Learning Outcomes

Role of Self Help Groups (SHGs) to address urban sanitation challenges in Berhampur, Odisha

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Building a better working world

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1. Background

The launch of Urban Swacch Bharat Mission (SBM-U) has provided an impetus to improve sanitation outcomes in Indian cities and towns. Leveraging this national thrust, Odisha's Urban State Sanitation Strategy envisions achieving ODF cities in Odisha for which the emphasis is on providing access to safe sanitation across all walks of the society (slum and non-slum households). Various infrastructure and institutional strengthening activities are currently underway in cities and towns. To complement this, communicating to households on the need to adopt good sanitation practice to facilitate behaviour change is also vital for any intervention that aims to improve sanitation outcomes. Strengthening Community Based Organizations (CBOs) such as the women Self Help Groups (SHGs) to drive community engagement is identified as one such intervention to facilitate this grassroots level change. This note aims to document Berhampur Municipal Corporation (BeMC) efforts to integrate women in sanitation to stimulate change particularly in the urban slums.

2. The challenge

Berhampur is the oldest city of Ganjam District with an estimated 26% residing in the slum areas. A typical urban slum community of Berhampur is pictured in figure 1. In an effort to attain ODF status, BeMC is motivating households to construct Individual Household Toilets (IHHL) and build Community Toilets (CT) where private sanitation seems unfeasible. The use of CTs is predominant in the urban slums and currently there are 20 CTs in the municipal corporation, which is operated by both private and public entities.

Despite the presence of CTs, few community members in the urban slums practice open defecation. The community attributes OD practice to poor infrastructure facilities (water, electricity) and insufficiency in funds to invest in toilet cleaning supplies to keep the premises clean and permit regular toilet usage. The municipality recognized this issue in its guest to



attain ODF and intervened to address the challenge, by leveraging existing CBOs such as the Self Help Groups (SHGs).

3. The intervention

In Berhampur, SHGs were formed under the National Urban Livelihood Mission (NULM). There are over 1,600 SHGs across 40 wards in Berhampur. The SHGs are women from the community trained under NULM to increase access to livelihood opportunities for members of the community. The SHGs are women entrepreneurs engaged in a multiple small scale businesses like manufacturing insect repellents, toilet cleaning supplies and food business. The SHG women are ward level frontal units and act as a liaison between the municipality and the households. The SHGs facilitate community engagement, promote local ownership and ensure accountability in any activity undertaken. Such demonstrable key attributes exhibited by the SHGs served as the rationale for BeMC to integrate SHGs in the sanitation agenda. The attributes complemented by the business opportunity to provide SHG women with an additional revenue source by operating and maintaining CTs seemed as a win-win situation for both the SHGs and the municipal corporation. The figure below is a representation of key SHG responsibilities.



As a first step

to the process, interested SHG members were identified and trained on the basis of business opportunity. A memorandum of understanding (MoU) was signed between the SHG women and BeMC to implement the initiative. Currently, the SHGs have taken up O&M of a CT in ward number 11 serving 400 households from 7 neighbouring urban slums. Additionally, the CTs also cater to the sanitation needs of the floating population of 100-150 a day. The activities undertaken by the municipal corporation to operationalize the plan of action is outlined below:

1. Infrastructure improvisation

Undertakings to improve basic infrastructure facilities in the CT to repair toilet doors, ensure 24*7 supply of water and electricity was implemented. Working alongside the municipality efforts in repairing the premises, the SHG women invested time and materials in cleaning the premises to ensure the presence of usable toilets. The renovated CT is pictured in figure 2.

2. Access to seed financing

The SHG women were financially independent even before taking up the O&M of CTs. Yet, BeMC ensured



the presence of additional funding where the SHGs were provided with INR 9,000. The financial incentive was provided to help the women purchase additional cleaning supplies and take on other need based activities to ensure the presence of clean toilet premises.

The SHGs also act as change agents by communicating to households on the importance of adopting good sanitation practices such as using toilets. Through the awareness campaigns, the main intention of the SHGs is to generate a demand for sanitation and motivate communities to use the clean premises. Besides the households, SHGs also leverage the influence of Anganwadi workers and members of the youth clubs for larger coverage of dissemination of information.

5. Recommendations

Presently, the SHGs do not generate any source of income as community members display resistance to pay minimal user fees for toilet usage. This is because of the fact that the community toilets were used free of cost in the past. Therefore, the current emphasis for the SHGs is to ensure clean toilet premises, motivate community members to use the toilets and ensure OD free wards. By far, the outcomes are evident from the reduced OD rates. As a recognition to the work, the SHGs have also been nominated for the Swachatta Excellence Award. However, three recommendations are outlined below to ensure the presence of a self-sustaining business model in the long-term.

Sustainable source of revenue: From the sustainability perspective, a business model that helps the SHG women earn a sustainable source of revenue is key. This entails identifying additional revenue generating opportunities that is not limited to user fee collection, sanitation credit cards etc. Practices such as collecting voluntary donation from the floating population using the toilets could be a potential stream of revenue. Given the prospective to earn considerable revenue by charging user fee, training SHGs to incorporate interpersonal communication to emphasize the benefits of collecting minimal user fee is key. Community engagement will also facilitate collaborative decision making on the exact fee community members are willing to pay.



Inclusive infrastructure provision: Existing

infrastructure of the CTs do not fit in special needs of women, children, disabled and the old age population in the community. The toilets premises lacked affordable menstrual hygiene supplies that cater to the needs of adolescent girls and women. Absence of tap connections also demand women to draw water from the nearby water tank for usage. Facilities that specially cater to the disabled and old age are also absent. Therefore, it is recommended to reassess the exact needs of the community members to promote Inclusivity while improving sanitation outcomes.

Monitoring and reporting: A standardized monitoring and reporting practice is absent. The SHGs spend majority of the time by investing time and money in activities maintaining toilet premises and engaging communities for communication. However, the presence of a standardized monitoring and reporting practice is essential to assess parameters like budget utilization. For this, municipality led efforts to enhance knowledge of the SHG groups on record keeping, bill payments, de-sludging costs, purchasing and inventory of cleaning supplies is needed. Providing tools such as simple record keeping checklist, budgeting books, cleaning trackers and other basic finance manuals could be provided. The presence of a streamlined process eases scale up initiatives and governance for the municipality.

6. Way forward

Empowering such women CBOs by identifying business opportunities in the sanitation space is considered a step in the right direction to attain holistic sanitation outcomes. Still in the early stages of establishment, efforts have been geared towards showcasing the success of the model. Once deemed successful, the model possesses the potential to be scaled up or adopted to promote similar outcomes.

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