

Impact of Swachh Bharat Mission (Gramin) on Rural Sanitation: A Study of Rural Areas of Reasi District of Jammu and Kashmir

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Abstract: Swachh Bharat Mission (Gramin) has considerably improved the availability of Individual Household Latrines in rural areas. Since the launch of Swachh Bharat Mission (Gramin) the number of households having toilets has increased from 37.2 per cent to 100 per cent in rural areas. Sanitation in Jammu and Kashmir was among the worst in India as only 20.38 per cent of households had toilets before the start of Swachh Bharat Mission on 02 October, 2014. The present research paper has made an attempt to evaluate the impact of Swachh Bharat Mission on improving the sanitation in the rural areas of Reasi district of Jammu and Kashmir. It has analysed the status of implementation of various aspects of Swachh Bharat Mission (Gramin) like provision of constructing individual household latrines, activities conducted under Information, Education and Communication, solid and liquid waste management, etc. In the present study, it was found that the Swachh Bharat Mission (Gramin) has been successful in achieving the target of providing universal sanitation coverage on the parameter of individual household latrines but still many people in villages practice open defecation. Further, it has also been observed that the solid and liquid waste management, an important component of the Swachh Bharat Mission (Gramin), was not getting any attention till now.

Keywords: sanitation, hygiene, solid and liquid waste, open defecation,

INTRODUCTION

The concept of sanitation broadly includes liquid and solid waste disposal, personal and food related hygiene and domestic as well as environmental hygiene. It would not be wrong to say that it hardly describes the sanitary conditions as they obtain in the villages of India. Most of the people still defecate in the open space, most of the

villages lack waste disposal and drainage systems and many in the villages are ignorant about the consequences of poor sanitation and unhygienic conditions.

Blackwell (2004) argues that consumption of contaminated drinking water, improper disposal of human excreta, lack of personal and food related hygiene and improper disposal of solid and liquid waste have been major causes of many diseases in India and it is estimated that around 30 million people suffer from water-related diseases.

The report on Corporate Social Responsibility by Federation of Indian Chambers of Commerce and Industry & IPE Global Centre for Knowledge and Development (2015) mentioned that sanitation in India had not got due attention as out of the one billion people in the world who have no toilet, India accounts for nearly 600 million. According to the 2011 Census, more than 67 per cent of the rural households in India do not have access to a toilet. In absolute numbers, more than 110 million rural households do not have access to a toilet. Within states, Jharkhand has the highest percentage of rural households without a toilet. Kerala was last on this list with only 5.6 per cent rural households without a toilet.

The rural sanitation programme in India was first introduced in the year 1954 as a part of the First Five Year Plan of the Government of India. The 1981 Census revealed rural sanitation coverage was only 1 per cent. The International Decade for Drinking Water and Sanitation (1981-90) had given central focus to rural sanitation. Government of India introduced the Central Rural Sanitation Programme (CRSP) in 1986 primarily with the objective of improving the quality of life of the rural people and also to provide privacy and dignity to women. From 1999, a demand driven approach under the Total Sanitation Campaign (TSC) emphasised more on Information, Education and Communication (IEC), Human Resource Development (HRD), capacity development activities to increase awareness among the rural people and generation of demand for sanitary facilities. This enhanced people's capacity to choose appropriate options through alternate delivery mechanisms as per their economic condition. Financial incentives were provided to Below Poverty Line (BPL) households for construction and usage of individual household latrines (IHHLs) in recognition of their achievements.

The Nirmal Bharat Abhiyan (NBA), the successor programme of the TSC, was launched from 1st April 2012. The objective was to accelerate the sanitation coverage in the rural areas so as to comprehensively cover the rural community through renewed strategies and saturation approach. Under NBA, the Incentives for IHHLs were enhanced and further focused support was obtained from Mahatma Gandhi National Rural Employment Guarantee Act (MNREGA). However there were implementation difficulties in convergence of NBA with MNREGA as funding from different sources created delays.

Prime Minister of India has launched the Swachh Bharat Mission (SBM) on 2nd October, 2014 to accelerate the efforts to achieve universal sanitation coverage by constructing 90 million toilets in rural India at a projected cost of Rs. 1.96 lakh crore. It is worthwhile to mention here that no previous government in the history of Independent India has ever attempted to tackle the challenges of sanitation at this scale and with such a large financial commitment.

The Swachh Bharat Mission was launched with two Sub-Missions, the Swachh Bharat Mission (Gramin) [SBM (G)] and the Swachh Bharat Mission (Urban), which aims to achieve Swachh Bharat by 2019, as a fitting tribute to the 150th birth anniversary of Mahatma Gandhi, which in rural areas shall mean improving the levels of cleanliness in rural areas through solid and liquid waste management activities and making Gram Panchayats Open Defecation Free (ODF), clean and sanitised.

Swachh Bharat Mission (Gramin) has considerably improved the availability of Individual Household Latrines (IHHLs) in rural areas. Since the launch of Swachh Bharat Mission (Gramin) the number of households having toilets has increased from 37.2 per cent to 100 per cent in rural areas. This shows that the focus on community participation and saturation approach of the SBM has yielded brilliant results. But it has to be seen whether these newly constructed IHHLs are actually used by people.

Women and girls face special risks from lack of access to sanitation facilities but decisions on the construction of household level sanitation facilities were made exclusively by the males. The socio-cultural factors as well as community and household level dynamics often prevent women from participating in sanitation-related decisions. The Indian government tried addressing the gender inequality in its country wide sanitation programmes like Total Sanitation Campaign (TSC), Nirmal Bharat Abhiyan (NBA) and Swachh Bharat Abhiyan (SBA) by reserving 33 per cent membership for women in institutions and bodies related to water and sanitation. However, in actual practice, women's participation is seldom actively encouraged at the field level.

Srinivasan (2015) argues that the provision of water, sanitation and hygiene is a basic human right. Yet, millions of people lack access to basic toilet facilities, which anecdotal evidence suggests may increase violence against women. He examined the relationship between the lacks of toilet facilities in the Indian household on non-family violence against Indian women. He has found that lack of toilet facilities in the household is positively related to non-family violence against urban Indian women but not for rural Indian women. Further, this relationship is stronger for poor urban women. The study indicates that the lack of toilet facilities in households is a source of violence against urban Indian women.

Routray et al. (2017) have found in their study of rural villages of coastal Orissa that decisions on the construction of household level sanitation facilities were made exclusively by the males head in 80 per cent of households; in 11 per cent the decision was made by men who consulted or otherwise involved women. In only 9 per cent of households the decision was made by women. Their qualitative research revealed that women's non-involvement in sanitation decision making is attributed to their low socio-economic status and inability to influence the household's financial decisions. The study revealed the existence of power hierarchies and dynamics within households, which constrained female's participation in decision-making processes regarding sanitation.

RURAL SANITATION IN JAMMU AND KASHMIR

Dar (2020) argues that the erstwhile state of Jammu and Kashmir has established the Rural Sanitation Department in October 1989 to improve the cleanliness in rural areas through Solid and Liquid Waste Management and making Gram Panchayats Open Defecation Free. However, three decades have passed since the establishment of the department but the same has gone from bad to worse. Of late, several much-hyped schemes were also introduced by the government but the factors like lack of planning, funding, awareness among common masses and changing patterns of lifestyle in rural areas have rendered these schemes useless. Despite making a significant improvement in reducing the practice of open defecation, the countryside of Jammu and Kashmir has not shown any progress on the overall sanitation level.

Sanitation in Jammu and Kashmir was among the worst in India, with only 20.38 per cent of households had toilets in 2014 before the launch of SBM. According to the [Baseline Survey 2012](#) of the Union Ministry of Drinking Water and Sanitation, Jammu and Kashmir (J&K) was ranked third worst performer, behind only Orissa and Bihar, on rural sanitation. As per Swachh Bharat Mission data, 11,87,766 toilets and 1350 sanitary complexes have been constructed in J&K till now. But contrary to the data, rural sanitation has not significantly improved in the erstwhile state over the past six years. Also, on the SBM website almost all villages in Jammu and Kashmir were declared ODF; but the information is “unverified and misleading” and the same can be analysed by consulting the independent surveys which have found that the vast majority of people in villages are still using dry latrines.

Sangra (2020) in her micro-study undertaken in Salehar village of Bishnah block of Jammu district on Open Defecation Free Status of Jammu and Kashmir argue that although the erstwhile state of Jammu and Kashmir has attained 100 per cent Open Defecation Free status in September 2018, well before the Swachh Bharat Mission (Grameen) deadline of 2 October 2019 but the movement of women in flocks to fields as it gets dark portrays

quite a different picture. The micro study answered the following critically important questions like: Do the so-called individual household latrines exist only on paper, while being incomplete and non-functional in reality? Are these not being used due to cultural barriers and socialisation? What policy steps are needed to effect change in rural sanitation behaviour? This micro study categorically points to the major lacunae in the execution of the SBM-G, which failed to meet its goal of attaining 100 per cent ODF status for J&K. The baseline survey, which was the basis for identifying the beneficiaries of the SBM-G, excluded a considerable number of families. This suggests that policymakers must be more far-sighted and account for infrastructural wear and tear over time. If one family was provided a toilet in the 1980s, keeping the family's development cycle in mind, there is every likelihood that family grew into separate household units now, which ideally should have been identified and given the benefit. The study also brings out that the mere provision of IHHLs does not ensure that it is being used.

The present study has made an attempt to evaluate the impact of Swachh Bharat Mission on rural sanitation in Reasi district of Jammu and Kashmir. It has analysed the status of implementation of various aspects of Swachh Bharat Mission (Gramin) like provision of constructing individual household latrines, activities conducted under Information, Education and Communication, solid and liquid waste management, etc. Further, an effort was made to examine the role of women in sanitation related decision making in their households.

RESEARCH METHODOLOGY

The universe of the present study includes all the rural households of the Reasi district. The sample for the present study is drawn from the rural households of Kolsar panchayat in Pouni Block of Reasi district that was selected through purposive sampling. Kolsar panchayat comprises of three villages i.e. Gun, Kolsar and Nagar and the total number of households was 114. For the purpose of present study, the 50 per cent households from each of these villages of Kolsar panchayat, that comes out to be about 65 rural households, were selected through simple random sampling to evaluate the impact of Swachh Bharat Mission (Gramin) on rural sanitation. An effort was made to cover households from all sections of society to have a comprehensive picture of rural sanitation. In order to collect the primary data, the structured interview with the help of interview schedule was conducted with the head of households.

Relevance of the Study

Sanitation in Jammu and Kashmir was among the worst in India as it is ranked above only Odisha and Bihar as per the Baseline Survey 2012 of the Union Ministry of Drinking

Water and Sanitation. In Jammu and Kashmir, more than 54 per cent of total 1.2 million households are without toilets. Swachh Bharat Mission (Gramin) seeks to eliminate open defecation in rural areas of the country by 2019. The present research study is significant as there is a dearth of sanitation related studies in J&K. This study has comprehensively evaluated the impact of Swachh Bharat Mission (Gramin) on poor state of rural sanitation in Jammu and Kashmir.

Women and girls are most affected by lack of access to sanitation facilities as they have greater need for privacy during defecation. Females avoid being seen while defecating in the day light and wait till dark to use the open space for defecation. Women's involvement in sanitation related decision making is non-existent. Though governments and policy makers emphasise women's involvement in sanitation programmes, socio-cultural factors and community and household level dynamics often prevent women from participating in sanitation-related decisions. The present research study would help policy makers to realise the women's active participation in sanitation programmes as little research in the field of sanitation is available to inform about women's autonomy within the households and the household dynamics that could influence women's ability to contribute to latrine adoption.

It needs to be highlighted that from the perspective of social work, the theme is important as it pertains to the rural sanitation which is of direct interest to social workers. Social workers would always be interested in understanding the impact of sanitation programmes on rural population and contribution that women can make in realising this goal. This aspect gains further relevance due to the fact that a large majority of women reside in rural areas.

FINDINGS OF THE STUDY

For the present study, the socio-economic profile has been taken as one of the antecedent factors influencing behaviour of people towards sanitation in rural areas. The findings of the present study reveal that overwhelming respondents were Hindus and all of them have at least one literate family member. Economically, there were few respondents with good financial background. The social and economic background of the respondents is discussed as under:

Social Profile

The social profile of respondents has been studied with the various variables like religion, caste/community and educational status of respondents. The following table shows the social profile of the selected rural households.

Table 1: Social Profile of Rural Households

	<i>Indicators</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Religion	Hindus	63	96.92
	Muslims	2	3.08
	Total	65	100
Caste/Community	Brahmans	16	24.62
	Rajputs	19	29.23
	Bhagats	20	30.77
	Mahashas	4	6.15
	Lohars	3	4.62
	Sunnis	2	3.08
	Ramdasia	1	1.53
	Total	65	100
Education (Highest Qualified Member in a Family)	Illiterate	Nil	Nil
	Primary	5	7.69
	Middle	18	27.69
	Matriculation	21	32.31
	Higher Secondary	11	16.92
	Graduate and Above	9	13.85
	Professional Course	1	1.54
	Total	65	65

Religion is an important parameter especially for Jammu and Kashmir due to its multi-religious and plural nature. In the present study, it has been observed that overwhelming number of the respondents (96.92 per cent) were Hindus. There were only two Muslim respondents which indicate the large majority of Hindus in the study area. Further, an effort was also made to know the caste/community-wise distribution of the selected households. The present study reveals that Brahmans, Rajputs and Bhagats constituted about 84 per cent of total respondents in the study area (see Table 1).

Education is an important index of modernisation and rational thinking. In a democratic system, it plays an important role in developing human understanding of the society and its structures. Thus, the present study has tried to examine the educational level of respondents as education played an important role in bringing behavioural changes about sanitation and cleanliness. The educational level of the highest qualified person from family is recorded during data collection. It has been found, as illustrated in Table 1, that all the households have at least one literate person in the family. Most

of the respondents i.e. 32.31 per cent have a family member with highest qualification of matriculation followed by 27.69 per cent of respondents with educational qualification of family members up to 8th standard. There were also significant numbers of households whose members have attained higher education like graduation and above. Thus, it can be said that the educational background of the selected households presents an optimistic picture.

Economic Profile

The economic profile of respondents was studied with the help of number of parameters like their occupation, household type, their reported annual household income and ownership of land.

Occupation is a vital parameter that determines the economic condition of respondents. It has been observed, as shown in Table 2, that most of the households (41.54 per cent) were dependent on agriculture followed by 26.15 per cent of respondents whose at least one family member is engaged in government job. There were also considerable numbers of respondents who are dependent on labour and private jobs for their sustenance.

Further, when enquired about the classification of the respondents' households on the basis of income, it was found that the economic condition of the respondents was not good as more than half of them (56.92 per cent) falls under BPL category (See Table 2). The APL households were also not economically sound as they were only marginally above BPL. It corresponds to the occupation structure as most of the households are primarily dependent on agriculture.

An effort was also made to understand the land ownership patterns in the study area. It was found that overwhelming majority of respondents owned land but the productivity of land is not good. Due to hilly terrain, the land is hardly sufficient to satisfy their subsistence needs and thus they have to depend on seasonal labour and other professions for fulfilling their basic needs.

Income is an important index which reflects economic status of a respondent. Jammu and Kashmir has only 10.35 per cent of population that is living below poverty line against the national average of 37 per cent as per the Tendulkar Committee report. In the present study, it was observed that the economic condition of the households was very poor in comparison to their counterparts in other areas of J&K. Almost half of the households have annual income of below Rs. 50,000 followed by 23 per cent of respondents with annual household income of between Rs. 50,001-100,000. There were also some respondents (12.31 per cent) whose annual household income is above Rs. 2.5 lakh (see Table 2). It needs to be mentioned that the study

area is backward and only few people with government jobs are having good annual income.

Table 2: Economic Profile of Rural Households

	<i>Indicators</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Occupation	Agriculture	27	41.54
	Business	4	6.15
	Government Job	17	26.15
	Private Job	9	13.85
	Labour	10	15.38
	Others	8	12.31
	Total	65	100
Household Type	Below Poverty Line (BPL)	37	56.92
	Above Poverty Line (APL)	28	43.08
	Total	65	100
Annual Household Income (in Rs.)	Less Than 50,000	34	52.31
	50,001-1,00,000	15	23.08
	1,00,001-1,50,000	2	3.07
	1,50,001-2,00,000	6	9.23
	2,00,001-2,50,000	Nil	Nil
	More Than 2,50,000	8	12.31
	Total	65	65
Ownership of Land	Yes	59	90.77
	No	6	9.23
	Total	65	100

Impact of Swachh Bharat Mission (Gramin) on Rural Sanitation

Swachh Bharat Mission has a great impact on the sanitation in India. It can be seen that there is attitudinal change in people regarding sanitation and they are taking various initiatives to clean their villages, colonies, cities, etc. Swachh Bharat Mission is going to save huge public money that is spent on health issues arising due to poor health and hygiene. It will also ease the burden on existing health care facilities in India. But this will be achieved only if people change their attitude towards hygiene. Still we see people are openly spitting pan, gutkha or tobacco on roads and public places. Thus, Swachh Bharat Mission can be made successful in real sense only with greater awareness. India

has failed to achieve the adequate sanitation and cleanliness level even after several decades of independence. Swachh Bharat Mission has been launched to change this dubious status of India.

The impact of SBM has been assessed with the help of various indicators like toilets availability and its usage, conducting awareness campaigns, Solid and Liquid Waste Management plants, etc. It has been found in previous studies that there are large implementation gaps in the SBM and there is lack of awareness about the objectives of SBM.

Yadav et al. (2018) in their study of rural areas of Nalgonda district of Telangana argued that the majority of the respondents were aware of SBA and its core objectives. It was observed that most of them were having a positive attitude towards SBA. Though most of the people were having a positive perception, only 25.98 per cent have participated in SBA activities and the main source of information was found to be television and newspaper. The proportion of people disposing solid waste in community bins and using soap and water for hand washing was significantly higher among people who were aware of SBA.

World Bank (2015) has analysed the environmental and social systems assessment of SBM (G). It has found that the key functionaries responsible for implementing SBM need to have an overall perspective on social aspects of SBM. There are huge challenges especially at the village level as the coverage and targets are high but staff for social mobilisation, decentralised planning, transparency and accountability is extremely limited. The survey found instances where operation and maintenance of IHHL reinforces traditional cultural practices that increase the work load of women. Responsibility for Community assets such as sanitary complexes, SLWM projects and overall cleanliness of the village come under Village Water and Sanitation Committee (VWSC)/panchayat but continues to be seen as job to be done by specific communities at some places. Thus there remains a need for community sensitisation and monitoring of maintenance and usage to ensure that caste or gender based discrimination are not prevailing.

Availability and Usage of Toilet Facility

Toilets are essential for clean and healthy communities and thus it contributes to the social and economic development of India. Earlier, the rural people do not have separate toilets at their houses but Swachh Bharat Mission has been impactful in motivating as well as financially helping various people to have constructed household toilets. In the present study, it was found that cent-per cent of respondents mentioned the availability of separate toilet facility in their houses. This corroborates with the 100 per cent ODF status of Jammu and Kashmir.

The decision of constructing toilets indicates the dynamics of family power relationships regarding gender. In most of the studies, it has been found that women are lying at margins as far as sanitation related decision making is concerned. In the present study, it was found that the decision of building toilets was solely taken by males. This highlights the fact that the underlying patriarchal structures play an important role in restricts the women's role in sanitation related decisions in rural areas of J&K.

Access and usage of the toilet facility is very critical in ensuring the sustainable sanitation but one of the major constraints in achieving this objective is the poor economic condition of the rural households. In the present study, it was found that majority of the respondents (56.4 per cent) construct the household toilets with their efforts while the rest of them constructed toilets with government financial support got through various schemes like Nirmal Bharat Abhiyan and Swachh Bharat Mission (see Table 3).

Table 3: Support for Construction of Household Toilets

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Own efforts	38	58.46
Under Govt. Scheme	27	41.54
Total	65	100.0

Further, when enquired about the purpose of having toilet in homes, it has been found that health concern (56.92 per cent) and privacy (55.38 per cent) were the main reasons reported by the respondents for constructing toilet in their houses. Some of the respondents also cited dignity and convenience for constructing toilets (see Table 4).

Table 4: Purpose of Constructing Toilet

<i>Purpose</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Health	37	56.92
Hazard	2	3.07
Privacy	36	55.38
Dignity	4	6.14
Convenience	4	6.14

Note: The number of responses shown in the table are more than sixty five as this was multiple choice question and one respondent gave more than one response.

The mere construction of toilet is not sufficient to realise the goal of cleanliness mission and for realising the health benefits. Latrine use is an important indicator for monitoring the effectiveness of various sanitation programs. Open defecation causes a great risk especially to women's safety and dignity as well as children's health which leads to various diseases and violence against women. It has been observed that rural households avoid using toilets due to lack of awareness or religious reasons. The present study has revealed, as illustrated in Table 5, that large number of respondents were using the toilets but there are some respondents who do not regularly use toilets and are still defecating in the open. Thus, there is a lot scope for awareness campaigns to bring behavioural changes among people.

Table 5: Usage of Toilet by Family Members

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Yes	54	83.08
Sometimes	6	9.23
No	5	7.69
Total	65	100

Availability of Community Sanitary Complex

There is a special provision of building community sanitary complex under the Swachh Bharat Mission (Gramin). Community sanitary complexes can be constructed to meet the sanitation needs of the people of community as well as migrant people who do not have access to toilets in their houses. In the present study, it has been found that three community sanitary complexes were constructed for rural people of Kolsar panchayat. But the condition of these community toilet blocks was very worst as there is no provision of regular water supply and cleanliness. People avoid using these toilets as there were large open tracts of land surrounding their houses. It highlights the poor level of awareness and failure of the government agencies regarding bringing behavioural change in rural people about proper and healthy sanitation practices.

Awareness of Swachh Bharat Mission (Gramin)

Swachh Bharat Mission was launched with the ambitious goal of achieving complete sanitation coverage in rural as well as urban areas by October 2, 2019. Swachh Bharat Mission has accelerated the process of toilet construction in a mission mode. The awareness of Swachh Bharat Mission programme as well as its core objectives is necessary for realisation of the goal of open defecation free India. In the present study, it was found that overwhelming numbers of respondents (81.54 per cent) were aware about

the Swachh Bharat Mission programme. This highlights the fact that government machinery has not been fully successful in generating awareness about Swachh Bharat Mission as there were significant number of respondents i.e. 18.46 per cent who did not know about Swachh Bharat Mission (see Table 6).

Table 6: Awareness of Swachh Bharat Mission (Gramin)

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Yes	53	81.54
No	12	18.46
Total	65	100

Further, when enquired about the objectives of the Swachh Bharat Mission (Gramin), it was found that majority of the respondents mentioned promoting cleanliness and hygiene (65.23 per cent) as the main objective of the Swachh Bharat Mission (Gramin). There was also significant number of respondents (20 per cent) who mentioned the creation of open defecation free villages by incentivising toilet constructions as the main objective of Swachh Bharat Mission (Gramin) [see Table 7]. Thus, it can be said that there was overall lack of awareness about the core goals of Swachh Bharat Mission (Gramin) and the state government need to accelerate its efforts to disseminate the awareness about all the goals of SBM (G).

Table 7: Opinion on Objectives of Swachh Bharat Mission (Gramin)

<i>Objectives</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Open defecation free villages by incentivising toilet constructions	13	20.00
Solid and liquid waste management	4	6.15
Promoting cleanliness and hygiene	45	69.23
Awareness generation through the involvement of community and panchayats	8	12.31
Non-applicable	12	18.46

Note: The number of responses shown in the table are more than sixty five as this was multiple choice question and one respondent gave more than one response.

Impact of Swachh Bharat Mission (Gramin) on Rural Sanitation

Swachh Bharat Mission has significant impact on the rural sanitation as India has achieved the target of universal toilet access within set timeframe for the first time in history.

Thus, it was also inquired from respondents whether the Swachh Bharat Mission is improving the rural sanitation. The present study has found, as illustrated in Table 8, that most of the respondents i.e. 44.62 per cent of respondents consider the performance of Swachh Bharat Mission (Gramin) as good followed by 26.15 per cent of respondents who rated its performance as not good. It again highlights the poor state of rural sanitation in J&K because the mere toilet construction cannot be taken as parameter of rural sanitation.

Table 8: Impact of Swachh Bharat Mission (Gramin) on Rural Sanitation

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Good	29	44.62
Not good	17	26.15
Non-existent	7	10.77
Non-applicable	12	18.46
Total	65	100

Awareness Campaigns about Swachh Bharat Mission (Gramin)

Information, Education and Communication is the key for the success of Swachh Bharat Mission. Awareness generation is the most important component of the Swachh Bharat Mission (Gramin) as the goal of 'Clean India' is not possible without bringing behavioural change among people. Thus, the organisation of awareness campaigns indicates the real intention of implementation agencies to achieve the 'Swachh' India. In the present study, it was found that only 24.62 per cent respondents have attended the awareness campaigns conducted by various agencies (see Table 9). This highlights the urgent need on part of government agencies to scale up efforts towards IEC activities which are lacking here.

Table 9: Conduct of Awareness Campaigns in their Village

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Yes	16	24.62
No	49	75.38
Total	65	100

Further, when enquired about the agencies that conducted awareness campaigns, panchayats were mentioned by all the respondents except one who referred government officials (see Table 10). Thus, it shows the complete absence of voluntary organisations

on the scene of sanitation drive in J&K. Non-Government Organisations (NGO's) are the very important agents in Swachh Bharat Mission and government need to utilise the services of NGO's to improve rural sanitation in J&K.

Table 10: Agency that Conducted Awareness Campaign

<i>Agency</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Panchayat	15	23.08
Non-Govt. Organisation	Nil	Nil
Govt. Officials	1	1.54
Non-applicable	49	75.38

Awareness about Solid and Liquid Waste Management

Solid waste broadly includes non-hazardous industrial, commercial and household junk, including household organic trash, street sweepings, hospital, and institutional garbage and construction wastes. Liquid waste includes wastewater or sewage that is generated from a home or community including toilet, bath, laundry, lavatory and kitchen-sink wastes. The management of solid and liquid waste is crucial in realising the goal of healthy rural sanitation. Thus, when enquired about the awareness about solid and liquid waste management from respondents, it was found that large majority of the respondents (80 per cent) were not aware about the solid and liquid waste management (see Table 11). This shows the low level of awareness about the issue of solid and liquid waste management in rural areas of J&K.

Table 11: Awareness about Solid and Liquid Waste Management

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Yes	52	80.00
No	13	20.00
Total	65	100

Disposal of Household Waste

Household waste disposal in rural areas has not got serious attention till recently. In the present study, it was found that more than half of the respondents (58.46 per cent) are throwing the waste outside their houses followed by 38.46 per cent who throw waste in open spaces away from their houses which is a point of concern (see Table 12). They argued that they have no option in the absence of a proper waste management system.

This indicates that there is an urgent need for proper handling of wastes in rural areas to keep the villages clean and avoid health hazards. The government should not take the building of toilets as the sole parameter of completing the Swachh Bharat Mission. It should equally focus on the serious issue of solid and liquid waste management which seems to be neglected till now as per our findings.

Table 12: Disposal of Household Waste in Rural Areas

<i>Response</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Pit	2	3.08
Outside the house	38	58.46
Open Spaces	25	38.46
Total	65	100

Provision of Solid and Liquid Waste Management Projects

Solid and liquid waste management has emerged as the biggest challenge in proper sanitation facilities. Swachh Bharat Mission has the provision of setting up of Solid and Liquid Waste Management (SLWM) plants in rural and urban areas. This provision of Swachh Bharat Mission (Gramin) has got the least attention of various states/UT governments. In the Swachh Bharat Mission (Gramin), there are provisions for starting projects like collection, segregation and safe disposal of household garbage; biogas plants and maximum reuse of organic solid waste as manure through methods like vermin-composting to tackle the problem of solid waste management. But no effort has been made on these issues. Similarly to deal with liquid waste there are provisions for projects like maximum reuse of waste water for agricultural purposes; collection of waste water through soakage pit or low cost drainage; Waste Stabilisation Pond (WSP) technology and anaerobic decentralised waste water treatment. In the present study, it was found that all the respondents reported the absence of any Solid and Liquid Waste Management plant in their area. This corroborates with the overall situation in rural areas of J&K where there is least focus on this objective of Swachh Bharat Mission.

CONCLUSIONS

India has made rapid progress in ending open defecation across the Country which is having a huge impact on improving water, sanitation and hygiene (WASH). The Swachh Bharat Mission (SBM) has changed the behaviour of hundreds of millions of people with respect to toilet access and usage. The main focus of Swachh Bharat Mission (Gramin) has remained on building Individual Household Latrines (IHHLs). Swachh

Bharat Mission (Gramin) has considerably improved the availability of Individual Household Latrines (IHHLs) in rural areas. Since the launch of Swachh Bharat Mission (Gramin) the number of households having toilets has increased from 37.2 per cent to 100 per cent in rural areas.

The present study has revealed that the impact of Swachh Bharat Mission on rural sanitation in J&K presents a mixed picture. It was observed that the Swachh Bharat Mission has been successful in achieving the target of providing universal sanitation coverage on the parameter of individual household latrines but still many people in villages are not aware about the prime purpose of toilets and practice open defecation. Thus, the ultimate aim of Swachh Bharat Mission is failing to some extent. It has also been observed that the solid and liquid waste management, an important component of the Swachh Bharat Mission (Gramin), was not getting any attention till now. There is also poor sanitation in villages and cleanliness is not maintained which invites health problems and diseases. Thus, it is essential on the part of government agencies to give more focus on IEC activities so that awareness about the objectives of Swachh Bharat Mission is disseminated among the masses. The community participation is very crucial for the success of Swachh Bharat Mission and the government should work towards making the people stakeholders in achieving the goal of clean India.

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