WHO PLANS FOR WATER AND SANITATION IN VILLAGES?
Who plans for water and sanitation in villages?

WORKING PAPER

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Introduction

The planning structure in India regarding water and sanitation in villages, like other developmental initiatives, has several levels and undergoes several hierarchies. The Government of India, at the central level, provides a broad framework involving policies and guidelines, which are then adapted or modified by the states. Water and sanitation are state subjects and thus responsibilities of the state, as per Schedule 7 of the Indian Constitution. Figure 1 summarizes the administrative structure and levels of governance within India.

Watershed, a project by a consortium of Dutch organizations, focuses on building capacities of Civil Society Organizations (CSOs) to advocate for water and sanitation services in their communities. In the current paper, the structure of planning within villages is assessed under the Watershed Project’s framework. Also, the scope for communities to raise their issues and plan accordingly is explored. It expands on the 14th Finance Commission (FC), which provides the opportunity for communities to plan through Gram (village) Panchayats (GP), and at the same time provides the financial resources to fund those plans. This paper discusses how the needs on water and sanitation of villages are addressed and planned for, detailing out the structure for participatory planning in the two states of the project’s engagement (Bihar and Odisha), referring to insights obtained during fieldwork to map the current situation.

Methodology

In order to identify the planning process within villages and lower regional levels (blocks and districts) within the mentioned states, a review of national guidelines, state guidelines, as well as policies and regulations, was carried out. This review aimed to understand the process of the assignment of duties and responsibilities at sub-national levels. Following this review, field visits and observations were carried out.

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out in the states of Bihar and Odisha from March till June of 2018. Finally, findings and results were documented based on interactions with Ward Members, Gram Panchayat members and Block and District officials.

Background on the planning structure in India

73rd Constitutional Amendment Act

Under the Indian federal system, Panchayats are institutions of self-government formed at the village level, intermediate (usually block) level, and at the district level. Since the 73rd Constitutional Amendment Act (CAA) 1992 of the Constitution of India, Gram Panchayats have been endowed with significant authority and responsibility with regard to grassroots planning and implementation. The 73rd CAA recommends (Section 243 G) devolution of power and responsibilities from the state to the Gram Panchayats (GP) in order to enable the latter to plan (through Gram Sabhas or village level meetings) and implement schemes for economic development and social justice.

Figure 2: Relationship between administrative and territorial unit with reference to rural India
The list of schemes, as provided under the Eleventh Schedule of the 73rd CAA, includes water management and watershed development, drinking water, and sanitation. With devolution of responsibilities, the 73rd CAA also recommends devolution of finances from the state to the GPs.2

In terms of fair and equal representation of different communities at the GP level, the 73rd CAA recommends that all representative seats within the GPs should be filled by direct elections from its territorial constituencies. A GP can have members from 1 or more villages, as illustrated in Figure 2. Depending on the size of its population, a village may be divided in to 1 habitation/hamlet/ward or more.

The seats are to be reserved for marginalized communities, such as the Scheduled Caste and Scheduled Tribe, in proportion to the population of these groups within the GP. Furthermore, at least one-third of the total seats should be filled by women to ensure gender equity.

**Fourteenth Finance Commission**

Every five years, a commission is appointed by the President of India under Article 280 (3) of the Indian Constitution in order to determine the financial relationship, and to facilitate the transfer of financial resources, between the national and sub-national (state) governments. In February 2015, the Government submitted the 14th Finance Commission (FC) report to the Parliament, which has been termed as a significant step taken towards the ‘real devolution of administrative and financial powers’ to local bodies.3 The 14th FC increased threefold (compared to the 13th FC) the share of allocated funds to GPs for the period 2015-2020 for expenditure on the provision of basic services such as sanitation, drinking water, maintenance of community assets, etc. Through these transfers to local bodies, a strong planning and efficient delivery of basic services is expected to be assured.

Specifically, the 14th FC grant comprises of funds for rural local bodies (i.e. the GPs), as well as funds to urban local bodies (i.e. the municipal bodies). The grants to either local bodies, in turn, comprise of two parts – the basic grant and the performance grant, in the proportion of 90:10 for GPs and 80:20 for municipal bodies, respectively. The purpose of the basic grant is to provide ‘unconditional support’4 to local bodies in delivering basic services. The guidelines highlight that the 14th FC grant should not be used for expenditure on anything other than provision of basic services i.e. water supply, sanitation including septic management, sewage and solid waste management, storm water drainage, maintenance of community assets, maintenance of roads, footpaths, street-lighting, burial and cremation grounds, and any other service as identified in relevant legislation.

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Gram Panchayat Development Plan

The 14th FC enabled responsive local governance through the release of grants, which require the preparation of proper plans by the GPs on basic services, before incurring any expenditure. In most states, prior to the 14th FC, GPs were already engaged in planning, identification of beneficiaries, and monitoring of separate state and centrally sponsored schemes. Additionally, they were also involved in different programme committees related to health, sanitation, water supply, watershed management, education, nutrition, social forestry, bio-diversity and public distribution. However, since the implementation of the 14th FC recommendations, the preparation of a combined and integrated plan, known as the Gram Panchayat Development Plan (GPDP), has been made necessary. This plan converges all the resources available to the GP and integrates its different functions. The GPDP aims to ‘…..ensure efficiency in budgeting, increase accountability in performance and better delivery of development’.5

The GPDP is a five-year vision document broken into annual plans, wherein the GP identifies and prioritises its requirements. The plan is made in accordance to the ‘resource envelope’ i.e. the funds available to the GP under different schemes, as communicated by the state government.6 Following Constitutional mandate, the plan has to be made through a participatory process, involving the community (particularly the Gram Sabha7) in the formulation of priorities and projects, while ensuring the mandates of social justice and economic development mentioned in Article 243G8,9

Odisha GPDP Guidelines

In addition to the 73rd CAA, the Odisha Gram Panchayat Act 1964 (Section 5) confers on GPs the role of getting approval (from residents of the village, through Gram Sabha) for plans, programmes and projects aiming for social and economic development prior to their implementation. Additionally, it empowers the GPs with obligatory

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6 In addition to funds released through the 14th FC, GPs are also entitled to funds released under state finance commission, specific state schemes, as well as centrally sponsored schemes, such as the Mahatma Ghandi National Rural Employment (MGNREGA). With such enhanced resources available to the GPs, the preparation of integrated development plans are recommended. The 14th FC guidelines issued in October 2015 mandates that before incurring any expenditure, local bodies (such as GPs) need to prepare local plans, ensuring basic services for everyone, including the most marginalized sections of society.

7 A Gram Panchayat is constituted by elected representatives of a large village or a cluster of villages. The Gram Sabha, on the other hand, is the assembly of the electorate of a village, constituting of all persons registered in the electoral rolls in the village. It is the forum to discuss issues of local governance, development and prepare need based plans for the village. It is the only permanent unit in Panchayati Raj system and not constituted for a particular period. A village maybe further divided in to wards. All adult persons whose names are included in the electoral rolls relating to a ward in a GP constitute a Ward Sabha. Like the Gram Sabha, the Ward Sabha is responsible for development of proposals, determine priority of schemes and development programmes for the ward. The Ward Sabha is the smallest administrative unit in the Panchayati Raj system.

8 243G of the Indian constitution refers to Power, authorities and responsibilities of Panchayats – including, preparation of economic development and social justice plans, and implementation of schemes for economic development and social justice.

and discretionary functions such as providing basic services to citizens, creation and maintenance of village infrastructure, alleviation of poverty, management of common property resources and other measures necessary for human development.¹⁰

The Odisha state government clearly recognizes the opportunity for better planning with the increased share of funds since the 14th FC, the 4th State Finance Commission (SFC) and other centrally and state sponsored schemes. It also recognises GPDPs as the platform for GPs to identify the needs, prioritise them, map the possible financial resources, prepare projects and allocate resources based on intensive participatory planning at local level i.e. the Gram Sabha.

According to the guidelines¹¹ issued by the State of Odisha in December 2015, the steps involved in GPDP preparation are the following:

i. **Identification of ‘resource envelope’ of the GP**, which refers to the financial and human resources that GP needs in order to carry out its development initiatives. The purpose of this step is to prioritise investments depending on the available resources and the community needs. In the process of identification, the GP needs to categorize the financial resources available in terms of tied, semi-tied, or untied funds (ranging from no discretion to full discretion on the use of funds).

In terms of human resources, the GP is responsible for the function of 11 line departments: water resources, rural development, health & family welfare, women & child development, scheduled caste and scheduled tribe development, agriculture, cooperation, school & mass education, food & civil supply, animal resources and fishery development, and Panchayati Raj. The core functionaries available with the GP include a Junior Engineer (JE) to look after the implementation of all development works, a Self-Employed Mechanic (SEM) to look after minor repairs in drinking water supply, and a Panchayat Executive Officer (PEO) to supervise the coordination of GP administration, among other duties.

ii. **Generation of participatory planning environment**

The guidelines recommend the provision of a local name (Ama Gaon, Ama Yojana/my village, my scheme) to the decentralised planning, as well as awareness generation at the state and local level through the use of mass media, local artists, IEC material, etc. This step includes preparatory meetings at the block and panchayat level in order to explain the process, encouraging participation.

iii. **Situational analysis and participatory planning**

This step includes evaluation and assessment of the current situation in terms of infrastructure (roads, buildings, etc.), civic amenities (solid and liquid waste

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management, drinking water, electricity, etc.), human development (anganwadis, schools, etc.), economic development and livelihood (agriculture, local manufacturing, etc.), social development and natural resources. The situation assessment is expected to reveal the gaps and deficiencies in the previously-mentioned sectors. These gaps and deficiencies are to be used to identify priorities for the long term (period of 5 years) and short term (for the current year). The proposals following the prioritisation exercise then need to be approved by the Palli (or Ward) Sabha and the Gram Sabha.

iv. Project planning and finalization of Development plan by GP.

Based on the outcomes of the previous three stages, the GP must prepare the annual plan, taking in to consideration the priority items for the coming year. The annual plan must include the name of the project with the estimated cost, the source of fund and the executing agency. The GP must identify here the line department/s for the project. The projects of the annual plan of a given year must be prepared by the end of December of the previous year. The guidelines also specify details for monitoring the progress of the projects, including social audits. Further, it states that the GP will set the benchmarks for the delivery of public services. In the long run, the GP should attempt to reach the desired level of public services to match the local aspirations.

v. Technical & administrative approval

Once the plan has been prepared, it needs to be authorised by the appropriate technical authority, following which the GP will provide administrative approval by sanctioning fund for the project.

vi. Post plan arrangements

Under this step the guidelines mention formation of several committees at the state level to review the planning process, progress of the project, the bottlenecks therein, and the various capacities that need to be built for the process. It also mentions formation of a block level committee and resource group, comprising of the Assistant and Junior Engineers, nominated sarpanches and more officials and nominated members of civil society, that will, in addition, mentor in preparation of village development plans. It further states that for the purpose of monitoring, all data needs to be entered in the specified web portal.

vii. System support & capacity building for participatory planning

This step refers to the formation of various units at the state, district and block level for training and capacity building.

Bihar GDPD Guidelines

Following the 73rd CAA 1992, the Bihar Panchayat Raj Act was passed in 1993. The 1993 Act was replaced by the Bihar Panchayat Raj Act, 2006. Under the new act, panchayats at all the three levels were entrusted with duties and functions in respect
of all the 29 matters listed in the Eleventh Schedule of the Constitution. In 2014, the 2006 Act was amended to create Ward Sabha in each electoral constituency of the GP to take the process of decision making to the lowest level.

The strategy adopted by the Government of Bihar for implementation of GPDP was laid down in a letter\(^\text{12}\) issued by the Government of Bihar. The letter detailed out the procedure for convening Gram Sabha and Ward Sabhas for Intensive Participatory Planning Exercise (IPPE) – II\(^\text{13}\). Through IPPPE-II, the letter prescribed, Mahatma Gandhi National Rural Employment Guaranty Act (MGNREGA)\(^\text{14}\) and National Rural Livelihood Mission (NRLM)\(^\text{15}\) were to be converged for preparation of the labour budget of the block. Additionally, in Bihar, IPPE-II would comprise of the GPDP process. The Bihar government identifies the use of the 14th FC basic grant for water supply, sanitation (including septage management), sewerage, storm water drainage, street lighting, roads and footpaths, parks, playgrounds, and burial and cremation grounds. The guidelines also state that in order to fulfil the development needs in the above mentioned sectors, GPs should prepare a long-term perspective plan corresponding to the period 2015-2020, as well as two annual plans for the periods 2015-2016 and 2016-2017.

The IPPE-II is to be conducted by the Block Planning Team (BPT) comprising of Community Resource Persons, Anganwadi Workers, Panchayat Technical Assistant, Panchayat Rozgar Sevak, Gramin Awas Sahayak, Agricultural Advisers, Community Coordinator and Mobilizers, Vikas Mitra, and two members from civil society organisations. The BPT should hold a three-day planning exercise in order to prepare an activity plan in conformity with the labour budget, the State Rural Development Plan, and GPDP. The BPT is expected to fill various forms and use Participatory Rural Appraisal (PRA) tools to capture data on vulnerable households, the availability of resources and facilities, and household personal and social information in order to understand the need for resources and list the plans appropriate for the needs.

The process over the three days is as follows:

i) Day 1: Publicity on the planning activities to all households, transect walk in the village, preparation of resource map and verification of the same through transect walk, preparation of a list of community resources and selection of community activities.

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\(^{13}\) IPPE-II was launched with an aim to cover backward blocks of the country comprehensively by incorporating all rural development programmes in a single participatory planning exercise. Thus, in addition to the information collected in IPPE i.e. MGNREGA, it would include, the National Rural Livelihood Mission (NRLM), the Deen Dayal Upadhyaya Grameen Kaushalya Yojana (DDU-GKY), National Social Assistance Programme (NSAP) and the Indira Awaas Yojana (IAY) to prepare the labour budget.

\(^{14}\) MGNREGA is a labour law and social security measure that enhances livelihood security in rural areas by providing 100 days of wage employment to do unskilled manual work

\(^{15}\) NRLM is a poverty alleviation programme aimed to generate self-employment and organisation among rural poor.
ii) Day 2: Household survey for collection of data relevant to MGNREGA and selection of GPDP activities to be taken up under FFC allocations.

iii) Day 3: Collection and compilation of MGNREGA applications and GPDP activities, creating a priority list for MGNREGA personal plans and GPDP activity plan, approval for the same in the Ward Sabha and getting approval for these plans in the Gram Sabha.

Finally, the guidelines add that in the Ward Sabha, all members have to participate as well as ensure participation of youth groups and female members of Self Help Groups. In addition, it prescribes that Gram Sabha should be organised at GP headquarters or in any other convenient public place. The seating arrangement in the Gram Sabha should be such that Mukhiya or the headman, the officials and panchayat members face the residents of the village. It adds that the Gram Sabha can add, remove, revise or change the primacy of any activity plan. And, the proposed plans can be passed only with the majority of support of the Gram Sabha.

The IPPE-II was to result in compilation of three plans through the participation of people – MGNREGA plans, conforming plans of MGNREGA and other departments, and GPDPs. According to the official letter the exercise was expected to commence on 10th January 2016, with the GPDPs ready by 10th March 2016.

**Insights from field visit and interactions with different stakeholders**

After the field visits to the two districts in March 2018, the GPDP process as it exists at the ground level was better understood. In Ganjam, the district of engagement in Odisha, it was observed that the GPDPs for the year 2018-19 had already been developed.

In Odisha, October 2nd (Mahatama Gandhi’s birth anniversary) is the designated day for preparation of the GPDPs. The procedure followed to prepare the GPDP is reported to comprise of: (1) identification of issues and the necessary activities to address the same at Ward Sabha, (2) collection and compilation of the activities at the Gram Sabha, and (3) collection and compilation at the Gram Panchayat.

Further, a notice is issued by the concerned officials 15 days prior to the meeting to declare the date of the meeting, in order to encourage maximum participation. The Panchayat Executive Officer (an employee of the Block/District office) supports the GP in the planning process. Once the plans are finalized, these are submitted to the Block Development Officer, Project Director (District Rural Development Agency) and the District Collector for approval. Following approval, the plan is sent back to the GP for allocation of financial and human resources to materialise the same. (Figure 3 illustrates the planning process and the approval process.)
In the context of water, following a letter issued by the state government in 2017\(^{16}\), 30% of the available funds (from 14th FC and 4th state FC) are reserved for expenditure on drinking water supply. The approval of the plans at the block level is subject to the adherence to this guideline. Thus, GPDPs are prepared in such a way that projects related to water supply, either regarding a new connection or Operations and Maintenance of existing water points, only constitute 30% of the 14th FC and 4th SFC funds. On the other hand, in the context of sanitation, since the introduction of the Swachh Bharat Mission, the incentive fund required for household toilet construction is directly transferred from the state to the beneficiary's bank account. Thus, individual household latrines (IHHLs) are not required to be included in GPDP.

In general, it was observed that there was a need for awareness creation amongst the local population, in order to better understand the type of development work that can be funded under 14th FC and 4th SFC funds through GPDP. There was also a need felt for clarity in the community in terms of the 'resource envelope' available for the planning process, since there are sources of funds other than the 14th FC and 4th SFC, such as Members of Parliament Local Area Development Scheme (MPLADS), the Member of Legislative Assembly Local Area Development Scheme (MLALADS) or, own revenue. According to the GPDP guidelines, all untied or semi tied, centrally or state sponsored schemes can be used for the planning process, which needs to be better understood by the local representatives as well as the community.

In Samastipur district of Bihar, the integrated planning process was found to have not been executed, despite the fact that a training on the same had been carried out in 2014-15. However, following a government order\(^{17}\), 80% of the 14th FC and 5th SFC funds were found to have been allocated for two specific schemes: (1) Har Ghar Nal ka Jal (household pipe water supply scheme) and (2) Ghar Tak Pakki Gali – Naliyan


\(^{17}\) As informed by state government officials interviewed in April 2018
(scheme on construction of pucca roads and drains in rural areas), both of which are part of the Chief Minister’s Saat Nischay (seven resolves) scheme. It is important to mention here that in both the project sites, in spite of the 73rd Constitutional Amendment Act and the 14th FC guidelines, that emphasize on decentralisation of funds, functions and functionaries (to the lowest level), state guidelines often dictated the terms in which the available funds could be utilised. As in Odisha, state guidelines dictated that expenditure on water could not exceed 30% of the available funds. Similarly in Bihar, 80% of the funds had to be used for two specific schemes. Such state guidelines go against the grain of participatory planning, the essence of which lies in communities planning as per their requirements.

The field visits also brought forth the need for more information on the GPDP process among the community members. In terms of ensuring inclusion, the visit highlighted the need for capacity building of women elected representatives for meaningful participation in ward proceedings. Women elected representative were either observed to not attend or have no say in the ward proceedings.

Further, in both Ganjam and Samastipur, there was a felt need to deepen the understanding of water and sanitation, in terms of the intrinsic connection with water resources. This is also what the Watershed Strategic Partnership aims to address – to look at water and sanitation in terms of sustainability, not just focus from moving from infrastructure to service delivery, but on the wider water environment within which such services operate. In both the study sites there is a need, therefore, to develop capacities to understand the wider context, particularly due to the presence of water bodies – Tampara lake (Ganjam) and Debkhal Chaur (Samastipur).

**Conclusion and Recommendations**

The study revealed several positive points in terms of the new system of devolution – greater delegation of responsibilities with fiscal decentralisation. It pointed to the fact that there exists strong intent, as well as a well-defined participatory planning process prescribed for the different levels of governance. It also brought to fore the existence of several regulatory guidelines that to a large extent, determine how water and sanitation at the village level should be planned and budgeted for. However, from the field insights it was not clear how capacity building support is provided (if any) at the Gram Panchayat level and lower administrative levels, in order to truly engage with the process. Further, it was not clear if in this process whether some, or if any, persistent needs regarding the supply of basic services within village were left unaddressed. For this reason, there was a felt need to analyse the level of awareness regarding GPDP among the different regional authorities (GPs, block and district), as well as the available funds to carry out the plans. In terms of awareness on the

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availability of funds, for instance, the field visits to Odisha, revealed that the GPDP exercise in Ganjam District was limited to the utilization of 14th FC or the 4th SFC funds, not including the planned schemes and funds under any other line department.

In terms of inclusion and community participation, the field visits raised the question if indeed GPDP was a participatory exercise, the lowest unit (ward sabha) onwards. The Constitution of India, as well as various state Panchayat Acts provide quotas or reservation for representation of women and other marginalised sections of the society at all decision making unit. However, it was observed during field work that their participation was often restricted by societal norms. Although, quotas and reservation are the first step to ensure representation of the marginalized in decision-making. There was, additionally, a significant need felt to invest in the creation of an enabling environment through capacity building of women or representatives from marginalized communities, who typically have not been involved in decision-making.

In conclusion, the following points need to be highlighted and enhanced in order for the devolution of responsibility to contribute positively.

1. Capacity building of the local governments for better planning: It is essential to work on the capacities of the Gram Panchayats in order to plan efficiently. While the manual for preparations of GPDPs, as well as the framework for these plans are provided by the centre (Ministry of Panchayati Raj) as well as the states, these need to be put in use by the GPs. Presently, only in few places the planning is conducted as per these prescribed processes, but these are mainly facilitated by NGOs. For these processes to be scaled up, the capacity building process of GPs to plan, implement and monitor need to be institutionalized, as there will be handholding and other support required by GPs, even post the trainings/workshops.

2. Capacity building for transparency and accountability: The capacity building of communities and Community Based Organizations (CBOs) not only strengthens the planning process, but also improves the level of transparency and accountability in terms of what has been planned and what is actually happening on ground for the community members.

3. Foster community participation: While devolution of planning and budgetary processes is well intended, reaping its fruits depends on how actively the community participates within the process. The community needs to exercise its role as the concerned stakeholder.

4. Supporting active participation of marginalized: Affirmative action (quotas and reservations) along with capacity building of the marginalised is required for meaningful participation.

5. Deepen understanding of the link between Wat-San and WRM: There is need for improved understanding of the wider context and the crucial link between water and sanitation, and water resources. There is thus a need for capacity building in water resource management for sustainable water and sanitation.
References


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