CHAPTER-VII

SUMMARY, CONCLUSION AND RECOMMENDATIONS
1. Introduction:

Since Independence, rural development has come to be accepted as the primary strategy of socio-economic development of the country in general and poorer sections in particular.

The Community Development Programme was launched in 1952 to transform the rural society by introducing modern changes in agriculture by providing non-formal education, electricity, roads, bridges and transportation and drinking water and sanitation. The method of CDP was to develop a sense of self-help in rural people by providing modern facilities to rural people (Arora, 1979; Singh, 1985; Baranbas, 1968; Vidyarthis, 1982).

Although the CDP did bring about significant improvements in the social, economic and political fields, but it enabled the rich landlords, who owned land, to make use of the facilities of modernization. A large proportion of the landless farmers, labourers, artisans, women were left outside the purview of development. Consequently, the CDP could not reduce the large-scale poverty, ignorance and illiteracy of the rural people. On the contrary, it (CDP) made the rich more rich and poor more poor (Baranabus, 1987).

A number of studies by sociologists, economists and evaluation agencies strongly recommended to adopt a new poor-friendly strategy to
develop the poor people (Hebber, C.K., 1996; Sharma and Malhotra, 1977; Hirway, 1988).

In 1980s the Government of India adopted a new strategy or rural development viz., Integrated Rural Development Programme (IRDP). The IRDP mainly focussed its attention on target groups viz., rural poor. The IRDP is relatively a new but modified strategy of rural development. The IRDP believed that the rural poor who have been victims of landed gentry, dominant castes and political rulers for centuries, cannot develop for themselves even if the government offered help and assistance. Their problems needed special attention and care, macro and micro planning and mobilization. However, the IRDP, even after two and half decades of its introduction has not demonstrated as a tool of development.

Evaluation studies have shown that even the IRDP is not working as per its expected goals. It is against this background that the present investigator set out to evaluate the impact of Rural Development Programmes on the beneficiaries.

Studies so far conducted on the impact of IRDP have focussed on self-employment. But there are very few studies on Rural Housing, Old Age Pension and Anganwadis. Again, there are no studies on Drinking Water Supply and Sanitation.

The main objective of the study was to evaluate the impact of rural development programmes in four selected villages in Gulbarga district.

The specific objectives of the study were:
1) To study whether or not rural development programmes such as Rural Housing, Old Age Pension and Anganwadis have been successfully operating in the four selected villages, and
2) To study or evaluate the functioning of the Karnataka Integrated Water Supply and Environment Sanitation Project sponsored by the World Bank, but implemented in the four selected villages.
3) Finally, an attempt is made to analyze the part played by NGOs in rural development programmes.

2. **Universe and Methodology:**

The universe of the study consisted of Gulbarga district. Further, the study was carried out in four purposively selected villages viz., (1) Adaki in Sedam Taluka (2) Gobbur-B in Afzalpur Taluka (3) Martur in Chittapur Taluka and (4) Wandurg in Shahapur Taluka.

Two reasons may be attributed for selecting the four villages in different talukas in Gulbarga district.

1) The present investigator had been working in these villages as social worker under different development programmes. Obviously, the research scholar is familiar with the projects, people and the socio-cultural background of the villages.

2) The second reason that mainly prompted to select these four villages was that the Karnataka Integrated Water Supply and Environment Sanitation Project sponsored by the World Bank is implemented in these four villages.

2.1 **Sample Selection and Size:**

Sampling was done at two levels. In the first place, the four villages where the Karnataka Integrated Rural Water Supply and Environment Sanitation Project was implemented, were selected for the study.
In the second place, respondents were selected from a list of beneficiaries provided by different banks and Panchayt secretaries. From the available list of beneficiaries, a sample of 200 beneficiaries – 50 from each village were selected.

2.2 Interview Method, Coding and Tabulation:

The investigator prepared an interview schedule. The said schedule was pre-tested on 20 respondents – 5 from each village. After being satisfied with the schedule, respondents were contacted at place – home/farm and their responses were recorded.

Occasionally, well-informed and educated beneficiaries were interviewed to have insights into the issues. Data were manually coded and tabulated by the investigator.

3. Socioeconomic Background of the Respondents in Sample Villages:

1) Age Composition:

Data collected on age show that 48 per cent of the respondents were in the age group of 21-30 years. Similarly, 21 per cent and 18 per cent were in the age groups of 31-40 and 41-50 years, respectively.

2) Caste Background:

Caste composition of the respondents shows that 72 per cent belonged to SCs and STs, while 17 per cent were from other backward castes. But just 11 per cent were from higher castes (Brahamin, Lingayat, Vaisy).

3) Sex Composition:

The sample consisted of 80 per cent men and 20 per cent women.
4) Marital Status:

An overwhelming majority (90%) of the respondents were married, while only 3 per cent were not married. Besides there were 7 per cent widows/widowers.

5) Family Background: Joint/ Nuclear:

An analysis of the family background shows that 58 per cent of the respondents were living in nuclear families – husband, wife and their children, besides ego’s parents. On the other hand, 42 per cent of the respondents lived in joint families – brothers, their wives and children, aged parents and other near and distant relatives staying together. It means a clear cut family system among rural beneficiaries has not yet developed.

6) Educational Background of the Respondents:

Educational background of the respondents revealed that 38 per cent of them were illiterate, while 28 per cent had primary education. It is important to observe that 22 per cent of the respondents had high school education. While 6 per cent had studied up to PUC (10+2), another 6 per cent were graduates (BA/BSc).

The data clearly indicated that the rural poor, the sample under investigation is moving towards greater education.

7) Occupation Background:

A study of occupational background of the respondents revealed that 78 per cent, a majority were doing coolie or daily wage labourers, while 22 per cent were engaged in agriculture. It means quite a high percentage of the respondents were poor.
8) **Housing Status:**

The type of house one lives in is an indication of one’s status. An observation of housing revealed that a majority (85%) were living in huts, while 15 per cent were living in Kachcha houses – a Kachcha house is one whose walls and roofs are made either of unburnt bricks, bamboos, mud, grass leaves, reeds and/or thatch. It means, a majority of the respondents were living in low status (huts) houses.

9) **Women as Household Heads:**

In the whole of the sample, only 20 per cent of females were heads of the family. On the other hand, 80 per cent of the respondents were heads of the family. Generally, widows, divorcees or deserters acted as heads of the households.

I. **Rural Development Programmes:**

The present chapter dealt with the extent to which Rural Housing, Old Age Pension and Anganwadis have benefitted the beneficiaries in the sample villages.

1) **Rural Housing:**

Housing is an integral part of Rural Development. Shelter being one of the basic needs of man, the history of human habitations is intimately bound up with the social and economic history of mankind.

Under ‘Rural Housing’ two schemes have been studied. They are:

i) **House-site-cum-Construction Scheme for the Landless Workers**

and

ii) **Indira Awas Yojana**
i) **House-site-cum-Construction Scheme for the Landless Workers:**

House-site-cum-construction scheme for the landless workers was introduced by the Ministry of Works and Housing in October 1971, under which cent per cent grant/assistance to the state government was being given for acquisition of land and its development for allotment of house sites for landless workers in rural areas. Under this section, the following subjects have been discussed.

1) **Awareness of Housing-site-cum-Construction Assistance:**

Data collected in this regard have shown that 68 per cent of the respondents were not aware of the scheme, while 32 per cent of the respondents knew about the scheme. On further probing it was observed that the scheme was not brought to the notice of the villagers. Panchayat members and secretaries behave indifferently and try to evade knowledge of schemes. Besides, poor people do not evince much interest in such schemes. In short, government schemes are not given sufficient publicity. As a result very few people make use of such schemes.

2) **Application for Sites:**

Of the 200 respondents, 120 or 60 per cent of the respondents could apply for sites, while 40 per cent could not. Those who could not apply said that they were not aware of the sites. There were a few who were away from their native village at the time of sending applications to the authority concerned. It is clear that housing schemes are not brought to the notice of the beneficiaries.

3) **Allotment of Sites to Applicants:**

Allotment of sites to the applicants is another stage when vested interests are likely to manipulate the decisions. Relevant data revealed that out of 120 applicants, 80 applicants or 67 per cent were allotted sites for
construction, 33 per cent could not be allotted. Those who could not be allotted sites were poor, illiterate and ignorant. It means that the IRDP benefits as per the ideology of Antyodaya could not reach the poorest among the poor. On the other hand, relatively well-off and educated poor were getting the benefits. It means the target group approach could not deliver the expected results.

2. Indira Awas Yojana:

The Indira Awas Yojana aimed at providing built houses to the rural poor including the SCs, STs and freed bounded labourers below the poverty line with the following guidelines.

1) Beneficiary selection should be done at the Gram Panchayat level in an open forum,

2) Allotment of houses should be done in the name of female members of the household,

3) Micro-habitat approach i.e., the provision of roads, drains, drinking water, etc. to be encouraged, and

4) Linking the JRY and IRDP in order to provide the income generation and skills upgradation component.

In the following pages, the main findings are reported.

1. Identification of Beneficiaries:

A number of studies have shown that the chief weakness of the IRDP schemes is its dependence on identification of genuine beneficiaries.

G.D. Bhatt (1989) in his article: “Evaluation of the Integrated Rural Development Programme: A Study” pointed out that in spite of the guidelines, the IRDP beneficiaries were not selected on the basis of the detailed household survey. The list was actually prepared by the Village
Development Officers or Panchayat Adhikaries and approved by the Gram Pradhans.

2. Survey of Housing Needs:

In response to a question whether any survey of housing needs in the village had been undertaken, 51 per cent said that they did not know anything about a survey and only 16 per cent said that a survey was conducted by government staff. But 41 per cent clearly said that no survey of any kind was undertaken in the village in the last 3-4 years.

3. Identification of Beneficiaries in Open Meeting by Panchayat:

As per the guidelines, names of beneficiaries for any scheme should be identified by conducting a household survey and the same should be announced in a Grama Sabha under the supervision of Panchayat chairman, other elite's, men and women beneficiaries. But normally such open meetings are not conducted. List of beneficiaries is prepared by the Panchayat chairman and his henchmen, secretary and a staff from the department concerned.

In the present study, it was observed that 30 per cent of the respondents said that names of beneficiaries were not announced in an open meeting. But a closed door meeting was held in the panchayat office. But 15 per cent of the respondents said that beneficiaries were not identified in any open meeting. Unfortunately, 33 per cent of the respondents did not know anything about holding open meeting. When contacted the Panchayat chairman and secretary, they said that despite notice about holding meeting through beating drums in the villages, most beneficiaries did not attend meetings. Most poor people spend their evenings in liquor shops. In short, the benefits of IRDP are used by powerful poor among the poor beneficiaries.
4. Allotment of House/Sites for Houses for Genuine Beneficiaries:

As per the data collected in this study, it is becoming clear that schemes are being implemented by violating the rules prescribed by the department. Respondents were asked to state whether genuine respondents were allotted houses/sites for houses by the authorities concerned, 36.50 per cent respondents said that very few genuine beneficiaries were allotted houses/sites for houses, while 15 per cent of the respondents said more than 50 per cent of the beneficiaries were allotted houses/sites for houses. Only 5 per cent of the respondents said that cent per cent of the beneficiaries were allotted houses/sites for houses. But 43.50 per cent of the respondents expressed their ignorance. It is clear that the houses or sites for houses were not allotted to the genuine or needy beneficiaries.

5. Housing with Infrastructure:

Housing schemes can be successful, if an integrated approach is adopted. That is, it is not sufficient if houses are constructed. People can stay in such houses only when related facilities like employment, water, electricity, roads, education and health are provided.

Data collected in this regard showed that the planners did not very much bother about the required infrastructure. Fifty (50%) per cent of the respondents expressed their ignorance about the scheme and its planning. But 40 per cent of the respondents, however, said that the planners took into account the needs of infrastructure to some extent. Only 10 per cent said that the planners did take into account the problems of infrastructure to a great extent.
On the whole, it could be said that construction of houses was not well planned. As a result, it was observed, beneficiaries did not move to the newly constructed housing colony to live in.

The foregoing analysis shows that the housing scheme in the four sample villages was not planned as per the needs of the people.

1. A survey of housing needs was not held,
2. Genuine beneficiaries were not identified impartially,
3. Infrastructural facilities were not taken into account while constructing housing colonies for the poor.

2. Old Age Pension Scheme:

Old Age Pension Scheme (OAPS) forms an integral part of any welfare state. The National Old Age Pension Scheme as introduced on 15th August 1995. The said scheme assured a sum of Rs. 100 per month to the old destitutes. Destitutes were defined as those without any source of income and no relatives to support them.

The Government of Karnataka introduced the Old Age Pension scheme in January 1965. A person is qualified for pension if he has no income, aged not less than 70 years and does not have children or grand children above 20 years in age. The age limit for physically handicapped person is 65 years. From April 1991, the monthly pension was raised to Rs. 100 (Gulbarga District Gazetteer, 20040. This chapter has dealt with three important complaints against the pension scheme in Karnataka.

1) The definition of ‘old age’ is too rigid and harsh to include the real needy in rural society,
2) An aged person above 70 years is bound to have children and/or grand children above years as age at marriage is much lower in rural areas than in urban areas, and

3) The real beneficiaries with low income are not identified.

The objectives of the present chapter were:
1. To know the reactions of the respondents about the meaning of ‘old age’ as defined by the Government of Karnataka,
2. To know whether the identification of beneficiaries is done adequately,
3. To know whether the old age pension is regularly distributed, and
4. To know whether the present amount of Rs. 100/- is sufficient.

1. Need to broaden the definition of ‘old age’ for pension:

An overwhelming majority (76%) of the respondents said that the present definition of ‘old age’ is very dissatisfactory. Another 17 per cent said ‘not satisfactory’. A discussion with the respondents revealed that the present definition of ‘old age’ is too complicated and controversial. Most members said that any person who completes 60 years should be considered eligible for old age pension, irrespective of whether one has children or grand children above 20 years.

2. Identification of Beneficiaries:

In all schemes of IRDP, identification of beneficiaries has been a problem to be tackled with.

At present census records are used to decide one’s age. But every year aged people above 70 years are added. But their entry into the list of aged is not made. Thus, a good number of aged remained outside the list. A majority (51%) of the respondents said that identification of the aged is
not done adequately. Another 44 per cent did not believe that identification of beneficiaries was done honestly by the staff concerned. It was suggested that a special committee to be constituted to survey the aged people in rural areas every year.

3. Regular Disbursement of Pension:

An important drawback of the old age pension scheme in rural areas is its delayed payment. It is complained that often the pension is not paid to 3-4 months. Consequently, the aged people are subjected to difficulties. When asked whether the old age pension is disbursed regularly, cent per cent of the respondents said that pension was not disbursed regularly.

4. Enhancement in the Amount of Old Age Pension:

It has been already pointed out that at present the old age pension amount is very small. In view of rising prices, old age pension should be increased. When asked whether there should be increase in the old age pension, 85 per cent of the respondents fully agreed. It means the respondents were unhappy with the existing pension amount and wanted sufficient increase in it. From the above analysis, the following findings may be drawn:

1. A majority of the respondents believed that the present definition to suit the needs of the aged people,
2. Genuine old people are not identified as aged,
3. ‘Old age’ pension is not regularly disbursed in time.

3. Anganwadis:

Anganwadis are the primary Non-Government Organization (NGOs), whose aim is to promote the development of children and welfare of women, especially pregnant and nursing in rural areas. Anganwadis are
the chief organizational instruments through which the objectives of the Integrated Child Development Services (ICDS) are implemented. The objectives of the ICDS scheme are:

1. To improve the nutritional and health status of children in the age group 0-6 years,
2. To lay the foundations for proper psychological, physical and social development of the child,
3. To reduce the incidence of mortality, morbidity, malnutrition and school dropout,
4. To enhance the capability of mothers to look after the normal health and nutritional needs of the children through proper nutrition and health education (Chatterjee, 1987: 114*).

An anganwadi is a focal point for the delivery of the ICDS package and services in every village. Anganwadi centres for the children as well as women within the community itself. Children up to the age of 3-5 years are provided facilities for play and learning in the afternoon.

Children are also served supplementary nutrition. In the afternoon functional literacy programmes covering health and hygiene, food and nutrition, home management and child care, civic education and even vocational and occupational are conducted for women in the age group of 16-45 years. However, observations made on the working of the anganwadis reveal that they are doing works like serving supplementary food supplied by the department in packets. Food packets are also distributed to pregnant and nursing women at their homes by anganwadi staff. Occasionally, a meeting of women is convened to explain about

health and hygiene, child development, etc. But rural women seldom attend such classes.

Profile of Aganwadis:

Generally, two aganwadis are provided to any village viz., one for general public and another for SCs and STs. The present study found that most of the aganwadis are located in rented building without enough rooms, halls and space for games and sports.

1. Pre-school activities for children in the age group of 3-5 years:

Data collected in this regard show that pre-school activities for small children are done to some extent, that is often children are brought to aganwadis and taught the basics of language and manners. Beyond that nothing is taught. The aganwadi workers complained that they did not have enough staff. Moreover, parents of children do not attach importance to training about manners and discipline. A majority of the respondents (51%) said that aganwadis were conducting pre-school activities for small children to some extent. But 33 per cent said that the work done by aganwadis was negligible. It means, aganwadis were not doing any worth appreciating programmes in rural society.

2. Supplementary Food for Infants:

As per rules, supplement food is to be served to infants. Food packets are supplied by the department to the aganwadis. The staff would serve to children in plates. A majority of the respondents (52%) said that serving food to children was not satisfactory. A few said that fifty per cent of the food packets are served to children. Thirty five per cent of the respondents said that serving food packets was dissatisfactory in the sense food packets are is adulterated, not supplied regularly.
3. Supplementary Food for Expectant and Nursing Mothers:

In India, particularly in rural areas, women consume low quality of food, which in turn affects their health. In order to promote health of expectant and nursing mothers, nutritious food is given free of cost to poor rural women.

In this connection, 79 per cent of the respondents said serving food to expectant and nursing mothers was dissatisfactory. They said that food packets are supplied to the beneficiaries at their houses regularly. Unfortunately, most expectant and nursing mothers did not eat the food as they were not convinced about its quality. Rural women suspected that food packets might contain poisonous elements. Therefore, food packets were being used by other members of the family.

4. Health Education for Adult Women:

Anganwadis, as per the ICDS objectives, are expected to educate adult women about health and hygiene, home management etc. But this is not done.

As high as 85 per cent of the respondents said that no such programme of educating rural women about health, hygiene and nutrition is undertaken by the anganwadis. However, discussion with the anganwadi staff revealed that they did not enough trained staff to hold such programmes. The staff said that every month women are asked to assemble in an open place in the evening where broad guidelines about health and hygiene are explained. But no audio-visual aids are used. Besides, rural women do not assemble in an open place.
To conclude, anganwadis in rural areas serve food to children and expectant and nursing mothers in a half-hearted manner. But they do not act as agents of social change.

To sum up the chapter:

1. Rural housing is not planned and implemented as per the needs of rural people,
2. Old age pension scheme is not working satisfactorily as per the needs of old age people,
3. Anganwadis are doing minimum and mechanical work of supplying food packets, educating rural women about health, hygiene and nutrition is seldom undertaken,
4. It appears that anganwadis are not yet come to be accepted as agents of social change in rural society.

II. The Karnataka Integrated Rural Water Supply and Environment Sanitation Project:

II-1. Water Supply:

Water is life and sanitation is a way of life. Both are critical for leading a quality life. A colossal 80 per cent of the diseases stem from consumption of unsafe water or poor sanitary conditions in rural areas.

The National Water Policy, 1987 gave the highest priority to drinking water supply. Its objectives were to provide

1. Safe drinking water to problem villages and
2. Safe water supply to non-problem villages.

The Karnataka Integrated Rural Water Supply and Environment Sanitation Scheme was initiated in 1996 and implemented in 1111 (one thousand one hundred eleven) villages of selected 12 districts of Karnataka.
The main aim of the project was to improve the health and productivity of rural people. An attempt was made to examine to what extent the scheme has been planned and implemented in the four sample villages.

1. Karnataka Integrated Water Supply:
Awareness about IRWS & ES Project:

Respondents were asked to say whether they were aware of the scheme. It is significant to observe that 50 per cent of the respondents said that they did not know much. Further, 27 per cent of them did not know much. Further, 27 per cent of them did not know any thing at all about the scheme. It means enough publicity was no given. According to a few respondents, an inaugurated function was held in respective villages. But a majority of the people did not know much about the scheme.

2. Awareness Regarding Community Contribution:

As per the rules of the scheme, each family was required to contribute 30 per cent of the total cost. Respondents were asked to state if they knew about community contribution. As high as 70 per cent of the respondents did not know about the proposed community contribution. About 30 per cent of the respondents knew about community contribution. A further probe revealed that most people were not convinced about community contribution. They believed that it was government’s project, therefore, the government must bear the entire cost.

3. Contributions Mobilized by the Respondents for the Scheme:

An examination of efforts made by the respondents to mobilize contributions for the scheme showed that 63 per cent did not make any efforts to mobilize any amount at all. Only 37 per cent members consisting panchayat members, rich and well-off families contributed between Rs. 200
and 1000. It was observed that those who made little contribution did so to please panchayat members, government officers, etc.

Those who did not contribute said that since they were poor they could not afford to make any payment. In short, most of the respondents were indifferent towards community contributions for the water supply scheme.

Further, the data showed that after the scheme was handed over to village water supply committee there was no follow-up by the government staff. Water was also not supplied regularly to the villagers. Most villages collected water from standposts where water was stored. But women had to wait in line for collecting water.

Drains were not constructed in the villages. As a result, used and dirty water was let out. It was observed that used water was not constructively and creatively used by the villagers.

II-2 Environment Sanitation:

The International Drinking Water Supply and Sanitation Decade Programme was launched by the government in 1981 with a view to provide the population with protected water supply and basic sanitation facilities over a period of years.

Sanitation is used to define a package of health related measures. It denotes a comprehensive concept of the methods of disposal of human and other liquid or solid waste. Good sanitation prevents many diseases and promotes health. Under the scheme, provision for construction of latrines with financial assistance was made. Provision was also made for providing free constructed latrines. It may be noted that about 40 per cent of the
respondents got constructed different types of latrines – twin pits, single pit toilet with septic tank. But 60 per cent just did not bother about latrines. A discussion with the respondents showed that they were not in favour of using latrines. Besides, majority felt the problem of supply of water.

In short, the scheme of providing latrines to ensure good sanitation has not succeeded. In fact there were no takers’ for latrines. There were examples where latrines provided freely to the poor were used as storerooms. It clearly shows that the target-group approach, like Community Development approach, which was based on Open Market and Trickle-Down System, also has not succeeded. The IRDP approach needs a good deal of realistic planning, imagination, commitment and motivation on the part of the government, public and voluntary organizations.

**Major Findings:**

1. The scheme of Rural Housing could not succeed due to unrealistic planning and defective implementation. The major problem was identification of beneficiaries.

2. Old age pension scheme has not helped the aged in rural areas. Old age pension amount is too meagre an amount to ensure two meals a day.

3. Anganwadis are doing minimum work of distributing food packets. They lack facilities for educating rural women in health and hygiene.

4. The Karnataka Integrated Water Supply and Sanitation has not succeeded much. But people are getting water relatively in greater quantities compared to the days before implementation of the scheme.

On the other hand, sanitation programme of providing latrines has failed. The major finding is that the Community Development approach
created socio-economic disparities between the rich and land-owing groups and the poor backward castes and SCs and STs, the target group approach is creating disparities between well-off and weak poor families. The Antyodaya philosophy is still a dream for poor.

Recommendations:

The following recommendations are offered to improve IRD Programmes.

1. **Identification of Beneficiaries**: Identification of the beneficiaries is one of the weakest and critical points in the implementation of IRD programmes. Studies have shown that more than 50 per cent of the beneficiaries were not the genuine poor. Before implementing any scheme an NGO with a reputation of honesty and integrity should be requested to hold a household survey to decide the income of the family. As long as identification of beneficiaries, a crucial stage, remains weak and defective, IRDP cannot hope to succeed.

2. **Integrated Rural Development Programmes** should be planned in an integrated manner. While sanctioning a cow, care should be taken whether the beneficiary has enough space in house, rainfall in the area, water and veterinary facilities. Indiscriminate, reckless and irresponsible way of sanctioning loans, just to reach target by banks should be discouraged.

3. **When everything is said and done**, rural development is possible when the rural poor are educated and taken into confidence by voluntary organizations. The role of NGOs should be strengthened.

4. **Aged people** are the most vulnerable group in modern society. This is more so in rural society. Regular surveys of aged in rural society should be held. The present pension amount should be raised to Rs.
500.00. The aged people should also be provided subsidized food and free health facilities.

5. **Anganwadis** should be strengthened by appointing highly educated and skilled staff to educate rural women. Building and other facilities should be provided.

6. **Measures to provide enough potable water** to the rural poor should be undertaken. Rural people should be educated about the importance of water.

7. **Sanitation facilities like latrines**, especially public latrines, garbage disposal, drainages should be provided to rural people.

8. **Wanted: A Sanitation Movement**: Safe drinking water and sanitation are critical determinants of public health. Together, they can significantly reduce the burden of communicable diseases. The centre has over the years expanded budgetary support for water and sanitation schemes but unfinished task, particularly in sanitation, is enormous. The Planning Commission in its mid-term appraisal of the Tenth Plan (2002-07), said only 17 per cent of rural households have access to improved sanitation, while in the urban areas, nearly 40 per cent of households are deprived, 70 per cent of the population has no access to hygienic toilets. The importance of sanitation as a genuine indicator of development cannot be overemphasized. At the Third World Water Forum held in Kyoto three years ago, policy makers acknowledged the link between reduced diarrhoea risk and good sanitation and debated the best ways to encourage households to install toilets. Over the last half decade, India has been running a Total Sanitation Campaign in the rural areas, but this fell short of a comprehensive response to the challenge. The Planning Commission, which advocated a mission mode approach, noted that even by 2010 the coverage might extend only to a 100 million dwelling units. That would still leave millions without access to
a toilet inside the house. Although provision for sanitation and safe drinking water supply is becoming important over the years, not enough attention is being paid to sanitation and water supply as the foundation of all health services. Most states have pursued weak policies in this area and neglected the elected local governments, giving them a low stake in improving sanitation infrastructure. Unless the government puts its best efforts in making sanitation and safe drinking water supply, especially to rural people, a social movement, health of the nation cannot be ensured (Editorial: The Hindu, April 12, 2006).