



2021

## REPORT

On

Mid Term Evaluation of the Project Sahayata- XIV

“Improvement of access to water and sanitation for vulnerable people living in Thar Desert, Rajasthan India”



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## A. Introduction

According to the new WHO/UNICEF joint monitoring programme (JMP), 2.1 billion people worldwide lack access to safe, readily available water. As per a study done by MIT, if water related concerns are not taken on priority, by 2050, more than half of the world's population will live in water stressed regions. Non availability of water also has significant impact on adopting unsafe sanitation and hygiene practices which lead to cultivating varied nature of diseases among across age group of human life. Scarcity of quality water, non-availability of sanitation facilities and unsafe hygiene practices attribute the occurrence of virus, bacteria or infection based diseases. The US National Sanitation Foundation defines sanitation as *“the quality of living expressed in clean homes, clean farms, clean neighborhoods and clean community. Being a way of life, it must come from people, nourished as it is by knowledge and it grows as obligation and ideal in human relations.”*

“WASH” a collective term used in the public health domain on the concern of water, sanitation and hygiene is amongst the important mission for India Government as well as in the Development sector fraternity. Among the 17 Sustainable Development Goals (SDGs), Goal 6's mission is to "Ensure availability and sustainable management of water and sanitation for all." The target is to achieve universal and equitable access to safe and affordable drinking water for all and achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations by 2030.

India's sanitation challenges are well documented. Among the various objectives, one of it includes eliminating open defecation through the construction of household-owned and community-owned toilets and establishing an accountable mechanism of monitoring toilet use. Developing nations like India, face the concern of scarce water resources and safe drinking water on a daily basis. In the WASH domain, various other initiatives also have been laid by the Government. In Rajasthan state of India, availability of water and sanitation practices are well behind the national average. Due to scanty and inherent variable characteristics of rainfall, the Thar Desert of Rajasthan is prone to chronic droughts. High frequency of droughts coupled with consistent increase in population adversely affect carrying capacity of the land resulting in acute scarcity of three life sustaining resources i.e. food, fodder and water. Drought completely erodes the rural economic base and suffering of the living beings increase manifold. Because of scarce

natural resources and absence of any industry and employment opportunities the percentage of people living below poverty line is high, illiteracy rate is high, the region is underdeveloped and the basic infrastructure is lacking. Agriculture output is meager because of low productivity sandy soil.

With a aim to improve the country’s sanitation outlook, like minded donors and implementation agencies like Ministry of Foreign Affair of Luxembourg in partnership with PADEM & His Highness Maharaja Hanwant Singhji Charitable Trust joint hands and came forward with an aim for implementation of vision to bring change in the life among the needy humans.

His Highness Maharaja Hanwant Singhji Charitable Trust, since its inception in 1971, is continuously working in rural areas with a view to provide relief and rehabilitation in times of natural calamities. The Trust since past 10 years, in co-operation with donors has facilitated access to sanitation and water security.

The project location is in Baap block in Phalodi Tehsil of Jodhpur district of Rajasthan. Jodhpur is gateway to the Thar Desert. The western part of the district is devoid of basic natural resources; water, food and fodder and is generally devoid of vegetation. The worst effected, most underdeveloped and remote area of the Jodhpur district is Baap block in Phalodi Tehsil. The average rainfall in the block is below 250 mm per annum. The project area targeted for Sahayata – XIV comprises of following gram panchayat:

S. No.	PanchayatSamiti / Block	Gram Panchayat	Villages included in Gram Panchayats
1	Baap	Tepu	Kanasarimoti, Durgani, Bhanani & Jodhani-Tepu
		Modkiya	Modkiya, Madpura, Panna Nagar & Khakhuri
		Akhadhana	Akhadhana, Pratap Nagar, Bagtawar Nagar, Harisingh Nagar & Sanguri
		Bhakhriya	Bhakhriya, Jaisingh Nagar, Janupura, Tanotbasti & Baghji Ka Par
		Ghatore	Ramjanpura & Hanwant Nagar

S. No.	PanchayatSamiti / Block	Gram Panchayat	Villages included in Gram Panchayats
		Ravra	Kesarpura & Bhivji ka Gaon
2	Phalodi	Shekhasar	Shekhasar, Bandheri, Shivnath Nagar, Sonada
		Jaimla	Jaimla, Bhojnagar, Motinagar & Deep Nagar
		Sihda	Sihda, Narayanhari & Jaisari

The above-mentioned geography of Jodhpur district which can be categorized as one of the driest and remote regions of the inhospitable Thar Desert of Western Rajasthan where fresh water resources are becoming increasingly scarce. Groundwater quality is poor in most of the areas and very little recharging takes place because of frequent droughts and failure of Government and the community to harvest rain water for ground water recharging as also for surface storage. The only surface source of water are village tanks called ‘NADIES’ which harvest rain water & in case of droughts remain dry. Nadies generally store water for a period of 6 months to 12 months depending on terrain conditions. The situation is compounded further by non-availability of ground water. Wherever, there is ground water it is more than 500 ft. deep and mostly it is brackish. The Bureau of Indian Standard has laid down maximum permissible limit of fluoride as 1.00 mg/liter with the remarks as ‘lesser the better’. The people here mostly live in scattered hamlets because they have their land there and their animals are able to graze freely on the open land. Water resources i.e. village ponds or wells are scarce and are at far of distances.

Shortage of water has led to serious sanitation issues. Water contamination and diseases caused due to open defecation are major reasons for the high mortality rate and persistent ill-health. Pregnant mothers and young infants are the most vulnerable to these diseases such as diarrhea, dysentery, typhoid, malaria, dengue and chickenguniyan etc. Human development is more closely linked to access to safe water and sanitation than any other development indicator. In this area nearly 80% of health problems of the children up to 10 years of age are due to inadequate water and sanitation facilities. Undoubtedly, water and sanitation facilities need to be developed in such rural areas.

## B. Background of the study

His Highness Maharaja Hanwant Singhji Charitable Trust conceptualized Project Sahayata – XIV for improvement of access to water and sanitation for vulnerable people living in the Thar Desert, Rajasthan India through construction of tankas on individual household basis and basic sanitation facility comprising of one toilet and one-bathroom unit to the neediest on participatory basis with financial support from Ministry of Foreign Affair of Luxembourg in partnership with PADEM.

In the Project Sahayata XIV, 24 rain water harvesting tankas and 267 toilet / shower units are planned to be constructed along with sensitization to hygiene during 36-month duration of the Project beginning 1st of January; 2020 and ending on 31st December 2022.

The Trust and the funding partners wish to conduct a Mid Term evaluation for the project. Karma Online Ventures LLP, a leading research and consulting organization in development sector in India was appointed to undertake the field survey-based impact assessment of the whole initiative.

## C. Study Objective & Approach

The program was initiated in 2020 and now has completed approx. 20 months. The field level study was conceptualized as part of Mid Term Evaluation of the program for understanding the outcome and impacts of the whole initiative covering following broad objectives:

- To understand outcome of the program
- Assess Impact of the whole initiative
- Understand the extent to which the objectives have been met against specific indicators and targets
- Understand gap in the current approach
- Identify measures to be taken to scale the initiative
- To document and provide feedback on challenges and lessons learned on all relevant aspects of the Project in order to serve the beneficiaries in the best possible manner for Trust's forthcoming Project.



The following factors of the project were also evaluated:

- a. Relevance
- b. Efficiency
- c. Effectiveness
- d. Impact
- e. Sustainability

Below shared broad approach was adopted for the study

- In depth detailed desk review of the programme along with the available data with implementation team
- Identify the broad indicators which need to be evaluated
- Conceptualize a significant sampling plan
- Undertake questionnaire based quantitative and qualitative field survey to undertake a detailed field assessment of the programme interventions and its outcome
- Interactions with the community institutions and field partners along with stakeholders etc to understand the programme outcomes
- Review the assets created as part of the programme and the management process to handle these at the community level
- Assess the learnings within the programme based on interactions with the community and other key stakeholders
- Conclusion of the whole initiative and also identify areas of improvement.

Efforts were made to capture data from below mentioned sources

- Data captured by the team in progress report, register, excel etc.
- In-depth interview with implementing team
- Midterm evaluation report of the project
- In-depth interview with relevant stakeholders involved directly or indirectly
- Data points from secondary sources and
- Beneficiaries from the project location



## D. Brief on the project

Project Sahayata – XIV, conceptualized by HHMHSCT i.e. His Highness Maharaja Hanwant Singhji Charitable Trust and funded by Ministry of Foreign Affairs of Luxembourg in Partnership with PADEM (NGO based in France and Luxembourg), is linked to improvement of access to water and sanitation for vulnerable people living in the Thar Desert, Rajasthan India through construction of tankas on individual household basis and basic sanitation facility comprising of one toilet and one bathroom unit to the most needy on participatory basis.

**About PADEM** – PADEM is an NGO based in France and Luxembourg that works in close collaboration with local partners on improvement of living conditions for vulnerable people in nine countries. PADEM has a holistic approach and works on improvement of infrastructures, economical and social activities, improvement of life skills, education of the children and supports the people with disabilities etc. PADEM – Luxembourg is supporting the Trust since 2006 for promotion of education of rural girls and providing access to water and sanitation facilities to the poor and deprived section of the society mainly in rural areas.

**About HHMHSCT** - HHMHSCT i.e. His Highness Maharaja Hanwant Singhji Charitable Trust was established in 1971. Since its inception, the Trust is continuously working in rural areas of Western Rajasthan with a view to provide relief and rehabilitation in times of natural calamities. To improve the quality of life of the people of Thar, the Trust through Projects like Sahyog has created permanent assets such as anicuts, hand pumps, tankas pastures etc. and has educated people to enhance their livelihood in the field of agriculture, animal husbandry and small scale income generating activities.

24 rain water harvesting tankas and 267 toilet / shower units are planned to be constructed along with sensitization to hygiene during 36 month duration of the Project beginning 1st of January; 2020 and ending on 31st December; 2022.

### **Unit Cost**

Total cost of construction of tankas& toilet / shower units has been kept same as already approved during 3rd year of project sahayata XIII. For sahayata XIV programme, PADEM share for general category has been kept as 40% of total cost and for extreme poor / Antayodaya category PADEM

share is 60% of total cost of construction for both the structures. Per unit cost of construction and share of different stakeholders for both the infrastructures is as under:-

S. No.	Infrastructure	Unit Cost – General Category			Unit Cost – Extreme Poor / Antayodaya Category		
		PADEM's Share (INR)	Beneficiary's Contribution (INR)	Total (INR)	PADEM's Share (INR)	Beneficiary's Contribution (INR)	Total (INR)
1	Tanka	27500 (40%)	41250 (60%)	68750 (100%)	41250 (60%)	27500 (40%)	68750 (100%)
2	Toilet / shower unit	23100 (40%)	34650 (60%)	57750 (100%)	34650 (60%)	23100 (40%)	57750 (100%)

The cost of affixing of a marble plaque duly inscribed testifying support of the benefactor is borne by the beneficiary.

### Payment Schedule to the beneficiaries

Taking into consideration, the poor financial status of the people of the target area, it has been decided to make payment to the beneficiaries in 3 installments in consonance with the stages of construction as under:-

#### Tankas

S. No.	Work Description	Installment	Amount Payable (Rs.)	
			General Category	Extreme Poor (Antayodaya Category)
(i)	After completion of earth excavation work	First	9000	13750
(ii)	After completion of masonry work	Second	9000	13750
(iii)	After completion of all balance construction works including installation of hand pump and submission of bills	Third	9500	13750
<b>Total</b>			<b>27500</b>	<b>41250</b>

#### Toilet / shower units

S. No.	Work Description	Installment	Amount Payable (Rs.)
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			<b>General Category</b>	<b>Extreme Poor (Antayodaya Category)</b>
<b>(i)</b>	After excavation and completion of soak pit and completion of masonry work upto plinth level	First	7500	11550
<b>(ii)</b>	After completion of masonry work upto roof level	Second	7500	11550
<b>(iii)</b>	After completion of all balance construction works and submission of bills	Third	8100	11550
<b>Total</b>			<b>23100</b>	<b>34650</b>

Trust proposed to provide water security by construction of surface / roof rain water harvesting tankas each having a storage capacity of around 22,248 liters using locally available material. Considering the local requirement the Trust proposed to provide one unit of toilet comprising of bathroom and latrine each having minimal effective space size of 3<sup>1/2</sup> 'X5' with stone slab roofing. Drawing for both the tanka and the toilet/shower units along with written guidelines is contained in the booklet which was distributed amongst the beneficiary community before commencement of the construction activity.

The infrastructure is constructed by the beneficiary himself and looking to the poor financial status of the people of the target area, payment to the beneficiaries is made in three installments in consonance with the stages of construction through National Electronic Fund Transfer directly into the bank account of the beneficiary. No middleman or contractor is involved.

### E. A brief on project geography

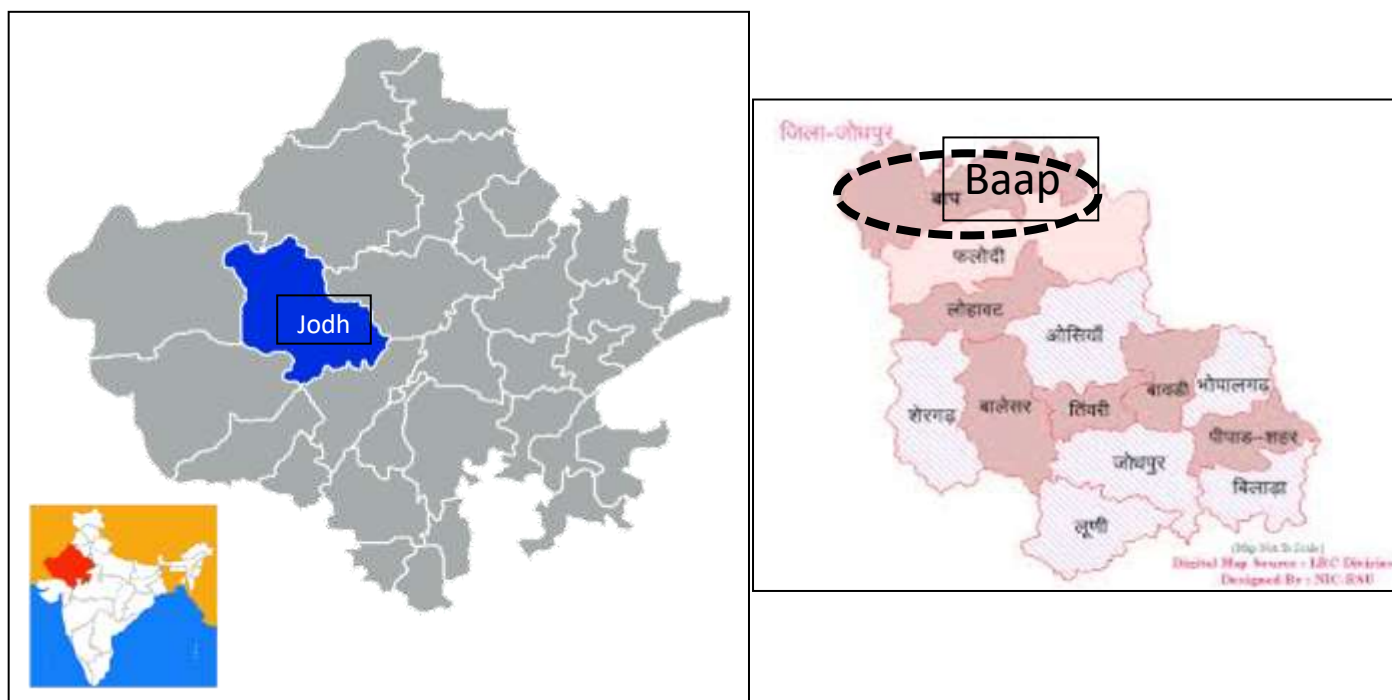
Bap is a Tehsil in Jodhpur District of Rajasthan State, India. Bap Tehsil headquarters is Bap town. It is situated in Jodhpur District. Bap tehsil was created in 2012 out of the northern part of Phalodi tehsil.

Bap Tehsil is northernmost of the eleven tehsils in Jodhpur District. It borders Phalodi tehsil to the south, Jaisalmer District to the west and northwest, and Bikaner District to the north and east. The

tehsil's main town is Baap town which is located 156 KM towards North from District head quarters Jodhpur and 399 KM from State capital Jaipur towards East.

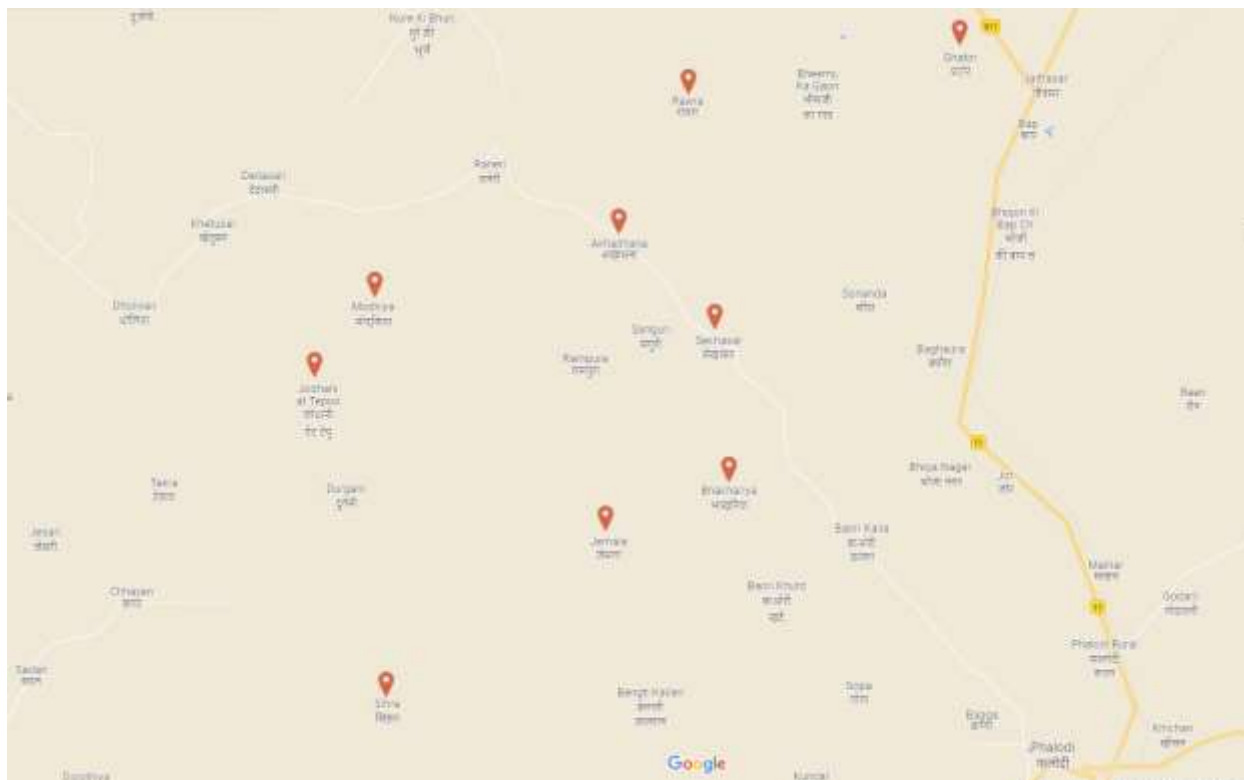
There are approx. thirty-four Gram Panchayats in Baap tehsil. Below map indicate the Baap tehsil location in the district map of Jodhpur.

Image 1 : Project location Baap



Initially all the Gram Panchayats covered in the project were in Baap Tehsil. But due to reorientation done by Government of Rajasthan in the month of November 2019, three Gram Panchayats namely Shekhasar, Jaimla & Sihda have been shifted to adjacent Phalodi Tehsil. Below image indicates the map location of all the gram Panchayats covered in the project.

Image 2 : Gram Panchayat Locations where Project is implemented

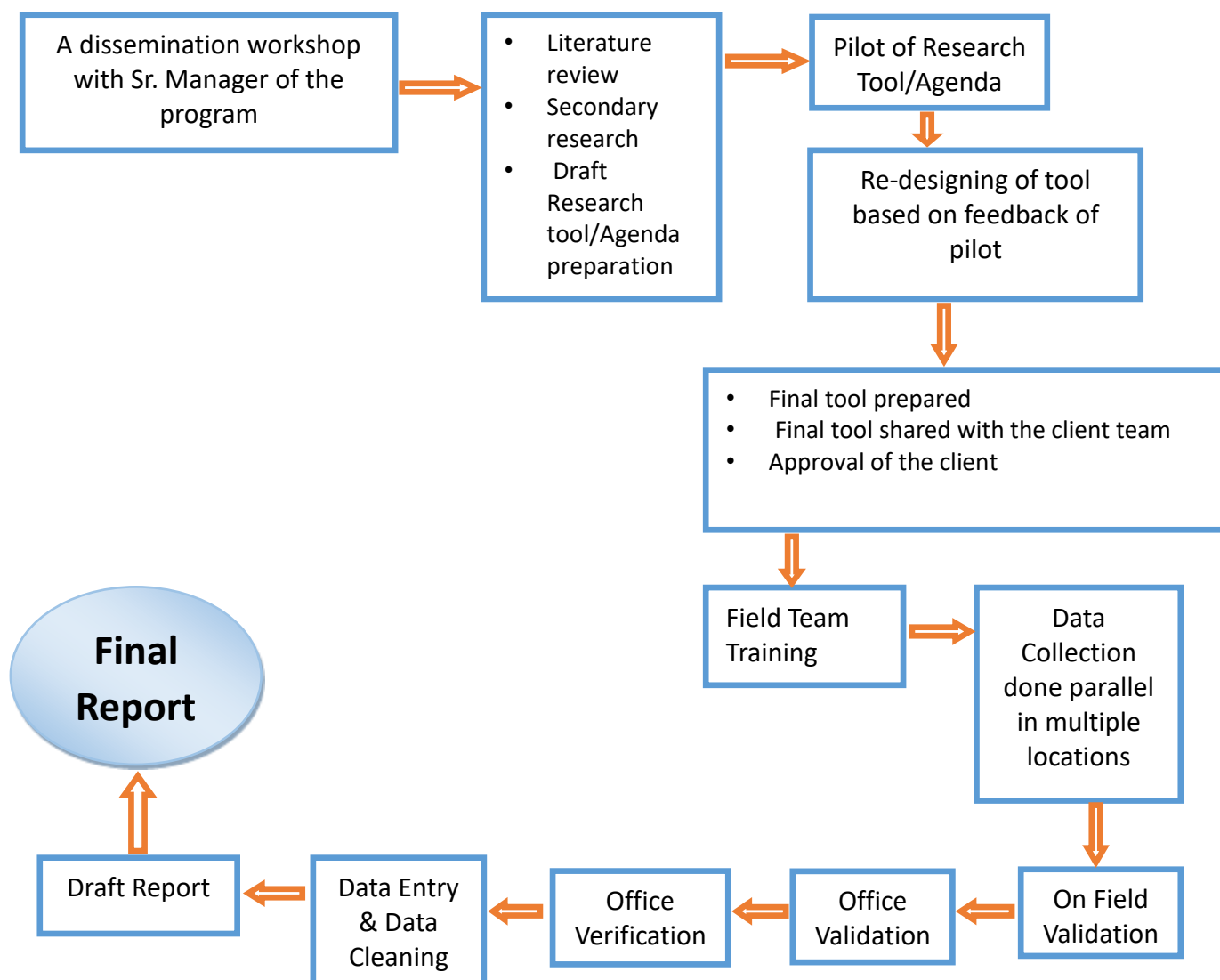


## F. Methodology adopted in the study

Study is envisioned as evaluation of the initiative undertaken by HHMHSCCT on constructing toilet/bathroom and tankas for the needy people. A comprehensive research exercise was adopted to evaluate the status of the project and impact of the program among beneficiaries. For the same, survey was conducted across all the gram Panchayat covered by the Trust. A comprehensive research exercise was adopted to evaluate the status of the project and impact of the program among beneficiaries.

Below figure graphically represents the approach adopted for the study and sequence of steps adopted:

Figure 1 : Steps adopted for the study



#### i. Sampling Procedure and size

This section provides details characteristics of the respondents covered in the study. For the primary survey a robust sampling frame and sample size was decided with taking inputs from the Trust. . Sample variation encompasses various category of respondent.

For quantitative study, 40 Household respondents covering at least some samples from different Gram Panchayat. were planned.

For sample selection, random sample selection of beneficiary approach was adopted in the study along with ensuring following parameters in selection of samples.

- Spread in period of last 20 months all over the Project area
- Taken benefit for one of the initiatives of Trust i.e Tanka Construction or Toilet construction
- Geography spread
- Gender diversity

#### ii. Approach for Pilot Interviews

Prior to starting of main field work, tools/questionnaire of all categories were tested on field to ensure proper flow of questions, ease in understanding of the questions by the respondent, ease in administrating the questionnaire, comprehensibility in terms of information coverage etc. Following points were taken into consideration for pilot interviews:

- Pilot was conducted in Ahmedabad among similar category of respondents and 2 samples in project geography.
- Pilot interviews were done only by Project In charge /Project Associate who were engaged in managing the project.

#### iii. Approach for field training

Before commencement of field survey, training was provided to the entire team including Project Associate and Investigators.

- A brief note in form of Curricula was designed for training purpose.
- In house training was provided on :



- Domain knowledge, survey objectives, conceptual understanding of the study, survey tools, sampling design, sampling process to be followed, respondent selection criteria, expected data quality, local language terms and dialect, etc.
- Research tools (on each question and its significance in the questionnaire).
- The details were explained through various techniques like lectures, role plays, mock interviews and demonstration interviews.
- After classroom sessions, field practice sessions were conducted amongst similar category samples of respondents as planned in the research design of this study.
- Investigators were allowed to conduct actual interviews only after satisfactory performance in pilot interviews on field.

#### iv. Quality Control processes adopted

Multi-pronged robust process was followed for quality control during data collection. Following steps were followed for quality control:

- The entire survey work for the study was done under the direct supervision of Karma Online Ventures LLP in-house employees i.e. either Project In charge/Project Associate. Looking after the nature of the study, no part of the project was outsourced.
- A checklist was shared with each team member. At the end of every interview, team member was supposed to cross verify with the check list whether all the required information was recorded or not. Team members were instructed to leave the place of interview only when points written in the check list were taken care of and subsequently ticked [ ✓ ] as well.
- At an interval of certain days (based on sample coverage of corresponding centre), debriefing meeting was done with the field team. In some cases, Project In charge was engaged to clarify doubts of the field investigators from time to time.
- A detailed checklist was prepared for validation purpose, using which all the responses were cross-checked for entire questionnaire to ensure completeness and logical flow.
- Team Members doing validation, were supposed to go through each form and if needed, the person who conducted the interview were contacted to seek clarification. In case of further missing data or wrong data, efforts were made to re-collect the data by personally

visiting the respondent or by telephonic means (if possible). Only after ensuring the completeness of information received from the respondent, the interview was treated as final sample covered.

- Team members involved in the study were those who had prior experience of conducting studies of similar nature.

#### v. Team involved for field survey

Field investigators involved in data collection were having Bachelors or Masters degree in Management/Rural studies/Commerce/Arts and having experience as field researcher or had done surveys of similar category respondents in Rajasthan.



## G. Data Analysis & Findings

As per the overall mission of the Trust to be a catalyst for the betterment of rural poor with special focus on marginalized communities and needy people minorities by providing direct support to local communities with its strong presence at grass root level in Rajasthan area. The current program was undertaken in Baap & Phalodi tehsil of Jodhpur district.

### i. Data Analysis of MIS Data

As part of the scope, we had done in-depth analysis of MIS data maintained by the project implementation team. This section provides details of the beneficiaries selected under the program and year wise progress of the project.

Below details are the progress of the Toilet / shower units in the 1<sup>st</sup> year i.e. 2020

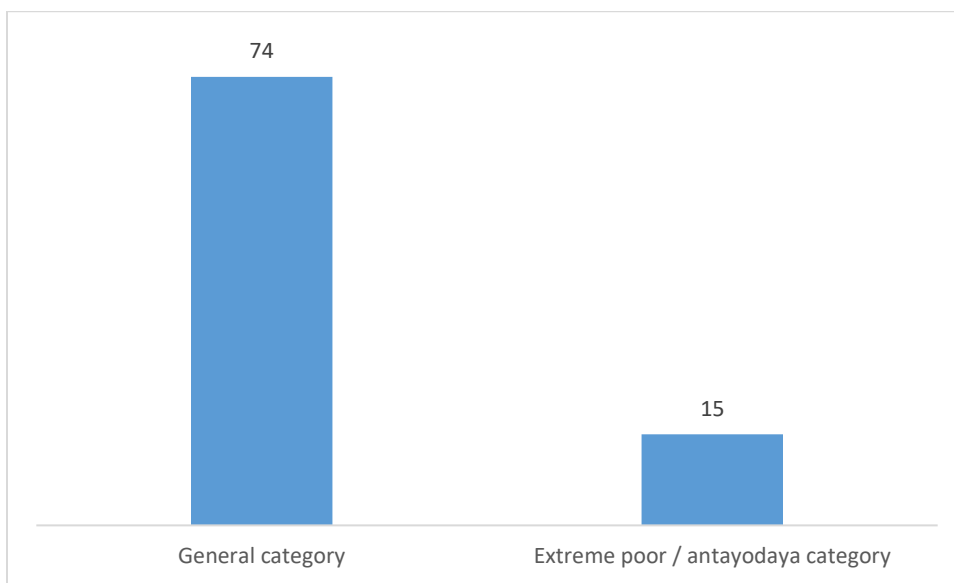
S. No.	Village	Gram Panchayat	No of toilet cum bathroom units allotted
1	Sihda	Sihda	6
2	Jaiseri	Sihda	4
3	Narayan Hari	Sihda	5
<b>Total of Sihda</b>			<b>15</b>
4	Bharua Nagar	Modkia	1
5	Madpura	Modkia	3
6	Panna Nagar	Modkia	2
7	Khakhuri	Modkia	2
8	Modkia	Modkia	1
<b>Total of Modkia</b>			<b>9</b>
9	Bhanani	Tepu	3
10	Jodhani	Tepu	3
11	Kanasi Moti	Tepu	5
12	Durgani	Tepu	4
<b>Total of Tepu</b>			<b>15</b>
13	Jaimla	Jaimla	4
14	Baghji Ka Par	Jaimla	1
15	Deep Nagar	Jaimla	4
16	Moti Nagar	Jaimla	4
<b>Total of Jaimla</b>			<b>13</b>
17	Pratap Nagar	Akhadhana	1

S. No.	Village	Gram Panchayat	No of toilet cum bathroom units allotted
18	Hari Singh Nagar	Akhadhana	1
19	Akhadhana	Akhadhana	3
20	Sanguri	Akhadhana	3
<b>Total of Akhadhana</b>			<b>8</b>
21	Bhakaria	Bhakaria	4
22	Tanot Basti	Bhakaria	4
<b>Total of Bhakaria</b>			<b>8</b>
23	Bheevji Ka Gaon	Ghatore	4
24	Hanwant Nagar	Ghatore	1
25	Ramjanpura	Ghatore	1
26	Kesarpura	Ghatore	1
<b>Total of Ghatore</b>			<b>7</b>
27	Shekhasar	Shekhasar	5
28	Bandheri	Shekhasar	7
29	Sonda	Shekhasar	1
30	Shivnath Nagar	Shekhasar	1
<b>Total of Shekhasar</b>			<b>14</b>
<b>Grand Total</b>			<b>89</b>

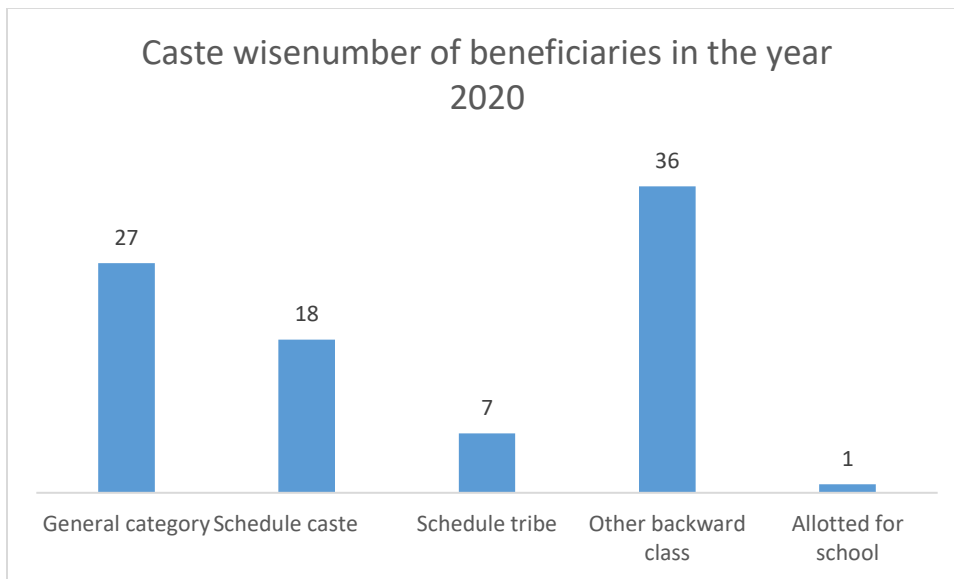
Demographic survey report of number of family members benefited of 88 toilet / shower units and number of children and staff members benefited of one school. This survey report is summarized as under:-

S. No.	Type of beneficiaries	No of beneficiaries	Children upto 6 years of age			Children from 7 to 18 years of age			Adults over 18 years of age			Total members benefited
			Boys	Girls	Total	Boys	Girls	Total	Males	females	Total	
1	Families	88	117	126	243	167	149	316	163	161	324	883
2	School	1	-	-	-	130	120	250	6	2	8	258
<b>Total</b>		<b>89</b>	<b>117</b>	<b>126</b>	<b>243</b>	<b>297</b>	<b>269</b>	<b>566</b>	<b>169</b>	<b>163</b>	<b>332</b>	<b>1141</b>

Graph 1– Economic status wise number of beneficiaries in the year 2020



Graph 2 : Caste wise number of beneficiaries in the year 2020



Construction of all the 8 tankas (7 under general category and 1 under extreme poor / antayodaya category) were constructed in th first year of Project Sahayata XIV. These tankas are fully complete and are being used by the beneficiaries. Hand pumps for taking out water from the tankas have been installed on all the tankas.

Caste wise summary of tankas allotted during 1st year i.e. 2020 is as under:-

General category	02
Schedule caste	02
Schedule tribe	03
Other backward class	01
<b>Total</b>	<b>08</b>

Village wise summary of tankas allotted during 1<sup>st</sup> year i.e. 2020 is as under:-

S. No.	Village	Gram Panchayat	No of tankas allotted
1	Jaiseri	Sihda	1
2	Durgani	Tepu	1
3	Bhanani	Tepu	1
4	Akhadhana	Akhadhana	1
5	Tanot Basti	Bhakaria	1
6	Kesarpura	Ghatore	1
7	Shekhasar	Shekhasar	1
8	Deep Nagar	Jaimla	1
<b>Total</b>			<b>8</b>

Below demography profile benefited from the construction of the toilet

S. No.	Type of beneficiaries	No of beneficiaries	Details of family members benefited										No of animals benefited		
			Children upto 6 years age			Children from 7 to 18 years age			Adults over 18 years age			Total Members	Big	Small	Total
			Boys	Girls	Total	Boys	Girls	Total	Male	Female	Total				
1	Families	8	9	7	16	12	8	20	12	12	24	60	24	69	93

Below details are the progress of the Toilet / shower units in the 2<sup>nd</sup> year i.e. 2021, till 31<sup>st</sup> August 2021.

- Construction of 15 toilet / shower units has been completed. These toilet / shower units are fully complete and are being used by the beneficiaries. 12 of the toilets/shower beneficiaries are from General category and 3 are from Extreme Poor / Antayodaya Category
- In case of 61 beneficiaries, the toilet construction work is work in progress. 51 of the toilets/shower beneficiaries are from General category and 10 are from Extreme Poor / Antayodaya Category. Detail status of WIP cases are shared below:
  - Payment of 1<sup>st</sup> & 2<sup>nd</sup> installments has been made to 32 beneficiaries and their toilet / shower units are expected to be completed within 1½ months time
  - Payment of 1<sup>st</sup> installment has been released to 29 beneficiaries and their toilet / shower units are expected to be completed by December end.
- The remaining 13 beneficiaries are expected to commence the work shortly.

Below details are the progress of the Tankas in the 2<sup>nd</sup> year i.e. 2021, till 31<sup>st</sup> August 2021.

- Construction of one tanka has been completed. This tanka is fully complete and is being used by the beneficiary family.
- In case of 5 beneficiaries, the Tanka construction work is work in progress. Detail status of WIP cases are shared below
  - Payment of 1<sup>st</sup> & 2<sup>nd</sup> installments has been made to 02 beneficiaries and their tankas are expected to be completed within 1½ months time.
  - Payment of 1<sup>st</sup> installment has been released to 03 beneficiaries and their toilet / shower units are expected to be completed within two months.

Of the above 6 tankas beneficiaries in the year 2021, 5 belongs to general category and 1 belong to Extreme Poor / Antayodaya Category.

The remaining 2 beneficiaries are expected to commence the construction shortly.



- ii. Findings from the Survey
  - a. Profile of samples covered in the survey

This section of the report presents detailed demographics including socio economic background of the respondents covered in the study. Also, in the below subsections data presented by various graphs and charts establish the fact that all across possible category of respondents are covered in the study. As stated in the sampling plan section of this report, we had made efforts to cover maximum possible Gram Panchayats as part of the study and efforts had been made to cover varied caste, gender, age group samples covers in the study which can be seen in the subsequent sub sections.

*Gram Panchayat wise, purpose wise beneficiaries covered in the survey*

In total 40 respondents were interviewed of which 37 are cases who had received toilet construction support and 3 are the cases who have been supported by Tanka construction. The table 1 indicates the Gram Panchayat wise samples covered under each nature of benefits.

*Table 1 : Gram Panchayat wise, samples covered in the survey*

<b>Gram pachayat</b>	<b>No. of Beneficiary</b>
Akhadhana	6
Jaimla	4
Sihda	9
Tepu	8
Bhakhriya	3
Shekhasar	10

In the survey efforts were made to cover samples from different villages within a Gram Panchayat.

*Age group wise respondents covered in the survey*

Among the total respondents interviewed, efforts were made to cover at least some samples from each age group. As part of the survey, we have not interviewed any respondent whose age is lesser than 22 years.

During the survey age of the respondent was asked and later it was grouped into a range. The table 2 indicate age group wise, nature of beneficiaries' wise samples covered in the study.

*Table 2 : Age growup wise samples covered in the survey*

Age Group	Grand Total	
	No. of respondents	Age group wise Percentage of Sample
66 years and above	4	10%
Between 45 to 65 years	11	28%
Between 31 to 45 Years	18	45%
Between 22 to 30 years	7	17%
<b>Total</b>	<b>40</b>	<b>100%</b>

Family structure of the households covered in the survey

Among the 40 samples covered in the study, 33 samples i.e. 82.5% are nuclear family structure and 7 i.e 17.5% are joint family structure. The table 3 indicates the nature of benefit wise data covered in the study.

Table 3 : Family structure wise samples covered in the survey

Family Structure	No. of respondents	Family Structure wise Percentage of Sample
Joint	7	17.5%
Nuclear	33	82.5%

Gender of the respondents covered in the survey

In the study to have holistic perspective it is important to cover both the gender of the society. Here in the study, we have made efforts to interview both genders. The table 4 indicate 22.5% female from the beneficiary household were covered in the study.

Table 4 : Gender wise samples covered in the survey

Gender of the Respondent	No. of respondents	Gender of the Respondent wise Percentage of Sample
Female	9	22.5%
Male	31	77.5%

#### Caste of the respondents covered in the survey

Since the selected blocks in the study are dominated by OBC, SC and ST class population. Same is reflected in the table 5 as well. 72% respondents covered in the study belong to OBC, ST or SC and 28% belong to general caste.

Table 5 : Caste wise samples covered in the survey

Caste of the Respondent	No. of respondents	Respondent Caste wise Percentage
OBC	9	22.5%
ST	4	10%
General	11	27.5%
SC	16	40%

#### Education of the main member of the HH

Education is one of the important parameters to understand the importance of hygiene in human health. Also, it is seen in many cases that most educated person in the house is influential in the decision-making process related to WASH domain. In the study we have taken data of education of the main member of the House hold, shown in table 6.

Table 6 : Education of the main member of the Household

Education of the Respondent	No. of respondents	Education wise Percentage
Illiterate	14	35%
Primary	9	22.5%
Upper Primary	9	22.5%
Secondary	4	10%
Higher Secondary	2	5%
Graduate	2	5%

#### Main income source in the family of household covered in the survey

Majority of the population in the geography is dependent on agriculture as major source of income, the same got reflected in the survey as well. Among the 40 samples covered in the study 55% respondents stated agriculture or farm related labor activities as the primary source of income in the house. The table 7 indicates the nature of benefit wise profession of samples covered in the study.

*Table 7 : Source of income wise samples covered in the survey*

Main source of income in the House	No. of respondents	Main source of Income in the HH w (Percentage)
Agriculture	16	40%
Animal Husbandry	2	5%
Farm labor	6	15%
Labor (other than farm labor)	15	37.5%
Shop	1	2.5%

Poverty level wise household covered in the survey

In the survey we have taken data on the below poverty line households i.e extreme poor category. As indicated in the table 8, among the 40 respondents, 9 (22.5%) belonged to below poverty line i.e extreme poor category. The rest 31 (77.5%) were poor and vulnerable.

The table 8 indicates poverty wise households covered in the study.

*Table 8 : Poverty wise samples covered in the survey*

Gram Panchayat	(BPL) Extreme Poor Category	Others (poor and vulnerable)
Akhadhana		6
Jaimla		4
Sihda	4	5
Tepu	2	6
Bhakhriya	2	1
Shekhasar	1	9
Total % of BPL and Other	22.5%	77.5%

Constructed structure of the house of household covered in the survey

The construction structure of the house is also an important parameter in India to understand the economic status of the household. In the survey we have taken data on the structure of the house. As indicated in the table 9, among the 40 respondents 82.5% stated of having Pucca (Cement/Brick based) house.

Table 9 : Gram Panchayat wise, constructed structure of the house wise samples covered in the survey

Gram Panchayat	Pucca (Cement/Brick based)	Semi – pucca / kutcha / hut
Akhadhana	6	
Jaimla	3	1
Sihda	8	1
Tepu	7	1
Bhakhriya	1	2
Shekhasar	8	2
<b>Total</b>	<b>33</b>	<b>7</b>



## b. Findings from the Survey

This section covers detail analysis of findings based on the responses stated by the respondents in project geography. Efforts have been made to cover all the objectives as predefined in the scope of the research project.

Since the sample size is small, more efforts have been made to capture qualitative data and assess how the whole initiative has created impact in the beneficiaries' life.

The data presented in this section is further divided into two sub sections wherein the first section have detail findings covered from beneficiaries received support for toilet construction and the next section covers findings from responses of Tanka beneficiaries.

### **Beneficiaries – Toilet Construction**

#### *Source of motivation to construct the toilet in house*

In the survey respondents were asked who motivated them to construct the toilet in their house. All the 37 beneficiaries for whom trust has supported in construction of toilet responded as HHMHSTC Project Officer/Staff Members were the major motivation behind taking the initiative. Moreover there was strong wish and a significant need of having a toilet in their home. Most of the respondents stated, almost all family members where engaged in the entire process and everyone was actively participating from conceptualizing to competition. This indicate the high level of motivation among the beneficiaries for having toilet in their own house. Some respondents highlighted that as the Trust is not contributing 100% financial support in the construction work of toilet and they did not have enough monetary capital to invest the remaining part, yet they arranged money from other sources, moreover family members themselves were engaged in the construction process to save labor cost and constructed the toilet. Some family members foresee this expenditure as capital investment and were confident in generating income from other sources because of saving in time which otherwise they had to spent for going for defecation in open by wasting approx. 2/3 hrs every day. Some members also appreciated the Trust's policy of Payment disbursement by directly transferring the money into beneficiary's bank account by way of NEFT

since this brought more transparency in the whole process Beneficiaries have claimed ownership of the built toilet since their own money is invested in the construction work.

Support received from HHMHSCT

As indicated in the table 10 below, of the 40 respondents interviewed all had a grateful feeling for the Trust and its funder. Below table indicates the response received when the respondents were asked to share what kind of support received from HHMHSCT:

*Table 10 : Response on support received by HHMHSCT*

Response	% of responses
Monetary support in constructing the toilet	100%
Helped/Provided inputs to build such a method to save in cost	80%

The respondents were asked to share what were the benefits that HHMHSCT or its partner organizations helped to build toilets, following responses were received:

*Table 11 : Response on benefits received by having a HHMHSCT or its partner organizations as support organizations*

Response	% of responses
Able to build good quality toilet	100%
Able to make toilet in shorter time	80%
Able to make toilet with basic facilities	85%

Who supported in construction work of the toilet

Among the 37 beneficiaries covered in the survey, 86% reported of using skilled/trained mason in the construction work of toilet of which 24 HHs used trained masons from their own village and 8 used from the other village. Recruiting skilled worker indicate the quality of construction. 14% respondents who have taken unskilled masons stated the reason to save on cost, since they were cheaper in wage rate as compared to skilled/trained masons.



#### Type of roof in the toilet

Among the 37 beneficiaries covered in the survey, 100% stated of having large stone slab roof. Large stone slabs are predominately used in construction for roof purpose in this geographical region and also it is cost effective as compared to RCC roofing.

#### Type of wall in the toilet

Among the 37 beneficiaries covered in the survey, 78% reported having stone based wall in toilet and 22% stated of having brick based walls.

#### Availability of tap connection in toilet

Among the 37 beneficiaries covered in the survey, 65% (24 Households) have installed overhead tank and have tap connection inside the toilet and the rest 35% (13 Households) do not have overhead tank and have no tap connections. These households are using bucket in the toilet and bathroom. They bring water from the tanka manually.

#### Benefits for having toilet in the house

In the survey multiple choice questions were asked on how toilet facility is benefiting in their life? Various responses and contextual stories were shared by the beneficiaries. The table 12 indicates the responses. The contextual stories are covered in case study section of the report.

The major benefit beneficiaries perceive is relief in monsoon and winter season. In some of the households, the construction of toilet got completed recently. It is very likely that because of saving in time the beneficiaries will start working on new income generating activities or will deploy more time in their existing income source which will lead to increase in their income. The beneficiaries who had experienced longer history with the in-house toilet stated they are now giving more time in the existing income generating activity and also now female members of the households have started contributing significantly. On a larger context, female members are now contributing more in the household and as such the program has led to women empowerment and is bringing female members of the house in mainstream.

Almost every household responded in the qualitative interviews as the program of supporting toilet construction has created a large impact on female members.

Table 12 : Perceived benefits of having toilet

Reasons\Gram Panchayat	Percentage of Responses
Save time	89%
Woman are safer	88%
Decrease distance for latrine	81%
Relief in rain, cold and heat	72%
Ashamed in front of others while openly defecating	65%
Helpful for elder people	64%
Reduced dirt in village	48%
Reduction in violence in village	46%
Guests are more comfortable	42%
Increased respect in society	42%
Helpful for pregnant woman	21%
Reduction in animal attack or bite	16%
Seeing the toilet in my house, the well of neighbor built the toilet himself	52%

#### Satisfaction for having toilet in the house

Overall having toilet in the house has benefited the beneficiaries in many ways. Every household covered in the survey have a unique story to share as to how the in-house toilet is benefiting to them. Every beneficiary covered in the survey appreciated about the noble cause the Trust is doing.

As indicated in the table 13 respondents were asked to share their satisfaction level on the initiative undertake by the HHMHSCT of building toilet for the villagers, 100% respondent stated between good to very good of which 98% stated very good.

Table 13 : Satisfaction from the PADEM and HHMHSCT supported initiative of Toilet Construction program to needy Households

Gram Panchayat	Very Good	Good
Percentage	98%	2%

#### Usage of Toilet by all member of the Households

- Among the 37 respondents interviewed in the survey, all the members in the household are using constructed toilet. So the program has 100% usage among its beneficiaries.
- Facility of washbasin with soap for washing hands is available outside every toilet.
- The constructed toilet is used for bathing as well as toilet purpose.

#### Cleaning frequency of Toilet

The sustainability of the toilet construction project will be ensured if the created asset is well maintained and proper care is taken in time. Based on the survey it can be clearly seen, the beneficiaries are well aware about the importance of keeping the toilet clean. As indicated in table 14, among the survey done in 37 households, 91% clean their toilet daily and 9% respondents stated of cleaning toilet in every 2/3 days. In our survey, we had observed, washing bathroom and toilet cleaning liquid was available in the toilet and the toilets/bathrooms were well maintained. The survey team had made attempt to see the toilet from inside and almost all the toilet were visually checked. In none of the case any such concern found where the built infrastructure was messy.

*Table 14 : Frequency of cleaning toilet by HHs*

<b>Regular/Daily</b>	<b>Once in 2/3 Days</b>
91%	9%

#### *How the support from HHMHSCT helped in construction of Toilet*

Beneficiaries stated that quality of construction under Trust's programme is much superior as toilet is constructed as per their wishes. Trust only advises the technique and provides advice and drawing of the toilet / shower unit. Beneficiary purchases quality material and hires skilled masons . All Beneficiaries claimed ownership and owned responsibility of construction.

## **Tanka Construction**

Total 3 interviews were done of Tanka Beneficiaries. Below table 15 indicate Gram Panchayat wise number of beneficiary samples of Tanka were covered in the survey

*Table 15 : Gram Panchayat wise, beneficiaries covered in the survey for number of Tankas*

<b>Gram Panchayat</b>	<b>Number of Beneficiaries</b>
Akhadhana	1
Jaimla	1
Tepu	1

Since the sample size is very small, here in some cases we have presented the data in bullet format rather than using table or graphs.

### [Source of water in the Tanka](#)

All the beneficiaries reported rain water as the primary source of water and in case of scarcity they get the water filled with the tanker. Typically, the rain water is used till January month and later water is transported in the tanka from the nearest water source.

### [Benefits of having Tanka](#)

In the survey a multiple choice questions were asked on how Tanka facility is benefiting in their life? Various responses and contextual stories were shared by the beneficiaries. The table 16 indicates the responses. The contextual stories are covered in case study section of the report.

The major benefit beneficiaries perceive is relief to female members since they were primarily engaged in fetching water from various sources for the household need. The region has scarcity of water. Based on the responses received from beneficiaries who are using the Tankas build a year ago, rain water stored in the Tankas lasts till the month of January post which water is sourced through tanker which cost them between INR 500 to 1000 per tanker. Some of the respondent stated, they use camel cart and get water from nearby water source.

Tankas have relieved the beneficiaries in many ways but for 5/6 months they have to bear significant cost on sourcing of water from the village source.

Female respondents stated, because of availability of water in the tanka near to house they now get more time for household activities. Some respondents stated earlier they had to source water

from far distance which caused muscle pain, body ache along with cost either of tanker or managing the camel cart etc. Now they are significantly relieved from all these troubles and challenges.

*Table 16 : Benefits stated by respondent because of having Tanka*

Benefits
The cost/time/efforts of water fetching has reduced
By constructing tank, can collect the rain water
Safe to drink
Helps in seasonal security
Can use water for other than drinking purpose
It helps to engage in new income generation activity / spend more time in the existing income source
It is possible to boost the current economic trend by building tanks
There is relief in muscle aches, back pain, leg blisters etc.
Increased time for household activities
Animal attack is relieved in violence etc
Find time for social work
Children get time to study (if they are involved in water fetching)

#### Reduction in Annual cost

Respondents were asked, if you have reduced the expenses of water flow to the house due to tanka, then how much is the annual cost reduced? Respondents stated that previously female members were fetching water for the family from long distances. Now after construction of tanka they are using harvested rain water for about 6 months which costs them nothing. Previously during these 6 months they were spending following amount in addition to the water transported by the female members of the house.

#### Additional Income benefit

Respondents were asked, because of having tanka facility proximity to the house which has resulted in saving in time, is there any increase in income from the existing economic activity or additional/new income activity. Based on the interaction with the beneficiaries, the Tanka infrastructure has definitely resulted in saving in time and beneficiaries are able to devote more

time in their existing profession or new economic activities. Also now the water can be stored in scarcity time.

Benefits from having Tanka compare with the past

Respondents were asked about various problems and challenges they had to face before the availability of Tanka facility. The table 17 indicates gram Panchayat wise responses shared by beneficiaries in various challenges they had to face during the days of not having Tanka facility.

Table 17 : Responses stated on challenges they had before the Tanka facility

Responses
Had to compromise on the time on Income generating/Economic activity
Water to be brought out everyday
Had to go far to fill the water
Used to cost more to get water

Satisfaction from the constructed Tanka

Overall the Tanka facility in the house has benefited the beneficiaries in many ways. Every household covered in the survey have a unique story to share as to how the in-house tanka is benefiting to them. Every beneficiary covered in the survey appreciated about the noble cause the Trust is doing.

As indicated in the table 18, respondents were asked to share their satisfaction level on the initiative undertake by the HHMHST of building toilet for the villagers, 100% respondent stated the response as very good.

Table 18 : Satisfaction from the PADEM and HHMHST supported initiative of Tanka Construction program to needy Households

Response	Total
Very Good	3

Project created Impact in the life of Household members

Respondents were asked, how the Tanka facility has benefited in their day-to-day life. The multiple-choice responses were asked. The table 19 indicates the responses received from the survey.

The biggest advantage respondents stated was saving in cost and time. One of the respondents stated, they earlier had water storing tank of 1000 ltr in their house. At least 2 or 3 times in a week they had to call for a tanker or source the water themselves using camel cart. There was no provision for storing rain water. Now with the Tanka facility supported by The Trust, they can store rain water which can be used for at least 5 to 6 months and later water can be sourced using tanker of large quantity which saves cost.

Every beneficiary covered in the survey responded, the Tanka facility has significantly made the life convenient for female members of the house.

*Table 19 : Responses on the impact of the Tanka facility in beneficiaries' life*

Responses
Helped in saving the expenditure on the purchase of drinking water
Better water availability for livestock
Helps to employment at the local level
Helps to ensure safety of drinking water
Has improved social status
Helped improve health and reduce health related expenses.





## H. Stories from Ground- Case Studies

**Name:** Manohar Singh H/o Mrs. Prem Kanwar

**Gram Panchayat:** Tepu

**Type of benefit:** Toilet/Bathroom



### **Toilets help bring safety and security to Manohar's life**

Every day, Manohar Singh and his family would have to wake up early and walk hundred meters behind their house to defecate near the fields. Like many villages in rural India, open defecation had been prevalent among families of Tepu village in Bap tehsil, Jodhpur District, Rajasthan, India for generations. Open defecation poses serious challenges in health and sanitation contributing to diseases and socio-economic problems.

A small time farmer, Manohar Singh has no formal education and relies chiefly on his land for livelihood. He has 6 members in his family which includes 3 young children. Like most folk in his

village, Manohar Singh had little to no clue about the serious health and sanitation problems that open defecation poses. *“My son got bit by some insect when he was out to defecate and he fell ill.”* said Manohar. His wife, Prema would have to plan her visits to the fields during early morning or late evening to avoid being seen by the elder folk of the village. The stress of holding latrine has given rise to several health complications to Prema. Things were not looking well for Manohar Singh and his family and they held conversations about constructing a toilet at home.

During this time Project Sahayata XIV of HHMHSCT was assessing the water and sanitation needs of Tepu village. Manohar requested the village panchayat to help. The team from Project Sahayata XIV, conducted a thorough research and understood the needs of the villagers. They encouraged Manohar to construct a toilet and provided financial aid. The team also addressed the need to have a toilet at home and health risks of open defecation. Finally in 2021, Manohar finished the construction of a brick walled toilet along with a water connection. The family was relieved beyond words. They can now defecate without shame or fear in a safe and secure environment. *“It was such a joy to see my wife and children happy and safe. Nothing can replace that joy”* said Manohar. Manohar’s toilet has encouraged more of his neighbors to take up the task. He hopes that his village will be open defecation free soon.

**Name:** Swarup Singh

**Gram Panchayat:** Sekhasar

**Type of benefit:** Toilet/Bathroom



**Toilet helped him live a safe and dignified life**

Swarup Singh a farmer from Shekhasar village, Rajasthan lives with his wife and 2 young children. Swarup and his family defecate in the open. This has been a practise in his village for over numerous generations. Like many rural communities in India, Swarup considered it to be a normal precision as defecation is common in India, it is as much a gendered issue as it is a cultural. Sanitation is considered to be one of the most important aspects for a dignified and healthy life.

Open defecation compromises dignity, safety and health. This is especially true for women. Women find toilets safe and convenient to use at night especially during childcare. In the absence of it, they have to hold out and wait for long hours which causes health issues. Like many other women Swarup's wife was also facing several issues which interfered with her time with her family and health. In Swarup's absence she would have to walk long distances during dawn to find a suitable spot for them to defecate leaving them open to attack from reptiles and other animals. *"I was one of those people who did not understand the use of toilet too. It has not been a part of our culture but putting my family at risk was not something I wanted to do. So, I decided that I would construct a toilet at home:* said Swarup.

At first, he was unaware of the requirements of a toilet construction and had to take the help from the Panchayat's. Panchayat introduced him to Project Sahayata XIV of HHMHSCT, who helped him understand the various facets of sanitation and also provided financial aid to construct the toilet. Equipped with the knowledge and aid from Project Sahayata XIV Swarup constructed a toilet and bathroom building in 2021. A tank was also built for rain water collection and for regular use for the toilets.

Swarup admits that life is much better now with a toilet at home. His family can use it whenever they need and his wife doesn't have to be embarrassed about defecating. *"My family is safe and happy. The toilet has changed our life. We are all in much better mood now that we don't have to plan our life around the morning ablutions."*

**Name:** Ram Lal s/o Bhaga Ram

**Gram Panchayat:** Akhadhana

**Type of benefit:** Toilet/Bathroom



### **A toilet that keeps the family safe and secure**

Ram Lal is a farmer from Akhadhana village, Rajasthan. His family of six which included his 4 young children, had to walk 2 kms every day to find cover to defecate. The issue of open defecation is omnipresent in a country like India where certain demographic groups are often the victims of substandard life. Women and children are one such group. Often, the women of the household have to accompany the young children or elderly people at home putting the lives of everyone at risk to various elements of nature.



Ram Lal's family had to make this difficult trek every day, to find a secluded spot to defecate. This was especially hard on his wife and young children. *“Sometimes, when I come back late from work my wife would have to accompany them to the fields late in the evening and she would be very scared.”* Attack from animals are common during such early morning and late evening walks to the fields. Ram Lal decided that this can't go on and decided that building a toilet in the house would be the only way to keep his family safe.

He sought help from the local body and they put him in touch with Project Sahayata XIV of HHMHSCT. The team from Project Sahayata XIV analyzed the area around Ram Lal's house and advised him on the building along with that they also provided financial aid. With the support from Project Sahayata XIV he was able to complete the construction of cement building with a water tank facility for the toilet and bathroom. *“My family is thrilled. They don't have to venture out into the dark or plan their activities around defecation. They can use it whenever they like.”* said Ram Lal. He thanks the team from Project Sahayata XIV for all their support and encouragement and is happy to see his family safe and secure.

**Name:** Swaroopa Ram s/o Mangi Lal

**Gram Panchayat:** Sihda

**Type of benefit:** Toilet/Bathroom



### **Swaroopa leads the way for a sanitised change**

Sawroopa Ram is a father of four young children who engages in farming in the village of Sihda, Rajasthan. Everyday, Swaroopa Ram and his family had to walk long distances to find a bush or fields for cover to defecate. It was worse when the season changes and days get longer or the nights shorter and especially hard when the monsoon season starts.



Open defecation is an issue that affect everyone but women and children are affected disproportionately. The lack of toilet also raises questions around shame and dignity among women. They would have to choose odd hours of the day to defecate themselves and it becomes difficult with childcare and pregnancy. *“My wife and children were troubled. It was difficult to walk long distances with my young children and we were constantly worried for their safety.” said Swaroop Ram. He decided that its best to construct a toilet at home.*” Most houses in our village have toilets now and people don’t go out to defecate often unlike the older days.”

He finally constructed a toilet with the support of Project Sahayata XIV of HHMHSCT. The project helped him financially and also the team was able to guide him on the do and don’ts of sanitation, health and hygiene. The construction of the toilet was completed in 2021. The building is made of cement and has a bathroom adjacent to it too. There is also a tank for rain water collection which can be used for the toilet. His family is overjoyed as they do not have to walk long distances to the field and it’s also helpful when guests come over. Swaroopa Ram is happy, His family is safe and healthy and he gets to save a lot of time. *“Before the toilet construction, our entire day would be planned around the defecation time, now, my wife and children can go as they please.”* Adds Swaroopa Ram.

**Name:** Gomu Ram s/o Balu Ram

**Gram Panchayat:** Shekhasar

**Type of benefit:** Toilet/Bathroom



### **Toilet gives dignity and strength to the elderly**

Gomu Ram is a 70-year-old farmer from Shekhasar village, Rajasthan. He lives with his family of seven members, which includes his children and grandchildren. He comes from a generation that

considered the topic of toilet improper and sanitation an understated issue. Defecation outside is a common practice among most rural adult men. Being farmers, they need to visit their crop fields early in the morning and open defecation become the norm. They consider it clean and convenient compared to using a toilet. But defecating in the open is a tough task for the elderly. This is what happened to Gomu Ram. With age, traversing to the fields become an uphill task for him, he was unable to squat and usually will have to be accompanied by someone from the family. Gomu said *“It become worse when I was sick and I had to use the toilet frequently. I would have to depend on someone and that took a lot of time and energy from my family and I would be embarrassed too.”* His family insisted that he build a toilet.

Gomou decided to make a change, giving up deep rooted practise of open defecation was not easy but his age and the complications that came with it led him to make a decision. He decided to build a toilet at home and sort help from his panchayat to understand oh how to build a toilet and a bathroom too. Project Sahayata XIV of HHMHSCT came to aid financially and encouraged him to build a toilet as it was safe and secure for someone of his age to have a toilet at home plus it was beneficial for the entire family. The toilet construction was completed in 2021.It is a full functioning toilet made with cement but without a water connection, the water will have to be collected from the tank to be used in the toilet. *“The toilet is a boon, I don’t have to walk to the fields or wait for the right time to go to the toilet. The women of the house feel secure too.”* said Gomu.He is thankful to the team from Project Sahayata for guiding and encouraging him to take such a big step as it was not easy to change age old habits especially among the elders of the village.

## I. Conclusion

An effort by His Highness Maharaja Hanwant Singhji Charitable Trust, a non-government organization by providing Tanka and Toilet infrastructure support is considered as a remarkable initiative by the rural population of the Project area. The program is innovative and impact creating in many ways. Based on the interaction with 40 beneficiaries the program has made significant impact in socio economic life of the beneficiaries. All the respondents stated, they would have not done such quality construction of Toilet and Tanka if there would have been no support from the Trust. Even the field team engaged in the survey work, stated that discussion with the beneficiaries was memorizing experience for them. Women beneficiaries during discussions pointed out that a positive change has come in their social life and experience of having tanka / toilet infrastructure is remarkable for them. Based on the experience of interaction with 40 beneficiaries, we are confident to state below the tremendous impact the program has created:

- **Women Empowerment:** Both the nature of infrastructure have contributed significantly to woman empowerment in the project area. Drudgery and sufferings of women have reduced.
- **Girl's Education:** Both the activities have promoted girl's education in the project area.
- **Benefits to physically challenges citizens:** In the beneficiary selection process, special care has been taken to include such household who need the toilet or Tanka infrastructure the most. Most of the beneficiaries surveyed have physical challenged member in the household for whom long distance travel for defecation as well as for bringing water for household use was very challenging and now having toilet / tanka facility in their house they have been significantly benefited.
- **Saving in Transpotation Cost of Water:** The beneficiaries earlier had no/very small provision to store rain water. Now with the Tanka facility they are able to store rain water in large quantity. During summers with water storage capacity available, beneficiaries have to bear reduced cost of sourcing water by hiring water tanker.
- **Increase in Income:** Because of tanka / toilet facility available at home, beneficiaries are now able to devote more time to their existing professions/ other income generating activities. This has led to increase in their annual income.

- **Health benefits:** Water and sanitation are among the major factor to create health impact in human life. Now with having toilet facility and water storing infrastructure with the beneficiaries there is significant improvement in their health. Both the activities have helped in controlling water borne diseases, enteric diseases and microbiological contamination. All the benefited households have saved on treatment of these diseases. Children have been immensely benefited
- **Safe Environment:** The villagers were going for open defecation and adopting unsafe environment practices because of not having toilet facility in their house. Now with the availability of toilet such practices have been reduced and there is improvement in general environment.
- **Increased Social Status:** Owning a Tanka / Toilet has increased social status of the beneficiaries.

We have made efforts to understand the program from the below mentioned lense as well:

### **Relevance**

- **Sanitation** - Sanitation and hygiene improvement is a national level agenda for developing countries. The project villages chosen are geographically backward. Every beneficiary covered in the survey was appreciating the efforts made by the Trust in providing sanitation infrastructure. The project has given significant relief to children, women, sick and old age people. The everyday trouble for walking long distance because of non-availability of bushes/trees, wasting 2/3 hours daily, females feeling shame in front of others, accompanying old-age/handicapped/physically challenged member of the household, fear of snake bites, adopting unhygienic practices, safety concerns for women etc. justify the relevance for such a noble intervention in such a geographical area.
- **Tanka** - It is known fact that there is significant scarcity of water resource in this region. On the basis of the data available from secondary sources average rainfall in the region is approx. 250 mm. Since last many years, there is high variation in the annual rainfall and with changing climatic pattern average rainfall is decreasing year by year. The average rainy days in the region are 14 days in a year. The soil in the Project area is not very fertile. The ground water depth is close to 500 feet with high content of fluoride. The non-availability of sufficient surface water resource, desert region, low rainfall and in-depth

ground water with high content of fluoride indicates the beneficiaries were in urgent need of such support which justifies the tanka intervention provided by the trust.

Both the activities are highly relevant

### **Efficiency**

The tankas and toilets constructed in last 20 months duration which includes sourcing the potential beneficiary, convincing for the tanka / toilet construction, motivating for arranging financial contribution, ensuring quality construction and monitoring the work all require an efficient management and high standards of professionals. The project has been able to deliver the required results with best use of its resources. Majority of the beneficiaries stated their satisfaction with the transparent process adopted by the Trust and stage wise payment system. With active support of village level institutions and adopting participatory approach, the trust has completed construction of both the interventions in time to the satisfaction of beneficiaries. Working of H.H.M.H.S.C.T is undoubtedly efficient.

### **Effectiveness**

The mass level camping has covered significant children. This initiative has made a noticeable effect on the health and hygiene of children through improving their health and hygiene practices. By improving children hygiene habits, hygiene habits of their family member also improve because children become change agent at home

As per the Sarpanch Parvati Parihar/ Hanuman Parihar of village Jaimala, initially the HHMHSCT people approached him and asked to provide list of such households who are in need of having toilet in their house and willing to spend nearly half of the amount of constructed toilet. The Trust assigned him the mandate to identify such household where the need of toilet is significant, like belonging to very weak economic class or have somebody in house who is handicapped, cannot walk, injured or old age. He very much appreciated the concept and when he proposed the idea among villagers, the thought was welcomed by them as well. Also the Sarpanch highlighted, the process adopted by trust of giving amount directly in the bank account of beneficiary has built transparency in whole process and clean in approach. Both the interventions tanka and toilet have proved very effective leading significant benefits accrued to the beneficiaries

## **Impact**

The project is creating direct impact on poor and needy households and school students covering. In addition project has created indirect impact on the affluent beneficiaries who have built the infrastructures with their own resources as a result of sensitization programme under taken by the Trust.

Every household covered in the survey has either one or more than one member suffering from a severe health disease or physically challenged or blind or of very old age. This indicates the selection of beneficiary has been rigorous and significant efforts have been made to choose the household which was in maximum need of toilet / tanka infrastructure.

The program is going to make significant impact among women by their empowerment in the society. Their safety and security, saving of their time and increase in health and hygiene practices etc will lead to their engagement in economic activities and generating more income for the family

In this region, female members are mainly engaged in water fetching activity for household need. Now with convenient availability of water by having a tanka will bring significant change in their life. 100% female respondents surveyed in the project area acknowledged and appreciated the support Trust is providing.

## **Sustainability**

During the survey we observed that the toilets built 1 years ago are well maintained by the beneficiaries themselves. They regularly clean and maintain the toilet. Moreover the quality of the toilet constructed is in excellent condition. This has been mainly possible as ownership of the infrastructure constructed has been claimed by the beneficiaries themselves.

In case of Tanka infrastructure, the facility in itself has significant benefits to the beneficiaries. As part of the survey, we observed, that community as a whole is actively participating to take care of the infrastructure as it provides lot of benefits to them.

Both the infrastructures are long lasting as they require very little annual maintenance. Moreover both the structures have become status symbol as both directly impact on their health, well beings



and education of their children. Also looking to the benefits, excellent quality construction and capital cost sharing by the beneficiaries, sustainability of both the structures is ensured.

## J. Suggestions

Below, we share our suggestions on the areas which can be taken forward if same program is continued for more years or similar new program is conceptualized.

- Rain water harvested in the tanka is quite safe for drinking. As per inputs received from Sarpanch and opinion leaders the underground water in the project area contains high quantity of fluoride and as such is unsafe for human and livestock consumption. The government should be pursued to either supply canal water or install treatment plants in the project area. Till then there is a need for sensitizing or creating awareness at the households' level to boil the water used for drinking. This will help in using the available water in more efficient manner.
- More toilets / tankas need to be built for poor section of the society with increased financial assistance. As per survey conducted nearly 40% of rural population in the project area belong to extreme poor section of the society. For extreme poor households financial assistance should be suitably increased.

## K. Disclaimer

In the report it has been tried to take all possible measures of ensuring accuracy and completeness of the data by us, our views, opinions, inferences are still based on completeness and accuracy of the facts stated to us. If any of the facts or assumptions is not complete or accurate, it is imperative that we be informed accordingly, and the inaccuracy or incompleteness thereof could have a material effect on our conclusions. Also while performing the quality checks, we are assuming the genuineness of all signatures and photographs and any other documents that might have been provided to us by the respondents. On a large scale study like this, it doesn't always become possible to individually and independently verify correctness/authenticity of the same. Regarding any information that was dependent on external sources, public domains or secondary research, though it is tried to obtain information as much as possible from the sources generally considered being reliable, Karma Online Ventures LLP assumes no responsibility for such information.

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