

**INDIA: RURAL WATER SUPPLY AND SANITATION PROJECT FOR LOW INCOME STATES**

**Assam, Bihar, Jharkhand and Eastern Uttar Pradesh**

**SOCIAL MANAGEMENT FRAMEWORK**

**Ministry of Drinking Water Supply & Sanitation (MoDWS),**

**Government of India, New Delhi.**

**March 2013**

## **Social Management Framework**

*This report, Social Management Framework (SMF) prepared as a result of the synthesis of Social Assessment (SA) conducted in the four states (Assam, Bihar, Jharkhand and Uttar Pradesh) in the context of preparing the World Bank assisted Rural Water Supply and Sanitation (RWSS) for Low Income States (LIS) has the following objectives: TO (i) support in accomplishing the development objectives of the Project; (ii) integrate social inclusion, equity, cohesion, accountability, safeguards, risk management and sustainability strategies in the structures, institutions and interventions; and (iii) that the project interventions will not cause significant adverse social impacts and that all project activities comply with the laws, regulations and policies of India and the social safeguard policies of the World Bank. The project expects no negative impacts to occur as a result of its interventions. Ample potential exists for positive impacts/ benefits. However, it is a huge challenge in these states to transform the potential to 'reality'. To this end, SMF lends a supporting hand as it guides the policy, institutional and implementation arrangements. It acts as a tool for implementation, monitoring and supervision of interventions that address social issues and risks, including social safeguard risks. It addresses the needs of the World Bank's Operational Policy (O.P. 4.10) on 'Indigenous Peoples' (or Tribal Peoples, as they are known in India), and identifies the procedures to be followed for community civil works involving land. SMF is to be read along with the respective state specific Social Assessment report. One of the four states, Jharkhand, has significant tribals and hence in accordance with OP 4.10, a Tribal Development Plan (TDP) has been prepared. . SMF, SAs and TDP have been disclosed on the websites of both the central and state governments. A summary translated into local language has been disseminated across the project districts. Disclosure at community level will take place as a village entry activity with leaflets printed in the local language and distributed. SMF will be reviewed on annual basis and revised as appropriate.*

### **Introduction**

1. The World Bank is currently engaged with the Ministry of Drinking Water Supply & Sanitation (MoDWS), Government of India, in preparing and implementing a Rural Water Supply and Sanitation Program for Low Income States (RWSSP- LIs), with Phase I Program for USD 1 billion (USD 500 million IDA and USD 500 million GoI/State counterpart funding). The key objective of the proposed program is to improve piped water coverage integrated with sanitation services through decentralized service delivery systems. This program would be implemented through a special window of assistance under the National Rural Drinking Water Program (NRDWP). Four States (Bihar, UP, Jharkhand, and Assam) are being taken up as part of the Phase I Program. These states rank the lowest in terms of pipe water coverage. The project essentially aims at transforming the current hand pump based rural households into pipe water based household domestic consumption.

### **Project Development Objective**

2. Increase access to improved piped water and sanitation services for selected rural communities in the target states through decentralized delivery systems.
- 2.1 Key PDO level results indicators are the following:

- Direct Project beneficiaries (number), of which female (percentage);
- People provided with access to 'Improved Water Sources' under the Project (number);

- New Piped Household Water Connections (number);
- People provided with access to ‘Improved Sanitation Facilities’ under the Project (number);
- ‘Improved latrines’ constructed under the Project (number).

## 2.2 Project Beneficiaries

- Project will cover about 16,000 habitations in 33 districts across the four project states—Assam - 6; Bihar-11; Jharkhand-6; and Uttar Pradesh- 10.
- Directly will benefit about 7.5 million rural people with improved water supply and sanitation services.
- About 48% of the overall project beneficiaries expected to be women
- Participating States to benefit through improved institutional capacity, processes and procedures, for decentralized RWSS service delivery responsibilities and improving accountability to rural households
- MoDWS to benefit from improved institutional capacity to facilitate and scale-up community-driven, decentralized RWSS service delivery
- Targeted assistance to the tribal populations of 4 districts in Jharkhand, with about 0.4 million expected beneficiaries from tribal populations.

3. **Key Elements of the RWSS Project for Lagging States.** The RWSS Project for Lagging States will promote decentralized service delivery arrangements with increased Panchayati Raj Institution (PRI) and community participation, improved financial sustainability and enhanced accountability at all levels. A major shift from the business-as-usual will be the decentralization of RWSS service delivery responsibility to the DWSM and the Zila Panchayat (ZP - district PRI) for Multi Village Schemes (MVS) and the GPs for Single Village Schemes (SVS) and the intra-village MVSs. The other major focus is on strengthening policy and planning activities at the state and district levels, with clear accountability to the GPs and the beneficiary communities. The existing SWSMs and the participating DWSMs, ZPs, and GPs will be strengthened and their capacity built to allow them to undertake their respective policy, planning and review functions. An integrated approach to water supply, sanitation and environmental sanitation, along with source sustainability programs, will be supported by the project. The following are the key elements of the RWSS Program:

- Placing Gram Panchayats (GP) and communities in the central role – supported by higher levels of Panchayat Raj Institutions (PRI), by State governments, and by local NGOs and the private sector – for facilitating, planning, implementing, monitoring and providing a range of Operation and Maintenance (O&M) back-up services.
- Using sustainable, community or local government managed models for intra-GP RWSS schemes and using State-PRI partnership models for MVSs.
- Putting water resources security as a core theme of the new model, including increased community management of scarce resources.
- Moving the RWSS sector to achieve the recovery of at least 50 percent of O&M and replacement costs, and initiating contributions to capital costs.
- Integrating water supply and sanitation, with effective sanitation promotion programs for achieving ‘clean villages’.

4. **Project Components:**

The Project comprises the following three main components: (A) Capacity and Sector Development; (B) Infrastructure Development; and (C) Project Implementation Support.

**Component A: Capacity and Sector Development (15%):** This component will support the building of institutional capacity for implementing, managing and sustaining the project activities, along with sector development studies to inform policy decisions. The main sub-components include: (a) Capacity Building activities for MoDWS; (b) Capacity Building and Training activities for State level institutions, PRIs, and sector stakeholders; (c) Information, Education and Communications (IEC) Program; and (d) Sector Development Studies.

**Component B: Infrastructure Development (80%):** This component will support investments for improving water supply and sanitation coverage in the project habitations, including construction of new infrastructure or rehabilitation and augmentation of existing schemes, with safe disposal of wastewater. The water supply investments will be made in an integrated manner to include water source strengthening and catchment area protection activities, construction of household latrines, soak-pits, drain and lane improvements, community awareness programs for improving sanitation and hygiene practices, along with incentives for achieving ‘open defecation free’ status.. Most habitations are expected to be served by SVSs using local groundwater sources. The MVSs, mainly relying on surface water sources, will be taken up for habitations where the local source is either not sustainable or not of acceptable quality. The project will support the universal provision of household connections, with meters for bulk water supply in all schemes, and the promotion of household meters, where appropriate.

**Component C: Project Management Support (5%):** A National Project Management Unit (NPMU) will be set up at the MoDWS level for implementing and managing the entire Project across the four States.. The State level Project Management Unit (SPMU) will be established under the SWSM, assisted by staff in the districts (DPMUs) for implementing and managing the Project in each State.

## **II Social Assessment**

5. The initial inquiry reveals that project beneficiary profile may not be homogeneous, rather, quite diverse comprising a number of sub-groups identifiable on the basis of their differential endowment, gender, ethnicity, different economic groups and other regional features. Therefore, the challenge lies in addressing the requirements of the all the sub-groups, with special attention towards the rural and tribal poor and other normally socially excluded sub-groups. Besides, there are a large number of stakeholders, some internal and others external to the project, who would have varying degrees of influence and impact on project activities and outcomes. This makes it necessary for the project to provide a framework for participation of all key stakeholder groups and enable solicit their contributions towards project design and delivery mechanisms. To this effect, as a part of the project preparation, it was decided to conduct a consulting assignment, Social Assessment (SA). Four independent initiatives were done deploying separate consultants in each of the four project states.

6. The objective of Social Assessment was to better understand and address social development issues, and ensure accomplishing the outcomes – inclusion, cohesion, equity, security and accountability. This was also to enable assessing the social impacts of the proposed project interventions; develop measures to mitigate negative impacts and enhance positive impacts; examine the legal, policy and institutional aspects to enable accomplish the principles underpinning the approach.

7. Social Assessment comprised: (i) Beneficiary Assessment (BA), (ii) Stakeholder Analysis (SA), (iii) Institutional Analysis; (iv) Impacts Assessments; and (v) Risk Analysis. BA enabled building socio-economic profiles at the national, district, sub-district and village level; the project beneficiaries' assessment on the current status of research/extension/marketing; and their linkages with governance/management mechanisms. SA resulted in identifying stakeholders at different levels and mapping the key expectations, issues and concerns as related to each stakeholder and the sub-groups thereof. Institutional analysis led to documenting and analyzing the existing institutional arrangements, and formulating inputs into designing of the decentralized extension delivery system in consultation/collaboration with the stakeholders. This was followed by impact assessments and risk analysis. The results helped in designing the delivery system and addressing safeguards, thus ensuring positive and sustainable impacts.

### **Key Stakeholders and Consultations**

8. Key program stakeholders were identified and consultations held to seek their views and incorporate the same into designing of the program. Grassroots level stakeholders include: (i) benefiting households (including women, poor, Scheduled Castes, Scheduled Tribes and the hamlets); (ii) GPs (men and women elected representatives), (iii) Junior Engineers of DWSS, and (iv) other community based organizations. Block/ district level stakeholders are: the respective Panchayat Raj Institutions; other concerned line departments such as health, rural department, power, irrigation; district/ block administration; the government water and sanitation departments/ agencies; and non-governmental organizations, contractors/ suppliers and consultants. Departments of Finance, Drinking Water Supply & Sanitation, Rural Development and Panchayat Raj, Science and Technology, Irrigation, Health, political leaders, NGOs, consultants and other international agencies. There have been consultations throughout the project preparation both by the Bank Missions as well as by State and Central Governments and the SA consultants.

## **III SOCIAL MANAGEMENT FRAMEWORK**

9. Project interventions promise a huge potential for positive health and environmental as well as social benefits through supply of 'safe' drinking water and creation of sanitary conditions in the village. However, given the extensive diverse conditions –physical as well as socio-economic and cultural – it will be a challenge to translate the potential into reality. Success of the project depends upon the project's efforts at mobilizing local communities to participate in the development of water supply and sanitation facilities and enable them shoulder responsibility for the operation and maintenance and derive benefits on a sustained basis. The communities, however, are quite diverse in many ways – social (scheduled castes, others), economic (landless, small, marginal, and large farmers), ethnic (scheduled tribe, others), gender (female headed households) and geographical setting (hills, plains, forests, flood prone). A good number of regions are also suffering from poor water quality due to high content of fluoride, arsenic iron and other minerals which compels searching for water from long distances. Gram Panchayats, local self-governments, are still in their infancy. Added to these are other dimensions such as those areas characteristically Conflict Affected, infested by Naxalites and other Extremist Groups, rendering accessibility highly difficult. Additionally, WATSAN sector mainly rests with the Government Departments who have been traditionally following top-down and hierarchical decision making with hardly any accountability to the communities.

10. Given this setting, the project identifies the following as key social development issues: (i) participation; (ii) ensuring inclusion and enhancing equity, (ii) decentralizing service delivery underpinned by the principle of subsidiarity; (iii) customer base and demand generation – marketing the program and deriving home the health and hygiene benefits (iv) human and institutional development. The other important issues are enabling participation, especially of women; GP Strengthening; change management initiatives for changing the role of Government from 'provider' to a 'facilitator' to ensure;

improving accountability and transparency; and information, education and communication (IEC) campaign along with capacity building programs. The project will need to not only build the capacity of, but also provide capacity support to, the participating communities, local self governments and strengthen the existing and/or new institutions at the grassroots level to enable local communities participate in planning and construction of rural water supply and sanitation facilities and subsequently operate and maintain the systems on their own. Besides these key issues, there are many others specific to each state. Additionally, the issues identified in each state have also helped in enlisting certain principles which should underpin the project management. Operationalizing these elements forms the purview of the SMF. Further, given that each state is distinctly unique, and for the purpose of operational convenience, management measures are presented separately for each state.

**10. Key Elements.** The following key Community Driven Development (CDD) principles are being operationalized as a part of the Social Management Action Plan:

- i) Autonomy,
- ii) Decentralization coupled with subsidiarity,
- iii) Self-selection and demand driven,
- iv) Inclusion and equity,
- v) Participation,
- vi) Cohesion and Security
- vi) Gender mainstreaming
- vii) Capacity Support and Capacity Building
- viii) Tribal Development
- ix) Lands – community led voluntary initiatives.

11. Of the nine elements listed above, the last two -- Tribal Development and Lands-- relates to ‘safeguards’ and the remaining Non-safeguard social development. Between these two, ‘land’ issue is common to all the states, tribal development is specific to only one state – Jharkhand. So, the issue of land is presented as a common thread applicable to all the states, a separately prepared TDP serves addressing OP 4.10. Apart from these, management measures are presented separately for each state. This is followed by a Scheme Cycle depicting detailed activities to be adopted in rolling out a scheme. Role and responsibilities have been earmarked enabling a distinct role for GPs/ Gram Sabhas / VWSCs. A brief about the institutional and implementation arrangements as well as monitoring and evaluation design is presented towards the end.

## **SECURING LANDS**

**12. No lands will be acquired/ purchased involuntarily and hence Operational Policy (OP) 4.12-Involuntary Resettlement- is not triggered. The program, however, does need lands and mechanisms of securing the same are detailed.**

**Lands:** Land requirement arises for four purposes: FOR (i) water source; (ii) water treatment plants; (iii) construction of ground level or overhead tanks (G/OHT) or cisterns; and (iv) Water transmission and distribution pipelines as well as sullage/ storm water drains. Water sources could be

either ground water or based on surface sources, chiefly, rivers and canals. The ground water sources do require 'land' and so is the case with WTPs. In the case of tanks, if they are constructed in a place other than that of the 'source, separate land will be essential. Transmission and distribution lines are laid mostly in public land or along public streets and no land needs are to be secured. In a few cases, pipelines may have to pass through private agriculture fields. Since the pipeline are laid at least 90 cms below ground elevation, no land acquisition is needed, but permission from the land owner is taken. If such permission is not forthcoming, then alternative pipe routing is used, even if it is more expensive to do so. This means, lands are required for SI No (i), (ii) and (iii).

13. When plots of lands are to be acquired for project installations, their ownership could be either public or private. While it is easier to access public land, arrangements will have to be made for securing privately owned land. The prevailing normal practice in the state is obtain such land plots either through voluntary donation or by outright purchase. The discussions with the communities and experts as well as the past experiences reveal that :most villages do have sufficient public/Panchayat lands; and (ii) in case, it becomes inevitable, the local community will secure lands either through voluntary donations or outright purchase.

**14. Rules of taking possession of land.** It will be agreed with the participating states that the project will not resort to any involuntary land acquisition. All donations and purchases will be voluntary. Mechanisms developed will be such as to not only ensure voluntariness, but also that it will not involve any significant adverse impacts upon incomes or physical displacement. All voluntary land transactions will meet the following criteria:

- (i) the land in question will be free of squatters, encroachers or other claims of encumbrances;
- (ii) lands will be chosen (by the community) after ensuring that water indeed will be available in that particular piece of land;
- (iii) verification of the voluntary nature of land donations in each case;
- (iv) land transfers will be completed -- land title will be vested in the community (GP/VWSC) through registered sale deed or MOU;
- (v) lands will not be accepted from such land owners whose holding will be less than the minimum economical viable stipulated size (2.5 acres);
- (vi) not more than 10% of the total land holding will be accepted; and
- (iv) a provision will be made for redressal of grievances (ROG). DPMU will arrange for an examination of all land purchases by an independent agency before according the approval. Detailed record of all transactions will be maintained as per an agreed format and will form a part of the overall M&E arrangements.

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#### **IV Assam – Social Management Framework**

1. Assam is situated in the North-East region of India, bordering the seven States viz. Arunachal Pradesh, Manipur, Meghalaya, Mizoram, Nagaland, Tripura, and West Bengal and two countries viz. Bangladesh and Bhutan. It is, one of the seven sister States of the North East India with Dispur as its capital, located in Guwahati the main city of the State. With a geographical area of 78,438 sq. kms which is about 2.4 per cent of the country's total geographical area, Assam provides shelter to 2.2 per cent population of the Country. Assam is divided into 27 administrative districts. These districts are further sub-divided into 49 "Sub-divisions"
2. As per the 2011 census, total population of Assam was 31,169,272 with a growth rate of 16.93% over the last decade. Assam's population was 28.67 million in 2006 and 31.17 million in 2011 and at the stipulated growth rate it is estimated to be 34.18 million by 2021 and 35.60 million by 2026. In 2011, literacy rate in the State was 73.18%. Male literacy rate was 78.81% and female literacy rate was 67.27%. In 2001, the census had recorded literacy in Assam at 63.3% with male literacy at 71.3% and female at 54.6%. Urbanisation rate was recorded at 12.9%.
3. Assam is often regarded as the melting pot of a large number of ethnic tribes and races. It actually has the largest number of tribes or races in the whole of India. The main communities of the region include the Aryans and the non-Aryans i.e. Mongoloids and Indo-Iranians. Apart from that, Bodos (or Kachari), Karbi, Kosh-Rajbanshi, Miri, Mishimi and Rabha are the other tribes that have been infused in the rich cultural tapestry of Assam.
4. In Assam three areas – Bodoland Territorial Council, Karbi Anglong Autonomous Council and Dima Hasao Autonomous District Council are under the Sixth Schedule (Article 244(2)) of the Constitution designated as Scheduled Tribal Areas. Bodoland is the gateway to the beautiful North Eastern Region of India, which was created very recently by curving out some area of eight districts of Assam namely Kokrajhar, Dhubri, Bongaigaon, Barpeta, Nalbari, Kamrup, Darang and Sonitpur within the state of Assam. However, the entire area covered under the BTC has been recognized with Kokrajhar as original district and forming other new district like Chirang, Baska and Udaguri.
5. The 2001 Commission on Macroeconomics and Health examined the impact of health on development and concluded that improving the health status of people is essential to the economic development of a community. Life expectancy at birth (1996) was 56.2 years in Assam compared to the national average of 60.7. Infant mortality (below 1 year of age) in Assam is 70 per 1000 live births (2001) compared to an IMR of 64 in the rest of the country. Within Assam itself there is a wide disparity in the different districts – in 1991, Dhubri had an IMR of 128 while Jorhat had 47 infant deaths for every 1000 live births. *The population in Assam with access to safe drinking water is only 77.55% compared to the all India figure of 88% (the same is 84% in rural areas and 95% in urban areas) while the total sanitation coverage (rural plus urban) in India is 18% and in Assam 15.89%.* The inadequate coverage coupled with water quality issues emerging from high content of iron, fluoride and arsenic in aquifers in many areas of Assam has led to linked morbidity conditions. Bacteriological contamination due to unhygienic sanitation condition leads to water borne diseases. Hence the water and sanitation situation, particularly in rural areas remains to be a critical challenge for the State.

6. **Management measures.** Management actions are summarized in the table below.

Issues	Recommendations	
<b>Beneficiary preparedness</b>	<p>1) The beneficiaries are willing to accept the proposed piped water schemes and are ready to pay for improved service</p> <p>2) They seem to be less aware of the scheme details including site of the project and other details.</p> <p>3) Beneficiaries apprehensive about reaching piped water to the farthest point</p>	<p>1) Since the beneficiary preparedness exists, the commissioning of the schemes should be done as early as possible in ensuring water security addressing the issues of quantity quality and regularity. At the least, time frame should be shared with the communities so as not to lose their interest and enthusiasm. Project details to be displayed (proactive disclosure) in a permanent board to ensure awareness of the scheme among all stakeholders.</p> <p>2) There has to be district-wide awareness, through mass communication and interpersonal communication on the project benefits to create a demand in the community, particularly for pipe water household connections.</p> <p>3) Contour of the land to be considered prior to laying of pipe line. No false promises/ assurances should be made on ensuring household connections to each and every household.</p>
<b>Institutional preparedness</b>	<p>1) State level SPMU is in place but at the sub optimal functional level.</p> <p>2) PHED functionaries , although technically proficient , need orientation on Community Driven Development Approaches, administrative and management issues related to MVS</p> <p>3) District level DPMUs are yet to be commissioned</p> <p>4) At Anchal level, APWSC is yet to be commissioned although notification exists. However multi-level village schemes as planned under RWSS programme, which would cut across several GPs will required active role of APWSCs.</p> <p>5) VWSC at the GP level looks after mainly sanitation issues. Since water supply schemes are not handed over, they yet not prepared mentally and technically to takeover multi-village schemes.</p> <p>6) AT the GP level all the committees dealing with water and sanitation seem to be dormant as water supply schemes are yet to be handed over to the PRIs. With the new project with larger coverage and handing over the schemes to the PRI, PRI stakeholders and committee stakeholders needs to</p>	<p>1) Strengthening of SPMU with engagement of staff and definition of work roles.</p> <p>2) Regular capacity building through training programmes and exposure visits.</p> <p>3) DPMU to be commissioned and made functional through engagement of specialists The existing staff in the DPMU needs to be geared towards the World Bank Project provisions.</p> <p>4) APWSC should be oriented towards handling Multi Village Projects covering more than one GP</p> <p>5) GP level committees dealing with water and sanitation including VWSC should be oriented and trained to be able to handle multi-village schemes with larger coverage.</p> <p>6) Provision be made for establishing a scheme level committee comprising representatives of all the participating villages for advisory and overseeing the scheme.</p>

<b>Issues</b>	<b>Recommendations</b>
<p>be capacitated for effective management of such schemes</p> <p>7) SLUC are functional in most of the cases, but they work under the direct supervision and guidance of PHED bypassing the PRIs.</p> <p>8) SLUC s are generally handled by one or two office bearers- the President and the Secretary/ Treasurer. The other members are not involved in the management. All members need orientation, motivation trainings and also capacity building on management issues including financial management</p> <p>9) SLUCs do not have adequate capacity in community mobilisation and information dissemination</p> <p>10) There is lack of integration between VWSC and SLUC</p>	<p>7) Work closely with Panchayat Raj Institutions in ensuring legitimacy for all the users' committees.</p> <p>8) Adequate staff with technical capabilities have to be deployed.</p> <p>9) Leadership and Motivational trainings should be designed for GP functionaries.</p> <p>10) Capacity building through trainings of SLUC members on statutory obligations for managing SLUCs and book keeping required</p> <p>11) There should be a reporting mechanism for SLUC at the GP level</p> <p>12) All SLUC Executive Committee members need to be trained on technical, organisational and financial management issues</p> <p>13) Capacitating the SLUC members on information dissemination seems to be required. Local NGO-s and a local resource person can work towards capacity building of SLUC-s who would in turn carry out the functions in their catchments areas. Activation of the Block Resource Centres are a must in this context.</p> <p>14) VWSC as the standing committee at the GP level will provide guidance to SLUCs. There should be a reporting arrangement of SLUC-s to the VWSC for integration.</p>

<b>Inter Departmental Convergence</b>	
<p>Convergence of programmes and schemes are not yet streamlined for which program benefits are either duplicated or resources not optimally utilised.</p>	<p>Taking support of ASHA in the NBA program functionaries in mobilizing people for promoting individual sanitary latrines and creating awareness about health, hygiene and nutrition</p> <p>SHG-s under the Rural Livelihood Mission to be integrated with User committees</p> <p>MGNREGA programme to be utilised for infrastructure creation under RWSS. With adequate rainfall in Assam, rainwater harvesting structures could be created and this activity could be converged with MNREGS programme effectively.</p>

<b>Issues</b>		<b>Recommendations</b>
		Yearly Action Plans needs to be developed for such convergence programmes. With the PHE Engineers having technical knowledge on this activity, such schemes could be easily implemented
<b>Sl no</b>	<b>Further issues detailed</b>	<b>Mitigation Measure</b>
1	Lack of ownership of the constructed schemes by Gram Panchayats (GPs)	<ol style="list-style-type: none"> <li>PRI members engaged in implementation phase ‘as and when’ required basis, this has to be streamlined and a detailed planning to be done starting from planning to handing over of the scheme involving PRI stakeholders</li> <li>Handing over process needs to be streamlined and capacitating all the PRI stakeholders concerned needs to be done</li> <li>The committees constituted for looking after the issues needs to be strengthened with designated power and execution of the power</li> </ol>
2	District and Block ( Anchal ) Level staff may not be comfortable with the new project as it entrusts greater responsibility on PRI	<ol style="list-style-type: none"> <li>There has to be a detailed orientation on the roles and responsibilities of the different government and PRI functionaries indicating the advantages of such involvement-</li> <li>Exposure visit and success story sharing could be a viable method</li> </ol>
3	Additional responsibility on PHED Engineers at State and District may lead to over burdening on staff capacities	<ol style="list-style-type: none"> <li>The SPMU and DPMU needs to be strengthened with adequate staff</li> <li>There should be a provision for dedicated technical expert at DPMU level</li> </ol>
4	Women as a stakeholder may remain excluded	<ol style="list-style-type: none"> <li>The women participation has to be ensured through appropriate orientation and sensitization</li> <li>Women organization and community level stakeholders i.e. women SHGs, ASHA activists, AWWs are seem to be active in all the study districts, they need to be engaged for various grassroots community interactions and advocacy related to WATSAN</li> <li>Gender awareness training for project staff and participating support organizations are to be planned.</li> </ol>
5	Lack of accountability	<ol style="list-style-type: none"> <li>Re-defining the role and responsibilities for all the stakeholders at different level and a mechanism to track the same essential.</li> <li>Re-articulating their respective roles and responsibilities, if needed, in the context of the WB supported project</li> </ol>
6	Slip back of commissioned schemes	<ol style="list-style-type: none"> <li>Creating demand for improved piped water supply services</li> <li>Payment of user charges on a regular basis is a</li> </ol>

<b>Issues</b>		<b>Recommendations</b>
		<p>practice at Assam, it needs to be sustained with introduction of new scheme</p> <p>3. Subsidy to be minimized in water supply with provision of community system for poor and needy and that has to be the responsibility of respective SLUC.</p>
7	There could be procedural conflicts in integrating water with sanitation under the same committee	<ol style="list-style-type: none"> <li>1. Orientation of members at all levels</li> <li>2. Procedural streamlining for integration</li> </ol>
8	Lack of convergence may lead to duplication of work and resource use	<ol style="list-style-type: none"> <li>1. Coordination meetings to be organized on a regular basis for sharing of projects proposals</li> <li>2. Judicious allocation of funds for the purpose through strategic planning</li> </ol>

To sum up the best possible ways to address the issues and/ or mitigate the risks is to capacitate the stakeholders including, community at a large, using various communication tools and most importantly ensure adoption of the desired practices.

## **V. Bihar – Social Management Framework**

1. Bihar is 12th largest state of India in terms of geographical size (94,163 sq. km) and 3rd largest in terms of its population (104 million as per Census 2011). The state is well known for its abundant natural resources, perennial rivers, fertile lands and a long glorious history. In spite of abundant natural resources the state remained one of the poorest in the country since independence. The condition further deteriorated after the state's division and separation of Jharkhand as Bihar retained almost 75 percent of the population but was left with 54 percent of the land bereft of almost all mineral resources, thus inducing a lot of strain on the available resources.
2. Bihar lies in the tropical to sub tropical region. Rainfall is the most significant factor in determining the nature of vegetation in Bihar. The state has predominant monsoon season with an average annual rainfall of 1200 mm. The sub Himalayan foothills of Someshwar and Dun ranges in Champaran constitute the belt of moist deciduous forests. The state is densely populated with 880 persons per square kilometres as against the national average of 324. Of 104 million, 92 million live in rural areas (88.7 percent census 2011). The state has about 15.7 percent of Scheduled Caste (SC) population and 0.9 percent Schedule Tribe (ST) population (as per 2001 census).The sex ratio of the state at 916 females per 1000 males is lower than the national average of 940 females per 1000 males (census 2011)
3. In the specific context of rural poverty indicators, the latest estimates of 1999- 2000 indicate that Bihar has 44.3 percent as compared to national average of 27.1 percent. This level of rural poverty of Bihar is second highest in the country. Bihar, being a part of the Gangetic plains, its soil fertility and water resources are high for substantial part of the state while some portions of the state also fall in the relatively infertile Deccan plateau. In absolute terms, about 54.35 million people live below the poverty line in Bihar.
4. The state has 38 districts, 532 blocks, 8741 Panchayats and 107642 habitations. Bihar is blessed with abundant surface and ground water resources for substantial part of the state that is sufficient to cater to the demand for various end uses. The state receives average rainfall of 1250-1350 mm but 87 percent of this precipitation is limited to three monsoon months. The water table of the state varies from as low as 5m in the North Eastern region to 20m in the Southern districts (*Source: DDWS website*).
5. Providing safe drinking water to its people is the responsibility of the State Government. Till last decade coverage of habitations was the priority of the government. However, currently safe drinking water and other related issues like sanitation and hygiene have become the priority. Of the total habitations (107642) in Bihar, 20248 habitations are in the status of Partial Population Coverage and remaining 87394 habitations are in 100 percent population coverage. In about 14580 habitations the water quality is affected, of which 10877 are affected with Iron, followed by 2698 with fluoride, 1004 with arsenic and 1 with nitrate (*Source: DDWS website*).
6. Ground water table is quite high and hence water availability is not an issue in major parts of the State. In terms of quantity, the average population served per source is 110 which is quite good when compared to the Government of India norm of 250 persons per source. The rural population of the state is served by public as well as private hand pumps (India Mark III and shallow well hand pumps).About 79.73 percent of habitations are covered by Hand pumps / Bore well schemes followed by 3.88 percentage piped water scheme and 15.62 percentage by other schemes (*Source: DDWS website*).

## **7. Social Management issues/ measures**

- **Community participation:-** The activities of the project may not get community participation due to following reasons
  - Lack of education and awareness among the community.
  - Socially backward groups are also economically not too sound and thus, they may not be able to pay for the capital cost.
  - Caste dominant divisions and political alignment thereof, which may not augur well for group action.
  - Highly inadequate women participation, situation of women is poor; illiteracy, empowerment, no say in decision making nor exercise any control over resources.
- **Equity and inclusion:** Currently the villages dominated by socially backward groups has comparatively less functional infrastructure (water & sanitation). They are also economically backward thus cannot afford construction and maintenance of the infrastructure.
- **Lands:** though ample land is available with panchayats, they may not make available the same easily due to the local level socio-political dynamics. Planned external efforts will be required to bring all sections on a common platform and convince them to strive for long term common interests. Measures will have to be deployed to ensure voluntary securing of lands.
- **Regular water Supply:** since community having piped water supply was not found very much satisfied with the water supply timings and pressure of water supply, community may not like to take connections provided the condition of water supply is improved. So, demand for pipe water supply may not be forthcoming unless massive IEC efforts are made and facilities delivered as promised.
- **Power Supply:** since supply of power is an issue in Bihar thus, it could be a potential risk for power based schemes. Due to irregular electric connection operation of water pumps and supply may remains stalled and money invested for construction will go waste. If the water supply fails then community will again go back to their old water sources and this could be fatal in case of villages with water contamination (fluoride and arsenic)
- **Weak PRIs and non-existing/ non-functional VWSCs:** the operation and maintenance of the schemes may be an issue if the dedicated structure is not established at grass root level.
- **Political influence:-** looking into the importance of VWSCs, it is possible that political and economically dominated groups hijack VWSCs. This can also initiate a conflict between VWSCs and Gram Panchayat, particularly in the constituencies reserved for socially backward groups.
- **Delay in project delivery:-** since the lack of coordination and capability gaps are observed among the different wings of Department of PHED thus, it may happen that the project fails to deliver its objective within its stipulated time.
- **Contamination of Ground Water:-** leech pit toilets with deep pits (as reported by the households having toilet) and distance of water sources for toilet pit can lead to groundwater contamination, if proper measures are not taken on urgent basis.

## **Management Actions**

	<b>Mitigation</b>
Lack of Community participation	<ul style="list-style-type: none"> <li>• Multiple round of stakeholder consultations should be held prior to conceptualizing and during preparation of the project. Each sub project should have a local level communication office with a grievance redressal officer. The activity of each sub project should be further overseen by a high level coordination committee (at state level.).</li> <li>• Establishing Village Level Structure i.e VWSCs <ul style="list-style-type: none"> <li>– It is important that each village VWSC is participated by all the respective sections of the society of the village and their members are trained for supporting W&amp;S service delivery.</li> <li>– Revisiting the existing legislative stipulations to this end is essential.</li> </ul> </li> <li>• Capacity building of PRIs and VWSC members is critical.</li> <li>• Ensuring women participation <ul style="list-style-type: none"> <li>– One-third of the VWSCs members should be women and they should be provided training mandatorily</li> <li>– The social mobilization agency should deploy women members to get women's participation</li> <li>– Women should also be contacted by the Anganwadis and schools through their wards and motivated</li> <li>– Women education and empowerment programmes should be reinforced</li> <li>– Women groups organised by Mahila Samakhya could be involved for active participation in W&amp;S related issues</li> <li>– In the model of Mahila Samakhya, similar groups could be developed at village level for active participation in W&amp;S related issues</li> <li>– Women could be trained for providing services related to W&amp;S, may be through rural sanitary marts</li> </ul> </li> <li>• Establishment of bottom up approach and involvement of PRIs and community in O&amp;M of W&amp;S programmes</li> <li>• Capacity support to be arranged from experienced Support Organizations for community mobilization and technical aspects.</li> </ul>
Equity and inclusion	<p>Pro poor policy comprising the following be adopted:</p> <ul style="list-style-type: none"> <li>• provide concessions to rural poor in the matter of water connections and tarif.</li> <li>• Waive the normal one time connection deposit for such rural poor and to collect only the cost of providing meters (to be fixed by the PRIs themselves), to inculcate the sense of ownership;</li> <li>• Fix a life line supply of 7,200 litres per household (considering 40 lpcd for 6 member household) per month for rural poor, at a concessional rate (to be fixed by the PRIs themselves).</li> <li>• Consultations be held on the location of public stand posts.</li> <li>• Simplify procedures of taking connection and any proof of residence such as ration cards and ID cards would be considered sufficient to provide a connection.</li> <li>• Provide water free of charge through public kiosks / cisterns / taps to vulnerable sections such as nomads, destitute, homeless poor, etc. who cannot afford to pay anything.</li> <li>• Promote structured participation of NGOs and CBOs in organizing the vulnerable sections for managing free water supply through public kiosks.</li> <li>• Signing off on the Detailed Project Reports by GP/ VWSCs is a must before civil works are contracted.</li> </ul>

	<ul style="list-style-type: none"> <li>• All civil works payment be made after due presentation of the progress made and accounts to the Gram Sabhas.</li> </ul>
Lands	<ul style="list-style-type: none"> <li>• Work closely with community.</li> <li>• Involve panchayat and VWSCs in decision making.</li> </ul>
Regular water Supply	<ul style="list-style-type: none"> <li>• Work out the most feasible way of water supply, appropriate with duration, time, quality, and quantity.</li> <li>• Alternative arrangements are required for restoring regular water supply which could be solar based systems.</li> </ul>
Weak PRIs and non availability of VWSCs	<ul style="list-style-type: none"> <li>• PRIs should be empowered and mandatorily be members of VWSCs and other respective committees at different levels. The whole idea will be initiating planning from village level through involvement of community especially PRIs and VWSCs which will be scrutinized by the DWSM and will be sent for approval to SWSM. Further they should be involved in following activities; <ul style="list-style-type: none"> <li>– In motivating community for taking part in water and sanitation management for sustainability of service delivery so that financial viability of the schemes is not affected.</li> <li>– Should be trained in participatory development models</li> <li>– They should play an active role in the planning, implementation and management of W&amp;S services including domestic waste disposal.</li> <li>– They also need to be involved in dialogue with the community for ensuring piped water connections, timely payment of tariff and support in management.</li> <li>– Thus, it is important that each village VWSCs and PRIs have their adequate participation and they are also trained for supporting service delivery. Appropriate and regular IEC will also be equally important.</li> </ul> </li> </ul>
Strong Political influence	<ul style="list-style-type: none"> <li>• Community mobilisation and empowerment so that they are able to identify the requirements related to water, sanitation, health, and hygiene and not come under any such influence.</li> </ul>
Delay in project delivery	<ul style="list-style-type: none"> <li>• Project Management Unit is to establish good rapport with the Government of India and State PHED for timely release of funds and sanctioning of contracts respectively.</li> <li>• Project delivery in Mission mode so that Project management Unit has a complete structure up to the level of panchayat and able to monitor the project closely.</li> </ul>
Contamination of Ground Water	<ul style="list-style-type: none"> <li>• Capacity building of PHED officials on soft skills so that communication on technical aspects could be delivered to the community.</li> <li>• Hiring of professional agencies for developing and implementing communication strategy for sanitation, hygiene, and conjunctive use of water.</li> </ul>

## **VI Jharkhand – Social Management Framework**

1. Jharkhand is a state in Eastern India. It was carved out of the southern part of Bihar on November 15, 2000. The state has an area of 79,710 km<sup>2</sup>. It shares its boundary with the states of Bihar to the north, Uttar Pradesh and Chhattisgarh to the west, Odisha to the south, and West Bengal to the east. Two notable features of Jharkhand are its high proportion of Scheduled Tribe population which is about 28 percent against an all India average of 8 percent, and a high percentage of area under forest cover which is about 29 percent against the Indian average of 23 percent<sup>1</sup>.

2. With a population of 32.96 Million, the state accounts for 2.6 percent of India's population. The rural and urban population accounts for 77.7 percent and 22.3 percent of the total population respectively. Jharkhand has 24 districts, 260 blocks and 32,620 villages.<sup>2</sup>

### **Tribes of Jharkhand**

3. Among all States and UTs, Jharkhand holds the 6th rank in terms of Scheduled Tribe (ST)<sup>3</sup> population. It has around thirty two Tribal Groups, major among them being Santhal, Munda, Oraon and Ho. Eight out of the thirty-two tribes of Jharkhand fall under Primitive Tribal Group (PTG)<sup>4</sup>. They are Asur, Birhor, Birajia, Korwa, Savar, Pahariya (Baiga), Mal Pahariya and Souriya Pahariya. PTGs remain the most isolated and disadvantaged indigenous tribal groups with noticeable reduction in their population. Malnutrition, Malaria and dysentery are rampant in PTGs villages and the access of these communities to the social welfare programmes remains limited.<sup>5</sup>

4. The tribals normally live in contiguous areas unlike other communities. Their lives are closely associated with the nature as they eke out their livelihoods from the natural environ – streams, trees, plants, animals etc. It is, therefore, recognized that maintaining their identities would invariably mean keeping their environment intact with them. Given the contiguous inhabitations, it also becomes simpler to have an area approach for development activities and also regulatory provisions to protect their interests. In order to protect the interests of the Scheduled tribes, the provision of "Fifth Schedule" is enshrined in the Constitution under article 244 (2).

5. Jharkhand is one of the recently formed states of the Indian union. Like any new administrative entity, it also faces a number of issues. Some of these issues are as follows:

- **Poverty:** Jharkhand is the fifth poorest Indian state with 51.6% rural people below the poverty line (BPL).
- **Depleting Natural Resources:** It has a large proportion of tribal communities which are highly dependent on the natural resource base for their survival and their livelihood systems revolve around forests, agriculture, livestock and wage labour. Degradation of forestlands due to uncontrolled grazing, illegal logging and misapplication of forest policies are reducing the availability of NTFPs to the tribal communities.
- **Reduced Agricultural Output:** Declining fertility of soils, increasing incidences of drought and seasonal shifts in rainfall patterns are affecting traditional cropping patterns and limiting harvests.

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<sup>1</sup>Census of India, 2001; <http://jharkhand.nic.in>

<sup>2</sup> IFAD/India-Jharkhand Tribal Empowerment and Livelihood Project Project Design Report-Appraisal- Main Report, 2012

<sup>3</sup> The Article 366 (25) of Constitution of India defines scheduled tribes as "such tribes or tribal communities or parts of or groups within such tribes or tribal communities as are deemed under Article 342 to be Scheduled Tribes for the purposes of this constitution".

<sup>4</sup> Among scheduled tribes, there are certain tribal communities who have declining or stagnant population, low level of literacy, pre-agricultural level of technology and are economically backward. 75 such groups in 17 States and 1 Union Territory have been identified and categorized as Primitive Tribal Groups (PTGs).

<sup>5</sup> IFAD/India-Jharkhand Tribal Empowerment and Livelihood Project Project Design Report-Appraisal- Main Report

- **Devolution of Powers:** Although a number of specific State and National Acts, Policies and Programmes have been in place for some time, these are yet to make any perceptible impact on the conditions of tribal people in Jharkhand. The Panchayat Raj (Extension to Scheduled Area) Act (PESA) was approved in 1996 but implementation modalities to establish and empower the necessary institutions have been rather slow. It was only in 2010 that the Government of Jharkhand (GoJ) conducted Panchayat elections. Empowerment of these institutions by devolving finances and executive powers is yet to begin in the right earnest.<sup>6</sup>
- **Left Wing Extremism (LWE):** Furthermore, issues relating to a deficit in governance, leakage and malpractices, hindrance to productively develop forests and enjoy traditional user rights with control and supervision by the Gram Sabha as against the current system of overriding powers of the Forest Department, high tribal youth dropout rates prior to completing 10-12 years of schooling and lack of meaningful labour opportunities are feeding the discontent of tribal people. This situation is exacerbated by LWE which today afflicts 20 out of 24 districts in Jharkhand<sup>7</sup>. LWE on the one hand, mobilizes the discontent amongst tribal people to its cause, and on the other hand, prevents the government to deliver services to improve their quality of life and living conditions.
- **Mortality:** The state also has one of India's highest mortality rates for children under five. Child mortality rate of 69 per 1,000 is much higher than the national average. Infant mortality rate is 67 as against all India average of 57. Percentage of child immunisation is 34.2% as against India's average of 49.7%<sup>8</sup>.
- **Malnutrition:** Four out of every 10 women in Jharkhand are undernourished. Half the children younger than three are considered malnourished. Half of children under age of 5 are stunted and one-third of children are wasted or too thin for their height. About 57% are underweight due to both chronic under nutrition, worse nutritional status than children in most other states in India.<sup>9</sup>
- **Water & Sanitation:** The coverage of rural water supply and sanitation services is very low in Jharkhand. Besides, there are water quality related issues too, with many places reporting Fluoride, Arsenic & Iron contamination. 49% of the population is dependent on hand pumps for their water-the remaining meet their needs from a variety of sources, such as, wells, ponds, rivers, streams, piped sources, etc. The sanitation facilities in the rural areas too leave much to be desired. Only 7.6% of rural households have toilets in their houses. The situation is even worse for SC (4.3%) and ST (3.7%) households. Only around 2% of the rural households have closed drainage facility.<sup>10</sup>

## 6. Social Management actions

Issues/ risks	Actions
<ul style="list-style-type: none"> <li>• The beneficiaries are willing to accept the proposed piped water schemes and are ready to pay for improved service</li> <li>• They seem to be less aware of the scheme</li> </ul>	<ul style="list-style-type: none"> <li>• Since the beneficiary preparedness exists, the commissioning of the schemes should be done as early as possible in ensuring water security addressing the issues of quantity quality and</li> </ul>

<sup>6</sup> IFAD/India-Jharkhand Tribal Empowerment and Livelihood Project Project Design Report-Appraisal- Main Report, 2012

<sup>7</sup> <http://www.satp.org/satporgt/countries/india/maoist/>

<sup>8</sup> IFAD/India-Jharkhand Tribal Empowerment and Livelihood Project Project Design Report-Appraisal- Main Report, 2012

<sup>9</sup> *Ibid.*

<sup>10</sup> Census, 2011

Issues/ risks	Actions
<p>details including site of the project and other details.</p> <ul style="list-style-type: none"> <li>• Beneficiaries apprehensive regarding the reach of piped water to the farthest point.</li> </ul>	<p>regularity.</p> <ul style="list-style-type: none"> <li>• Project details to be displayed (proactive disclosure) in a permanent board to ensure awareness of the scheme among all stakeholders.</li> <li>• Contour of the land to be considered prior to laying of pipe line.</li> </ul>
<p><b>Stakeholder preparedness</b></p> <ul style="list-style-type: none"> <li>• State level SPMU is in place but at the sub optimal functional level.</li> <li>• District level DPMUs proposed and establishment in progress</li> <li>• VWSC at the GP level looks after works related to hand-pumps, repairing, IHHL and IEC activities. Since overall O&amp;M of Water Supply and Sanitation are to be handed over to them, they are yet not prepared mentally and technically to takeover multi-village schemes.</li> <li>• AT the GP level there is no separate institutional arrangement in managing Rural Water &amp; Sanitation. The new project under RWSS will be handed over to the PRI, stakeholders and committee stakeholders, who thus will be needed to be capacitated for effective management of such schemes.</li> <li>• Jalsahiyas are functional in most of the cases, but they work under the direct supervision and guidance of VWSC, who at present are incapable of technical monitoring of the existing schemes such as water quality checks, leakages in the system, maintenance of infrastructure, etc.</li> <li>• VWSCs are generally handled by few members and headed by the GP Mukhiya. The other PRI members are not involved in the management. All members need orientation, motivation trainings and also capacity building on management issues including financial management</li> <li>• Jalsahiyas do not have adequate capacity in community mobilization, information dissemination, monitoring and book keeping.</li> <li>• There is a dominance of influential groups in VWSC.</li> <li>• Convergence of programmes and schemes are not yet streamlined for which program benefits are either duplicated or resources not optimally utilized.</li> </ul>	<ul style="list-style-type: none"> <li>• Strengthening of SPMU with engagement of staff and definition of work roles.</li> <li>• DPMU to be made functional at the earliest through engagement of specialists. The existing staff in the DWSD (Who are also a part of SPMU) needs to be geared towards the World Bank Project provisions.</li> <li>• GP level committees dealing with water and sanitation including VWSC should be oriented and trained to be able to handle multi-village schemes with larger coverage. Adequate staff with technical capabilities has to be mobilized.</li> <li>• Capacitating the VWSC members on information dissemination seems to be required. Local NGOs and a local resource person can work towards capacity building of VWSCs who would in turn carry out the functions in their catchment areas. Activation of the Block Resource Centers are a must in this context.</li> <li>• Capacity building of Jalsahiyas on community mobilization, information dissemination, monitoring and book keeping.</li> <li>• Convergence issues need to be dealt in an integrated way at every level through coordination meetings where strategic plans under each programme could be shared for identifying areas of convergence.</li> </ul>

<b>Issues/ risks</b>	<b>Actions</b>
<ul style="list-style-type: none"> <li>Community is more or less geared up to pay for water but there are some instances where they stopped paying if water is not available or grievances are not addressed.</li> <li>Subsidy in sanitation sector has a negative impact and community is not maintaining the sanitation system as it comes in a subsidized rate .</li> </ul>	<ul style="list-style-type: none"> <li>Water security and sustainability issues should be taken care of through appropriate GPWSC and VWSC strengthening. There should be a streamlined system of Grievance Redress at the VWSC levels.</li> <li>Water supply connection should not be given at free of cost as there is already a habit of paying for getting water and the present Act also has such provision.</li> <li>If any subsidized rate to be thought for inclusion of poor and marginalized section such as; PTGs, this should be handled by GPWSCs.</li> <li>Issue of subsidy in sanitation needs to be revisited.</li> </ul>
<ul style="list-style-type: none"> <li>Community not particularly sensitive to women issues in the context of water and sanitation. Women's role conceived as passive in water management.</li> </ul>	<ul style="list-style-type: none"> <li>Gender sensitization to be done through appropriate IEC mechanisms.</li> <li>The mandatory provision of women participation in VWSC Executive Committee to be increased from 30% to 50% or more. At least one position among the President, Secretary and Treasurer should be held by women. (All women member VWSC could also be tried out as an innovative model).</li> <li>The petty contracts arising out of the sub-project should be considered entrusting to the existing women groups on community contract basis in the context of operation and maintenance.</li> </ul>
<ul style="list-style-type: none"> <li>Some beneficiaries living in elevated or far off habitations may be neglected.</li> <li>Also, since tribal population is scattered they are likely to get excluded from the proposed schemes under Water and Sanitation.</li> </ul>	<ul style="list-style-type: none"> <li>Tribal Development Plan, ensuring their inclusion in the best possible way.</li> <li>Ensuring, to the extent possible, the accrual of project benefits to the traditionally marginalized communities-more specifically, the PTGs under the project area</li> </ul>

<b>S.No</b>	<b>Issues/ Risks</b>	<b>Mitigation Measure</b>
1	Lack of ownership of the constructed schemes by Gram Panchayats (GPs)	<ul style="list-style-type: none"> <li>PRI members engaged in implementation phase 'as and when' required basis, this has to be streamlined and a detailed planning to be done starting from planning to handing over of the scheme involving PRI stakeholders.</li> <li>Handing over process needs to be streamlined and capacitating all the PRI stakeholders concerned needs to be done</li> <li>The committees constituted for looking after the issues needs to be strengthened with designated power and execution of the power</li> </ul>
2	District and Block Level staff may not be comfortable with	<ul style="list-style-type: none"> <li>There has to be a detailed orientation on the roles and responsibilities of the different government and PRI</li> </ul>

<b>S.No</b>	<b>Issues/ Risks</b>	<b>Mitigation Measure</b>
	the new project as it entrusts greater responsibility on PRI	<p>functionaries indicating the advantages of such involvement.</p> <ul style="list-style-type: none"> <li>• Exposure visit and success story sharing could be a viable method.</li> </ul>
3	Additional responsibility on DWSD Engineers at State and District may lead to overburdening on staff capacities	<ul style="list-style-type: none"> <li>• The SPMU and DPMU needs to be strengthened with adequate staff.</li> <li>• There should be a provision for dedicated technical expert especially in social, environment and procurement sectors, at DPMU level.</li> </ul>
4	Women as a stakeholder may remain excluded	<ul style="list-style-type: none"> <li>• The women participation has to be ensured through appropriate orientation and sensitization.</li> <li>• Women organization and community level stakeholders i.e. women SHGs, ASHA activists, AWWs do not seem to be very active in all the study districts, they need to be engaged for various grassroots community interactions and advocacy related to WATSAN.</li> </ul>
5	Lack of accountability	<ul style="list-style-type: none"> <li>• Re-defining the functional at all level of stakeholders.</li> <li>• Re-articulating their respective roles and responsibilities in the context of the WB supported project.</li> </ul>
6	Slip back of commissioned schemes	<ul style="list-style-type: none"> <li>• Creating demand for improved piped water supply services.</li> <li>• Subsidy to be minimized in water supply with provision of community system for poor and needy and that has to be the responsibility of respective VWSCs preferably not to be decided at the Apex level. However, in case of tribal population covered under the project, Social welfare department in mutual agreement with the VWSC (having tribal representatives as members) can decide on the respective subsidies, under the project.</li> </ul>
7	There could be procedural conflicts in integrating water with sanitation under the same committee.	<ul style="list-style-type: none"> <li>• Orientation of members at all levels.</li> <li>• Procedural streamlining for integration.</li> </ul>
8	Lack of convergence may lead to duplication of work and resource use	<ul style="list-style-type: none"> <li>• Coordination meetings to be organized on a regular basis for sharing of projects proposals</li> <li>• Judicious allocation of funds for the purpose through strategic planning.</li> </ul>
9	Left Wing Extremism is a challenge in most of the project areas and may lead to delays in implementation.	<ul style="list-style-type: none"> <li>• Generating grass roots demand for services and mobilizing community influencers to elicit the community's support in the project areas may reduce such risks.</li> </ul>
10	Exclusion of marginalized, particularly the Tribals, SCs, OBCs	<ul style="list-style-type: none"> <li>• Inclusion of all targeted habitations without any discrimination arising out of cost or technology.</li> </ul>
11	Conflict may arise if petty works are not given to local contractor	<ul style="list-style-type: none"> <li>• Preference to be given to local contractors and laborers.</li> </ul>
12	Conflict may arise in VWSC	<ul style="list-style-type: none"> <li>• Democratic process to be ensured in the formation of</li> </ul>

S.No	Issues/ Risks	Mitigation Measure
	if it is not represented by all sections of the village	VWSC.

#### **IV      SMF -- Eastern Uttar Pradesh**

1. The Eastern Uttar Pradesh (UP) comprising 28 out of total 75 districts in UP is one of the most socially and economically backward regions of the state, along with the Bundelkhand region. More than 80% of the people live below the poverty line and without access to basic services including water, sanitation and health.
2. Rural communities are internally divided along caste, class and gender lines. Caste hierarchies are fairly strong within rural communities represented by physical segregation of scheduled caste communities on the fringes of villages in most of the mixed caste villages. More than 80% of the households owning land are in the category of small and marginal farmers with precarious subsistence farming, which is often not enough to feed the entire household for the whole year. Women constitute the major agricultural work force and providers of water at the household level, but are largely excluded from the decision making processes at the household and community level.
3. Eastern UP lies largely on the Indo-Gangetic plain, and together with western Bihar is one of the most densely populated areas of India, and is characterized by frequent natural disasters mainly floods. Agriculture is a predominant activity -- Eastern UP leads the tally<sup>11</sup> in the state with highest percentage of agricultural land holdings below one hectare, which classifies a farmer as marginal. The region tops with over 84 percent of land holdings below one hectare. Lower land holdings make farm mechanization rather uneconomical and the farmer is unable to reap the full benefits of economies of scale.
4. The State Human Development Report 2007 (HDR) also highlights the developmental disparities of Eastern UP vis-à-vis UP as a whole. Among the bottom ten districts in terms of the human development index (HDI), eight belong to the Eastern UP.
5. Field visits to 20 GPs across 5 districts (Chandauli, Faizabad, Kaushambi, Kushi Nagar and Shrawasti) in different agro-climatic zones of the Eastern UP suggest that close to 100% people in rural areas have access to drinking water through public and private facilities, mainly hand-pumps. Most of the households have shallow hand-pumps (dug at 30-60 feet) installed within the household premises, besides the public stand posts set up by Jal Nigam or GP under different schemes including Swajaldhara. People without a proper house or land, who are not more than 2% of the study sample, are dependent on public stand posts.
6. Data from the field suggests that despite near universal access to water for people in the rural areas, the quality of water being consumed is suspect and unsafe in most of the cases. This remains the most daunting challenge in terms of ensuring safe water supply to people. People as consumers and government agencies as service providers try and address water supply issues differently with varying perceptions and positions on what constitutes improved water supply. This is quite pronounced in the case of Kushi Nagar, which has a very high incidence of Japanese Encephalitis (JE) and Acute Encephalitis Syndrome (AES).
7. The government agencies believe that shallow hand-pumps, which are dug on the first strata, are the primary source of this killer virus. But people find the water coming out of India Mark II hand-pumps dug by Jal Nigam also to be of dubious quality in many cases. Like for example, as per many respondents in the 4 GPs visited in Shrawasti, the water from India Mark II hand-pump turns yellow or red within a couple of hours of storing the water and smells bad. The reasons quoted by them are that these hand-pumps are dug at a shallow depth of 30-60 feet (though at times this is also at 100 feet) and not at the

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<sup>11</sup> Business Standard, Lucknow January 06, 2012

second strata at the depth of 150-200 feet, as claimed by the Jal Nigam. This suggests the need to ensure the quality of construction as per agreed norms.

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

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

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

### **Social Management Action Plan**

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

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

<b>6</b> Sanitation remains a poor add on to the overall project with its primary focus on water supply: and as a result, water supply and safe sanitation do not get addressed as an integrated issue having a major bearing on the quality of water and the resultant health status of people	<ul style="list-style-type: none"> <li>(i) Safe sanitation in terms of open defecation free (ODF) communities/GPs is made into an incentive for improved water supply services</li> <li>(ii) Water supply and safe sanitation are offered as an integrated service with emphasis on communication and capacity building for effective sanitation and hygiene behaviour change at the community level.</li> </ul>
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In view of the above, it is clear that the possible ways to mitigate these risks is to invest in large scale and intensive communication and capacity building of stakeholders, particularly of user communities and GPs. These are detailed in separate sections under Social Assessment.

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V SCHEME CYCLE	2-3 months	2-3 months
-Pre-planning Phase		
Formation of GP Water and Sanitation Committee (GPWSC) and opening of Bank Account by GPWSC	1	1
Formation of Multi Village Water and Sanitation Committee (MVS-WSC)	NA	2
Tripartite agreement for MVS signed between DWSC, Technical Dept. and participating GPs	NA	2
Gram Sabha Resolution "Agree To Do", to take up RWSS schemes as per guidelines and principles	3-Feb	3-Feb
Planning Phase	3-4 months	4-6 months
IEC/ BCC for water, hygiene, sanitation and environmental sanitation by SO and GPWSC - continues throughout planning and implementation phases periods	4-Mar	4-Mar
Preparation of Water Security Plan for the GP	2	3
Preparation of SHS/SGS preliminary designs by GPWSC, with support from SO	3	NA
Preparation of MVS preliminary designs by Technical Agency	NA	4
Preparation of a comprehensive environmental sanitation plan for the GP/ habitation.	3	3
Gram Sabha Resolution for scheme technology and estimates (for SHS/SGS)	1	1
Gram Sabha Resolution for Environmental Sanitation	1	1
Submission of SHS/SGS/SLWM proposals by GP to DWSC for administrative approval	1	NA
Submission of MVS proposals by Technical Dept.to DWSC for approval and for administrative approval as per Delegation of Powers	NA	1
Preparation of detailed Technical and Cost proposals of SHS/SGS by GPWSC with assistance from SO and Technical Dept., and submission for Technical Sanction	2	NA
Preparation of Detailed Project Report (DPR) by Technical Dept. for MVS	NA	4
Preparation of Community Action Plans (CAP) for water and sanitation by GPWSC, with assistance from SO	1	1
Gram Sabha resolution on accepting CAP (Community Action Plan)	1	1
Collection of initial community contribution by GPWSC	3-Feb	3-Feb
Implementation Phase	6-10 months	18-24 months
Selection of construction contractor(s) by GP/GPWSC for SHS/SGS and SLWM Schemes, assisted by SO and Technical Department,	2	2 (Env San only)
Selection of MVS Contractor by Technical Dept as per procurement process	NA	2
Construction of HH toilets (IHHL) with checks on quality of construction by Household and GPWSC/ SO	3	3
IEC/BCC activities continue, coordinated by SO on construction quality/monitoring, use/maintenance of toilets, hygiene promotion, solid waste management and sanitation training	10-Jun	18-24
Quality of construction independent checks for MVS and SLWM	1	1
Preparation of Implementation Phase Completion Reports for SHS/SGS/SLWM by GPWSC with assistance from SO (and Technical Dept if required)	1	NA
Preparation of Implementation Phase Completion Reports for MVS by Technical Dept.	NA	2
Technical and Social Audits to check water and sanitation schemes; toilets are used and maintained; villages are clean with no visible solid waste	2	4
ODF confirmed by SO/GPWSC, with spot checks by external groups	1	1
O&M Phase		
Continuous IEC/BCC activities with monitoring at household and community level	6	18-14
Sanitation cross-checks by GPWSC: households use and maintain toilets; villages are clean: no visible solid waste thrown around. Checks confirmed by external group	1	1
GPWSC takes over O&M of schemes for SHS/SGS/intra-GP/SLWM	2	2 (SLWM only)
Technical Dept. takes over O&M from Contractor for inter-village works of MVS	2	4
Collection of user charges by GPWSC	2	4
Exit of SOs from the GP	1	1
Continuous back-stopping by State Technical Dept.	-	-



## **VI Institutional and Implementation Arrangements**

1. The Project will support progressive decentralization, with a much higher role and responsibility to the PRIs at the district and village level for designing and implementing the schemes, and to the SWSM and DWSM for policy and oversight aspects. The responsibility of planning, implementing, and maintaining small SVS will be fully devolved to the GP, assisted by the District Project Management Units (DPMUs) and Support Organizations (SOs). Rural communities will participate in the scheme cycle through the GP committees (GP-WSC for SVS and MVS committees for MVSs) for ensuring that demands are met, both intra-village and bulk-water supply across villages and habitations. Contractual arrangements will be made between the bulk-water provider, the PHED/JN, and the scheme level committees for small and large MVSs. This will be accompanied by significant capacity building of the PRIs and sector institutions to take on such responsibilities. Public Private Partnerships (PPPs), including Design-Build-Operate (DBO) models will be piloted for large MVSs. Following are main institutional and implementation arrangements .

- (a) **National Level:** *National Project Management Unit, Technical Advisory Group, Water & Sanitation Management Resource Centre, National RWSS Institute.* The Project will be implemented through a special window of assistance under the on-going NRDWP. A National PMU (NPMU) will be established to assist MoDWS in implementing the project. The NPMU will comprise a specially constituted Technical Advisory Group (TAG) with the primary responsibility to review the implementation of the project in each of the target states and guide the states in their respective project activities and capacity building and institutional strengthening programs. The TAG will also be responsible for preparing the project implementation review documents for Bank supervision missions. A Water and Sanitation Management and Resource Centre (WASMARC) will be set up for providing technical and policy advice and assisting the MoDWS in managing the RWSS programs. The NPMU will converge with WASMARC during the project implementation period. Its initial mandate will be to focus on the target states, but will gradually expand its reach and coverage to the entire country. A National RWSS Institute (NRWASI), as a ‘state of the art’ training and research institute, will be established with linkages with other national and international technical institutions.
- (b) **State Level:** *State Water & Sanitation Mission, Water & Sanitation Management Organization, Public Health Engineering Department/Jal Nigam, State Rural Water and Sanitation Institutes, State Project Management Unit.* The State Water & Sanitation Mission (SWSM) under the RWSS Minister, is already in existence in the four states and is responsible for overall policy guidance for the RWSS Sector Program. The Executive Committee of the SWSM, headed by the RWSS Secretary is assisting SWSM in all its responsibilities, including planning and policy formulation, capacity building, fund flow, approval of the annual plan and budget allocation, and monitoring and evaluation of the Sector and District Programs. The project will strengthen the SWSM with the establishment of the Water and Sanitation Management Organization (WASMO) as a dedicated unit for managing, monitoring and approval functions, including guiding and building capacity of the district implementing agencies. The State Technical Departments such as PHED/DWSD, or Jal Nigam (in UP), will work primarily as the ‘facilitator’ for all aspects of the district programs, including technical support, capacity building, and training programs. Their role in large schemes (MVS and SLWM) would be to plan and implement the schemes, with involvement of GP-WSCs for intra-village works and operations. The project will set-up and/or strengthen the State Rural Water and Sanitation Institutes (State RWASIs) for training and research, including *Vishwa* in Jharkhand and *Pranjal* in Bihar. The State Project Management Unit (SPMU) has been set-up in the SWSM, with sector specialists for preparing and implementing the project. The SPMU will be responsible for assisting the SWSM in all aspects of design and implementation of the RWSS district-wide programs,

including approvals, monitoring and review functions. The SPMU will converge with WASMO during the project implementation period.

- (c) **District level:** *District Water & Sanitation Mission, District Water & Sanitation Committee, Public Health Engineering Department/Jal Nigam (District Technical Divisions), Multi Village Scheme-Water & Sanitation Committee, District Project Management Unit.* The DWSM, headed by the ZP Chairperson and DWSC headed by the District Collector (DC) will be strengthened by the project for receiving policy guidance from the SWSM and translating into district-level programs. The DWSC will be responsible for providing administrative approvals of SHS/SGS/SLWM, along with overall monitoring and management of the district program. DWSCs, apart from supporting DWSMs, will also select GPs based on the criteria laid down by the SWSM, identify and engage Support Organisations (SOs) and release funds to GP/GP-WSC for SHS/ SGS/ MVS (intra village) schemes and SLWM schemes, and release funds to PHED/ DWSD/ UPJN for MVSs and large SLWM schemes. The Technical Divisions of PHED/Jal Nigam at the district levels will be responsible for designing and implementing the MVSs and large SLWM schemes in partnership with the participating GP/GP-WSCs, and facilitating the GP-WSCs in designing and implementing the SVSs. They will also be the technical back-stopping agency for all schemes during designing, construction and O&M cycles. The MVS-WSC at the district level will be a representative committee of the group of GPs for MVS and will endorse and sign off the scheme design and implementation phase payments. All Project districts will have fully staffed DPMUs for supporting the implementation of the Project and policies, including communications, capacity building, monitoring and evaluation programs.
- (d) **Village Level:** *Gram Panchayat, Gram Panchayat Water & Sanitation Committee, Support Organization.* The GP and GP-WSC will be the key institution for all RWSS activities. The GP will be responsible for taking all important decisions through resolutions at the Gram Sabha meeting, including tariff fixation, within the overall guidelines given by the SWSM and DWSM. The GP-WSC as the statutory sub-committee of the GP, will be responsible for design and implementation of the SVS, intra-village component of MVS, and SLWM activities, along with IEC/BCC programs for sanitation and hygiene promotion activities. The GP-WSC will work closely with their counterpart health and education committees at the village level. The SOs will be appointed by the DPMU to assist the GP and GP-WSC in designing and implementing the schemes as per scheme cycle. SOs will also be responsible for community mobilization and IEC/BCC activities at the village level.

## **VII Monitoring and Evaluation**

1. Monitoring is a continuing process that aims primarily to provide the management and project stakeholders of an on-going intervention with early indications of progress in achieving the desired objectives. It also serves to identify- gaps and thus help to rectify-any problems with an on-going programme. Monitoring of a program needs to be closely aligned with the evaluation of the project. Evaluation is an important monitoring tool and monitoring is an important input to evaluation. Thus monitoring and evaluation are supportive concepts and provides the basis of assessment of performance and outcome of a project based on an M&E plan. The aim of the M&E plan is to “measure the progress in activity implementation as well as extent to which the activity will result in changes in accordance with the objectives”.

### **Objectives**

2. The project monitoring will aims in improving the following;

- Status Reporting
- Programme implementation
- Data sharing with partners
- Accountability
- Intermediate correction in programme implementation
- Services (water & sanitation)
- Use of toilet and sustainability of the structures

### **Type of Monitoring**

3. Internal and external both the monitoring is proposed to ensure accountability.

#### **3.1 Internal Monitoring**

This could be undertaken at each of the levels like VWSC, DWSM and SWSM. At each level, participatory monitoring will with representatives of VWSCs, NGOs and other stakeholders using a pre-tested checklist. Essentially, this will amount to tracking the scheme cycle on a real time basis and making available results continuously to the managements at district/ state levels. This will be internal to the ‘project’ form an integral part of the overall M&E system being developed under the project. This will also help in preparing progress reports on a regular basis.

#### **3.2 External Monitoring**

Additionally, the following needs to be monitored by external agencies on an annual basis. A TOR to this effect will be prepared during the first six months after the commencement of the project.

<b>Indicators</b>	<b>Outputs</b>	<b>Approach/ Methodology</b>	<b>Partners in enquiry</b>
<ul style="list-style-type: none"> <li>--Ratio of posts created and staffs appointed as per norms of NBA and NRDWP</li> <li>-At least 1 graduate engineer is available for 1,00,000/- population</li> <li>-At least 5 DWSM consultants in each district</li> <li>-At least 2 BRCs at block level</li> <li>-Proportion of habitations prioritized based on Region and caste</li> <li>-- All project staff trained both in general and specialized aspects, including gender sensitization.</li> <li>- All staff of Support Organizations and Design Consultants undergo project orientation programs.</li> </ul>			
<ul style="list-style-type: none"> <li>Devolution of power to PRIs for;</li> <li>-Number of water existing supply schemes devolved to PRIs</li> <li>-Number of schemes constructed by VWSCs or HWSCs vis a vis those constructed by the government agencies</li> <li>-- Number of households as a proportion of total households having household water supply connections</li> <li>-- Number of SC/ST households having household water connections.</li> <li>-- Number of Households depending upon pumps / public standposts</li> <li>--O&amp;M plan prepared, tariff fixed</li> <li>--Collection of user charges</li> <li>-Proportion of VWSCs are actively participating in O&amp;M</li> <li>-Proportion of VWSCs having One third women members</li> <li>-Proportion of VWSCs has involvement of Schools and Anganwadis in VWSC</li> </ul>			
<ul style="list-style-type: none"> <li>Appointment of social mobilization Support Organization/ Agency.</li> <li>The agency has at least one fifth of their staff as women.</li> <li>The agency has Tribal/Community Development trained professionals.</li> <li>Training of at least 5 VWSC members in each village done.</li> <li>Training of all women members of</li> </ul>			

VWSC done.			
<p>% of rural households having water supply systems functional at the time of spot checks</p> <p>% of rural piped water supply systems privately managed</p> <p>% of rural population within 500 m of an improved water source</p> <p>Time spent in fetching water- general/ SC/ST households</p> <p>Number and nature of protected water Sources</p> <p>Average amount paid for water supply per month</p> <p>Type of storage for water (specify) contamination observed in drinking water proportion of Households using defluoride units/filters</p> <p>proportion of Households have water quality testing facility</p> <p>distance of nearest drinking water source that takes water from ground water (e.g. a hand pump or a well)</p>			
<p>Access to sanitation services</p> <p>In schools and hygienic standards</p> <p>% of households with improved latrines</p> <p>% of SC/ST households with improved latrines.</p> <p>% of HHIs being used vis-à-vis constructed</p> <p>% of schools in the project areas with latrines as per standards</p> <p>Proportion of schools having toilet</p> <p>Proportion of schools having functional toilet</p> <p>Proportion of schools having child friendly toilet</p> <p>Availability of running water in the toilet</p> <p>Proportion of schools having hand washing facility</p> <p>Proportion of schools having drinking water facility</p> <p>Proportion of schools having</p> <p>Information &amp; Education material (visuals/painting) on water, sanitation &amp; hygiene is displayed</p>			
Proportion of Anganwadis having functional water and toilet facilities.			

Proportion of Anganwadis/GPs/ Public places having Information & Education material (visuals/painting) on water, sanitation & hygiene is displayed			
Lands: % of schemes using government lands % of schemes using Panchayat lands % of schemes using private lands Status note about the owners who parted with lands voluntarily.			

4. Social Audit system shall be adopted for assessing qualitative indicators through beneficiary participation. This shall be done at least twice during the scheme cycle – once, while moving from planning to implementation; and second, at the time of completion and commissioning. All the relevant stakeholder representatives will be mobilized into a team and conduct an audit and sign off on the status as well as the actions thereof. Social Audit procedures prepared under the other Bank assisted projects will serve as base material.