
| 27 | Jaunpur | District Institute of Rural Development, Jaunpur |
| 28 | Mirzapur | District Institute of Rural Development, Mirzapur |
| 29 | Deoria | District Institute of Rural Development, Deoria |
| 30 | Basti | District Institute of Rural Development, Basti |
| 31 | Kannauj | District Institute of Rural Development, Kannauj |
| 32 | Lalitpur | District Institute of Rural Development, Lalitpur |
| 33 | Aligargh | District Institute of Rural Development, Aligargh |
| 34 | Rampur | District Institute of Rural Development, Rampur |
| 35 | Gonda | District Institute of Rural Development, Gonda |
| 36 | Vanarasi | District Institute of Rural Development, Vanarasi |
| 37 | Allahabad | District Institute of Rural Development, Allahabad |
| 38 | Banda | District Institute of Rural Development, Banda |
| 39 | Balia | District Institute of Rural Development, Balia |
| 40 | Kanpur | District Institute of Rural Development, Kanpur |
| 41 | Urai Jalaun | District Institute of Rural Development, Urai Jalaun |
| 42 | Eatah | District Institute of Rural Development, Eatah |
| 43 | Mathura | District Institute of Rural Development, Mathura |
| 44 | Pilibhit | District Institute of Rural Development, Pilibhit |
| 45 | Hardoi | District Institute of Rural Development, Hardoi |
| 46 | Sitapur | District Institute of Rural Development, Sitapur |
| 47 | Lakhimpur Khiri | District Institute of Rural Development, Lakhimpur Khiri |
| 48 | Sultanpur | District Institute of Rural Development, Sultanpur |
| 49 | Fatehpur | District Institute of Rural Development, Fatehpur |
| 50 | Hamirpur | District Institute of Rural Development, Hamirpur |
| 51 | Moradabad | District Institute of Rural Development, Moradabad |

| | | |
|----|---------|--|
| 52 | Lucknow | U.P. Academy of Administration and Management, Aliganj, Lucknow |
| 53 | Lucknow | Human Resource Development Cell, U.P. Jal Nigam, Lucknow |
| 54 | Lucknow | Water and Land Management Institute, U.P. Irrigation Department, Utrethia, Lucknow. |
| 55 | Lucknow | UP State Institute of Health and Family Welfare, Sector C, Indiranagar, Lucknow |
| 56 | Lucknow | U.P. State Institute of Planning, Kalakankar House, Lucknow |
| 57 | Lucknow | State Institute of Agriculture Management, Kakori Rehman Khera, Lucknow |
| 58 | Lucknow | Institute of Co-operative and Corporate Mgt. Research and Training 1/464 Indira Nagar, Lucknow |
| 59 | Lucknow | U.P. State Institute of Financial & Accounts Trg. 24/3 Indira Nagar, Lucknow |
| 60 | Lucknow | U.P. State Institute of Trg. and Research for SC/ST A-2/12-D Vishal Khand, Gomati Nagar, Lucknow |
| 61 | Lucknow | Sahbhagi Sikshan Kendra, Chhotha Meel, Sitapur Road, Lucknow |
| 62 | Kanpur | Institute of Research, Training and Development Kanpur |
| 63 | Lucknow | Training Institute of Minor Irrigation Bakeshi Ka- Talab, Lucknow |
| 64 | Hardoi | Raja Todar Mal Training. Institute of Revenue Records And Survey, Hardoi |
| 65 | Lucknow | U.P. State Judicial Training and Research, Gomati Nagar, Lucknow |
| 66 | Lucknow | Sampurnanand U.P. State Training Centre of Jail, Jail Road, Lucknow |
| 67 | Lucknow | U.P. State Secretariat Institute of Training & Management Jawahar Bhawan, Lucknow |
| 68 | Bijnour | Institute of State Engineers Training, Kalagarh, Bijnor |

| | | |
|----|----------------------|---|
| 69 | Lucknow | Institute of State Electricity Board Training Sarojini Nagar, Lucknow |
| 70 | Lucknow | Institute of Cane Development, Lucknow |
| 71 | Hardoi | Tourism Research Institute of Development and Training Hardoi |
| 72 | Lucknow | State Institute of Technical Education, Lucknow |
| 73 | Lucknow | Training Institute of Civil Defence Chakarpurva Meel, Sitapur Road, Lucknow |
| 74 | Allahabad | State Institute of Educational Management. and Training Allahabad |
| 75 | Kanpur | Department of Civil Engineering (Environmental Engineering), IIT, Kanpur |
| 76 | Aligarh | Dept. of Civil Engineering(Environmental Engineering), Aligarh Muslim University, Aligarh |
| 77 | Jhansi | Department of Civil Engineering (Environmental Engineering), Bundelkhand Institute of Engineering and Technology, Jhansi. |
| 78 | Allahabad | Department of Civil Engineering (Environmental Engineering), Motilal Nehru Institute of Technology, Allahabad. |
| 79 | Gorakhpur | Madan Mohan Malviya Engineering College, Gorakhpur. |
| 80 | Varanasi | Department of Civil Engineering (Environmental Engineering), Institute of Technology, Banaras Hindu University, Varanasi. |
| 81 | Lucknow Allahabad | & State Council for Education, Research & Training, Lucknow and Allahabad |

Annexure 7

Sample Contract document for hiring nodal training institution

CONSULTING SERVICES

Engaging Nodal Training Institution for Capacity Building of Stakeholders in RWSSP-LIS Project in UP

THIS CONTRACT (“Contract”) is entered into in this date of, by and between the SPMU, **RWSSP-LIS Project in UP**

(“hereinafter referred to as **SPMU**”) having its principal place of business at, Lucknow, and(name of the nodal training institution) (“hereinafter referred to as **The Consultant**”) having its principal office located at (address of the nodal training institution).

WHEREAS, the Consultant is willing to perform these services:

1. Services

To carry out training and capacity building interventions as detailed out in the attached terms of reference (ToR) and appendix therein.

2. Term

The Consultant shall perform the Services during the period commencing (date)..... and continuing through (date) or any other period as may be subsequently agreed by the parties in writing.

3. Payment

1. A. Ceiling

(i) For services rendered pursuant to above, the SPMU shall pay the Consultant an amount not to exceed INR:(Indian RupeesOnly).

(ii) The above amount has been established based on the understanding

that it includes all of the Consultant's costs and fees, as except service tax, that may be imposed.

2. B. Schedule of payments

The payments shall be made on a monthly basis against the programs conducted successfully during the period and submission of related program reports on prescribed formats and the invoice.

C. Payment Conditions

Payment shall be made in Indian Rupees, no later than 30 days following submission by the Consultant of invoices in duplicate to the Coordinator designated in Paragraph 4.

4. Assignment Administration

A. Coordinator. The SPMU designates Mr. as Project Coordinator for this assignment. The Coordinator will be responsible for the coordination of activities under this Contract, for acceptance and approval of the reports and of other deliverables by the SPMU and for receiving and approving invoices for the payment.

5. Performance Standards.

The Consultant undertakes to perform the Services with the highest standards of professional and ethical competence and integrity. The Consultant shall promptly replace any employees assigned under this Contract that the SPMU considers unsatisfactory.

6. Confidentiality

The Consultants shall not, during the term of this Contract and within three years after its expiration, disclose any proprietary or confidential information relating to the Services, this Contract or the SPMU business or operations without the prior written consent of the SPMU.

7. Ownership of Material

Any material, graphic, films or otherwise, prepared by the Consultant of the SPMU under the Contract shall belong to and remain the property of the SPMU.

8. Dispute Resolution

Any dispute arising out of the contract, which cannot be amicably settle between the parties, shall be referred to adjudication/arbitration in accordance with Arbitration & Conciliation Act 1996.

FOR THE SPMU

FOR THE CONSULTANT

Signed by :

Signed By :

Title : Executive Director

Title :

Enclosure: Terms of Reference

Terms of Reference (ToR)
Engaging Nodal Training Institution for
Capacity Building of Stakeholders in RWSS-LIS Project in UP

Background

The government of Uttar Pradesh (GoUP) through its SPMU/State Water and Sanitation Mission (SWSM) intends to implement/currently implementing its RWSSP-LIS project in UP (2013-19). It has the following components:

- (i) Capacity Building: This will comprise (a) Capacity Building of MoDWS; (b) Capacity Building of RWSS Sector Institutions and PRIs; and (c) Technical Assistance (TA) to States.

- (ii) RWSS Investment: This component will support investments for improving water supply and sanitation coverage in the project habitations, including construction of new infrastructure or rehabilitation and augmentation of existing schemes, with safe disposal of wastewater.

- (iii) Project Management : Project Management Units will be established at the national level and at each of the participating states to implement and monitor the project.

Need for a Nodal Training Institution

The proposed RWSSP-LIS project implies a significant departure from current practices, both in thinking and action and demands capacitating the stakeholders with knowledge, skills and management practices. A capacity building strategy and implementation plan has been prepared by GoUP with technical assistance from Knowledge Links. This would serve the basis for initiating capacity building activities. However, this document is dynamic and flexible in the sense that appropriate changes would be made based on review and modification of the document as per learning over different phases and batches of the project.

As per the envisaged strategy, it is strongly felt that services of a nodal training institution would need to be hired by the SPMU for conducting the training programs. The role of nodal training institution would be to work closely with WSSO within SPMU/SWSM for conceptualising, designing, conducting and managing training programs. They could involve other institutions for meeting specialised training requirements like technical trainings. The nodal institution would conduct training of trainers, policy level workshops and develop standardised training manuals and

materials for grass root level trainings.

Objective

The objective of this TOR is to engage a Nodal Training Institution to support at state, district and GP/village level, various orientation and capacity building activities considered necessary for implementation of RWSSP-LIS Project.

Scope of the Work

RWSSP-LIS Project would be implemented during 2013-19 in 3 batches with every batch following a scheme cycle divided into four phases, namely preplanning, planning, implementation and O&M. The Nodal Training Institution will undertake various activities during the project period to enhance the capacities of the stakeholders, based on need and demand from the clients. **A list of programs to be conducted would be finalized in the beginning of every year/batch in consultation with the client.** This would be largely based on the activities given for different levels in the capacity building strategy document.

The nodal training institution would be responsible for:

- i) Conduct training of trainers (ToTs) for state/district level stakeholders
- ii) Organize observation study tours/cross visits to best practice projects
- iii) Engage other institutions for specialized programmes
- iv) Engage regional training institutions for conducting trainings at block and GP/village levels
- v) Develop training modules and training material (including trainer and trainee notes) for different programmes to be organized by regional training institutions
- vi) Ensure that the capacity building programmes either conducted directly or through specialized institutions or through regional training institutions are delivered as per desired quality standards.
- vii) Provide handholding support to regional training institutions while the programmes are being implemented by them.
- viii) Undertake the development of standardized training modules for various processes as per scheme cycle. These would be particularly used by facilitators at village and district levels.
- ix) Ensure that training needs are assessed in the beginning of each phase and before conducting each type of programme. The outcomes of these exercises must be used in fine-tuning the respective programme design.
- x) Review the implementation of capacity building activities at different levels and suggest improvements and innovations on a periodic basis, including any other events if required.

Based on a preliminary assessment a list of programmes (with indicative number of participants and costs) that are likely to be conducted during the first year of the project is given in the **Appendix 1**. Thus the value of the contract for a period of 1 year, would be Rs. lakhs, excluding service taxes.

Though the contract duration is one year but it is likely to be extended for the duration of the project depending on performance of the nodal training institution and felt needs at different levels. The effort of the nodal training institution should be to build the capacities at different levels in a manner that gradually their direct interventions are reduced and regional institutions and stakeholders are able to undertake the responsibility of capacity building on their own.

Output and payment

The key outputs would be in the form of documented reports of the organization of various events like workshops, training, exposure visits and any other events, in the prescribed format. (Two types of reports would be required to be submitted: (i) A summary report through email within two days of completion of the event. The related guidelines are given in **Appendix 2** (ii) A monthly reporting format at the end of each month for which a format is attached as **Appendix 3**). Additionally, other outputs such as training manuals, print or video documentation, etc., may be generated, based on demand, and based on mutual agreement between clients and the nodal training institution.

Payment of the nodal training institution would be done at the end of every month for work done for that month, on submission of output, as specified above. The payment for a programme would be based on as per budget of the programme with following conditions:

3. 100% payment as per budget in case the participants are equal to or greater/lesser than 10% of the number proposed in the agreed list of programmes.
4. In case variation in number of participants is more than 10%, the payment would be made for the actual number of participants based on the agreed rate for the concerned programme.

Qualification and Personnel proposed

The qualification and experience of trainer team has been specified for each of the training programme in the related training outline. Nodal training institution is expected to provide the specialized professional inputs as per requirements stated therein. The team for each of the programme must be discussed and agreed with the clients. It would also be required that the Nodal training institution employs a core team of trainers and additional resource persons are engaged by them as per requirement of specific programme. The core team would have following professionals

5. **Capacity Building Expert:** Post Graduate in Social Sciences/ Institutional Development/ equivalent, with at least 7 years of experience in participatory training in the rural sector, with some exposure to capacity building in the rural water supply and sanitation area;

6. **Expert in Participatory approaches:** Advanced degree in social sciences/community development/equivalent with at least 5 years of experience in participatory approaches to community mobilization, including exposure to PRA methods;

7. **Water and Sanitation Expert:** Degree/Diploma in environmental sciences / engineering/ social development/equivalent with at least 3 years experience in the rural water supply and sanitation field, with exposure to participatory approaches

At least one of the above should be a woman.

Time frame

The total contract is for a period of twelve months from the signing of the agreement, which may be extended based on need and performance.

Reporting

The nodal training institution would interact with Executive Director SPMU and relevant staff in the WSSO and report to Executive Director SPMU.

Appendix 2

Event Report Guidelines

Please follow the format outlined below for submitting Event Reports (ER). If you have any questions, please contact SPMU.

Event Reports must be submitted by email, immediately after an event.

- Reports should be concise, capturing key learnings and activities undertaken.
- Suggested length for the ER – max. 1 page.
- The ER can be structured as follows:
 - Introduction (1 para)
 - Nature of Event Attended (Training type, workshop), Venue, Dates (from/to)
 - Objectives
 - Participants
 - Key Activities undertaken (1 Para)
 - Learning Outcomes (1 para)
 - Next Steps (1 para)
 - Step 1:
 - Step 2:

Appendix 3

Monthly Progress Report Guidelines

Please follow the format outlined below for submitting Monthly Progress Reports. If you have any questions, please contact SPMU. **Please delete this page and all instructions in the form itself prior to submitting your report.**

Please attach a Cover Page and Table of Contents for the Monthly Progress Report.

The Monthly Progress Report includes two components:

I. Summary Information

- Contract #
- Report due date
- Date range for activities reported on
- Project Title
- Nodal Training Institution
- Primary contact information
- Summary of Trainings Conducted
- Person preparing report
- Date of Submission

II. Detailed Report on Trainings Conducted

- Reports should be concise, capturing key learning and activities undertaken. Suggested length for sections of the report is as follows:
 - 1 Day Training – max. 2 pages
 - 2-5 Days Training – max. 10 pages
 - 6-8 Days Training – max. 15 pages
- Please follow the guidelines provided on the following pages and use the numeral headings in your report.

Reporting Format: Reports must be submitted in Electronic Format along with 5 hard copies.

Timing of Reports: Monthly progress reports must be submitted on the 5th of the following month. For example: the Report for the period 1-31 August, 2008 must be submitted to SPMU by 5th September 2013.

Monthly Progress Report – Summary Information

| | | | |
|-------------------------|--|---|-----------------------------|
| Report Due Date: | | Date Range of Activities Reported: | MM/YYYY- MM/YYYY |
|-------------------------|--|---|-----------------------------|

| | |
|-----------------------|---|
| Project Title: | Engaging Nodal Training Institution for Capacity Building of Stakeholders in RWSSP-LIS Project in UP |
|-----------------------|---|

| | |
|---|--|
| Nodal Training Institution Name: | |
|---|--|

Primary Contact:

| | | | |
|------------------|--|-------------------|--|
| Last name | | First name | |
| Title | | Telephone | |
| Address | | Fax | |
| | | | |
| E-mail | | | |
| Web site | | | |

Summary of Trainings Conducted

| Title of Training | Number of Participants | Date of Training | |
|--------------------------|-------------------------------|-------------------------|-----------|
| | | From | To |
| | | | |
| | | | |
| | | | |
| | | | |

| | | | |
|----------------------------|--|------------------------|-------------------|
| Report Prepared by: | | Date Submitted: | <i>mm/dd/yyyy</i> |
| | | | |

Monthly Progress Report – Detailed Report on Trainings Conducted

For each training, please provide the following information.

*The main body of the Report should contain a maximum of 4 photographs. Additional photographs and/or video documentation should be sent as a **separate file**.*

1. Introduction

- 1.1 Background.
- 1.2 Type of training/capacity building event (ToT, Cross Visit, OST, Policy Workshop etc)
- 1.3 Training Objectives
- 1.4 No. of Participants (provide details of participants in Annex A)

2. Details of Sessions

- 2.1 Brief review (1 para) on each session of the training..

3. Lessons Learnt

- 3.1 Briefly narrate key learning. Also assess:
 - i. Which sessions worked and why?
 - ii. Which sessions did not work and need attention?
- 3.2 Next Steps (mention decisions taken with key stakeholders)

4. Action Plan

- 4.1 Include here a summary/key points of the Action Plan developed by participants

5. Feedback

- 5.1 Analysis of Self Assessment Report
- 5.2 Analysis of Training Feedback Form

Annexes

Annex materials do not count against page limits. Please do not include additional annexes beyond the materials requested below unless requested by SPMU.

Annex I: List of Participants and Profile

Please provide a list of all who attended and where appropriate, institutional affiliation and contact details. If required, Table 1 may be used for guidance.

Annex II: Participants' Hopes and Expectations

If applicable, please include the hopes and expectations that participants expressed from the training program.

Annex III: Action Plan

If applicable, please insert the complete Action Plan developed by participants at the workshop.

Annex IV: Self-Assessment Format

If applicable, please include the format of the Self-Assessment Form used during the training.

Annex V: Feedback Form Format

Please include the format of Feedback Form used during the training.

Annex VI: Pictures of the Event

Select up to a maximum of 6 to 8 pictures which illustrate major activities/sessions of the training. If additional pictures or video documentation was undertaken, a separate CD must be sent to SPMU.

Table 1: Profile of Participants

| Sl. No. | Name | Department/ Institution | Designation | Experience in WSS Sector | Training Programs Attended in Last Three Years | Email ID | Phone/ mobile |
|---------|------|-------------------------|-------------|--------------------------|--|----------|---------------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |

| | | | | | | | | | | | | | | | | | | |
|---|--|--------|--|-----------------------------|---|-----|----|----|--|---|-----------------------------------|---------|-------|---|-------|---------|---------|----------------|
| 3 | DWSC experience sharing and review workshop | Direct | Selected members of DWSC, SO, VWSC, SLC | SWSM/Principal Secretary RD | 1 | 360 | 12 | 30 | Training Institution/ Capacity Building Agency | Lucknow/ Regional Level | Progress reports | 150 | 4500 | 0 | 50000 | 30000 | 84500 | 1014000 |
| Sub total | | | | | | | | | | | | | | | | | | 5080500 |
| B STATE LEVEL- (Operational level) | | | | | | | | | | | | | | | | | | |
| 4 | Observation study tours to other successful RWSS Projects in India | Direct | Members of SWSM, opinion makers, SPMU, UPJN engineers, PR officers, DPMU, DWSC, SO, VWSC | SWSM/SPMU/ WSSO | 5 | 250 | 25 | 10 | RWSS projects/ programmes of selected states | Uttarakhand, Kerala, Karnataka, Maharashtra | OST Guidelines | 1000 | 10000 | 0 | 0 | 400000 | 410000 | 10250000 |
| 5 | Observation study tours to other successful RWSS Projects abroad | Direct | Members of SWSM, opinion makers, SPMU, UPJN engineers, PR officers, DPMU, DWSC, SO, VWSC | SWSM/SPMU/ WSSO | 7 | 80 | 10 | 8 | To be identified | To be identified | OST Guidelines | 1000 | 8000 | 0 | 0 | 1600000 | 1608000 | 16080000 |
| 6 | World Bank Procurement Procedures and Systems | Direct | Senior management in SPMU/UPJN | SPMU/WSSO | 5 | 5 | 1 | 5 | Administrative staff college of India | Hyderabad | World bank procurement guidelines | Lumpsum | | | | | | 100000 |
| 7 | Monitoring and evaluation | Direct | SPMU/DPMU Staff | SPMU/WSSO | 2 | 350 | 10 | 35 | M&E Specialist | Lucknow | M&E manual | 150 | 5250 | 0 | 10000 | 105000 | 210250 | 2102500 |
| SKILL UPGRADATION TRAININGS | | | | | | | | | | | | | | | | | | |
| 8 | Computers | Direct | Relevant Staff of SPMU/DPMU | SPMU/WSSO | 5 | 50 | 2 | 25 | Computer staff | Lucknow | Relevant manual | 150 | 3750 | 0 | 25000 | 187500 | 441250 | 882500 |

| | | | | | | | | | | | | | | | | | | |
|----------|--|--------|--|-----------|---|-----|----|----|--|-----------------------|---|-----|------|---|--------|--------|---------|-----------------|
| 9 | Financial Mgmt and Accounting | Direct | Relevant Staff of SPMU/DPMU | SPMU/WSSO | 3 | 50 | 2 | 25 | Financial Specialist | Lucknow | Financial manual | 150 | 3750 | 0 | 150000 | 112500 | 266250 | 532500 |
| 10 | MIS | Direct | Relevant Staff of SPMU/DPMU | SPMU/WSSO | 3 | 75 | 3 | 25 | MIS specialist | Lucknow | MIS manual | 150 | 3750 | 0 | 150000 | 112500 | 266250 | 798750 |
| | MOTIVATIONAL TRAININGS | | | | | | | | | | | | | | | | | |
| 11 | Staff Retreat | Direct | SPMU/DPMU staff | SPMU/WSSO | 3 | 300 | 5 | 60 | Tranning Institution/ Capacity Building Agency | To be decided by SPMU | Retreat guidelines | 150 | 9000 | 0 | 150000 | 900000 | 1059000 | 5295000 |
| | Sub total | | | | | | | | | | | | | | | | | 36041250 |
| C | DISTRICT LEVEL/ INTERMEDIARY LEVEL | | | | | | | | | | | | | | | | | |
| | PRE-PLANNING PHASE | | | | | | | | | | | | | | | | | |
| 12 | Understanding of demand responsive and decentralized service delivery approaches in the context of RWSSP-LIS | Direct | Members of DWSM, DPMU Staff | DPMU | 3 | 900 | 30 | 30 | Tranning Institution/ Capacity Building Agency | district level | Excerpts from PIP | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |
| 13 | Contract Management and Selection of SOs | ToT | DPMU Staff | SPMU | 3 | 120 | 4 | 30 | Tranning Institution/ Capacity Building Agency | Regional level | SO selection guidelines, SO contracts | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 594000 |
| 14 | Workshop on Village Selection Methodologies including pre-feasibility and site appraisals | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Pre-feasibility and site appraisal guidelines | 150 | 4500 | 0 | 60000 | 36000 | 100500 | 3015000 |
| | PLANNING PHASE | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | |
|----|---|-----|---|------|---|-----|----|----|--|----------------|--|-----|------|---|--------|--------|--------|----------|
| 15 | Training of Trainers on CLTS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 5 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Practical guide on CLTS, CLTS workshop manual | 150 | 4500 | 0 | 250000 | 120000 | 374500 | 11235000 |
| 16 | ToT on community action planning and monitoring | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 5 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Project document, note on suggested planning process | 150 | 4500 | 0 | 250000 | 60000 | 314500 | 9435000 |
| 17 | ToT on Feasibility Studies, engineering survey and design | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 8 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Technical manual on feasibility and design process | 150 | 4500 | 0 | 240000 | 144000 | 388500 | 11655000 |
| 18 | ToT on Source and Catchment Protection | ToT | Community Development staff of DPMU, training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Technical manual on source and catchment protection | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |

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|-----------------------------|--|--------|---|------|---|-----|----|----|--|----------------|------------------------------------|-----|------|---|-------|-------|--------|---------|
| 19 | ToT on Community Empowerment Plan | ToT | Community Development staff of DPMU, training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Note on community empowerment plan | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |
| 20 | Training on planning and design of MVS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Guidelines on MVS | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |
| 21 | Training on SLWM | Direct | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Literature on SLWM | 150 | 4500 | 0 | 60000 | 36000 | 100500 | 3015000 |
| 22 | Financial Systems and Procedures | Direct | Finance/Accounts staff of SOs | DPMU | 2 | 450 | 15 | 30 | Training Institution/ Capacity Building Agency | district level | Financial manual for SOs | 150 | 4500 | 0 | 60000 | 36000 | 100500 | 1507500 |
| 23 | Project M&E Systems | Direct | UPJN Engineers at division/ sub-division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | M&E manual for SOs | 150 | 4500 | 0 | 60000 | 36000 | 100500 | 3015000 |
| IMPLEMENTATION PHASE | | | | | | | | | | | | | | | | | | |

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| 24 | Training on Construction Technologies and Community Procurement | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Technical manual, community procurement manual | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |
| 25 | Training on Contracting Arrangements for Hiring Consultancy for MVS | Direct | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Guidelines on contracting and construction of MVS | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |
| 26 | Water quality monitoring and surveillance | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | Guidelines on Water quality monitoring and surveillance | 150 | 4500 | 0 | 60000 | 36000 | 100500 | 3015000 |
| 27 | Training on Management and Supervision of Service Agencies for Construction Supervision Works | Direct | DPMU Technical Staff | SPMU/WSSO | 3 | 450 | 15 | 30 | Training Institution/ Capacity Building Agency | Regional level | Technical manual and contract of service agency | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 2227500 |

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|------------------------|---|--------|--|------|---|---------|------|----|--|----------------|--------------------------------|-----|------|---|-------|-------|--------|-----------------|
| 28 | Progress tracking/experience sharing workshop | Direct | Selected DPMU staff, UPJN engineers at division/sub division levels, SOs, VWSCs | DPMU | 1 | 3600 | 120 | 30 | Training Institution/ Capacity Building Agency | district level | Progress reports, case studies | 150 | 4500 | 0 | 30000 | 18000 | 52500 | 6300000 |
| O&M PHASE | | | | | | | | | | | | | | | | | | |
| 29 | ToT on Establishment of O&M Systems for SVS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 2 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | O&M manual for SVS | 150 | 4500 | 0 | 60000 | 36000 | 100500 | 3015000 |
| 30 | ToT on Establishment of O&M Systems for MVS | ToT | DPMU, trainers of training institutions, UPJN engineers at division/sub division levels, SOs | DPMU | 3 | 900 | 30 | 30 | Training Institution/ Capacity Building Agency | district level | O&M manual for MVS | 150 | 4500 | 0 | 90000 | 54000 | 148500 | 4455000 |
| Sub total | | | | | | | | | | | | | | | | | | 89214000 |
| D VILLAGE LEVEL | | | | | | | | | | | | | | | | | | |
| PLANNING PHASE | | | | | | | | | | | | | | | | | | |
| 31 | Orientation Program on RWSSP-LIS Project and Roles and Responsibilities of GP/VWSC and other stakeholders | Direct | Members of GP, Panchayat Secretary | SOs | 2 | village | 5349 | | SOs | Village | | 0 | 0 | 0 | 0 | 1500 | 1500 | 8023500 |

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| 3 2 | Cross Visits to Other Villages | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs | Village | Stationery | 100 | 500 | 0 | 0 | 1500 | 2000 | 10698000 |
| 3 3 | Training Program on SLWM | Direct | Selected Members of GP/ VWSC | SOs | 2 | village | 5349 | | SOs | Village | | 0 | 0 | 0 | 0 | 1500 | 1500 | 8023500 |
| 3 4 | Campaign to Clean UP School/Village | Direct | School Children | SOs | 1 | village | 5349 | | SOs | Village | | 0 | 0 | 0 | 0 | 750 | 750 | 4011750 |
| 3 5 | Training Program on Strengthening micro credit activities (Self Help Groups so as to empower the members | Direct | Women Members | SOs | 2 | 80235 | 5349 | 15 | SOs | Village | Stationery | 100 | 1500 | 0 | 2000 | 1500 | 5000 | 26745000 |
| 3 6 | SLC Formation | Direct | Members of GP/ VWSC | SOs | 15 | 16475 | 659 | 25 | SOs | Village | SLC guidelines | 100 | 2500 | 0 | 0 | 10000 | 12500 | 8237500 |
| 3 7 | Training on Water Quality Testing and remedial actions | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs | Village | Stationery, note on water quality monitoring | 100 | 500 | 0 | 0 | 1500 | 2000 | 10698000 |
| 3 8 | Training on Preparation of Detailed Proposal for Implementing Water Supply Schemes and Sanitation Facilities | Direct | Selected Members of VWSC | SOs | 2 | 16050 | 535 | 30 | SOs | Village | Stationery, format of proposal | 100 | 3000 | 0 | 0 | 1500 | 4500 | 2407500 |
| 3 9 | Training on Preparation of Community Works Plan (CWP) and Community Empowerment Plan (CEP) | Direct | Selected Members of VWSC | SOs | 2 | village | 5349 | | SOs | Village | | | 0 | 0 | 0 | 1500 | 1500 | 8023500 |
| IMPLEMENTATION PHASE | | | | | | | | | | | | | | | | | | |

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| 40 | Training on Financial Systems and Book Keeping in RWSSP-LIS Project | Direct | GP Sarpanch and Panchayat Secretary | SOs | 3 | 10698 | 5349 | 2 | SOs | Village | Stationery | 100 | 200 | 0 | 0 | 600 | 800 | 4279200 |
| 41 | Training on Community Procurement | Direct | Selected Members of GP/ VWSC | SOs | 2 | village | 5349 | 5 | SOs | Village | | 0 | 0 | 0 | 0 | 1000 | 1000 | 5349000 |
| 42 | Work Accounting and physical progress documentation of construction works | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs | Village | Stationery | 100 | 500 | 0 | 0 | 1000 | 1500 | 8023500 |
| 43 | Training of masons on sanitation construction works | Direct | Masons | SOs | 6 | 10698 | 5349 | 2 | SOs | Village | stationery, technology drawings | 200 | 400 | 50 | 500 | 1200 | 2150 | 11500350 |
| 44 | Training of plumbers on piped water supply | Direct | Plumbers | SOs | 2 | 10698 | 5349 | 2 | SOs | Village | stationery, learning material | 100 | 200 | 50 | 0 | 500 | 750 | 4011750 |
| 45 | Training on Construction Supervision | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs | Village | Stationery | 100 | 500 | 0 | 0 | 1000 | 1500 | 8023500 |
| O&M PHASE | | | | | | | | | | | | | | | | | | |
| 46 | Workshop on Preparation of VWSC Bye Laws and Tariff Fixation/Revision | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs | Village | Stationery, model bye laws | 100 | 500 | 0 | 0 | 1000 | 1500 | 8023500 |
| 47 | Training on Operation of Scheme and Preventive and Breakdown Maintenance | Direct | Selected Members of GP/ VWSC | SOs | 2 | 26745 | 5349 | 5 | SOs | Village | Stationery, tips on maintenance | 100 | 500 | 0 | 0 | 1000 | 1500 | 8023500 |
| Sub total | | | | | | | | | | | | | | | | | | 144102550 |

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| 4 8 | Untied fund at SWSM for international programs and specialised trainings, technical assistance, needs assessment and mentoring @ Rs. 60 Lakh/year | Lumpsum | | | | | | | | | | | | | | | | | | | 36000000 | |
| 4 9 | Mid term evaluation | Lumpsum | | | | | | | | | | | | | | | | | | | | 3000000 |
| 5 0 | Grand Total | | | | | | | | | | | | | | | | | | | | | 313438300 |