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SANITATION IS OUR RIGHT

Right to Sanitation Campaign in India

NOVEMBER 2013

Intent and Reality – the Great Divide!

"Toilets are More Important than Independence"

– M K Gandhi

Father of the Nation emphasised the importance of Toilets in the pre-independent India and said it to be more important than attaining independence from foreign rule. This fact has somehow, in the past 66 years since independence, has not received adequate attention and as a result, the country has not prioritised sanitation. Today, the independent sovereign India is the Global Capital of open defecation with more than half of its 1200+ million people defecating in the open every day. The political independence has not brought any significant change to this reality.

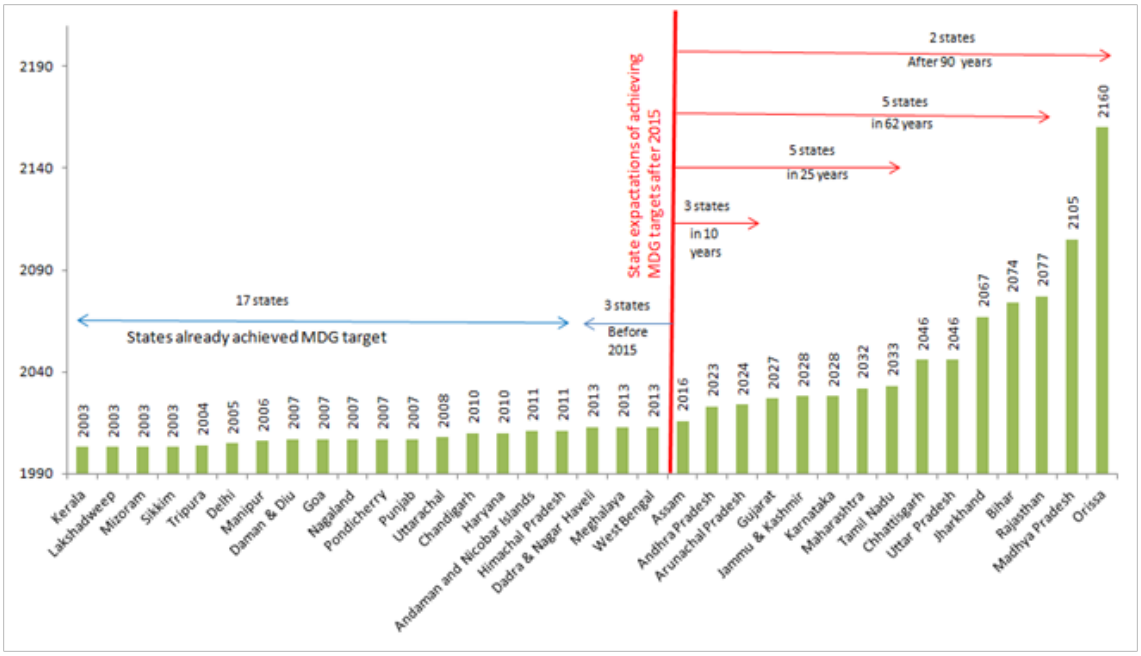
The misplaced priorities led to India celebrating its maiden mission to Mars demonstrating its strategic, technical and execution excellence investing about 400+ crores rupees to join the elite club of nations even when millions of its people are bereft of basic services such as safe drinking water and sanitation. The sanitation crisis calls for similar excellence in action, to save the Indian children from diarrhoeal deaths, malnutrition and stunting, the significant cause of this being poor sanitation.

The sad story further unfolds a grimmer picture of world's third fastest growing economy. The census report in 2011 brought forth the startling information of about 3.5 crore toilets built in ten years at the individual household levels were missing. These toilets were built under the country's flagship program 'Total Sanitation Campaign' which got rechristened as Nirmal Bharat Abhiyan in May 2012 with enhanced incentive support.

This renewed emphasis and additional resource allocations may be welcome steps, but these knee jerk reactions have not been able to give the needed fillip for taking sanitation movement forward at the grassroots. According to 2011 census, 36 per cent of households do not have a source of water at the place where they live. Women are forced to walk at least 500 metres in rural areas to collect water. This situation is even more challenging in areas affected with drought or face perennial water shortage, such as Bundelkhand in Uttar Pradesh or states like Rajasthan, Bihar, Jharkhand and Orissa. This further exasperates the situation, as poor access to water impacts on use of available toilets.

Missing the MDGs

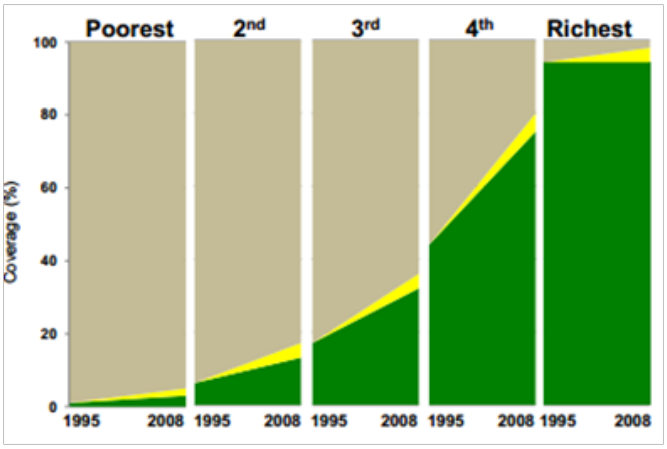
The Joint Monitoring Programme for Water and Sanitation (JMP) report 2013 states that in India 59 per cent of people or in number some 626 million still practice open defecation and India is lagging behind 11 years to meet the Millennium Development Goal target. The Indian government had resolved to reduce the open defecation by 50% by 2015. Unless the sanitation situation is addressed in an urgent manner, India will fall far short from realizing its goals of reducing child malnutrition and mortality, as poor sanitation is a significant factor contributing to both malnutrition and child mortality.



(Figure 1 Indian states and year to achieve sanitation MDCs. Source UNICEF)

Inequities

Various household surveys such as NFHS, DHS, MICS and so on presents a comparison of sanitation practices between the poorest and the richest 20% of households in the country – this analysis on wealth quintile is only an indicator of the inherent inequities in the programming and implementation. This also indicates that in its agenda of progress, India has not reached out to its poorest and it is the rich that has been most benefitted.



(Figure 2- Sanitation trends by wealth quintiles. Source: http://www.wssinfo.org)

This is seen in case of missing toilets in some of the poorer states in India as the numbers are as high as 87% in Madhya Pradesh and 78% in Uttar Pradesh. Although these figures are now contested by the Ministry, the baseline survey is already giving an indication that the scenario is not good in the BIMARU states.

Time to Act

In this emergency like situation around the issues of sanitation crisis and missing toilets in India, it is imperative for Government of India to bring adequate policy reforms, ensure people-centred and context-specific sanitation solutions, strengthen decentralised process and local institutions, institute effective implementation mechanism through across levels and, institute credible and accurate monitoring system and ensure comprehensive response to the crisis.

Toilets are dead! Time to cremate them.

Amidst the big noise about India's 'fast' growing economy and its growth quotient, the country is still limping to attain total sanitation for its people. About 65-80% people in rural areas in India have to defecate in the open. There is no proper maintenance of public toilets. There are more than 26 lakhs dry latrines, where humans have to clean the other human's excreta by hand. Despite tall claims and high promises, we are not able to abolish this inhuman practice and tradition. The census of 2011 shows that only 31.9% households in rural India have access to sanitation. Lack of access to adequate sanitation impacts different aspects of peoples' lives and there are numerous reports indicating its intrinsic links with health, education, livelihood and general well being of a nation. There are instances from rural India where girls have to drop out from schools for the lack of sanitation in schools, there is a large number of diarrheal death of children due to lack of access to sanitation. Problems are many and impacts are huge. And, in this crisis like situation it is alarming that India has a huge number of toilets going missing from the ground.

Considering the declaration of Ministry of Drinking Water and Sanitation (MDWS) through Nirmal Bharat Abhiyan (NBA) of making the whole country open defecation free by 2022, will India be able to meet the challenging target it has given itself of achieving 100% sanitation by March 2022? It looks a remote possibility primarily because of one factor: crores of 'missing' toilets – otherwise we can call 'dead toilets'.

The revelation in the Census 2011 report[1] on household amenities that 49.8% of the total households in India defecate in open is quite an embarrassment for India. The percentage of rural population defecating in open is even higher at 67.3%. Only 30.7% of households having toilet within their premises and rest 1.9% are using public toilets.

Considering the interventions in rural sanitation in India since 1986 with the launching of 'Central Rural Sanitation Program' (CRSP), every year, toilets are being constructed. This got accelerated by launching of 'Sector Reforms Project' in 1999 across 67 districts of 26 States in India on pilot basis. Further, it got expanded to whole of India in 2002 through 'Total Sanitation Campaign' (TSC), under which massive toilets were constructed over a decade to make the country open defecation free.

The Ministry of Drinking Water & Sanitation (MDWS) claims that 53.09% of rural households were covered by the toilet drive by December 2010. And census considered September 2010 as the process of data collection completion time. Hence, if we take December 2010 as the fixed time, the data provided by MDWS is 22.30% more than the census figures. Now, the question is - where are the 22.39% (3,75,76,324) toilets of rural households in India have vanished?

Studies and reports have shown that there are serious gaps between the data on coverage and the ground reality. The Ministry used the population growth over the years as a reason to justify the conflicting and alarming figures.

1 http://www.censusindia.gov.in/2011census/hlo/Data_sheet/India/Latrine.pdf

There are critical factors contributing towards difference in actual toilets available in the ground against the coverage figure – the missing toilets. Some of them are:

1. There are cases where toilets were never constructed but were reported as existing
2. Toilets constructed with low-incentives starting from 'Sector Reform Project' and early years of TCS hardly exist in the ground
3. Restoration/ renovation of one toilet counting the toilet twice or trice or perhaps more
4. Toilets are being re-constructed against the same household using the fund allocated under SRP/TSC

These things are quite evident in the field and each one is certainly contributing to the number of 'dead toilets'. In fact, the first two points are the reasons behind slip-back of Nirmal Gram Puraskar (NGP) awarded GPs. Now, even the Ministry has also admitted the massive gap in NGP awarded Gram Panchayats where the status of 'Nirmal' is not so clean.

At this juncture, India is poised to really see if it is the increase in population or the toilets are actually missing from homes. It stands accountable to its people on all those toilets missing and plundering of public funds.

There seems to be a realization of this huge gap and the inherent fall outs. In an effort to address this and to ensure setting of real target, the MDWS initiated household level baseline survey across the country to assess the real status in 2012 and so far[2] about 80% of Gram Panchayat entries have been done in the baseline survey by MDWS (based on Census 2011). The data further proves that the toilets are missing and the variance looks like this:

1. There is a variation of about 25% in the rural HH toilet coverage reported between the MDWS (Census 2011 projected HH coverage) and Actual Census 2011 toilet coverage.
2. This variation is not something new and has been studied in detail in various ministerial level conferences as well since May 2012 (One such reference link: http://mdws.gov.in/sites/upload_files/ddws/files/pdf/Agenda-SC%20final%2024-25May12%2018.05.12.pdf)

There is no denying that there has been an increase in population and thus HH count over the years, and, as a result, the toilet availability gap will exist. However, even if one studies these figures keeping in mind this HH increase (based on MDWS and Census 2011 projections versus the actual census 2011 figures) there is still a variation of nearly 25%.

There is a claim that the baseline survey will solve the riddle of 'missing toilets' and the annual implementation plans from states will satiate the minds of the critics and planners. However, even now, if we take the example of state like Kerala, where the baseline survey is completed, there is a gap between Census (93.23%) and MDWS (99.68%) figures. This is one of the states where the number of missing toilets is small comparing to BIMARU states where the percentage of missing toilets are appearing to be high.

2 Till 1 October 2013

However, the question if toilets that are existing are in use or not still looms large in country and there is no comprehensive database in this regard as a reference point. The census only provides the data related to access, not use and MDWS also provides the data related to coverage. Though the current base line provides data related to functional and defunct toilets, but it still does not give any data related to use.

Whether we consider the data provided by MDWS and Census or the policy level changes taking place, all are leading to one conclusion that toilets are dead and this is quite prominent in the ground. Despite a lot of efforts starting from Central Rural Sanitation Program (CRSP) in the year 1986 to Nirmal Bharat Abhiyan (NBA), till date, things are not is place as desired. There are a huge number of dead toilets over the decade and it is better to criminate them on this 'World Toilet Day' so that the crisis of sanitation can be addressed on a new page.

The data on the 'missing toilets' or 'dead toilets' is a wake-up call for one and all and this must be addressed urgently.

So, how does one address this situation? Is it enough to just accept it and carry on with the business as usual? Before it becomes yet another scam of highest order, there is a need for the government to sit up, acknowledge, accept, take punitive measures for the utter misuse of public money and undo the historical injustice.

India Fact Sheet on Sanitation and Hygiene
November 2013

India is competing well in the world economy today taking its position in top 10 economies of the world. However, it is sliding on the Human Development Index with 134th position.

India: World's open defecation Capital

- India is the World Champion in One Day Cricket. But with 626 million Indians (national average 53.1%) practicing open defecation, India also is the world's open defecation capital. It has more than twice the number of the next 18 countries combined; accounts for 90 per cent of the 692 million people in South Asia who practice open defecation; and for 59 per cent of the 1.1 billion people in the world who practice open defecation.
- According to Census 2011, the national sanitation coverage is 46.9% where as rural sanitation coverage is just 30.7%. For rural Dalits, it is below 23% and for rural tribals, it is below 16%.
- There are more mobile phones than toilets in India (2011 India Census). According to the Indian telecom regulatory authority, there are currently more than 929 million mobile phone subscribers in the country. In other words, more than 300 million Indians have access to a mobile phone, but not to a toilet.
- In terms of percentage of people using improved sanitation facilities, Pakistan, Bangladesh, Sri Lanka and Bhutan are ahead of India.
- In entire South Asia, India stands at the last position when it comes to gap between the rural and urban percentage population accessing improved toilets.

Missing Toilets

- Nearly half of India's 1.2 billion people have no toilet at home. Nearly 77% of SCs and 84% of STs do not have toilets at home.
- Within India amongst the different states, Jharkhand tops the list with as high as 77% of homes having no toilet facilities, while the figure is 76.6% for Orissa and 75.8% in Bihar. All three are among India's poorest states with huge populations that live on less than Rs 50/- a day. (Source: Census 2011)
- Out of .6 million villages in the country, only 25,000 are free from the practice of open defecation
- According to India Census 2011, the rates of toilet usage in rural areas of Madhya Pradesh - 13.6%, Rajasthan - 20%, Bihar - 18.6%, Uttar Pradesh - 22% and so on.

Economics

Lack of adequate sanitation is a huge problem in India. India loses approximately USD $53.8 billion (>6.4% of India's GDP, 2006) due to increased health costs, productivity losses, and reduced tourism revenue due to inadequate sanitation and poor hygiene (Water and Sanitation Program of the World Bank, February 2011).

Dry latrines and manual scavenging

The Census of India 2011 has established that the inhuman practice of manual scavenging still continues in India. According to the census data there still are 7,94,390 dry latrines in the country where the human excreta is cleaned up by humans. 73% of these are in rural areas where as 27% in urban areas. Apart from these there are 13,14,652 toilets where the human excreta is flushed in open drains. In all, there are more than 26 lakhs [2.6 million] dry latrines in the country where the practice of manual scavenging still continues.

Children

- A large percentage of diarrheal deaths occur due to poor WASH
- Among all children under age 14, more than 20 per cent either die or live with illnesses due to unsafe water, inadequate sanitation or insufficient hygiene
- Despite the encouraging increase in toilet coverage (84 per cent schools had toilet facilities in 2011 as per census), huge problems in accessibility and operation and maintenance of the facilities persist, leading to widespread open defecation among school children in rural areas.

Women

- Women suffer from reproductive tract infections caused by poor hygiene (Facts for Life)
- Women are more severely affected by lack of toilets as due to cultural taboos, they cannot openly defecate during daylight. Between dawn and dusk, millions of women living without toilets are simply forced to hold it.
- In order to get away from the eyes of men, women often use more isolated places for open defecation, making them vulnerable to getting molested or raped.
- Post puberty, girls and women menstruate on an average 3,000 days over a lifetime, or nearly 10 years of their lives. According to a recent study, 355 million women and girls menstruate in India on a monthly basis. "On average a woman requires 7,000 sanitary pads before her menopause to manage menstruation days."
- Only 12 percent of young girls and women have access to and use sanitary napkins. However, even for those who use sanitary napkins, there is no facility for safe disposal of sanitary pads in schools, colleges, community toilets, etc.
- 200 million have a poor understanding of menstrual hygiene and linked health care.
- 23% of India's girls drop out of school after reaching puberty.

Persons with Disabilities (PwDs) and Elderly

- A population of 21 million persons with disabilities, approximately 2.1% of the population. This includes the temporarily impaired and the elderly. In 2020, the total population of PwDs is projected as 70 million and that of the elderly to be 177 million, and majority of them have multiple disability conditions.
- PwDs due to their physical barriers find it difficult to use general infrastructure or go outside for defecation.
- Public toilets for PwDs in rural and urban India are far and few. Even the schools strikingly have no provisions for the same. The provision for accessible toilet standards are not specified in any of the state/ national/international policies.

Hygiene

- According to the Public Health Association, only 53 per cent of the Indian population wash hands with soap after defecation, 38 per cent wash hands with soap before eating and only 30 per cent wash hands with soap before preparing food (UNICEF)
- Only 11 per cent of the Indian rural families dispose child stools safely. 80 per cent children's stools are left in the open or thrown into the garbage (UNICEF)
- Hand washing with soap, particularly after contact with excreta, can reduce diarrheal diseases by over 40% and respiratory infections by 30% (UNICEF)

India: The Sanitation Stink

'Nearly half of India's 1.2 billion people have no toilets at home' (Census 2011). With the Government of India aiming to make the country Nirmal Bharat by 2022, there is a still a long way to go with only 30.7% rural households having access to toilets.

State	%age rural HHs toilets missing for 2010-11	Projected Census 2011 %age HH toilets missing (As per MDWS) *	Actual: %age of rural HHs with missing Toilets (Census 2011)
ANDHRA PRADESH	24.07	39.78	67.81
ARUNACHAL PRADESH	17.69	55.24	47.30
ASSAM	7.05	54.82	40.43
BIHAR	61.34	70.46	82.40
CHHATTISGARH	39.85	52.02	85.47
GOA	27.24	77.31	29.08
GUJARAT	4.61	33.85	66.96
HARYANA	0.00	28.43	43.93
HIMACHAL PRADESH	0.00	16.47	33.42
JAMMU & KASHMIR	27.70	65.01	61.35
JHARKHAND	52.58	64.31	92.38
KARNATAKA	26.11	41.17	71.59
KERALA	0.00	78.22	6.77
MADHYA PRADESH	14.93	25.56	86.88
MAHARASHTRA	22.00	42.33	62.00
MANIPUR	0.00	44.35	14.01
MEGHALAYA	9.34	43.95	46.12
MIZORAM	0.00	-5.46	15.42
NAGALAND	4.59	37.87	30.78
ORISSA	41.09	48.76	85.92
PUNJAB	22.48	73.85	29.61
RAJASTHAN	36.37	47.39	80.35
SIKKIM	0.00	7.38	15.89
TAMIL NADU	3.34	23.70	76.78
TRIPURA	0.00	0.87	18.55
UTTAR PRADESH	3.31	29.25	78.23
UTTARAKHAND	18.59	41.60	45.94
WEST BENGAL	0.00	30.69	53.26
TOTAL	19.09	42.60	69.31

Source: Data as on Oct. 1, 2013

http://tsc.gov.in/TSC/Report/Phvsical/RptPhysicalProgessStateWiseDistrictwise.aspx?id=PHY

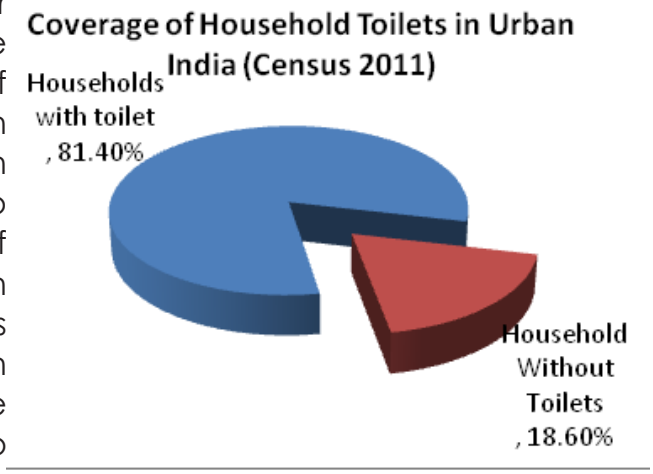
http://tsc.gov.in/TSC/Report/otherreports/RptStatewsiseBasicInfo.aspx?id=PHY

Census 2011

** Takes into account increase in population and thus HHs over the years.*

Urban India – Floating on the Sludge!

India has been regarded as a biggest sanitation challenge globally due to the high proportion of population without safe sanitation facilities. It is estimated that 60% of open defecation globally happens in India. In order to address this challenge, there have been some focused attempts by the government for providing subsidies for the poor to construct latrines. However, much of this has happened in the rural area. Urban sanitation for the poor and the smaller towns particularly has received considerably lower attention and hence lower allocation as compared to the rural sanitation sector. The challenges in urban sanitation are manifold and its neglect will continue to pull down India's performance on sanitation front. Some of the key challenges in urban sanitation are as follows.



Invisibility in terms of numbers: The major challenge in urban sanitation is that the issue is practically invisible in terms of statistics. If one looks at the sanitation coverage (as per Census 2011) in urban areas it says, around 18% households do not have access to sanitation. However if we get into the depth of this data, it can be seen that the poor who live in the slums (notified and non-notified) have much lesser access to sanitation. Though the data may be contentious as there are no correct estimates on the number of slums and squatter settlements there are in the towns, the MoUD states that, in the non notified slums 51% households do not have access to toilets. Rapid urbanization is a reality and the strategies on sanitation in urban centres is not able to keep pace at which slums and squatter settlements are coming up

Low and skewed investments: Sanitation receives very little attention as compared to the other infrastructural investments in the urban centres. Additionally whatever investments are being done on sanitation in the large towns are mostly focusing on the better off sections of the population. The heavy sanitation investments are on developing sewer networks; sewage treatment plant etc. however these are mostly catering the parts of the towns which are occupied by the better offs.

The overall investments in the towns are also extremely skewed towards the large towns. The small towns are plagued with poor human resource, low investment and poor governance mechanism. As far as sanitation services are concerned, the towns are just looking at Solid Waste Management as an area of work. Fecal sludge management and liquid waste management in these towns are in shambles. As per the Central Pollution Control Board (CPCB), out of around 8000 towns that are there in India only 160 towns have sewerage system and sewage treatment plants. Additionally, the CPCB studies also claim that only 13% of the sewage is treated. It also states that the treatment facilities are unevenly divided with 40% capacities being only in two mega cities Delhi and Mumbai.

Sustainability of Community Toilets: In the cities there have been initiatives taken by the municipal bodies and in some case through PPP models, community toilets have been constructed as an on-site sanitation solution for the slum dwellers. Though shared toilets are considered as unimproved sanitation as per the JMP, it still is needs to be seen as a viable option in slums which have space constraints to construct household latrines . However, these become defunct after a few years of operation. There are several reasons for this. As the number of people using the toilets is relatively lesser (than models promoted by Sulabh etc) often the user charges are not enough for making the community toilet sustainable. There are also cases where the community toilets become dysfunctional when there is no investment in building ownership of the community. There is a need to develop schemes where there is emphasis on operation and maintenance expenses along with the capital expenses.

Inadequacy of Government schemes for sanitation for the poor: There are hardly any government schemes (unlike NBA for rural) for constructing toilets for the urban poor. The only scheme which we have is Integrated Low Cost Sanitation Scheme (ILCS). But it focuses largely on conversion of dry latrines of the economically weaker section to pour flush latrines. The scheme also has provision for construction of new latrines but only to the extent of 25% of the total converted toilets. This means, if in a town there are 10 dry latrines, then they can get funds for constructing 2.5 new latrines! Unfortunately this is way lesser than what is required for the urban poor because:

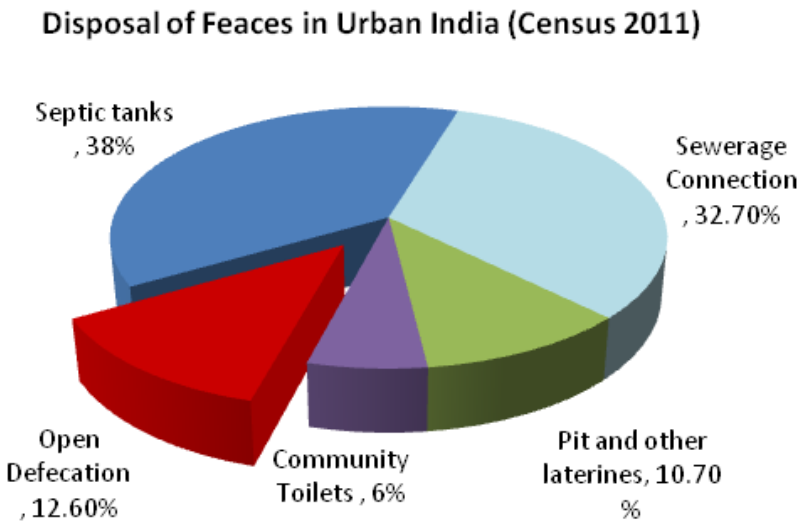
1. the dry latrines are very less in numbers now. For example in MP in the urban areas there are only 2717 dry latrines (as per census 2011)

2. the actual poor in the urban area do not have any form of latrines (leave alone dry latrines). So a very huge number of poor living in the urban areas are deprived of any sanitation services

While there are schemes like JNNURM and RAY which are focused on providing housing for the urban poor and making towns "Slum Free", these are facing with huge implementation hurdles. Besides, it will only be an adhoc arrangement which will cater to the existing slums. The strategy for new slums which will come up in the coming years is not clear in either of these schemes.

Fecal sludge management:

As per NFHS-III, 2005- 06, 17% urban households in India did not have access to any toilets at home, 24% households were sharing toilets, and about 19% had their toilets connected to sewers. The majority of households which had toilets had on-site installations of these 27.6% households had septic tanks



and 6.1% had pit latrines. Another 5% toilets were as "Flush/pour flush not to sewer/ septic tank/pit latrine" – which means human excreta from these installations were being let out untreated onto land and water bodies – mostly into open drains without any confinement or treatment.

Census 2011 also indicates that only 32.7% of urban households are connected to a piped sewer system whereas 38.2% dispose off their wastes into septic tanks and about 7% into pit latrines. This shows that there is a large chunk of households which have onsite arrangements. However it is not clear on how the waste is disposed off from these installations. It also shows that about 50 lakh pit latrines are insanitary (have no slabs or are open pits); 13 lakh are service latrines – of which 9 lakh toilets dispose faeces directly into drains, 2 lakh latrines are serviced by humans (illegally), 1.8 lakh latrines serviced by animals.

The urban population is growing rapidly (by 2030, 50% of people are said to be in urban centres). Of those migrating to the towns, mostly are the poor who cannot make a living in the rural area and they settle in the slums or slum like localities or on pavements and these are the typically un-served and un-notified localities. Most of the times, these slums are located near open drains which are rampantly used by the housing colonies to dispose of their waste water (in some cases even sewer water from the septic tanks). At times toilets are also directly connected to these open drains. The huge investments in the urban areas are mainly on constructing infrastructure like sewerage network or sewer treatment plants. However, these infrastructure cater only to a select few - the rich and neo-rich. On an average, it is understood that, only 10% of waste water (grey and black water) is treated. So whatever additional investments are being made these are being made only for the better offs. None of the poor community are connected to these networks.

Land tenure: The poor and the marginalized are settled in slums and squatter settlements in and on the peripheries of the towns. Most of these slums are settled on government or other properties and considered 'illegal' and carry the burden of being 'outsiders' although they are actually the lifelines of any city. Most of these households do not have tenure rights on the land where they are settled. The issue of tenural rights is quoted as a reason for not providing infrastructural arrangements like sewer network for the households in these slums. This in turn results in communities resorting to open defecation. In places where communities understand the importance of toilets, are able to construct on-site installations but again the disposal of sludge from these installation becomes a challenge and it finds its way into the open drains and other water bodies.

This provides a rather grim scenario of the sanitation situation in urban areas that are ever-expanding putting a tremendous stress on the available infrastructure and resources. There is an urgent need to have a sustainable solution to this emergency-like situation and in this journey of finding solutions it is important to draw upon the collective wisdom of different communities and stakeholders. Let this crisis like situation unite people.

Participating Organizations in RtS Campaign in India

SARVODAYA SANGH RDMA SAMARTHYAM BUNDELKHAND VIKAS SAMITI NRSS IGSSS DHARATI PRADEEPAN NBSS VASUDA AIKMSS BUTTERFLIES NIRMAN MGSA NACDOR CFAR JAGORI ACTION INDIA MPSSS CADME CENTRE FOR DALIT RIGHTS BHARAT MUSLIM MAHILA ANDOLAN DBRC DALIT BAHUJAN FRONT DYNAMIC ACTION GROUP FANSA-INDIA NFHR OPENSPACE SOPPECOM SAFAI KARMACHARI ANDOLAN RASHTRIYA GARIMA ABHIYAN JAL AJEEVIKA MANCH AHAR PYNE ABHIYAN SABLA SANGH GRAM SWARAJYA SAMITI VISWASH NETWORK SAKHI NIDAN AGA KHAN RURAL SUPPORT PROGRAMME INDIA MANDAN BHARATI JAGRITI SAMAJ NCDHR KVS C.I.D AFPRO DIOCESE OF VARANASI FANSA UTTAR PRADESH ENVIRONMENTAL SOCIETY ABHIYAN GRAM UNNATI SANSTHAN VATSALYA CSNR SHRAMIK BHARATI AKHIL BHARTIYA SAMAJ SEVA SANSTHAN SAMASDRUSTI CYSD RTE FORUM AIFFM ONEDROP POPULATION FOUNDATION OF INDIA ODISHA WATER FORUM PRAGATI JUBAK SANGHA WATER INITIATIVE ODISHA NATIONAL INSTITUTE OF DEVELOPMENT CARMDAKSH UNICEF TECHNICAL MANAGEMENT SUPPORT TEAM VIKAS MITRA SAMAJIK SANSTHA PIDA SAMAJ SEVI SANSTHA LOK SHAKTI SAMITI ADARSH NAVYUVAK MANDAL MAA BAMBLESWARI SHG FEDERATION DISHA SAMAJ SEVI SANSTHA SHORE SAMAJIK SANSTHA JAN KALYAN ABHIYAN GRC WASH-Net SRIJAN SAMAJIK SANSTHA NCAS HEALTH FOR THE URBAN POOR BAKUL FOUNDATION SATHEE IIYD GRAM JYOTI UAA RCDC WNTA LOK KALYAN SEVA KENDRA AAINA NAWO SHAMBVI-CG PRACTICAL ACTION PRAVAH VIGYAN FOUNDATION SVDS SNEHA GSMT SVYM CADAM SAM-BKS LOKSHAKTI SAMAJSEVI SANSTHAN PRAGATI GRAMIN VIKAS SAMITI WASH MEDIA WASH COST WATERAID EXNORA INTERNATIONAL SNEHALEAF SOCIETY RDO AWED INDO VWDS CMSSS CTRD OAZOANE AIRD CEEMA PMSSS FRESHWATER ACTION NETWORK SOUTH ASIA (FANSA) INDIA NATIONAL CHAPTER STATE CHAPTERS IN ANDHRA PRADESH TAMILNADU KARNATAKA MAHARASHTRA ODISHA GUJARAT JHARKHAND UTTAR PRADESH SOUTH ASIA REGIONAL SECRETARIAT AND MANY MORE . . .

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