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Additional Information:

• This is a conference paper.

Metadata Record: https://dspace.lboro.ac.uk/2134/29345

Version: Published

Publisher: © WEDC, Loughborough University

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Impact of Child’s Environment Project in district Tehri Garhwal

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Background

On the bifurcation of the biggest state of India – Uttar Pradesh, the hill state of Uttarakhand, consisting of 13 districts was created in November 2000. Tehri Garhwal, one of these 13 districts, has a population of 0.52 million, out of which 0.49 million are rural and 0.03 million are urban. The district has 1760 inhabited villages and the total area is 4421 sq. kms. 40% of the population is below poverty line. 52% of the total population is illiterate, however there is a significant difference between the literacy rates of males (72.10%) and females (26.41%). The terrain is hilly, extremely difficult and sparsely populated with the villages set far apart.

The problems prevalent in the district were:

- Lack of water and sanitation facilities in schools and colleges
- Water borne diseases
- Poor personal hygiene practices
- Drudgery and hard life of women
- Poor maintenance of water systems
- Unsanitary environment in and around the water sources
- Malnutrition among children
- Indiscreet defecation

Considering the above problems a Unicef supported & SIDA assisted Child’s Environment Project was conceived with the objective of reducing the water and sanitation related diseases and improving the provision of safe water and sanitation facilities to contribute to the Government of India’s goal of reducing mortality, morbidity and malnutrition among children below 5 years and drudgery of women. The project objective has the following measurable indicators:

- Reduction of diarrhoeal morbidity at 1990 level by 25% and mortality by 70% by 2002
- Universal access to safe water with the present norm of 40 lpcd and within 100 m elevation by 2002
- Access to toilets increased from 11% in 1990 to 30% by 2002 and 80% households reporting proper water handling and hand washing practices by 2002

The project was planned using the Log Frame Analysis approach based on the cause and effect relationship as shown in the diagram. The following six outputs with measurable indicators were worked out keeping in view the objectives of the project so that on achievement of all the outputs the project objective is achieved:

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**Figure 1. Uttarakhand district map**
- Improved access to and use of safe water
- Improved access to and use of sanitary facilities
- Promotion of key practices both domestic and personal for better hygiene
- Establishing inter-sectoral convergence for greater impact
- Promoting community participation and management
- Strengthening primary and secondary stakeholders

Similarly against each of the above mentioned six outputs the activities with measurable indicators were worked out so that on successful completion of all the activities against each output, the output is achieved. This whole exercise was carried out in an inter-sectoral workshop in which the representatives of all the implementing departments, NGOs and elected representatives participated.

The advantages of using LFA as a planning and monitoring tool are as follows:

- Coherence between inputs, outputs, objectives and the goal of the project
- Use in monitoring encourages evaluation of achievement of objectives and outputs of the project, rather than activities and expenditure alone
- Fixing realistic and objective indicators, verifiable through means mutually agreed between partners/stakeholders in the project, related to the outputs of the project.

**Project Strategies**
The project focuses on the convergence of the various developmental agencies viz. the government departments, NGOs, Community based Organisations and the community themselves through their elected representatives in the planning, implementation and monitoring of the project activities. The active participation of the community is ensured to develop a feeling of ownership in them regarding the facilities and resources being provided to them and intensive IEC activities are being carried out for awareness creation and demand generation.

**Project Coordination**
The following committees have been formulated for the effective coordination and monitoring of the project.

1. **State level Planning & Review Committee** headed by Principal Secretary & Commissioner, Department of Forestry & Rural Development, Government of Uttarakhand
2. **District level Planning & Review Committee** headed by the District Magistrate, Tehri Garhwal, Uttarakhand
3. **Block level Planning & Review Committees** headed by Block Development Officers
4. **Village level Water & Sanitation Committees** headed by the Gram Pradhans

**Major Activities**
The following major activities have been carried out:

- One day Orientation of district/block level officials of all the sectoral departments was carried out to inform them about the project goal, objective, outputs and activities vis-a-vis the role of each department as well as the project planning and monitoring process.
- A District Coordination Committee was constituted under the chairpersonship of the District Magistrate with all the district level officials of sectoral departments as its members and Chief Development Officer as its member secretary.
- A district level inter-sectoral strategy development workshop was organised to formulate the strategies for implementation of various activities against each output.
- A district level trainers team was trained which had participants from all the sectoral departments as well as from NGOs, to conduct the training of block level trainers team.
- Block level trainers teams were trained in all the nine blocks of the district to further train the motivators and village contact team members, at the village level.
- Village Contact Drives were carried out by the trained VCT members in all the project villages to create awareness about safe water, sanitation and hygiene.
- Training of master masons was carried out at the district level in which two masons each from all the nine blocks were trained on construction of household latrines and ferro-cement rooftop rain water harvesting tanks.
Training of masons were carried out by the trained master masons at the block level in all the nine blocks in which 15 masons in each training were trained.

Training of Motivators at block level in all the nine blocks were carried out by the district level trainers to train them on sanitation and hygiene promotion.

Orientation of Village Water Management Committees / Panchayat members were carried out through the block level trainers team.

Training of School teachers through district and block level trainers team, for promotion of sanitation and hygiene.

Training of school children on sanitation promotion in community as well as in schools, through trained school teachers.

School health check-ups through qualified doctors.

Sanitation competitions in schools for awareness creation and inculcation of hygienic habits amongst school children.

Mothers’ Meeting at Anganwadi Centres/villages through trained supervisors on hygiene promotion and diarrhoea management.

Establishment of Rural Sanitary Marts at each block headquarter for sale of sanitary items for personal hygiene, home sanitation and construction of household latrines.

Impact Assessment
A survey carried out after one and a half years of project implementation revealed the following:

Safe Water sources at household level
- 73.3% villages covered by at least one safe water source
- 69% households use safe water sources

Access to sanitary latrines at household level
- 15.3% households have sanitary latrines
- 78.7% households latrines were in use

Personal & Domestic Hygiene & Sanitation
- 98.7% mothers wash hands before cooking and after defecation
- 57.8% mothers wash hands before feeding children and 55.4% after cleaning child’s stool
- 91% mothers cover food & 96.5% wash raw fruits & vegetables

Hygiene & Sanitation among children
- 93% children found observing satisfactory level of personal hygiene
- 83% children observe environmental sanitation practices

Awareness on Prevention & Control of Diarrhoeal Diseases
- More than 90% mothers were aware about the causes of diarrhoea
- More than 88% mothers considered dehydration among children dangerous

Incidence of Diarrhoea & Case Management Practice
- Point prevalence rate of diarrhoea among children below 5 years
  - 3.5% within 24 hrs from the time of survey
  - 7.4% within 2 weeks
  - 5.2% within 3 months
- 42% mothers consider diarrhoea a serious illness
- Commonly used home fluids are breast milk, milk, dal and rice water

Lessons Learnt
- Integrated inter-sectoral approach has resulted in the success of the project
- Involvement of elected representatives of Panchayati Raj Institutions at village level resulted in better response from the community
- Effective coordination between Government and NGOs was instrumental in the success of the project
- Innovative approaches (handpumps in hills, natural rain water harvesting tanks) helped in reaching the unreached areas
- Improvement and protection of traditional fresh water sources on the hill slopes not only resulted in conservation of water but also prevented soil erosion
- Use of ferro-cement squatting platforms substantially reduced the cost of household latrines in hill areas resulting in increased sanitation coverage
- Promotion of no subsidy demand responsive approach has resulted in increase in household latrine coverage as well as their use
- Participatory planning and monitoring of the project through the District Coordination Committee headed by the District Magistrate resulted in effective and timely implementation of the project
• Networking of 18 NGOs with various government departments in the project has greatly helped in covering the difficult and unreached areas.
• The Plan of Action based on Log frame analysis approach having clear and measurable indicators for each and every activity has resulted in effective monitoring and visible impact of the activities.

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