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IMPLEMENTATION OF TOILET FACILITIES

TOWARDS TOTAL SANITATION CAMPAIGN ON RURAL WOMEN

Dr. Ms.Pallavi L. Tagade Assistant Professor, D.K.Mahila Mv. Kurkheda. Dr. Mrs. Aparna S. Dhoble
Professor
Sevadal Mahila Mahavidyalaya,
Member, Board & Studies
R.T.M. NagpurUniversity,
Nagpur.

ABSTRACT

Rural women are vital and productive workers in India's national economy. In 1999, the India government introduced the Total sanitation campaign(TSC) to accelerate sanitation coverage throughout the country, particularly in rural areas. It was renamed Nirmal Bharat Abhiyan in 2012 and relaunched as Swachh Bharat Abhiyan in 2014. The present study was undertaken with following objectives to analyze the availability of toilet of rural women, to study distribution of toilet to families by Total Sanitation Campaign, to assess the use of toilet facilities by the rural women. 600 samples from Gondia district in Maharashtra State were selected. The result inferred that mostly 75% of respondent were use the toilets facilities, most of the 91% distribution of toilet to families by total sanitation campaign.Maximum 84% respondents were use toilet facilities for hygienic purpose.

KEYWORDS: Rural women, Social reformers, Total Sanitation Campaign

INTRODUCTION:

"The day every one of us gets a toilet to use, I shall know that our country has reached the pinnacle of progress." Pt. Jawaharlal Nehru, the first Prime Minister of India

Mahatma Gandhi preached and practiced sanitation as a way of life and desired that another follows it. Total sanitation and hygiene were one of the themes of Mahatma during the freedom struggle of India. He also led a movement to free the manual scavengers from job of cleaning bucket type latrines by introducing better sanitation options.

Sanitation is not a new concept in India. Since ancient times, importance was attached to cleanliness and, resultantly, there evolved systems of sanitation and drainage. The Indus Valley Civilization is an example. Also the chapter administration pronounced by Chanakya, in the "Arthashastra" during the 4th Century BC, contains details maintaining hygiene and cleanliness. This message has been carried forward from century to century. In recent times, the example of Tukadoji Maharaj, a great saint of Maharashtra, is a shining example. He pioneering work did in development. In his book 'Gramgita' while emphasizing the need for hygiene, he said, Which means:- "Every house in a village will have to be transformed to make the town or village hygienic, healthy and beautiful. This will require each and every member of a household to strive for highest moral values and righteousness."

Gadge Maharaj or Gadge baba was a saintly social reformer. His vision for the

villages continues to be a source of inspiration for many political parties. He motivated people to stop animal sacrifice as a part of religious rituals. He campaigned against alcohol and drug abuse. However, the most important facet of his reforms was his 'swachta abhiyan'. He would travel from village to village and encourage them to maintain cleanliness. The most important is that he inspired villagers to follow "do it yourself mode". In this, the villagers would not look for outside help-financial or otherwise. They would collect the resources and keep the village clean themselves.

The Government of India has announced National award for sanitation and water in his honour. The abhiyan or campaign does not offer any funds. However, it offers very attractive prizes to the villages who achieve first three ranks. Dressed in attire which invoked attention. Baba carried a broom in his hands. So did his followers. On arrival in any village, he would lead his followers to start cleaning the street briskly. The villagers would do the same enthusiastically. Further, would say 'live clean and simple, stop intoxicants and care for the environment'. With these simple words he was able to create large number of admirers. It is heartening to note that 33,000 out of the total of 42,000 villages in Maharashtra have stepped forward to participate in the Gadge Maharaj Swachta Abhiyan.

The State Government since independence has undertaken programs for overall cleanliness and elimination of open defecation in both rural and urban areas. A state wide sanitation programme was being implemented in the State since 1982 with regular budgetary support. Till recently, this program was implemented through a network of local NGOs led by a State-level nodal agency. There was an element of high subsidy up to 80% for every toilet units constructed under this program.

Simultaneously, Govt. of India also assisted this program under the Central Rural Sanitation Programme (CRSP) in the early nineties.

India remains one of the countries wherein concerted efforts are still required eliminate the practice of open defecation. In rural areas, open defecation, though reduced in scale, largely continues to be a socially and culturally accepted traditional behavior. Low awareness of the potential health and economic benefits of better sanitation and hygiene practices, perception of high costs of having a toilet and the perceived convenience of open defecation are some of the other bottlenecks towards achievement of the goal of Open Defecation Free India. The lack of priority given to safe confinement and disposal of human excreta poses significant health risks manifest in the sanitation challenge facing the nation today.

However, the Total Sanitation (TSC), Campaign launched Government of India in 1999, has gone a long way in achieving and sustaining the status of open defecation free Gram Panchayats in rural India and ensuring a healthy and hygienic environment. The vigorous efforts made under this campaign have helped to achieve rural sanitation coverage to an estimated 70 percent as of March 2011. The campaign has proved to be one of the most effective programs for its focus on a community-led, demanddriven approach, making a long-term positive impact on the health profiles and quality of lives of millions of rural people.

On 19 November we celebrate World Toilet Day. While we might take toilets for granted, billions in the world don't. Toilets and all that is relatedloosely called sanitationplay a hugely important role for all of us: not only in our daily lives as we spend time to relieve ourselves, but also for our sustainable, inclusive development. Toilets are crucial for the

healthy development of people, not to mention children.

Sanitation Sulabh The Movement grew out of efforts to eradicate involving scavenging manual latrines (Pathak, collection of bucket 2011), and has involved the construction of over a million private pour-flush latrines, but also several thousand public toilet complexes operated on a pay-per-use basis (Goyal and Gupta, 2009;Jha, 2003). The toilet complexes have been coproduced by government agencies and Sulabh, and have focused particularly on sites such as stations, markets and hospitals, but also some residential areas.

A duly completed household sanitary latrine shall comprise of a Toilet Unit including a substructure which is sanitary (that safely confines human feaces and eliminates the need of human handling before it is fully decomposed), a super structure, with water facility and hand wash unit for cleaning and handwashing. The Mission aims to ensure that all rural families have access to toilets. There are various models of toilets available based on safe sanitation technologies like the Twin Pit, Septic tank, Bio toilets amongst others The Ministry encourages the development of other safe technologies and States shall disseminate information about available technologies and their costs to the beneficiary to enable him/her to make an informed choice. States can also consider the construction of 'Row' toilets and Complexes for a group of families, mainly where it is not possible to construct IHHLs. It should be ensured that the toilets constructed for Individual households meet the minimum design specifications to ensure their sustainability. Care shall be taken to ensure that these over-designed toilets not are overconstructed i.e. building extra-large pits which are not required, to keep them affordable and also to prevent problems like contamination of drinking water. States have to ensure through effective

communication that such tendencies are restricted. Appropriate information has to be provided to the beneficiary regarding the maintenance of the toilets provided.

Community Sanitary Complex and Women Sanitary Complex form one of the important components of the Total Sanitation Campaign. These complexes are built when there is no space available or when there are financial constraints for safe takes care constructing. disposal/reuse of human waste, enhances privacy and dignity of the users in addition to maintaining the health status of the village. It is used, owned and maintained by community members and usually located within the community, where people reside. A community toilet may also have other utilities such as bathing facility or a place for washing clothes, depending upon the needs of the community.

The specific aim of study is to make improvement in the quality of life in rural areas. To accelerate sanitation coverage in rural areas. To motivate community and village councils promoting sustainable sanitation facilities through awareness campaign and health education.

OBJECTIVES OF THE STUDY

- To analyze the availability of toilet to rural women.
- To find out the distribution of toilet to families by Total Sanitation Campaign.
- 3. To assess the use of toilet facilities by the rural women.

HYPOTHESIS OF THE STUDY

- 1. The availability of toilet to rural women was more if it is, it is by a chance.
- 2. The distribution of toilet to families by Total sanitation campaign was more, if it is, it is by a chance.

Spe

Ti si di a f

3. The use of toilet facilities by the rural women was not much if it is, it is by a chance.

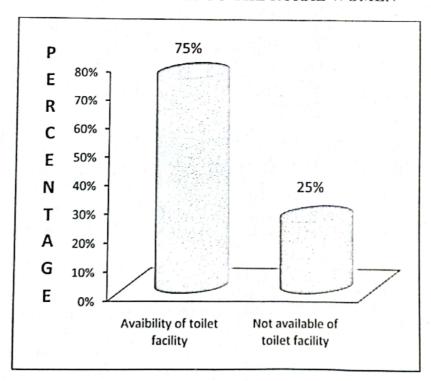
RESEARCH METHODOLOGY

For the investigation of the study "Implementation of Toilet Facilities of Total Sanitation Campaign on Rural Women, were selected with reference to Gondia district in Maharashtra state, the Gondia district of Maharashtra state was selected and the total sample present study was 600 cases. The sample of selected to the help of random sampling in which simple random sampling was used. The survey method was adopted for in study surveys are becoming more popular these days because they are more convenient

and time saving. Interview schedule was one of the traditional tools of data collection for this survey interview schedule be used to collect data. The data was collected and it was analyzed with the help of appropriate statistical test the statistical tool that used here was individual bar diagram and make comparison of different components.

RESULT AND DISCUSSION

Graph No. 1
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TOILET FACILITIES TO THE RURAL WOMEN



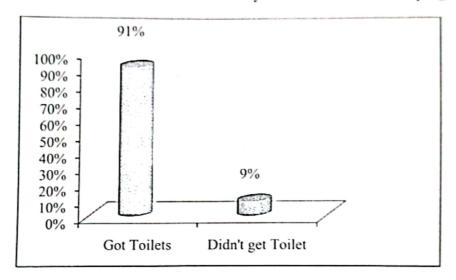
The data presented in above table indicated that 75% of the respondents had the toilet facility available and 25% of respondent had no toilet facility.

N-111			,
Null hypothesis	Tost applied	Hymothocic	Complement
- in potnesis	Test applied	Hypothesis	Conclusion

		accepted\Rejected	
There was no significant difference in the availability of toilet facility after TSC program	Paired "t" test P value 2.2 e 16	Null hypothesis was rejected at 5% level of significance.	There was increase in the availability of toilet facility after TSC.

Graph No. 2

Distribution of Toilets to Families by Total Sanitation Campaign

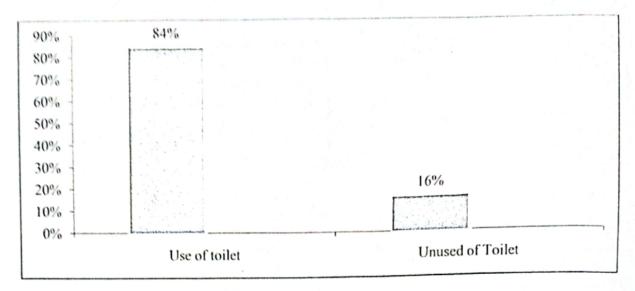


The above graph presented that 91% distribution of toilet to families by total sanitation campaign and 9% not distribution of toilet to families by Total sanitation Campaign.

Null hypothesis	Test applied	Hypothesis	Conclusion
		accepted\Rejected	
Distribution of toilet	Chi-square test T	Null hypothesis was	Distribution of
to facilities by TSC	Value -X2	accepted at 5% level	facility by TSC was
was independent on	1,0.05 = 3.841	of significance.	independent on
the type of family			types of family.
Proportion of	Z test for proportion	Null hypothesis was	Proportion of
respondents got	P value = 0.9214	accepted at 5% level	respondents got
toilet under TSC was		of significance.	toilet under TSC was
same in both the			same in both the
types of family.			types of family.

Graph No. 3

Use of Toilets by the respondents



The above graph indicates that 84% respondents were use of toilet facilities and 16% respondents were unused of toilet facilities.

Null hypothesis	Test applied	Hypothesis accepted\Rejected	Conclusion
There was no significant difference in the average number of respondents aware about use of toilet after TSC.	Paired 't' test P value = 2.2e-16	Null hypothesis were rejected at 5% level of significance.	TSC was effective is increasing the awareness about use of toilet.

CONCLUSION:

Sant Gadge Maharaj was an Indian mendicant-saint and social reformer from the Indian state of Maharashtra. He lived in voluntary poverty and wandered to different villages promoting social justice and initiating reforms, especially related to Gandhi said sanitation. Mahatma "Sanitation is more important than independence". He made cleanliness and sanitation an integral part of the Gandhian way of living. His dream sanitation for all. total was Cleanliness is most important for physical well-being and a healthy environment. It has bearing on public and personal hygiene. Mostly 75% of respondent were using the toilets which govern them for sanitation purpose. Majority of the respondents i.e. 91% receive toilet facilities to rural families total sanitation by campaign.Maximum 84% respondents were use toilet facilities for hygienic purpose. Toilet facilities were provided to respondents through Total Sanitation Campaign and they were using it properly and were satisfied with it. The implementation of toilet facility to rural women found to be more advantageous which keep health fit and fine and that's why cleanliness is essential part of life.

SUGGESTIONS:

1. The most important challenge for the effective implementation of the sanitation program in rural

areas is that most rural populations are poorly informed or not overtly aware of the linkage between sanitation and health.

- creating awareness and understanding which will lead to the desire to access a toilet and use it is important.
- 3. The best option for access is through the construction of a latrine by the household, which is owned, operated and maintained for its own use and benefit. These individual toilets can be built through various low or high-cost technological options to suit the household's means.
- The provision of a community toilet may be the only option and it is essential one.
- Sanitation is the social revenge in the society the concept of clean Indian is not

successful due to the soul mind and these is the end trust of the mind because that is standing life is the living-to-living flow.

- The beneficiaries of the program should be encouraging to spread the awareness of sanitation among other people.
- The government and panchayat should conduct periodic inspection to review the program.

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DR. R. G. BHOYAR GROUP OF INSTITUTIONS WARDHA

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D.K. Mahija Mahandyalay Kuekheda,

has participated in One Day Multidisciplinary International

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He/She has presented a research paper entitled

VBmistaf

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Mum

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