Reaching the Unserved

Access to individual household toilets in vulnerable urban areas

November 2020
Focus of the Swachh Bharat Mission (SBM) on Individual Household Toilets requires further attention in the light of COVID-19. Various studies have demonstrated that the urban poor, who depend on shared toilets are at a greater risk. The Joint Monitoring Program (JMP) of WHO-UNICEF also considers ‘shared toilets’ as unsafe sanitation.

Public agencies often cite lack of space, finance and sewerage access as reasons for not being able to make individual household toilets available for the urban poor. However, these constraints can be addressed if there is a strong intent by both the households and the government, and appropriate measures are adopted.

This document is a compendium of cases which show how these perceived barriers to constructing individual household toilets were successfully addressed. These cases also highlight the important role played by women who took the decision to have a toilet and lead its construction. They worked with local governments to ensure that all the necessary support is received. These cases reflect how living conditions of urban vulnerable communities can be transformed with women leadership. These experiences can be used in most vulnerable areas across cities in India.
Why is universal access to an individual household toilet important?

- As a matter of dignity and safety for women
- Universal access and equity in context of SDGs
  - SDG 6.1 - By 2030, achieve universal and equitable access to safe and affordable drinking water for all
  - SDG 6.2 - By 2030, 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
- Health is a key risk from unimproved sanitation - JMP considers community toilets as unimproved sanitation as they pose many challenges in terms of accessibility, hygiene, affordability due to user charges and safety

Impact of use of community toilets on COVID-19 enhances the need for individual household toilets

- A large proportion of people living in informal settlements rely on community toilets and are thus at a greater risk of contracting COVID-19. In these toilets, it is difficult to maintain physical distancing and to follow strict hygiene procedures which are required to prevent the spread of COVID-19.

- Self isolation becomes next to impossible for people who are infected with the virus who do not have individual household toilets. Recent studies have found evidence that “higher incidence in slums maybe due to the use of shared common facilities” as these are points of contact for transmission of COVID-19 (Niti Aayog (2020)).

Impact of community and public toilets usage for women

- Women who use shared toilets take the risk of enhanced exposure to COVID-19 due to the poor menstrual hygiene practices.
- Women are often subject to violence which influences their use of shared or community toilet facilities.
- As per telephonic survey conducted by CWAS in a few cities in Maharashtra it was found that women who use community toilets felt that they are at a greater risk of getting infected due to unhygienic conditions of community toilets and lack of physical distancing.

Illustrative representation of potential COVID-19 transmission pathways in slums in India where community toilets have been identified as major points of contact for transmission. (Source: Parikh P, et. Al. on behalf of the Childhood Infections and Pollution (CHIP) Consortium. COVID-19 and informal settlements – implications for water, sanitation and health in India and Indonesia. UCL Open: Environment. 2020;(1):08.Figure 1, Page 2/5. Available from: https://doi.org/10.14324/111.444/ucloe.000011.)
Benefits of individual household toilets for all

Addressing Privacy and safety concerns for women
Do not have to wait for early morning for open defecation or visiting community toilet when less people are around. Reduced risk of eve teasing and assault

Safety of children
Less exposure to accidents and diseases as open defecation and community toilet are avoided – More important during rainy and cold seasons

Comfort and MHM concerns for women and adolescent girls
Do not have to use a community toilet during the menstrual cycle days which enables better MHM practices

Easy access for elderly, differently abled
They can use a toilet at home and avoid travel to a community toilet, especially during nights.

Acceptability for Transgender community
Unrestricted access to safe facilities results in health benefits

Overall well being and health
As per the telephonic survey conducted by CWAS in few cities of Maharashtra, women respondents felt that the health and overall well being of the family has improved by using their individual household toilets. All respondents felt that owning a toilet has protected them from being infected by COVID-19.

Source: 1. Telephonic survey conducted by CWAS for residents across three cities in Maharashtra - Wai, Sinnar and Jalna
2. WSSCC/FANSA/Ministry of Drinking Water and Sanitation/Modern Architects for Rural India (MARI), August 2016, LEAVE NO ONE BEHIND Voices of Women, Adolescent Girls, Elderly, Persons with Disabilities and Sanitation, Workforce WSSCC/FANSA/Ministry of Drinking Water and Sanitation/Modern Architects for Rural India (MARI) Retrieved from: https://www.wsscc.org/media/resources/leave-no-one-behind-country
Swachh Bharat Mission (Urban) gave an impetus to ensuring individual household toilets across all urban areas India

• The Swachh Bharat Mission (SBM) launched in 2014, provided an impetus to construction of individual household toilets. Allocation of incentive for individual household toilets was a key trigger.

• According to SBM ODF Guidelines, to achieve and sustain ODF status, access to Individual toilets is essential.

• Many state governments and cities have taken measures to support households in vulnerable areas to expedite the SBM process and avail incentives to build their own toilets.
Measures taken to expedite and improve SBM processes: Government of Maharashtra

A program facilitated by Government of Maharashtra and successfully implemented by urban local bodies

- **Government of Maharashtra set up a dedicated mission office to implement the Swachh Maharashtra Mission under SBM.**

- **Policy level decisions such as delinking toilet application with land tenure, simplified process for toilet applications, incentive funds on achievement of ODF status, linked to sustainability, allotment of 50% funds from 14 FC for SBM etc helped the State increase coverage of individual household toilets.**

- **All these efforts translated into Maharashtra ranking amongst the top three states for construction maximum number of individual household toilets under SBM. Approximately 7 lakh plus toilet applications have been mobilized and constructed.**

- **To ensure sustainability, a ‘Sustainability Charter’ has also been launched by the State which has 7 points that directs ULBs to ensure that cities maintain their ODF status.**

- **The mission has been supported by ‘Team Swachh’ which constituted of dedicated technical staff placed at divisional and city level as city coordinators and nodal officers. Key development partners have also supported the mission to achieve sustainable sanitation at scale.**

The next priority of the government of Maharashtra is to move towards universal access to sanitation by increasing coverage of individual toilets by addressing constrains such as those related to space, finance and infrastructure.

**Key Measures**

1. Develop the concept of “ODF City”
2. Develop three tiered validation mechanism
3. Converge funds to increase the share of subsidy
4. Say ‘no NOC required’ for IHHL on Government lands
5. Encourage demand driven approach, Beneficiary led construction of toilets
6. Emphasise quality by discouraging prefab and contractor constructed toilets
7. Adopt carrot and stick approach for ULBs, linked to various incentives and disincentives
8. Make toilets mandatory for elected representatives
9. Launch “mission ODF Watch”, for vigilant monitoring of likely ODF spots
10. Move beyond toilets with safe and sustainable management of septage and wastewater
Measures taken to expedite and improve SBM processes: Government of Telangana

Enabling institutional mechanisms that ensure last mile delivery by establishing support and buy-in from the State Government

As part of the Swachh Bharat-Swachh Telangana Mission, the Government simplified approval procedures and fast tracked construction of household toilets:

- A Project Implementation Unit (PIU) was constituted for faster processing of applications and disbursal of subsidies
- The PIU met on a weekly basis to review progress and clear files on a mission model, headed by the Additional Commissioner and comprising members from the related departments of sanitation, town planning etc.
- Solutions to support the poor ranged from decision to allow construction of individual household toilets on non-tenured land, provision of finance through self-help groups to initiate construction, fast disbursal of subsidies, technology solutions to address constraints arising from space and terrain.

As on 12th October 2020, about 1.37 lakh additional household toilets were already constructed and only 5,596 are required to meet the SBM targets.

This is being achieved through identifying households without toilets, efficient demand generation and application processing by the ULBs and timely flow of subsidy to the beneficiaries.
Measures taken to expedite and improve the SBM processes: Case of Porbandar

Support for Households Left out in ODF areas through data-based proof of demand and dialogue with elected representatives

Porbandar achieved ODF status in 2016 and ODF+ in 2019. However, a group of vulnerable communities are yet to get access to individual household toilet.

Porbandar adopted a number of innovative approaches to identify households that were left out, to support them to gain access to the incentive funding under SBM:

- **Geo-Tagging of target beneficiaries:** Sanitation mapping (geo coding of households along with beneficiary survey) for all 12 slums/slum-like settlements in the city found close to 1300 households without an individual household toilet.

- **Field verification:** With this information a process was initiated with Porbandar Municipality – A field level verification was conducted to check feasibility of individual household toilet construction in these settlements.

- **Streamlining registration:** Fast track registration of individual household toilet applications was done to identify the possibility of constructing a household toilet. About 530 applications were registered in the first phase.

- **Evidence based proof of demand ensured release of subsidy:** Municipality could easily sanction the applications with the available information from the sanitation mapping exercise. The demand was acknowledged by the ULB and was sanctioned by the State Government under SBM.

GIS mapping of households without individual household toilets

Source: https://umcasia.org/whatwedo/wash/misaal-program/
Measures taken to expedite and improve the SBM processes: Case of a Basti in Jaipur

Streamline government approvals and fast-track release of subsidy with thrust from community based groups

Recognizing the need for household toilets in Jhalana Kunda Mahal Basti, and on learning about the subsidy being given by the government, 300 households applied to the Municipal Corporation for construction of individual household toilets. However, they faced delays up to 6 months. To overcome these delays, women from Daksha Samooah women forum took the following initiatives:

- **Government action**: Women under the collective of Daksha Samooah approached the Director-(DLB1), the nodal implementing agency under SBM, who immediately instructed the Municipal Commissioner to visit Jhalana Kunda and camp there till all outstanding issues had been addressed.

- **Verification**: The Chief Executive Officer Jaipur Municipal Corporation (JMC) and CFAR jointly organized a camp in December 2015, at Jhalana Kunda, where all concerning municipal officers were available to verify the household sites and sanctioning 260 pending applications for building of toilets.

- **Learning site**: It was also officially suggested by the Commissioner JMC that Jhalana Kunda be developed in collaboration with SBM, Government of Rajasthan as a learning site on ODF to orient the newly recruited ULB officials on the importance of community engagement in sanitation.

- **Scaling the solution in the slum settlement**: Between 2015 and 2017, additional 932 household toilets using twin pit techniques were facilitated by Daksha Samooah. They supported the community in filing applications for subsidy, procuring materials, connected them to masons, securing approvals, verification and geo tagging and finally getting the subsidy.

A thrust is needed towards universal access to individual household toilets

SBM in Urban Areas has helped put a focus on Individual Household Toilets (IHHT). Over the course of 6 years, 6.6 million household toilets were built across India, 105% of the envisaged SBM targets.

However, a thrust is needed to move towards universal coverage of IHHTs. This will also require addressing issues continued reliance on Community Toilets. The ground realities of crowding, lack of possibilities of maintaining physical distance and maintaining hygiene with handwashing have been highlighted in many cities during the COVID19 pandemic.

For this, an estimated 7 million additional individual household toilets will be needed in urban areas. It is likely that a large part of this demand will be from dense slum settlements, particularly in some large cities. This will require addressing issues of space and access to appropriate management of faecal sludge and septage.

Three main constraints are commonly faced in constructing individual household toilets

- Space constraints in high density areas with small dwellings
- Lack of space for septic tanks
- Behavioral issues – Preference for community toilet facilities, lack of perceived need, hesitation to build a toilet inside the house
- Lack of funds, as the SBM incentive is often not enough in many areas with high construction costs
- Other infrastructural issues such as inability to get a sewerage connection especially in dense settlements in large cities, or lack of water supply

In order to complete the construction of my toilet, I had to borrow Rs. 15,000 as an internal loan from a SHG.”
- Resident, Wai

“As a member of a self help group, I was able to borrow Rs 11,000 from ICICI bank and Rs 5500 as internal loan and completed my toilet construction.”
- Resident, Jalna

“Do not want to build toilet inside house and outside it is road widening. Also subsidy not enough here excavation cost for tank is very much.”
- Resident, Sinnar

“There is no space inside and road widening issue outside so unable to construct. Community toilet is near to house so we never thought of alternative.”
- Resident, Wai

“There is no space for toilet and we didn’t think of making one due to less frequency of water. We do not have enough to wash utensils so even if we make toilet it will not remain clean.”
- Resident, Sinnar

Picture Source: Author
Source: Primary Survey by CWAS February – March 2020
Addressing constraints to individual household toilets

Available studies and ground experiences suggest possibilities and ways to address these constraints. These experiences will need to be scaled up with appropriate support from governments and donors.

1. **Women and families have often overcome space constraints to build toilets**
   Examples for adaptive reuse of space in small dwellings and possibilities of shared or group facilities

2. **Households and women have used credit to overcome financial issues**
   Access to sanitation credit through self help groups from banks and MFIs

3. **Some cities have addressed infrastructural barriers in slums and densely populated areas**
   Providing sewerage access in slums and densely populated areas
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Adaptive reuse of small dwelling space – Case of Pune slum areas

• Individual household toilets can be constructed in homes that have space constraints when there is a strong intent from the owners. To understand how toilets have been constructed by such households, CWAS supported a study of survey of households in slums in Pune.

• Average sizes of houses surveyed is 16 sq.mts and average toilet size is 1.5 sq.mt. Houses of sizes less than 9 sq.mt were also able to construct a toilet in their homes.

• In most cases, the new toilet was an enclosed space generally built at the location of the former bathroom and combining a bath area and a toilet. However, the bathroom space and the toilet could also be located in separate spaces depending upon the disposal system.

• The main triggers to construct toilets were:
  • Awareness about SBM
  • Community toilets being in unhygienic conditions
  • Availability of connecting infrastructure for disposal

Adaptive reuse of small dwelling space – Case of Pune slum areas

**Case of Rajiv Gandhi Nagar Slum**
- Inhabitants: 3
- House Size: 8.6 sq. mts
- Toilet Size: 1.0 sq. mt
- Superstructure: Kutcha
- Cost incurred to built toilet: Rs. 17,000

**Case of Premnagar Slum**
- Inhabitants: 4
- House Size: 12.4 sq. mts
- Toilet Size: 0.9 sq. mt
- Superstructure: Kutcha
- Cost incurred to built toilet: Rs. 10,000

**Case of Sanjay Park Slum**
- Inhabitants: 3
- House Size: 9.8 sq. mts
- Toilet Size: 1.2 sq. mts
- Superstructure: Kutcha
- Cost incurred to built toilet: Rs. 15,000

Pune’s One Home One Toilet (OHOT) initiative to provide individual toilets in slums

‘One Home One Toilet’ project was implemented by Pune Municipal Corporation to provide sanitation at the household level, in partnership with Shelter Associates (SA).

The main focus was on:

- Collecting and mapping city-wide slum information to increase availability of safe and economical toilets for slum – dwellers
- Using data and behavior change programs.
- The project involved the community through various engagement activities like total sanitation approach, micro planning processes, etc.

The constant emphasis on the benefits of constructing individual toilets, especially for women as they have to face the worst ordeals of open defecation and led to families coming forward to construct individual toilets.

Shelter Associates used funds from philanthropists and corporate foundation were used for data collection, mobilization and building toilets.

In the One house one toilet (OHOT) initiative model, materials are delivered to the door and enable families to construct the toilet at a faster pace on priority. The material cost is borne by SA and the labor cost is covered by the household. 3186 individual household toilets have been facilitated by SA in Pune.

“There were no sewer lines here,” says Mr. Shaikh. “We thought the only option was to use the public toilet blocks.” Or, like many in the area tired of queueing up and the sub-standard sanitation of these blocks, simply defecate in the open.

Mr. Shaikh could be speaking for the residents of any of the 1,500 homes in Balajinagar — mostly all as small or smaller, and equally haphazardly built — which now have toilets in what would have seemed to be impossibly restricted spaces.

Building new infrastructure in slums is often arduous, and needs support from the municipal authorities to make basic improvements and so Shelter worked with elected representatives and engineers from the municipal corporation to see how new lines were to be laid.

Group toilets as an option to community toilets
Cases from Wai, Mahad, Sinnar, Vadagaon and Vita

• ‘Group toilets’ can be explored for joint families that do not have own toilets.

• Wai municipal council introduced the idea of group toilets, which are constructed and shared by two to three households to address space constraints.

• Mahad council constructed group toilets for households who were reluctant to use community toilets. Access to these was limited only to two to three households.

• In Vadgaon, three group toilets were constructed, which are being used by 6 households through mutual understanding. Subsidy was given to one household and these are jointly maintained by all households.

Community toilet converted into toilets shared between fewer user groups
Case of Mumbai slums

Mumbai

- In Mumbai slums, this model of “privatizing” a community toilet block by ‘capturing’ of seats, demarcates a fixed user group that is allowed exclusive accessibility via restricted circulation of its keys.

- In densely packed slums with practically no open spaces, smaller CT blocks are present which often share a common wall with hutments. Their restricted user base is of those living in its immediate proximity and homogeneity amongst users that share a common socio-religious background supports collective action.

- In case of blocks that are not under lock and key, a very strong notional sense of ownership is evident amongst its users, thereby forbidding its indiscriminate use.

Case Kanjurmarg slum where toilet block is shared by group of households by key-lock system

MHADA community toilet was converted into shared toilet with lock and key system. The key is given to the registered 30-40 households around the community toilet. Such HHs pay Rs 150 per month for maintenance.

Shared toilets constructed through collective efforts by women
Case of Mumbai slums

- The shared toilet in Santosh Nagar slum is a case of a shared toilet constructed under Slum Sanitation Programme by collective efforts of women of the slums.
- Women took initiative and had multiple rounds of meetings with government officials for funding of constructing the toilet block. And also with the private owner for procuring of the land of the toilet block.
- A gated society of 60 HHs has been formed and the women residents have taken complete ownership of the toilet block and monitor its operation and maintenance on a daily basis.
- The gates of the society are locked after 11pm this limits access to outsiders and restricts usage of the shared toilet use to society members only.

Case Dindoshi- Santosh Nagar slum- Toilet block shared by group of households by creating gated society

- Seats: 4 in Ladies & 4 in Gents
- Water supply: MCGM
- Sewage Disposal: Septic tank
- Monthly pass: Rs.40 / month
- Cleaning frequency: 2 times / day
- HH dependency: 60-65
- Approx. popn.: Up to 300 people

"The user fees collected are the part of society maintenance charges which is Rs. 300/- per HH which includes the maintenance of toilet."
- Residents

A Group Toilet model in Gadhinglaj city
To address lack of space for construction of individual household toilets

One of the most critical issue for construction of individual household toilets is lack of space, some households also have stigma of constructing toilets inside the house. To address these constraints, ULBs can construct group toilets wherein one toilet seat could be used one household through a lock and key system, this model is practiced in city of Gadhinglaj in Maharashtra. The construction of group toilets was done by ULBs and responsibility of maintenance is of the HHs using them.

Number of group toilets: 7
Dependent HHs: 144 HHs
Number of users: 532
Out of 7 group toilets : In 2 group toilet blocks one HH uses one seat, remaining 5 group toilet block have two HHs using one seat

Reasons for using Group Toilets

- Households not having space for constructing individual household toilets
- Households not having financial capacity to construct individual toilets
- No repair and operational cost of toilet.

ULBs perspective on Group Toilets

- Group toilets are found much cleaner than other CT/PTs
- Reduces vandalism and chances of toilet components getting stolen.
- Cleaning done by households, therefore additional human resource not required.
- Water and electricity provided by ULB, which reduces overall maintenance cost.
Shared septic tanks - Case of Khopoli, Sinnar

Community septic tank by the Khopoli Municipal Council (KMC)

To tackle the problems of space and funds, KMC developed an innovative solution to construct a group septic tank for a number of individual toilets in close vicinity. Group septic tank of appropriate size was designed to cater to 25-30 household toilets. 10 septic tanks have been already constructed in one slum area. An underground pipeline connecting toilets to septic tank has been laid by the KMC. These group septic tanks are desludged once in a month by the KMC.

After assuring that this approach worked well in one slum, KMC designed group septic tanks in other slums. Construction cost of a septic tank varies between Rs. 50,000 to 80,000 depending on the tank size, which is borne by the KMC. The household had to only pay for own toilets. Many households have come forward to build their individual toilets under the SBM.

Septic tank shared by two households in Sinnar

In this case, the house on the first floor was unable to construct a toilet as there was no separate and space for a septic tank. They decided to build a shared tank with the house on the ground floor and toilets form both houses were connected to it.

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3. Some cities have addressed infrastructural barriers in slums and densely populated areas
   Providing sewerage access in slums and densely populated areas
Lack of funds was found to be a major constraint for constructing individual toilets in a Demand Assessment Survey in Maharashtra.

In 2018, a survey was conducted by CWAS with an objective to understand the extent and nature of demand for sanitation finance and the extent to which finance constraints affect SBM implementation in Maharashtra. From the study it was found that lack of funds is the key constraint for not constructing toilets.

**Progressives**
Category 1: Applied to SBM, built or building a toilet

- Arranging the required amount: 46%
- Finding workers to build: 22%
- Finding a location: 4%
- Unavailability of required toilet components: 2%
- None: 52%

**Onlookers**
Category 2: Applied to SBM, not started construction

- Could not arrange the amount: 73%
- Non-receipt of design: 8%
- Yet to receive first subsidy: 9%
- Unavailability of suitable location: 14%
- Unable to find workers: 16%

**Laggards**
Category 3: Neither applied to SBM, nor constructed toilet

- Not enough money to...: 92%
- Unavailability of space: 10%
- Unavailability of credit: 3%
- No need: 1%

Arranging the required amount was the most stated challenge faced while constructing toilets, followed by finding workers to construct it.

Approximately three-fourth households mentioned lack of savings as the reason for not being able to arrange the initial amount.

While most households express their willingness to construct a toilet, lack of financial resources acts as a deterrent to toilet construction.

Sanitation credit from banks through SHGs and aggregator support
Case of MAVIM in Jalna

• Although a partial incentive for toilet construction address affordability concerns to an extent, most applicants may require access to credit to build a toilet.

• There is some willingness to take a loan to build a toilet – but, SHGs and MFIs were the only options available for households.

• A demonstration project for household sanitation credit for individual toilets was implemented with support from CWAS, CEPT University. Sanitation loans were mobilized for 300 women by linking SHGs to scheduled commercial banks in Jalna through MAVIM and its Community Management Resource Centre (CMRC). Active participation from local aggregators and trainers such has MAVIM is a key to linking households, SHGs and commercial banks.

Sanitation credit from Self Help Group with support from NULM
Case of Wai and Sinnar

Sinnar
Sinnar has a strong network of SHGs under the ULB’s NULM department
With active participations of the NULM department, 50 sanitation loans were mobilized from SHG members.

For availing financial services from banks, groupwise applications were submitted. Under this, an SHG group was also entitled to get interest subvention of 7%. An additional 3% interest subvention will be availed to all women SHGs who repay their loan in time.

Wai
In Wai, the ULB’s NULM department facilitated formation of SHGs which helped around 30 women to avail loans for constructing toilets from Wai Urban Cooperative bank under its “Mahila Sabalikaran” (Women empowerment). This was for Rs 20,000 at an interest rate of 11.5% with repayment period of 12 months. This was at a lower interest rate than other loans which encouraged other women to apply.

The loan is given in installments as per the progress of toilet construction. On ground verification is also done by the bank members on completion of toilet construction. The repayment of the loans was satisfactory with members repaying the loan in a timely manner.

The Story of Jyoti Bhise
Jyoti, a resident of Wai says “community toilet that we used was near the crematorium - far and inconvenient to access. It became more troublesome at night, in rainy season. We were afraid of animals and snakes.”

She decided to construct her own toilet. She applied for the SBM scheme. However the incentive subsidy was insufficient. Being a member of Shiv Malhar Bachat Gat (SHG), she took a loan of Rs 25,000 and started construction. Jyoti feels that she took an appropriate and timely decision to construct a toilet. While experiencing the comfort the facility has provided, Jyoti says “Having our own toilet gives us great relief and security”.

“I am glad that I am a member of a SHG group and they supported me in constructing a toilet at my home”
Kamal and her family were dependent on community toilets which was quite far and most of the time in unhygienic conditions. The elderly and children had to walk to the community toilet often in dark at night time. The rainy season brought its own set of challenges with water logging and dirty toilets.

Kamal is a vegetable vendor. Her family of six live in the Raviwarpeth area of Wai. The family earns just enough to meet daily expenses. They have no savings. In such a situation Kamal felt that owning a toilet would be just a distant dream. But she was determined and convinced her family to begin construction. They began with the septic tank but unfortunately could not complete it since they did not have enough funds. This led to a delay in construction for a while.

Then they heard about Swachh Maharashtra Mission and applied for a toilet subsidy. WMC promptly released the first tranche of subsidy. The second tranche of subsidy was to be released only after the super structure of the toilet was complete. Kamal did not have enough funds to complete the super structure. She did not lose hope and took a bold decision of taking a gold loan of Rs 25,000 at a 9% rate of interest for one year. After receiving the loan, she successfully constructed not only a toilet but also a bathroom for her family. Kamal takes immense pride in completing the construction against all odds and preventing her family from health and safety risks.

While experiencing the benefits of having an own toilet, especially during the COVID pandemic, Kamal adds “It is very comforting to have our own toilet as the elderly and female members of the family and children do not have to go out. During COVID pandemic, we would have been afraid of using the community toilet and may have resorted to open defecation”.

Picture Source: Author
Source: Primary Survey by CWAS February – March 2020
Chitra and her family were using the community toilet in Wai for many years. She recalled that “the community toilet they used was quite far from their home and not clean”. She had to accompany her children to use the toilet which took a toll on her work time.

Chitra supports her husband in making brooms to sell, which is their only source of income. She was determined to have a toilet at home. She was aware about the Swachh Maharashtra Mission (SMM) toilet scheme. While visiting the municipal council office, she found out that land ownership papers were one of the key mandatory documents for a successful application. As the family did not own the land, they struggled to get a consent letter from landlord to process the application. They arranged for all other necessary documents and got the approval. In spite of getting the approval, they lacked the funds required for initiating septic tank construction. However they could not start construction as under SMM, the first tranche of subsidy is released only after beneficiary completes septic tank excavation.

Chitra approached two private banks and took a loan of Rs. 15,000 from each. Her kutcha house highly inaccessible with improper approach road which made it difficult to construct a toilet. Chitra and her husband assisted the mason as labour and took multiple trips carrying materials on their heads and saved some money on labour cost. They were able to construct within their budget and the savings allowed them to construct a toilet combined with bathroom. The council also released the toilet subsidy which helped them in completing the toilet construction.

Chitra mentions that, “having our own toilet is very convenient for the family. My daily chores are managed properly and I get quality time to spend with family. We do not have to face the monsoon struggles anymore”. Today her house is one of the many houses in their community that has an individual toilet. She has motivated others in her community to move towards individual household toilets as she shares her experience.
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Ahmedabad Slum Networking Project: Extending water and sanitation services

The Slum Networking Project (SNP) aimed at providing basic services to targeted slums, including individual water supply connections, and individual toilets attached to sewerage systems. Aim was to integrate slum dwellers with the mainstream society through the provision of basic, physical infrastructure and social service to improve their quality of life.

- The pilot scheme of SNP was a partnership of Industry (Arvind Mills), NGO and the Ahmedabad Municipal Corporation (AMC). It included extension of city sewer network to slums to integrate them with city infrastructure, assistance for credit for toilet construction, community development programmes etc.
- Success of the pilot project led to city wide programme of Slum Networking
- Provision of individual toilet facilities proved beneficial to AMC as they saved funds on cleaning and maintaining shared facilities. Having a toilet at home also led to behavioural change among slum dwellers as it led to enhancement of their social status.
- Investment in shelter by households began after the provision of basic infrastructure. It also provided security from eviction to slum residents.

Based on experience of the SNP project, extension of the sewerage network has been scaled up in all slums of Ahmedabad. Ahmedabad municipal corporation (AMC) has institutionalization the SNP through ward/zonal budgeting for extension/ upgradation of sewerage infrastructure. For this, AMC uses the provision made in the Gujarat Provincial Municipal Corporations Act, 1949 (referred below). Similar approach was adopted by other ULBs in Gujarat.

The Gujarat Provincial Municipal Corporations Act, 1949 (Bombay Act No. LIX of 1949), Section 63 (2),... at least 10% of municipal own revenue income is earmarked for urban poor. It states “It shall also be incumbent on the Corporation to make, in its budget for every official year, provision for making expenditure to the extent of such amount, not exceeding ten percent of its income for such year........ for the purpose of providing basic facilities, like water supply, drainage, sanitation, street lights, medical aid, slum clearance and such other matters in areas predominantly populated by members of Scheduled Castes, Scheduled Tribes and other socially and economically backward class of people”
The “500 NOC scheme” provides slum residents with a ‘No Objection Certificate’ to have a legal access to individual sewerage, water and electrical connection on payment of a nominal fee of Rs 500. The objective of the city government was to ensure universal coverage of water and sanitation services in slums.

Eligibility Criteria
Applicant should have a dwelling unit in slum of not more than 40 sqm in size. The fee is much higher for bigger houses. Applicant must submit a residence proof such as ration card, voter I.D or electricity bill.

Steps to facilitate individual household toilets
1. The individual applies to the zonal office for NOC with requisite information. Estate department conducts site visit to the applicant’s residence to measure and prepare building plan sketch to ensure the dwelling unit is less than 40 Sqm.
2. If the dwelling is eligible for the NOC, estate department issues a "resolution" certificate to the City Civic Center (CCC). Beneficiaries pay Rs. 500 to tax department and get NOC receipt. Then a photographer is sent to take photo of beneficiaries.
3. Post NOC issuance to the beneficiary, the charges for individual sewerage and water connections were INR 300 and INR 200 respectively. A sewerage connection is a prerequisite for an individual water connection.

Investment in the provision of basic infrastructure leads to shelter upgrading and transformation of slums.

Slum Networking in Indore - Extending water and sanitation services to slum areas

- The slum networking project in Indore followed a community driven approach focusing on sustainable change for the city as a whole.

- The objective was on improving access to basic services was realized through innovative and low-cost engineering solutions. It created sewer network along the nallas along which slums were located, minimizing pumping.

- The development activities at the city level focused on strengthening of sewage network to receive slums particularly in areas where city sewers do not exist. At the slum level, house to house underground sewerage with individual toilets, storm drainage and individual water connection was provided.

Flexibility was provided to enable upgrading by making provision for private toilets and water taps.

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of slums covered under the project</td>
<td>183</td>
</tr>
<tr>
<td>Number of slums in with physical improvements</td>
<td>172</td>
</tr>
<tr>
<td>Total number of persons covered</td>
<td>4,50,000</td>
</tr>
<tr>
<td>Total length of new roads constructed</td>
<td>360 km.</td>
</tr>
<tr>
<td>Total length of new sewer lines laid</td>
<td>300 km.</td>
</tr>
<tr>
<td>Total length of new storm drains laid</td>
<td>50 km.</td>
</tr>
<tr>
<td>Total length of new water lines laid</td>
<td>240 km.</td>
</tr>
</tbody>
</table>

Kolhapur’s One Home One Toilet initiative: Drainage for household toilets in slums

• SA facilitates access to sanitation in informal settlements by: (1) setting up a very robust spatial data platform to pinpoint families who lack access to basic sanitation, (2) facilitating the construction of individual toilets, (3) conducting workshops to increase awareness within the community of environmental issues, (4) providing a forum for sanitation issues to be discussed and (5) establishing solid waste collection systems.

• Shelter Associate (SA)’s One Home One Toilet (OHOT) programme in Kolhapur includes collection of spatial data on drainage networks, mapping the location and size of new drainage lines that could be extended to slums and provide this information to the local municipality.

• Several workshops and Focused Group Discussions (FGDs) were conducted with children, youth, women, and men in communities. Slum level committees were formed to take up issues related to the provision of various services with the local ward offices.

• Considering the importance of drainage, SA initiated policy advocacy to improve the drainage system. In many slums, drainage network was extended through help of ward councilors and/or through Kolhapur Municipal corporation funds.

• Shelter Associates has so far facilitated construction of over 3000 individual household toilets in Kolhapur.

Andhra Pradesh Urban Services for the Poor Project (APUSP)

- The Andhra Pradesh Urban Services for the Poor (APUSP) was a collaborative project between DFID and the erstwhile Government of Andhra Pradesh. It was aimed at reducing poverty in select towns of Andhra Pradesh.

- The project which was initially confined to 32 Class I towns of Andhra Pradesh, was extended to 42 towns covering about 2.2 million urban poor.

- The project envisaged provision of water supply, drainage, roads, streetlights, sanitation and solid waste management in poor settlements. Provision was also made to link the infrastructure in the poor settlements with the citywide infrastructure.

- The APUSP was designed to receive the DFID, Government of UK grant fund of Rs.745 crores with a matching contribution from the Government of AP, taking the total outlay of the project to Rs.1,407 crores.

- Sanitation: Sewerage facilities were provided for a length of about 50 km at a cost of about Rs.56 crores, benefiting about 10,000 households in some of the corporations and Hyderabad surrounding municipalities.

This document is part of the efforts by the Inclusive Task Force of the National Faecal Sludge and Septage Management Alliance (NFSSM Alliance) for advocacy on increasing coverage of individual household toilets. The document has been prepared by CWAS with inputs on cases from The Centre for Advocacy and Research (CFAR), Administrative Staff College of India (ASCI) and Urban Management Centre (UMC).

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About us
The Center for Water and Sanitation (CWAS) at CEPT University carries out various activities – action research, training, advocacy to enable state and local governments to improve delivery of services.