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-ECONOMIC UNITS OF THE KERALA WATER  
AUTHORITY, INDIA--Women in the Water and Sanitation Programme  
June 1991

This paper gives an overview of the topic and ends with three appendices on specific issues prepared by senior project staff.

#### BACKGROUND

Kerala is a long, thin state (570 km long and never more than 120 km wide) on the southwest tip of India overlooking the Arabian sea. It has a recent heritage, surpassing most states in India, of women's participation in the life of the community and in activities outside the home, including education with the highest proportion of literate women in the nation. Balanced against historic traditions which do not stimulate equality between men and women in the sense commonly understood in Europe or parts of Southeast Asia, the recent history of land reform and socialist/communist governments does support female participation in many sectors of life. Nonetheless, there are still many things which militate against full involvement of women in water and sanitation projects such as ours. Among these are:

Decision-making for public services and local government have very limited involvement by women. This is a great challenge for the water and sanitation sector. While women are responsible for water and sanitation around the home, they have a weak voice in negotiations and decisions about many aspects important for themselves and their children.

Women are generally shy to express themselves in mixed (male/female) meetings; and this tends to run against cultural norms. Furthermore they are not always taken seriously when they do speak.

Women have less mobility during the day and are seldom seen out of the house after dark. Very rarely would a woman ride a bicycle, drive a scooter or larger vehicle.

All housework, including fetching water, collecting fuel, washing clothes, care of children and cooking is the responsibility of the woman even if she has other major income-generating activities.

Kerala, with 28 million people, has the highest population density in India. One coastal strip about 400 km. long from Trivandrum to Calicut is something like a dense rural Randstad. Given these conditions, the Kerala Water Authority (KWA), responsible for drinking water in the state, works to develop piped water systems with public standposts. At present, the Netherlands supports 8 such schemes serving populations from 10,000 people to more than half a million people each. In addition the KWA serves as nodal agency for large household sanitation (latrine) programmes, one of which is supported by the Dutch government.

Household latrines in rural areas are now becoming popular. When

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we ask people about their motivation for having a household latrine, they usually say:

- a latrine offers privacy to women in crowded conditions of Kerala (so that, for example, women do not have to restrict their diets to avoid defecation during daylight)
- it raises the value of the house (after land reform the large majority own a small bit of land)
- a latrine improves health and hygiene though, interestingly, this is not always the first reason for wanting a sanitary latrine.

Our project, the Socio-Economic Units (called 'SEUs') is attached to the Kerala Water Authority and focusses on community participation--at this time, the selection of standpost sites to benefit the community, the use of water at the standposts and in the home, maintenance and drainage around the standposts, household latrines and environmental sanitation. There are 3 socio-economic units with offices in the southern, central and northern regions of Kerala. These are supported by both the Netherlands and Denmark.

#### WOMEN IN THE PROJECT

A central feature of the SEU programme is strengthening community participation in relation to water health and sanitation. In the project's objectives, special emphasis is placed on women. There is, however, at this time no separate activity plan or allocation dealing with the involvement of women. This effort is integrated into all features of the work. Perhaps this can be described conceptually with reference to certain roles which women may fill in the home, community and project. Some concrete observations about each of these is noted below:

mothers, wives and users of services: To ensure the best location for public taps which will reach those in greatest need, discussions are held with the people who live in each area. For this, we try to be certain that the opinions and information about the area are solicited from women in particular. This also helps ensure public commitment to the care and use of the water taps.

Health education covers some of the most personal aspects of behaviour and most important aspects of family care. There are separate meetings with women which can be lively and well-attended. Sometimes these meetings are conducted by SEU field workers; other times they are lead by ward water committee members and/or women staff of local organizations who have been trained by the SEUs.

Some special campaigns are mounted which have relevance to local environmental issues. Women have a high level of participation in these--on planning committees, as well as in implementation. These include the well chlorination campaigns and fly control campaign (in coastal fishing villages).

women as members of the community: There are several types of

involvement. The Ward Water Committee is the basic community organization structure of the SEU programme. This is an unpaid community-based group organizing and implementing water and sanitation in the ward, selecting beneficiaries for the latrine programme, collecting money and so on. This is a planning as well as an executive committee. A ward has a population of about 2,000; and there are now more than 160 trained and active Committees. The Water Committee has 7 members of whom at least 2 must be women. Many Committees have 4 women many of whom are also active in women's clubs, staff of children's centres (ICDS, anganwadis, balwadis), health clinics, schools or ward members. The most successful Ward Water Committees have the most committed women. For example, in one Committee during the construction of latrines, the three woman Committee members would finish their work quickly at home by 8 AM and go to the worksites where householed latrines were being constructed. There they made sure that the masons did the work properly, would get supplies, would make sure that the education information was given by the masons.

Women standpost attendants are selected by the ward water committees from among the regular users of the taps. They are in the best position to report leakages, breakdowns, work to assure maintenance and (with support of the Water Committee) the proper use of the standpost. This is a fairly new effort as the schemes are just now being commissioned. However, we have already seen that a strong link between the committee and a attendant can have interesting results. For example, one standpost attendant wasn't able to convince some lorry drivers to stop washing their vehicles at the standpost and, not having success, got the Water Committee to request the local engineer to close down the standpost temporarily. The drivers changed their behaviour.

members of disadvantaged groups/self-employment: In two locations women masons are being trained and deployed for latrine construction. These are very poor women who had, previously been unskilled construction labourers, mainly carrying loads. Through this, it is hoped they will be able to double their income, being the first women to enter this type of work in Kerala. We have learned that it is very important to ensure these women work and/or form collective working groups as soon as possible after training is finished. This is because, after receiving training as masons, the local masons refuse to hire them for any work, even carrying loads. Another income-generating activity is the production of concrete blocks which lowers the cost of latrines and can be made as a home industry. Another effort which failed was the initiation of about 250 vegetable gardens with support of agriculture outreach workers and subsidized seeds from the state agriculture department. This was not successful as the seeds were defective and didn't germinate.

project professionals: There are 4 professional female staff out of a total of ten. Of these, 3 are charged with health education and training. A few points might be noted with respect to these senior staff. First, interestingly, the men on the staff seemed to have less faith--attach less importance to health education than the women. Some of the male professionals have said that people already know all these topics, or that people already practice all these things. Secondly, women professionals respond more quickly to issues which affect women including, for example, the need for improved design of taps and standposts, privacy

afforded by latrines and so on. Lastly, none of the field staff would have been women if the senior women staff were not already in place. The hiring of women field staff required a good deal of discussion in some of the units.

field staff: Ten of the 17 field staff (called 'field organizers') are women. The field organizers are responsible for working with the panchayat (a village with population about 20,000) in a wide range of activities. A major benefit of having women field organizers is that their interaction with groups of women is much easier, more open and free. Their commitment to improving water and sanitation tends to be more natural. Interestingly, there is also a tendency for women field organizers to go beyond water and sanitation issues, particularly with the poorest populations. This can present challenges to the project as our mandate does not extend to income generation, vegetable gardens and so on--and our current programme is already very full. However, the needs are real and obvious. We have also learned that it is important for us in Kerala to have well-educated women field organizers. Each is a young graduate of university or has a master's of social work; each has had field experience already. Well-educated women have higher legitimacy and can hold their own with local government officials.

women members or staff of other groups: Training is given to women leaders of children's centres (ICDS, anganwadis..), leaders of women's clubs, workers in health clinics, primary school teachers. The purpose is to work together with these individuals and their networks in all the health and sanitation activities--and to stimulate them to take the lead in the future. Some of these women are also on the Ward Water Committees. In this connection, we try to help each children's centre and many schools to have toilets and water taps. There are also a few (about 40) school health clubs led by teachers. In some areas there are special meetings with all the members of the local women's club to motivate them. In other areas, women health supervisors and nurses who are in training, do their fieldwork in our project areas. This includes home-visiting, conducting meetings on health and hygiene, assisting the community in chlorination of wells, follow-up on maintenance and use of latrines and so on.

## CONSTRAINTS

There are many challenges in trying to involve women as partners in this participatory programme. Some of these challenges are logistical; some are attitudinal. Special care must be taken to find really active women in the Water Committees--not just 'yes-women' appointed for the sake of fulfilling the criteria of having women on the committee. Sometimes women face gossip when trying to take part in local activities. When a woman attends a meeting, particularly one with managerial or executive work (as opposed to open, purely educational meetings), neighbors sometimes say, "She has no other work, that's why she can go." Or neighbors may start rumours which upset the husbands and mother-in-laws. Local norms can be very strong and persuasive. Even the project staff, both professionals and field workers, are subject to this. For example, their relatives tend to complain when they return from field work after dark in an automobile with

other male project workers. Field workers can face special problems in trying to attend meetings when women are free while still returning home before it is too late. Lastly, the attitudes of some men, are not yet supportive of women's involvement. Unsupportive attitudes include disregarding the women somewhat, wanting to show the women the 'right way' to do things or being overly protective.

## THE FUTURE

We have several visions of what we would like to achieve for the future. These include:

Establishing clear, sustainable links between the women in the community and technical staff of the Water Authority for activities such as reporting leaks, care and maintenance of the standposts, site selection of public taps.

Launching and then spinning off employment and income activities to other organizations or to the individuals themselves. This includes the establishment of the mason's cooperative (which can get government contracts as a cooperative), the block making, other production. While the first (mason's) has been planned and initiated, the others are still being developed. We have asked the Netherlands Embassy WID specialist if some assistance can be provided. We will also be bringing in a specialized woman, perhaps on a consulting basis, to help us formulate and develop these initiatives, including marketing surveys.

Possibly holding a state-level conference next year to draw attention to the role of women in water and sanitation, in water committees and as standpost attendants.

## APPENDICES

Attached are materials prepared by senior project staff focussing on various aspects of women in water and sanitation. These are papers by Ms. Thressiama Mathew on local women's participation, by Mr. C.O. Kurian on standpost attendants and by Ms. Elizabeth Zachariah on women's involvement in the programme overall. These papers also demonstrate the strong and thoughtful commitment of the project leaders to women in the programme.

*mutual system  
despite the  
difficulties.*

INTRODUCTION

Some questions one might ask in this context are why involve women, why particularly women and not men, or, what is so special or urgent about involving women. These questions are pertinent especially in the circumstances under which they are posed. After years of emphasis on this issue, there still exist a sea of doubt in many quarters, simply because some of these simple questions remained unanswered or ill-answered.

This attempt here is to focus on women issues particularly related to water and sanitation, and to begin the attempt, let us concentrate first on why women are so important here.

The world over, it is an accepted situation that women are the fetchers of almost all water for domestic purposes. They are the main dispensers and deciders of use of that water, and their role here qualitatively, is an important aspect. This latter factor is a greatly ill-understood one. The cultural and social implicators that have cast their mantle of domestic responsibility on womanhood enjoined too the task of water and its related activities.

Water forms the fulcrum of all human and domestic activities. It's quality, quantity and uses play decisive roles in life. In fact, the very quality of life is dependant on this.

All these aspects are understood to various extents, by different people. The problems of just having water available has been existent from the start of land life itself. History shows that all early human habitations had perforce been near fresh water sources (rivers and lakes). All our old towns and cities grew on river banks. Such was the important role that water played in civilization.

In the course of human evolution when functions and jobs had to be divided or shared, the women for biological, physical and emotional causes assumed responsibilities at the home front, while men assumed were those away from home. Such a symbolic relationship and role division (if it may be called that) was beneficial, and even necessary for useful coexistence. This basic role-sharing continued over the ages despite many other changes that occurred socially and environmentally. The essentiality of such situations over the ages confined too, certain activities particularly to women, one such being water fetching and utilization, the care and up keep of homes. These are some of the cultural reasons how women came to be responsible for fetching water especially for domestic consumption and maintenance of houses.

It is only natural that when some activities are being planned

or some decisions are being taken, the beneficiaries or those who would be affected be also considered. In the case of water and sanitation as women are the ones most involved, and who are the most affected by changes, it is only fair that they are consulted and involved.

Men have however been the general spokesman of a community or a household and investigators for various reasons therefore gets information from the men. For obvious reasons their perception of the problems or needs with regard to water and sanitation would not be realistic. A number of factors makes it difficult to get opinions of women, not least among which are cultural and traditional ones. It would be lengthy to go into detail of these aspects, but suffice it to say that all these gamut of problems have to be addressed when considering the involvement of women.

In the SEU projects the general situation with regard to water and sanitation, cultural and traditional realities, the need of the community etc were first studied and understood. This general knowledge was helpful for appropriate activities to be planned. Some initial studies, some concentrating on the information provided by women themselves on their problems and perceived needs, knowledge, attitudes, practices with relation to water and sanitation was done. This sample study provided useful basis to plan for activities generally, including finding out where and how women could be best involved.

#### ACTIVITIES WHICH INVOLVED WOMEN IN THE SOCIO-ECONOMIC UNIT

##### Site selection and Preliminary Survey

The main areas of activities that SEU had to work into when it started was site selection of public standposts (whereby a number of criteria had been outlined) through organization of Ward Water Committees, and identifying suitable women for standpost care. Along with this, areas of health problems, interventions required and other general observations were collected especially involving women. Keeping in mind the socio-cultural situations, women personnel were used to undertake much of these activities. They had the advantage of having the freedom to talk to women, having access into the houses lending better observational possibilities.

Analysis of these information and discussions of the problems with personnel of other concerned departments was a step that gave scope to address women as the main targets of SEU plans of activities. Women being the main actresses in the drama of water and sanitation have to be main persons to be addressed. For their sustained interests, and for changes in behavioural practices, it required careful planning which had to consider such factors as time available for women to attend education programmes, kinds of programmes most accepted and which have

the best impacts, ability to create interest to want to change long time habits and beliefs etc.

Having involved women in the selection of water points, they felt a sense of being "included" and consulted, thereby creating feelings of responsibility etc. In having women on standpost committees, they being most affected in matters of the standpost's function or disfunction, they would be more prompt and eager to report cases of leakages and damages ( a very real requirement once O&M starts up). Being regular users of these taps, they are also best avenues for observation with regard to quality of water and hours of functioning of the standpost etc. The men are also addressed but mainly with a view to inform and educate them, rather than to expect much "action" from them.

#### Sanitation:

The SEU sanitation (and water) programmes are integrated with health education. This includes aspects on how to maximally and usefully exploit the assets provided. In the sanitation programme the emphasis has been on instructing how to keep the latrines clean, how children should be trained to using them, and some basic technological information. Again for quite obvious reasons these issues are best, and usefully, addressed to women, but as much as is possible, men are sought to be informed of all these also. The programmes involve activities that women can learn from participation, observation and adaption. Constant follow-ups that involve local lady ward members and nursery school teachers provide a multiple of benefits. This monitoring and even follow-up extension work done by women provides women beneficiaries a platform to ask, discuss and even confide to women their doubts etc. A strong rapport and network forms after a passage of time, besides providing a network of mutual support and problem solving techniques through sharing of experiences. Much of the continuity of behavioural changes can be sustained by such an approach of involving the main participants, namely women.

#### Health Education Programme

The health education covering some of the most personal aspects of behaviour, the exploitation of the most needed commodity again include women as instructors, confidants extension workers. For obvious reasons again the involvement of women at, and of, various levels have many benefits.

#### Operation and Maintenance

It has been mentioned earlier that women standpost attendants would report leakages and breakdowns. They having been involved in selecting the sites and being affected most by breakdowns, combines to provide advantages to improving

service levels. The Women Ward Committee members, at times themselves users, lend support at the ward and panchayat levels. Given the right support and encouragement to help them help themselves, a qualitative aspect automatically comes into play: a slow but a sure and much needed achievement.

Self Employment Possibilities:

In introducing new and innovation technologies for affordability, acceptability and usability, women has been sought to be involved wherever possible. For example, concrete blocks which are easy to make, not only lower costs of latrines but also creates means for self employment for women, through an activity that can be done within the houses even. For more organized production some cooperative is sought to be founded to help, especially in the marketing of the product and to obtain raw material. With the passage of time these women's cooperatives could also extend into other fields and avenues for self employments. The SEU plans that women could be involved in minor repairs of taps and platforms (i.e. besides cleaning the platform and surroundings). They would be (in fact should be) rather interested in doing this. Earning money from income generating schemes means money in the hands of women that goes for family needs and especially for children - better clothes and food.

In all these little aspects in the various components of SEU activities it can be seen how women, not only just beneficiaries but also workers, have been involved, and are planned to be involved. Women have a major role in socializing children and what they pass on to their children in these activities, by way of instruction or activity, are some of the useful things the future users would gain from.

The ways to achieve these above mentioned things are, as seen, many, but painstaking consideration of all parameters have to be made. Careful planning as to what kind of women to involve, how to involve them, how much to involve women, when etc., are seemingly so simple but in reality not so. Time is a very important investment and target of such involvement in terms of time is rarely possible and in fact unwise. Persuasions, discussions, demonstration, repetitions, variations are all different approaches to involve, change and improve women and their present lot. Nevertheless the issues encompassed in involving women are many, and the need very real and important, especially if realistic targets of water and sanitation programmes are to be achieved.

18-4-1991  
IRC, The Hague

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monitoring of 1) degree of WI and 2) direct effect ?

APPENDIX 1

*Involvement of Women in  
Water and Sanitation S.E.U. Experience*

THRESIAMMA MATHEW\*

■ *Women in the Programme*

As stated in the principle objective of this project a central feature is the strengthening of community participation in relation to water, health, and sanitation. Within this, a particular emphasis has been given to women. All through the ages women have been traditional drawers and users of water. Being universal water carriers they spend between one

and four hours a day in water collection and transportation. While women's role in management, decision-making and maintenance work of traditional water supply sources and in sanitation activities is nothing new, the modern water sector hesitates to involve women as active participants in all levels of water supply and sanitation undertakings. Quite often the responsible authorities in the water sector tend to undermine women's ability to carry out responsibilities in water and sanitation projects.

In the SEU programme the major challenge will be to build successful initiatives for forming a more coherent approach to support and empower women.

#### ■ *Ward Water Committees (WWC)*

One of the main avenues for rejuvenating such activity is the Ward Water Committee. Before the establishment of SEU, the procedure for site selection was after the receipt of letter from the Kerala Water Authority, the Panchayat will suggest the location of sites for fixing the public taps. After the SEU formation, the Ward Water Committees have been formed in selected Panchayats. Each Ward Water Committee compose of the selected Panchayat member, 2 women representatives, an active social worker or a teacher, two representatives of youth organizations and a representative of ICDS/Health departments. This committee is involved in the site selection of public taps and low-cost latrines, distance criteria discussion, survey of existing water points, identifying and resolving problems of water, organising and mobilising communities, providing training and information regarding use and maintenance of public taps and latrines and establishing effective links between users and relevant institutions and departments such as Panchayats, Kerala Water Authority, Rural Development, Social Welfare, Health etc.

In some other selected Panchayats attempts are being made to study the effectiveness of committees run only with women members. Even though the concept of the role of women in drinking water is accepted, in practice it was difficult in the beginning of the project. A concrete example of the impact of the presence of women in the committee was seen in a joint meeting of the Kerala Water Authority, Socio-

economic Unit, Panchayat and Ward Water Committees to finalize the location of public standposts in Puthenchira Panchayat under the Mala Rural Water supply scheme. During the discussion some of the men representatives refused to listen to the needs of local women and proposed alternate standposts to their preferences. In the course of action the women members of the WWC, with the help of other women assembled in the meeting came forward very forcefully in the meeting and placed their demand convincingly before Executive Engineer and other colleagues. The men representatives accepted this as a defeat when proved that women can become active participants in deciding the location of standposts.

An Health Education Sub-committee has been formed with the composition of 3 people (two female and one man) from the WWC. This group has been greatly accepted by the local communities, especially in the coastal and backward Panchayats. In the health programme, greater emphasis has been given to the right selection of approaches or combination of approaches, appropriate to sanitation and the ability on the part of the local workers to select and use them effectively. Adequate provision has been made to study and understand how beliefs and attitudes influence behaviour (especially hygienic practices) and thus affect disease transmission. Action-oriented and pragmatic health education programmes with the help of local youths both women and men have been used to promote the health supportive behaviour and production of materials through participatory approaches.

Even though the activities are concentrated in a few selected Panchayats, very practical results are being obtained through the health subcommittees. I am providing below an experience of the Central Region (location Trichur) in connection with the work of the health sub-committee. Women folk in the rural areas of Kerala are more comfortable with open well and pond water than piped water. This is mainly due to their ignorance about the action of chlorine in water (they hate the taste of chlorine in piped water). The health sub-committee of Mala Panchayats was able to persuade the potential beneficiaries of atleast three public standposts to use water from the tap for drinking and household use. They also made sure that all the wells in this ward are chlorinated. They believe that slowly they can bring about change in people's habit.

Similarly the members in the WWC and health sub-committee have been actively involved in every stages of latrine construction. In this endeavour both the men and women are taking responsibilities in the implementation of the latrine programme. Menfolk in one of the pilot project areas (coastal belt) remarked "We are building latrines exclusively for our women".

It is in sanitation that the women representatives of the WWC assume active decision-making roles. In each ward, they take the lead to conduct socio-economic survey, collect health statistics, etc, and participate in the preparation of the final list of beneficiaries for the sanitation units. Since women are mostly concerned about privacy and convenience, these women committee members are most successful in motivating the low income households to make their contribution and own a sanitary latrine. They are also active agents to ensure inter-departmental collaboration. They are now recognised in the community and their suggestions are listened to by the Panchayat, SEU, Kerala Water Authority and other departments. Regular monitoring of the sanitation units is also carried out by this committee, and helps to ensure the adoption of hygienic habits by each house.

Sanitation is not just confined to the construction of sanitation units. It calls for a sanitation package, if we want to reach our objective. The sanitation package includes hygiene education, construction of latrines, soakage pits or drains, use of waste water to kitchen garden and compost pits. The health sub-committee sees that all public wells and standposts have proper drainage and soakage pit. Their enthusiasm is kept up through recognition of their activities in the Panchayat meeting.

The care and cleanliness of each public standpost is the duty of a care taker or standpost attendant. She is a volunteer elected from the users. The health sub-committee is responsible of appointing and training the care taker.

In our approach women are not just the target group, but they are the planners, organisers and implementators.

*Women's Clubs:* In areas where women's organisations are not existing, SEU is helping to form clubs or Mahila Samajam, besides measures to strengthen and activate existing ones. The intention behind it is to

awaken the women in the project areas. One such club, recently formed, conducted meetings and drew a plan of active involvement in the water and sanitation programme of SEU. Such forums help not only for hygiene education, but provide opportunity for discussing sundry family problems, and health problems relating to women which are of general interest. Women's clubs in 3 Panchayats have embarked on kitchen-garden programme not only as an income-generating activity, but as a solution to profitable use of wastewater. This has helped to divert their time in productive endeavours while at the same time adhering to care programme.

In SEU south, the coastal areas are extremely backward and their hygienic conditions are bad. No formal committee could persuade the women to change their behaviour. Feeling the pulse of these people, the health educator, called upon the women to form "Neighbourhood committees."

#### ■ *Women Masons*

Another innovation of SEU is the organisation and training of women masons in the construction of latrine programmes. For the present training programme, 15 masons have been identified and they are undergoing training for the past three months. In the second phase of the sanitation programme these trained women will be given opportunity for the construction work.

At the inception of the programme, these women were reluctant and hesitant to learn the work. In Kerala, masons are predominantly male members. A great deal of motivation was needed to coax them for the training programme. There were also objections from the male masons. During the process, the public laughed at them and teased them. In the training programme, they were given regular coaching in basic hygiene education for communicating with the household members. The topics are mainly use and maintenance of toilets, hygienic habits, hazards of open air defecation etc. As a way to boost up the morale of the women masons the Women Development Officers, District Welfare Officer and KWA Women Engineers etc visited them and encouraged them for continuing the work. Our long term intention is to develop this

group as a self employed women's Co-operative with funding from elsewhere

■ *Conclusion*

At this stage, I am not in a position to say further on this topic. After a period of two years SEU may be able to offer very valuable contribution on the impact of the involvement of women in the water supply and sanitation programme.

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ACTIVITIES WHICH INVOLVE WOMEN IN THE SOCIO-ECONOMIC UNITS

Elizabeth Zachariah  
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In introducing new and innovation technologies for affordability, acceptability and usability, women has been sought to be involved wherever possible. For example, concrete blocks which are easy to make, not only lower costs of latrines but also creates means for self employment for women, through an activity that can be done within the houses even. For more organized production some cooperative is sought to be founded to help, especially in the marketing of the product and to obtain raw material. With the passage of time these women's cooperatives could also extend into other fields and avenues for self employments. The SEU plans that women could be involved in minor repairs of taps and platforms (i.e besides cleaning the platform and surroundings). They

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would be (in fact should be) rather interested in doing this. Earning money from income generating schemes means money in the hands of women that goes for family needs and especially for children - better clothes and food.

In all these little aspects in the various components of SEU activities it can be seen how women, not only just beneficiaries but also workers, have been involved, and are planned to be involved. Women have a major role in socializing children and what they pass on to their children in these activities, by way of instruction or activity, are some of the useful things the future users would gain from.

The ways to achieve these above mentioned things are, as seen, many, but painstaking consideration of all parameters have to be made. Careful planning as to what kind of women to involve, how to involve them, how much to involve women, when etc., are seemingly so simple but in reality not so. Time is a very important investment and target of such involvement in terms of time is rarely possible and in fact unwise. Persuasions, discussions, demonstration, repetitions, variations are all different approaches to involve, change and improve women and their present lot. Nevertheless the issues encompassed in involving women are many, and the need very real and important, especially if realistic targets of water and sanitation programmes are to be achieved.

STAND POST ATTENDERS : EXPERIENCE FROM THRIKKUNNAPUZHA PILOT STUDYS. E. L. (S. E. L.) KOLLAM.

MR. C.O.KURIAN, HEAD, S.E.U. SOUTH

1. Introduction.

The benefit of rural water supply for people in the project area is planned to <sup>be</sup> derived mainly from its Public Taps. Benefeciaries have a big say in locating these taps at convenient points through their participatory involvements. Location of Stand Posts is only one of the earlier aspects of peoples involvement. Afterwards, both in water related health and maintenance related activities of taps, People of the project area have long term and continuous Participation. In Thrikkunnapuzha Panchayath this is systematically being done within an experimental Pilot Study.

2. Stand Post Attenders (SPAs).

SPAs are tap benefeciaries living nearby 'their' taps who are willing to take up responsibilities for the upkeep of and cleanliness around those taps. One SPA for one tap, they are nominated by WWC. Since the collection of water in the rural areas is the work load of women, siting of tap in the neighbourhood of their houses has greatly relieved them from one of their heaviest burdens. Hence, women were happily volunteering to be nominated.

During the process of Site Selection/Coverage Study, Field Organisers and Draughtsmen involved in this were also simultaneously forming a STAND POST COMMITTEE (SPC) for each potential tap consisting of three persons - probably women living nearby the taps. It is from within these three that SPA is nominated, in many instances, at a later date. 99% of SPAs in Thrikkunnapuzha are women. Of the 157 SPAs in the five Pilot Study wards, there are only half a dozen men (PARIPALAKANS), rest being all women - (PARIPALIKAS). In the said half a dozen cases women were not coming forward for personal reasons.

3. General Responsibilities.

1. Ensure that water is not wasted and the surrounding of tap is clean.
2. Ensure that grass/shrubs are not grown around taps.
3. ensure tidy and clean upkeep of drainage facility.
4. See that the beneficiaries observe the following:
  - Avoid Vandalism.
  - Not washing cloths near taps.
  - Not misuse valuable drinking water for farming/washing vehicles/ Animals.
5. Fault reporting to the authorities concerned.

4. Study-Specific Responsibilities.

In addition to the general, the Pilot Study requires additional specific responsibility from SPAs, which are the following.

Giving leadership to cleaning activity of 'their' tap.

It is a very novel programme is that the very idea itself came from SPAs/WWCs. When the nature and method of Health Education content for the Pilot Study was discussed in one of the meetings, they came up with this interesting suggestion. The activity involves assembling of all the WWC members of all wards together in one ward to divide themselves into small groups, and visit each tap for a cleaning-cum-educational session. The session is conducted in an informal atmosphere of open space near the tap where all the beneficiaries of a tap is invited to come. The educational session is followed immediately by cleaning activity in which all participate. SPA has the responsibility to organise this grouping and also to continue the activity by taking the lead on a continuous basis.

2. Collect useful field data on conditions of tap/Hygiene related behaviour of people.

SPAs are to collect useful information on condition of tap and peoples behaviour related to water, as an input for the Pilot study. Both participant-observation and formats are utilised for this purpose. The information thus collected are reported back in meetings of SPAs & WWCs convened for the purpose.

*not included.*

See annexure I. for an example of a compiled data sheet prepared on the basis of one such process (conditions of tap). Presently SPAs are participatory in a scheduled observation study on peoples behaviour around taps. The data being collected will be processed and presented in a forthcoming meeting soon.

See Annexure II for the format. - *idem*

3. Work as an important link person in the chain of reporting - repairing procedures of tap.

Format is prepared to facilitate the reporting system to be used by SPAs along with Trained Members (TMs) and Assistant Engineer (AE, KWA). See -annexure III. - *idem*

5. Interaction Points.

There are various meeting points to help continuous interaction and feed back of information. One of the largest is the all-ward (5 wards) SPA meet. This is done for dialogue on matters affecting all wards related to SPAs involvement. For instance, two such meetings were already conducted. One was to report back information collected by them and the other a basic Training -session on Street Tap. the later was conducted by Assistant Engineer, KWA.

Another point of interaction is the ongoing ward-wise meetings of SPAs organised by Field Organiser which is to take stock of and clarify the activities SPAs are carrying out.

Meeting sessions during the cleaning activities are a third point of interaction.

WWCs and SPAs meet at an informal level continuously.

6. An Interesting Feedback.

The most significant feed back related to SPAs new responsibilities is perhaps the slow but progressive acceptance of SPAs by tap beneficiaries. But it must be noted that this process is a slow one and many SPAs has to face: "who are you to tell us such things, this is not your private property". This is expected in the beginning but the growing trend is encouraging.

7. Immediate Future.

Pilot study is going to enter a phase when the construction activity of drainage/soak pits would be prominent for some time. SPAs are already informed to discuss with 'their' tap beneficiaries about the Percentage of contribution they are prepared to pay for the purpose. There is report from the field (informal) that it is ranging from 10 - 20 %. The collection procedures of beneficiary contribution by SPAs will be discussed in the next meeting.

8. Emerging Impact.

This impact is two-fold. On the one hand, the organisation of tap beneficiaries under SPAs around each tap is something so different and positive from what people have seen, and people are vocal about it. On the other, there is significant improvement in the condition of tap surroundings. But it will become conspicuous only when drainage issue also is tackled.

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Involvement of women in the capacity of SPAs is one of our most potential activities as it has started functioning in thrikkunnapuzha.

We have already started ground work in V-A project (6 Panchayaths) too to organise SPAs for water related activities.

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