

# GOVERNANCE & URBAN POOR

**A** policy watch on young children living in urban poverty  
**HUMARA BACHPAN CAMPAIGN initiative**



**SANITATION**

## Abstract

Availability of adequate sanitation facilities is central to the basic rights of every human being for personal dignity and self-respect. However, the physical environment of slums poses a challenge to its residents, particularly children. This policy brief reviews the implications of inadequate sanitation facilities on children's health, gender development and their quality of life. It particularly focuses on the high vulnerability of children to sanitation related illness, the link between unsanitary conditions and malnutrition, the impact on social and mental development and the practical day-to-day realities of poor provision for children and their caregivers in urban slums of India. Further, it also discusses the policy environment for urban poverty and identifies ways in which the slum-improvement programs can be more child-friendly and recognize sanitation as an important component of the slum restructuring process.

## Introduction

Sanitation alone is expected to bring the greatest return on investment of any development intervention- for every \$1 spent on sanitation at least \$9 is saved in health, education and economic development (Dasra, 2012). Despite this fact, sanitation continues to be a major national problem which has been neglected and requires immediate action considering rapid urbanization and increase in population in slums. More than 2.5 billion people lack adequate sanitation worldwide especially in developing countries like India. Inadequate sanitation facilities have a negative impact on food security, livelihood choices, and educational opportunity and on health of children.

In urban slums, around the world, thousands of children die every day from preventable diseases due to inadequate provision of both sanitation and clean water. Diseases such as diarrhea, worm infestations, skin infections and chronically challenged immune systems are prevalent due to unsanitary surroundings. This can lead to long-term effects like physical and mental stunting among the children in urban slums. Long term solutions are needed to address these issues in which children are affected the most.

## Alarming Facts & Figures

As per the newly released census data of 2011, over 65 million people live in slums, up from 52 million in 2001. Though the slum population has grown slower than the average urban population over the last decade, but provision of adequate sanitation facilities, has been lagging in India. 66% of the households in the urban slums have latrine within their premises, 57.7% of households have water closet latrines, 6.2% of households have pit latrine and 2.2% of households have other latrines. 15.1 % of the households in urban slums have public latrine and 34% of households do not have latrine within their premises. However, various reports do not show the accessibility of these services to the general population living in slums.

Lack of sanitation facilities makes India the number one country in the world where open defecation is highest. As per Joint Monitoring Programme (JMP), carried out by World Health Organisation (WHO) and United Nations Children's Fund (UNICEF) as of 2010, India contributes to 58 per cent of the world's population defecating in the open. Open defecation is a social problem and has an

adverse impact on the dignity of life for the slum dwellers and the health of children. According to JMP, India loses more than 1,000 children of less than five years of age due to diarrhea everyday; 80% of such deaths are below the age of two. If this evidence is not urgently acted upon, India will continue to lose millions of children, countless school days and valuable productive working hours.

#### **Key Recommendation**

*Encourage public and philanthropic investments to improve sanitation facilities in urban slums to reduce the adverse effects of open defecation in the form of ailing children, uneducated girls and unproductive people, which makes this populations even more vulnerable further deepening the cycle of poverty.*

#### **The Policy Environment: Is it child friendly?**

Until the sixth Five Year Plan (FYP) the primary focus in India was on agriculture and rural development. Urban poverty was hardly recognized as a concern during these years of planning. However, a change towards an urban focus was observed from the seventh plan period (1985-1990) with emphasis on infrastructure, slum upgradation and livelihood promotion. Thereafter, there has been a steady increase in the allocation of budget for urban development and urban poverty alleviation. Even, the tenth FYP, places significant emphasis on urban water supply and sanitation. Despite, the continuous effort of improving slums through provision of basic amenities like water supply, sanitation, night shelters and employment opportunities, urban slum dwellers in India still remain vulnerable. Following the liberalisation of India economy in 1991, some major landmark events and policy initiatives are listed below:

A centrally sponsored scheme for Integrated Low Cost Sanitation (ILCS) (1980-81) is being administered by Ministry of Housing and Poverty Alleviation (HUPA). The main objective is conversion of individual dry latrines into pour flush latrines thereby liberating manual scavengers from the age-old, degrading practice of manually carrying night soil.

The 74th Constitutional Amendment of 1992 proposed that urban local bodies should have a direct stake in urban poverty alleviation, slum improvement and upgradation, including the participation of citizens.

The Jawaharlal Nehru National Urban Renewal Mission (JnNURM) launched in 2005 with the objective of improving the quality of life in cities and promotes inclusive growth. The central government would provide financial assistance to cities for infrastructure and capacity development for improved governance and slum development by making available all the basic necessities such as security of tenure at affordable prices, improving housing, water supply, sanitation, education, health and social security.

National Urban Sanitation Policy introduced in 2008 by

the Ministry of Urban Development, Government of India (GoI) with the overall goal to transform urban India into community driven, totally sanitized, healthy and liveable cities and towns (NUSP, GoI).

In 2010, India signs the UN Convention on Human Rights amendment that recognizing water and sanitation as a human right.

Rajiv Awas Yojana (RAY): Launched on 2nd June, 2011 with a vision to create a slum free India. Under this scheme the slums are seen as spatial entities that can be identified, targeted and reached through slum improvement, upgradation, redevelopment and resettlement.

A key point to note is that none of the national policies have any focus on children's well-being or on their development. A safe and healthy living environment is essential for both physical and mental growth of a child. Well-being of children in terms of health, nutrition, education should form an integral part of the planning process. Children today are the future of tomorrow, lack of development of children will eventually lead to decline in the growth and development of a country.

#### **Key Recommendations**

▶ *Children should be central to slum development programs and policies should focus on inclusion of children-friendly components*

▶ *A bottom up approach instead of top-down method should be followed. Focus should be on community led approach as it encourages communities including children to confront the situation and take ownership to improve sanitation*

▶ *Educate, promote and spread awareness among children and community members to improve their hygienic conditions.*

▶ *Customize interventions as per the communities requirement considering the uniqueness of different communities*

#### **India and the Millennium Development Goal**

MDGs and related target indicators provide a framework for planning policy interventions and benchmark to monitor progress in human development and poverty reduction (Ministry of Statistics and Programme Implementation, GoI). Target 10 of the 7th MDG ensures to provide environmental sustainability by 2015. It further aims to facilitate sustainable access to safe drinking water and basic sanitation a reality for at least half of the urban population.

As per WHO and UNICEF report, by end of 2011, 2.5 billion lacked access to improved sanitation facility. Of these, 761 million use public or shared sanitation facilities and another 693 million use facilities that do not even meet the minimum standards of hygiene. The world remains off

track to meet the MDG target on sanitation and so does India. Given the 1990 level for households without any sanitation facility at 76%, India is required to reduce the proportion of households having no access to improved sanitation to 38% by 2015. The NSS 2008-09 reports that, 49.2% households are not having sanitation facility. It is expected that at the historical rate of decline, India may achieve to reduce the proportion of households without any sanitation to about 43% by 2015 missing the target by about 5 percentage points. Thus, improved sanitation facility still eludes half the household in Indian slums.

### Impact of Inadequate sanitation facilities on young children residing in urban slums

Though lack of sanitation facilities affects people of all ages, the well-being of young children is particularly compromised. Inadequate sanitation is not just an inconvenience but it costs lives, dignity and productivity. Poor sanitation means children losing their lives at an early age, uneducated girls, vulnerable women and unhealthy living condition leading to unproductively and poverty.

### Sanitation and Health:

According to a report by The Guardian, diarrhea is the biggest killer of children under five in the world, after pneumonia, responsible for 800,000 deaths each year, affecting around 2,000 children every day. Even when diarrhea does not kill, it empties nutrients from the body which in turn, after repeated occurrences results in stunting, and stops children's growth. Stunted children are not just shorter and thinner, but they are more vulnerable to disease and their brains do not develop as it should. Thus, poor sanitation not only has an adverse effect on the health of a child but also impairs their physical and mental development, thus affecting the economic development of the nation.

Children often use open spaces nearer the settlement to defecate-like open gutters, nearby parks, playgrounds, railway lines and open spaces near to the stream or water, thus contaminating their surrounding and water sources. Such regular exposure with fecal matter and drinking contaminated water results in fatal diseases such as diarrhea, parasitic infections, and worm infections, killing people especially children. As per UNICEF India, Water, Environment and Sanitation, more than 1,600 children under five years of age die each day only due to diarrhea caused by lack of sanitation. Recent research demonstrates strong linkages between poor sanitation and increasing child mortality.

### Sanitation and Women:

Women and girl child are the most affected groups by the hazard of lack of proper sanitation. As per the UN Women and Jagori Survey Data, 2010, more than 30% of marginalized women are violently assaulted every year as lack of basic sanitation forces them to travel long distances to meet their needs. Absence of toilets within their homes and due to lack of privacy and fear

of harassment, girls and women wait for night and find a secluded spot to defecate. Waiting so long to relieve themselves increases chances of contracting urinary tract infections, chronic constipation, and psychological stress. A United Nations survey indicated that up to 70% of girl's in Delhi slums experience humiliation everyday in terms of verbal harassment and half of them have been victims of physical assaults.

### Sanitation and Education

Lack of toilets in schools result in more number of girls dropping out as they do not feel safe going out in open space. As per the Annual Status of Education Report (ASER), 2011, 40% of schools in India do not even have a common functional toilet, as a result of which, 24% of girls drop out of school. Hence, inadequate sanitation is not only linked to protection but also education. This further intensifies gender inequality. The difficulties that women and girls face on a regular basis and at every stage of their lives due to lack of toilets are unimaginable.

### Key Recommendations

- ▶ Spread awareness and educate the slum dwellers about the adverse affects of lack of toilets and encourage them to stop open defecation and build toilets within their premises.
- ▶ The needs of women and children should be taken into account while planning for the provision of sanitation by the Urban Local Bodies(ULBs)
- ▶ Develop a gender based approach wherein the sanitation projects ensure full participation from women and children and involve them as important actors
- ▶ Mobilize communities and children with the help of NGOs, Civil Society Organizations (CSOs) etc.
- ▶ Government, Community Based Organizations (CBOs) and other related agencies to work together towards a common goal and build toilets in public spaces and within the school premises.
- ▶ Influence the government, policy makers and planners to invest judiciously in building toilets and improving sanitation facilities
- ▶ Continuous training workshops at regular intervals to be conducted with the children should to ensure long lasting impact of educating them about the importance of sanitation.

### Conclusion

A proper and adequate sanitation facility is not a luxury but a necessity. Investing in sanitation promises multi sectoral returns, it not only saves life but ensures healthier children; boosts education, environmental security and enhances economic welfare leading to economic development and growth of a nation. There is an urgent

need to acknowledge sanitation as a key focus area of development, improve quality of life of families, their children and provide them the dignity and privacy that they deserve. The challenge that the urban sanitation sector faces is mainly related to the low priority accorded to this sector by the bureaucrats, the municipalities, or

the households themselves. There exists blatant lack of awareness amongst people and they prefer defecating in the open space than within four walls. Hence, there is a need to improve this situation, spread awareness, change mind-sets and provide funds. If we need to progress as a nation, investment in sanitation is essential.



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