



Field Notes on Accountability

Incentivising Rural Sanitation: The Nirmal Gram Puraskar

Field Notes on Accountability

The field notes in this series seek to document accountability mechanisms built into key government programs for service delivery. These include programs such as the National Rural Health Mission, Mahatma Gandhi National Rural Employment Scheme, Public Distribution System and others.

No.1

The current note examines the implementation of the Nirmal Gram Puraskar (NGP) in Bilaspur district, Himachal Pradesh. It assesses the extent to which the NGP promoted participatory and accountable governance.

Other Field Notes

No. 2: Rogi Kalyan Samitis:
Spaces for Participation.

Background and Context

In 2003, the Government of India launched the Nirmal Gram Puraskar (NGP), an innovative scheme that offers cash incentives to Panchayati Raj Institutions (PRIs) and organisations that contribute significantly towards achieving total sanitation. The NGP was introduced to strengthen and boost on-going efforts under the government's Total Sanitation Campaign (TSC). Launched in 1999, the TSC is a demand driven, community-led programme that seeks to improve sanitation coverage in rural areas and bring about genuine behaviour change in hygiene and sanitation practices. The TSC emphasizes information, education and communication (IEC), and capacity development activities to spread awareness about sanitation issues in rural areas and create a demand for better sanitation facilities amongst local communities. The NGP was designed to boost TSC efforts to achieve open defecation-free or ODF villages in rural areas. The NGP rewards pro-active individuals, PRIs and non-governmental organisations (NGOs) who make significant contributions towards attaining ODF villages with full sanitation coverage.

The overall objective of the NGP is to incentivise PRIs and local communities, to work towards and sustain efforts to achieve open defecation free villages with full sanitation coverage. PRIs at all three levels—Gram Panchayats, Intermediate Panchayats and the District Panchayats—are eligible to apply for the NGP. Specifically, PRIs that have achieved (i) 100% sanitation coverage of individual households; (ii) 100% sanitation coverage of schools; (iii) open defecation free villages and (iv) clean environment maintenance, can apply for the award.

In addition, organisations such as NGOs, CBOs (community based organisations) and SHGs (self-help groups) that have made significant contributions towards achieving total sanitation at the block or district level are also eligible to apply for the NGP. The incentive amount awarded to PRIs is based on population criteria and ranges between Rs 50,000 to Rs 50 Lakh (see Figure 1). Notably the cash incentive is only available to PRIs and organisations receive citations or mementos in recognition of their efforts. NGP awards are given out annually following a rigorous selection and verification of applications submitted by PRIs and NGOs at the district, state and national level. The awards are given by the President of India and in addition to the cash incentives they receive, winning Gram Panchayats (GPs) are entitled to put up a notice board declaring their “*nirmal*” status.

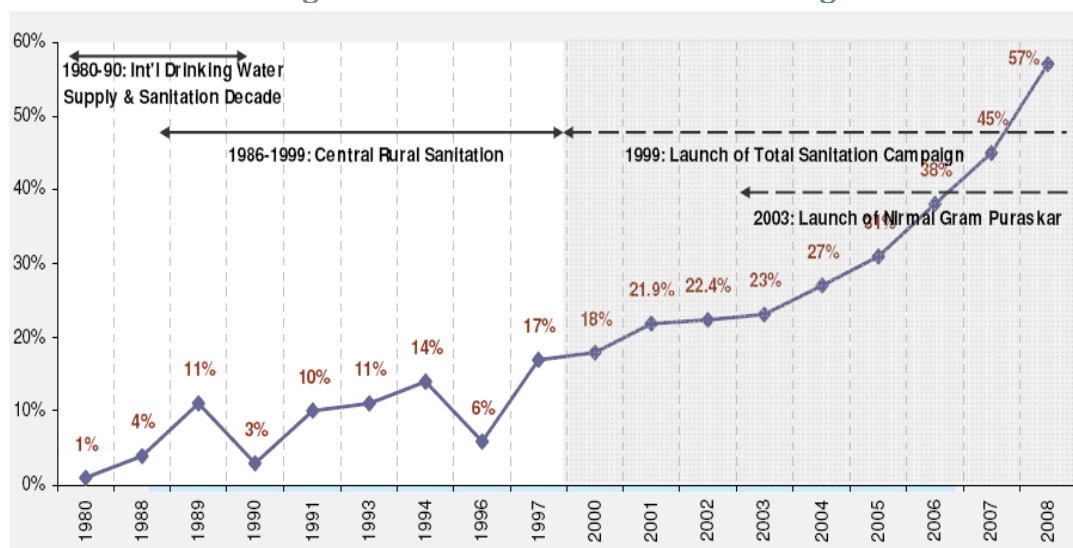
Figure 1. Incentive amount pattern under the NGP

Criteria Amount	Gram Panchayat					Intermediate Panchayat		District Panchayat	
	Less than 1000	1000 to 1999	2000 to 4999	5000 to 9999	10,000 and above	Up to 50,000	50,000 and above	Up to 10,00,000	More than 10,00,000
Population as per Census 2001									
Incentive amount (Rs in Lakh)	0.5	1.0	2.0	4.0	5.0	10.0	20.0	30.0	50.0

Source: Government of India (2010) *Nirmal Gram Puraskar Guidelines*.

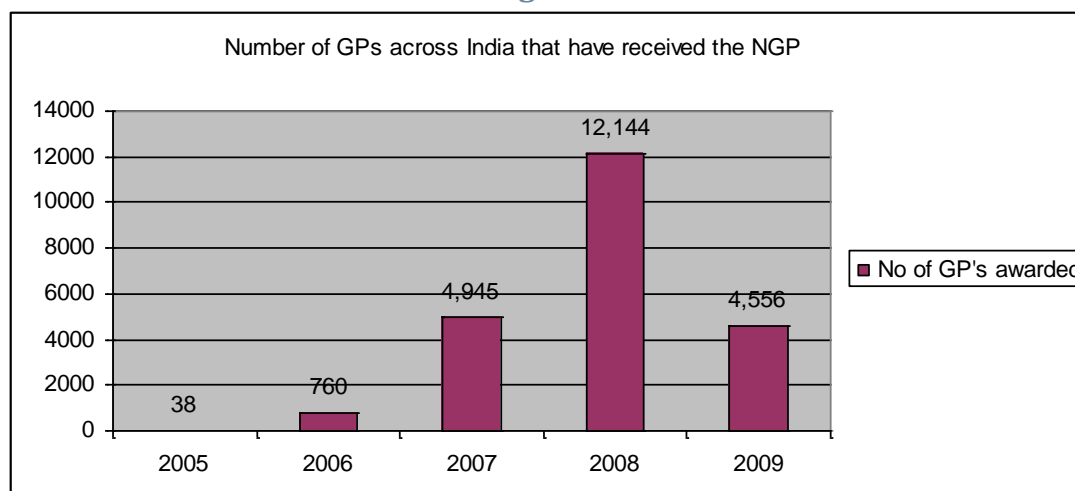
Impact of the NGP on rural sanitation

The NGP is based on the principle of community led participation and development. The assumption is that local issues are best understood and best resolved locally and therefore Panchayats, as decentralised units of local government closest to people, are best placed to address local issues and create incentives for sustainable change. The introduction of the NGP has brought significant improvements in rural sanitation coverage across the country. As we see in Figure 2, from less than 20% in 2000, rural sanitation coverage increased to nearly 57% in 2008. Since the scheme was launched in 2003, there has been a steady increase in the number of GPs submitting applications and winning awards.

Figure 2. Trends in Sanitation Coverage

Source: Himachal Pradesh Rural Development Department¹.

The number of Panchayats across India that have received the NGP award has increased from a mere 38 awards in 2005 to a staggering 12,144 awards by 2008. The data for the year 2009 however shows a dip to 4,556 in the number of NGP awards across the country. This dip in numbers was largely attributed to more stringent monitoring by the government.

Figure 3.

Source: Data compiled from official Website of Nirmal Gram Puraskar Website²

¹ Government of Himachal Pradesh, About the Total Sanitation Campaign, Media Kit, <http://www.hprural.nic.in/Status%20Note%20Media%20Kit.pdf>, accessed on 3 October 2010.

² Government of India, Nirmal Gram Puraskar Information System, http://164.100.194.23:8080/NGP2010/Rep_AwardedPriYearWise.jsp, accessed on 3 October 2010.

The NGP has clearly captured the attention of PRIs and organisations working to achieve total sanitation at various levels. However, despite the growing prominence of the scheme, there has been limited documentation of how the NGP works in practice. There are a number of unanswered questions about how the NGP incentivises PRIs to work towards achieving ODF status, the processes by which local communities are mobilised and the factors that contribute to a GP winning an award. There is also the overarching question of whether the NGP really works as a demand-driven community-led programme that mobilises and entrenches a sense of ownership in the creation and maintenance of better sanitation facilities. To try and unravel some of these questions, the *Accountability Initiative* undertook a micro study of two Gram Panchayats in Bilaspur district in Himachal Pradesh. Specifically, the study looked at a Gram Panchayat that had won an NGP award and compared it with another which had not won an award.

NGP in Himachal Pradesh

Himachal Pradesh is one of a few high performing states in India when it comes to rural sanitation coverage. From less than 30% in 2001, the state achieved 80% rural sanitation coverage in 2009.³ In addition, GPs in Himachal Pradesh have consistently been winning NGP awards. The number of GPs in the state winning NGP awards has been rising from only 22 GPs in 2007, to 245 in 2008 and 253 in 2009.⁴ The state has a strong record of implementing the TSC and NGP and also has its own incentive scheme to reward cleanliness, known as the Maharishi Valmiki Sampoorana Swachhata Puraskar (MVSSP).

Amongst the 12 districts in Himachal Pradesh, Bilaspur district has been ranked by a wide margin as the best performing NGP district with a large number of GPs winning NGP awards. The numbers speak for themselves. 65 of the total 151 Panchayats in Bilaspur district received an NGP award in 2008 and by 2009 there were a total of 73 NGP Panchayats in the district.⁵ Bilaspur district is administratively divided into three development blocks, namely – Ghumarwin, Jhandutta and Sadar - with a total of 151 Panchayats and 1080 villages.⁶ Of these three blocks, Ghumarwin is the only block where all 40 GPs have achieved ODF status. In Sadar, 18 out of 63 GPs are NGP Panchayats while in Jhandutta 15 out of 48 GPs are NGP Panchayats.

³ Government of Himachal Pradesh, About the Total Sanitation Campaign, Media Kit, <http://www.hprural.nic.in/Status%20Note%20Media%20Kit.pdf>, accessed on 3 October 2010.

⁴ Data sourced from Government of India, Nirmal Gram Puraskar Information System. Statistics compiled from “List of GP’s Awarded” in Himachal Pradesh for the years 2007, 2008, 2009, http://164.100.194.23:8080/NGP2010/Rep_AwardedPriYearWise.jsp, accessed on 3 October 2010.

⁵ Data sourced from the Government of India, Nirmal Gram Puraskar Information System. Statistics compiled from “List of GP’s Awarded” in Bilaspur District, Himachal Pradesh for the years 2008 and 2009 <http://164.100.194.23:8080/NGP2010/AwardedGPs.jsp> accessed on 3 October 2010.

⁶ Official website of the District Administration of Bilaspur. Information sourced from “Administrative Set-Up”, <http://hpbilaspur.nic.in/admin.htm#adminsetup>, accessed on 3 October 2010.

Key Stakeholders in Implementation of NGP in Bilaspur, Himachal Pradesh

To understand how the NGP works on the ground it is necessary to understand the different actors that are involved at various levels in its implementation. The following section provides a brief description of the key players involved in the implementation of the NGP in the district of Bilaspur:

District Rural Development Agency (DRDA)

In Himachal Pradesh, District Rural Development Agencies or DRDAs are the principal district level agencies responsible for overseeing the implementation of the anti-poverty schemes and programmes of the Ministry of Rural Development, Government of India. DRDAs are not implementing agencies but rather work in coordination with PRIs and other government agencies at the district level to oversee and monitor the implementation of development programs executed by PRIs and other institutions.⁷

The DRDA in Bilaspur was set up in 1979 and is a registered society under the Societies Registration Act, 1860. As mentioned, the DRDA is the primary administrative unit for the implementation of social sector programs such as the Indira Awas Yojna (IAY), Employment Assurance Scheme (EAS), Jawahar Gram Samridhi Yojna (JGSY), Swarnajayanti Gram Swarozgar Yojana (SGSY). These programs are implemented through Block Development Officers in development blocks as well as GPs.⁸

The DRDA is the chief implementing agency for the Total Sanitation Campaign in the district. DRDA Bilaspur has one Project Officer and three Block Development Officers who form part of a dedicated team working on the TSC. To implement the TSC and initiate the NGP process in the district, the DRDA adopted a partnership model involving local NGOs in the mobilisation efforts. In Bilaspur district, the DRDA signed a memorandum of understanding (MOU) with a local NGO working in the district—the Himachal Pradesh Voluntary Health Association (HPVHA). In Bilaspur, the DRDA has nine HPVHA staff members that work closely with the agency in implementing the TSC.

Himachal Pradesh Voluntary Health Association (HPVHA)

Established in 1987, the Himachal Pradesh Voluntary Health Association (HPVHA) is a registered non-government organisation working across the state on issues related to the provision and distribution of health services. HPVHA is the state chapter of the Voluntary Health Association of India and is comprised of 35 of the leading NGOs working in Himachal Pradesh. HPVHA is working towards “making health a reality for the people of Himachal Pradesh” and to this end has been carrying out a number of

⁷ Government of India, Role and Functions of the District Rural Development Agency, <http://rural.nic.in/drda.htm>

⁸ Official website of District Administration of Bilaspur, <http://hpbilaspur.nic.in/welfare.htm#drda>, accessed on 3 October 2010.

health-related projects in different districts in the state such as a drop-in centre in Bilaspur, a disability project in the Kullu district, a tobacco control programme in Shimla and several other health and sanitation initiatives.⁹ HPVHA is also working on implementing the TSC in three districts- Bilaspur, Himpur and Solan- supported by the DRDA Bilaspur. HPVHA has appointed block coordinators at the district level to carry out TSC activities in the GPs in the block.

Block Development Office

The Block Development Office or BDO plays an important role in the verification and monitoring of GPs that apply for awards and also ensures that the GPs awarded continue to maintain their ODF status. The BDO is not directly involved in implementation efforts around the TSC or the NGP. To ensure that there is no bias, block development officers do not monitor GPs of their own blocks but monitor efforts being undertaken by neighbouring GPs.

Panchayat

Gram Panchayats are the key implementing body for the NGP. In practical terms, the onus of ensuring that all the objectives of the TSC campaign have been achieved and that the ODF status of the village has been ensured and sustained is on the GP. As per the NGP guidelines, it is the GP which has to ensure that all the activities prescribed under the TSC and NGP are achieved. Such activities include the construction of toilets, disposal of waste materials, maintenance of school and anganwadi sanitation facilities under the TSC as well as the achievement of 100% ODF status under the NGP.

Mahila Mandals

Himachal Pradesh is dotted with Mahila Mandals (women's groups) that play an active role in addressing women's issues in villages. The Mahila Mandal is a community based organisation that is very popular in the region. Interestingly, under the TSC the state has instituted a special prize known as the Mahila Mandal Protsahan Yojana to recognise the efforts of those Mahila Mandals that have worked towards achieving the objectives of the TSC. Most of the wards in Bilaspur have Mahila Mandals that have taken up several initiatives for women like microfinance schemes and adult education programmes. As we shall see in the remainder of the case study, the Mahila Mandals play an important role in promoting NGP by acting as a bridge between the Panchayat and the women of the households.

⁹ Official website of the Himachal Pradesh Voluntary Health Association, <http://www.hpvh.com/> accessed on 3 October 2010.

Working to Achieve ODF and NGP Status in Mehri-Kathla Gram Panchayat

The Local Context

Mehri-Kathla is a Gram Panchayat situated in Ghumarwin block of Bilaspur district. As mentioned earlier, all 40 Gram Panchayats in the block have won NGPs, making it the first such block in the district and in the state. Mehri-Kathla is a relatively affluent GP in the region. It is comprised of 7 revenue villages with 7 wards. The Panchayat has 3 primary schools, 1 secondary school, anganwadi facilities and a functioning health centre. The local community in Mehri-Kathla is quite active, as evidenced by high rates of participation in Gram Sabha meetings and the active presence of Mahila Mandals in the Panchayat. Most houses in Mehri-Kathla are *pucca* with toilets located outside the main house. The cubical toilets have single soak pit latrines situated 5-7 feet away from the house. Field observations reveal similar toilets in Scheduled Caste (SC) hamlets of the GP.

The Panchayat at Mehri-Kathla is comprised of 7 elected panchayat members along with 2 female representatives from the Mahila Mandals. The last Panchayat elections at Mehri-Kathla were held on 22nd of December 2009. By all accounts, and contradictory to common perception, the Gram Panchayat in Mehri Kathla is extremely active in the day to day governance of the Panchayat. Panchayat meetings are held at regular intervals and most issues discussed here are related to resolving family disputes, village developmental issues, and sanitation issues. At the most recent panchayat meeting some of the issues discussed included the construction of drains, dustbins, estimation of costs for rain water harvesting and construction of the new panchayat office. Meetings are attended by all panchayat members and are headed by the Pradhan. The Panchayat, along with its other ward members and groups, such as the Mahila Mandals and Anganwadi workers, play a major role in implementing most of the government initiatives on the field. Most recently, the Panchayat has been mobilizing people for the “*Polythene Hatao, Paryavaran Bachao*” (Ban Polythene and Save the Environment) campaign in the village, which is a part of its’ solid waste management initiative. Notably, Mehri-Kathla is at present ranked number two for its performance in the area of solid waste management after a GP in Sadar block.

In addition to the Panchayat, Mehri-Kathla has a Village Water and Sanitation Committee (VWSC) with 8-10 members who were nominated to join. The VWSC in the Panchayat predominantly works for cleanliness and the preservation of natural resources.

Initial Mobilisation

In Mehri-Kathla, the initial push towards achieving ODF status under the NGP came from the HPVHA. As mentioned previously, the HPVHA had signed an MOU with the DRDA in Bilaspur in 2006 to initiate activities under the TSC in three districts i.e. Bilaspur,

Hamirpur and Solan. Importantly, the Gram Panchayat of Mehri-Kathla already had 59% ODF coverage before the NGO started work in the GP.

As a first step, HPVHA worked to mobilise the Pradhan, Panchs and Mahila Mandal's in the GP to raise awareness on sanitation issues in the village. This was done through workshops and sanitation camps. An estimated 15 camps were organized by the Panchayats over a six month period. The idea gained traction largely because the Pradhan of Mehri-Kathla was quite receptive. According to the HPVHA, the Pradhan was already personally involved with a number of hygiene and sanitation initiatives in the village. But more than that, the Pradhan and Up-Pradhan of the Panchayat were keen to establish themselves as political players in the district and the name and fame of receiving an award therefore acted as a ready incentive.

An important part of HPVHAs strategy was to facilitate the formulation of an action plan through the Panchayat. The first step in this process was to identify key problems. One of the major issues identified through this process was the pollution of local water bodies and the spread of water-borne diseases because of the practice of open defecation. With the help of the HPVHA, improving defecation practices in the Panchayat was identified as a crucial and necessary step to improve overall health conditions and reduce water pollution. The Pradhan and Mahila Mandal's got into action by organizing rallies to raise awareness about sanitation and ODF.

An important part of HPVHAs strategy in Mehri Kathla was to mobilize the Mahila Mandals to spread awareness about sanitary practices amongst village households. This was critical given that the Mahila Mandals were already fairly active and influential in the Panchayat. In particular, the Mahila Mandals had a strong link with the Gram Panchayat as the Pradhan of the Mahila Mandals was also an elected member of the GP. In addition, another Mahila Mandal representative was also on the Panchayat committee. Given that the Pradhan was already pushing the Panchayat members to promote the idea of the NGP, the Mahila Mandals too were encouraged to play an important role in this process. The Mahila Mandals served to link the women of the various households and the Gram Panchayat. Apart from their efforts on the TSC, the Mandals in Mehri-Kathla also assisted the panchayat in implementing several other initiatives at the ground level.

In addition to the activities carried out by the Mahila Mandals, the HPVHA adopted a number of traditional awareness raising strategies such as putting up posters, distributing pamphlets and organizing a *Swachata* or cleanliness week in the village. During this awareness-raising week, a series of events were organised such as a School Sanitation Day, Water Purification Day, Anganwadi Sanitation Day. The events finally concluded on World Health Day. The HPVHA and its coordinator had an active presence in Mehri-Kathla and villagers interviewed were well informed about their roles.

The Role of the Gram Panchayat

The first task for the GP was to make the Panchayat free of the practice of open defecation. To begin with, the ODF situation in different wards was discussed and efforts to improve the sanitation status of the wards were initiated under the watch of the Ward Panchs. All the Ward Panchs reported to the Pradhan about the ODF status in their wards. Interestingly, the ward Panchs were quick to work with the Pradhan on this issue. It is unclear what their motivation to do so was. The HPVHA indicates that two factors could have contributed to the Panchs motivation. The first was the effort made by the HPVHA itself of working directly with the Panchs to motivate them through formal workshops and informal interactions between the frontline NGO staff and the Panchs. A second factor was that the Panchayat itself has a history of working together on development issues. As the program officer of HPVHA pointed out, the Mehri-Kathla Panchayat has a relatively better history of working collectively on development issues and this helped in motivating all the members to work towards the award.

As part of the implementation of the NGP, the Pradhan carried out random checks of the wards to verify their ODF status. In 2006, 67% of all the households already had toilets but the remaining 33% were assisted with toilet construction to reach the goal of complete ODF status. At the local level, minimum expenditure toilets costing less than Rs 2000 were constructed with little financial help from the Panchayat. Instead of hiring manual labourers, in some instances, the villagers themselves worked to build toilets in their houses. Once all the villages had achieved the ODF status, a resolution to ban the practice of open defecation within the area of the GP was passed by the Gram Panchayat as per the NGP Guidelines.

Figure.4: Dustbin outside Panchayat office, Mehri-Kathla



Figure. 5: Board displaying NGP the status of Mehri-Kathla



In 2008, the HPVHA submitted applications on behalf of Mehri-Kathla, both for the NGP as well as the state Maharishi Valmiki Sampurna Swachhata Puraskar (MVSSP) award. On 15th August, 2008, Mehri Kathla won its first MSVVP state award and received Rs. 300,000 from the District Collector. The HPVHA then motivated and provided the Gram Panchayat with information on applying for the NGP. The next step towards getting the NGP was filling out the applications forms and submitting them for verification. This was followed by monitoring the Panchayat at the block, state and national level. At the block level, officials from the neighbouring Sadar Block monitored the status of Mehri-Kathla. State level monitoring was carried out by officials from Mandi district whereas the national level random checks were carried out by officials from Uttaranchal. Mehri-Kathla received an NGP award on 17 October 2008 for Rs. 2,00,000. The application was then sent higher up the monitoring chain and Ghumarwin block was awarded a NGP of a further Rs. 20,00,000 Lakh. Celebrations were held for the awards at the GP and the block level wherein each Mahila Mandal was felicitated with Rs. 2000 for their efforts.

What happened after the award?

Once a GP is selected for an NGP award, the total incentive amount is transferred into the TSC account of the particular state. It is the responsibility of the state government to release the amount to the award-winning GPs. The guidelines state that the incentive amount is to be released in two installments. The first installment is to be released as soon as the GPs are awarded while release of the second installment is contingent on whether the GP is able to sustain its ODF and NGP status.¹⁰ As per the NGP Guidelines, the incentive amount received by GPs is to be channeled back into the maintenance and improvement of sanitation facilities and ensuring ODF status. The funds may be used for a range of activities including the creation of additional sanitation facilities in market places, anganwadis, schools, solid and liquid waste management, promotion of vermin-composting etc. The incentive amount is not to be used, however, for organising seminars, workshops, melas, and sports events or for purchasing computers etc.

Like most government schemes, fund transfers are inevitably delayed and Mehri Kathla had a long wait before it received its money. The award money was finally received by the GP in October 2009, a full year after winning the award. Importantly, decisions on how to spend the money in the GP were far from participatory. Interviews revealed that the Gram Panchayat Secretary and the Sarpanch collectively made decisions on how to utilize funds. This seems to have caused some amount of discontentment within the Panchayat. The SC communities for instance complained that a disproportionate amount of money was spent on areas that were closer to the GP office and housed the already affluent and powerful villagers. The more marginalised SC communities and the distant villages were neglected and not provided with equal funding.

¹⁰ Department of Drinking Water Supply, Ministry of Rural Development, *Nirmal Gram Puraskar Guidelines*, Government of India, 2010.

Why do some Panchayats fail to get the NGP award?**Gram Panchayat Baloh – Jhandutta Block**

Baloh is a remote and relatively backward GP located in Jhandutta block of the Bilaspur district. Although Jhandutta block too has had some success with the NGP – 15 GPs won the NGP in 2008, progress has been slow especially when compared to Ghumarwin, where all 40 GPs have won NGP awards. What explains Baloh's failure? How does Baloh's experience compare with Mehri-Kathla?

The Gram Panchayat of Baloh is comprised of 8 revenue villages and 7 wards. It is a predominantly Scheduled Caste GP with 702 SC households out of a total of 766. The area is fairly remote and difficult to access. The GP is relatively more remote and far more backward than Mehri-Kathla. The houses in the GP are in clusters with a mix of *pucca* and *kaccha* houses. Moreover the GP is poorly serviced with only a handful of shops and one post office. The Panchayat in Baloh has seven elected members and one Pradhan. Unlike Mehri Kathla, interviews revealed that the Panchayat in Baloh is not very active and Gram Sabhas are generally not well attended. While the Pradhan was aware of the TSC, he admitted that there were no major activities or efforts to try and improve sanitation conditions in the GP.

Unlike Mehri-Kathla, Baloh did not receive sustained attention from the HPVHA. While HPVHA did organise training sessions and meetings to motivate villagers to work on sanitation issues, villagers interviewed had little knowledge about the NGO and its activities. Most people in Baloh were unaware of who the HPVHA block coordinator was. According to the HPVHA coordinator, the remote location and socio-economic backwardness of the GP as well as the lack of interest of the Pradhan hampered efforts to implement the TSC. Some efforts at creating awareness about the TSC were made by Mahila Mandals which carried out several activities. But these efforts failed to produce tangible results on the ground. In addition to having an ineffective Panchayat and weak NGO presence, unlike Mehri-Kathla, Baloh has also had a poor record on hygiene and sanitation. Flushing cubical toilets in the GP are a relatively recent but underused phenomenon. In many households, toilets are still in the process of being built. Most people continue to defecate in the open and use the nearby *nala*, a rain fed stream, to defecate. Interviews with villagers revealed that even when they have toilets, people prefer to defecate outdoors. The shortage of water in the GP is another factor which has hampered the use of toilets by local villagers. As one villager observed: *"Using latrines means we have to use 3 to 4 litres of water each time, whereas if we go in the open one litre of water is enough."*

In general, therefore, the TSC has been a weak initiative in Baloh. Villagers interviewed revealed that little to no activities had been conducted under the TSC in their hamlets. Moreover, most villagers did not have any idea about the NGP or the criteria for applying for the award. Despite the weak performance of Baloh in implementing the TSC and achieving ODF status, the HPVHA motivated villagers to apply for the NGP award. Ironically, when interviewed, the Pradhan was unclear about when the application was actually filed. Not surprisingly, Baloh did not win an NGP since the GP had failed to meet the required sanitation standards.

The spirit of the NGP is to create a demand for sanitation from within the community. However in Baloh, the push towards applying for the NGP award appears to be counter not only to the actual sanitation situation in the GP but also to the needs and interests of the community itself. Amongst the SC hamlets, most toilets were incomplete and residents explained that the toilets were constructed only under pressure from the Panchayat. Moreover the Panchayat did not provide any financial aid for constructing toilets claiming a lack of available funds. A few members from the GP received grants for the construction of houses with toilets, however most others were forced to use their own

Analysis

The Total Sanitation Campaign and the Nirmal Gram Puraskar seek to entrench better sanitation practices across the country through the active engagement and participation of local communities. These schemes highlight the catalytic role of PRIs, NGOs and CBOs in bringing about lasting changes in hygiene and sanitation behaviour while simultaneously strengthening the capacity of local communities to engage with local development processes.

The experiences of Mehri Kathla and Baloh Panchayat suggest that the one important factor that facilitates Panchayats winning the award is the prevalence of strong local actors. Unlike Baloh, Mehri-Kathla has a history of collective mobilization, evidenced by the presence of strong and active Mahila Mandals. The Sarpanch too was actively involved in the day to day governance of the village and was quick to involve himself in the process of winning the award. Their job was made easier by the fact that sanitation was already a priority for many residents in the village, as evidenced by the fact that the GP already had 59% ODF coverage even before the HPVHA began its activities. The challenge for the HPVHA and the Panchayat was therefore to achieve last mile coverage which was an achievable target unlike in Baloh where HPVHA's first challenge was raising awareness amongst residents to prioritise sanitation.

However, the process of working towards and getting the NGP even in Mehri Kathla was not without conflict. Interviews with the Scheduled Caste villagers highlighted how they did not participate in Panchayat meetings and were asked to 'keep away' from such meetings. A member of the SC ward articulates: *"When we attend the Panchayat meetings to discuss our problems, we are made to keep quiet and not given a chance to speak. When we raise our voices, the Pradhan asks us to sit!"* The poorer SC families stated that the Panchayat put pressure on them to construct their own individual toilets without much financial aid.

This is not surprising. Research on participatory processes in development schemes has often pointed out that the deeply entrenched social hierarchies which characterize social life in India are inevitably reflected in the ways in which citizens 'participate' in development programs. Elite capture is a well documented phenomenon as is the fact that upper castes and men usually dominate participatory proceedings. Clearly, as this case study seems to suggest, the Nirmal Gram Puraskar is no exception.

Apart from highlighting the problem of elite capture, the NGP experience in both Mehri Kathla and Baloh also enables us to draw some broad conclusions about the specific ways in which participatory processes are interpreted and implemented on the ground. In so doing, it offers some reflections on the gaps between policy and practice that India is now infamous for.

To begin with, despite the participatory rhetoric, the NGP is implemented in a very top down manner, where winning the award is the primary goal rather than promoting a genuine demand for sanitation both within the Gram Panchayat and the local community. This has significantly reduced the potential of the NGP to strengthen Gram Panchayats and promote strong local, sustainable community participation in sanitation. In this case study, the HPVHA interpreted its role in the NGP as that of being the primary implementer, motivated by the objective of winning the NGP award. In Mehri Kathla, HPVHA formed a strategic alliance with the relatively active Sarpanch and Mahila Mandals who in turn became the implementing agents of the HPVHA. The Sarpanch and Mahila Mandals, motivated by the desire to win the award, followed HPVHA's directions on 'how to' make the Panchayat ODF. Consequently, rallies were organized, posters displayed and other tried and tested methods – that are in fact given in the NGP guidelines – were employed. At no point did the HPVHA work to build the Panchayats capacity – for whom the program is in fact designed - to effectively engage with the community, identify their needs and demands and develop locally relevant means to resolve local problems.

As a result, the mobilization strategies did not evolve bottom-up where the Panchayats and community groups collectively planned and implemented locally relevant and unique sanitation initiatives that could generate genuine demand. Rather, it remained a top down scheme that used top-down methods of mobilization. These worked in Mehri Kathla – in no small measure because the necessary preconditions of high mobilization and awareness of sanitation were already met, but failed in Baloh where there was no pre-existing demand and the imposition of top-down strategies to create demand did not yield results.

Even in Mehri Kathla, which won the award, the top down nature of the process has compromised the potential of the NGP to genuinely strengthen the Gram Panchayat and empower the Gram Sabha. As discussed earlier, the Panchayat was unable to exercise any influence over the local bureaucracy and the NGP award funds arrived a full year after the awards were announced. Moreover, decisions on expenditure were taken in the old fashioned way by the Panchayat Secretary (the bureaucratic arm of the Panchayat system) and the Sarpanch and people had no voice. Top down implementation thus seriously compromised the game changing potential of the NGP scheme.

To be fair to HPVHA, empowering the Panchayat was not the mandate given to them by the DRDA. The DRDA saw its goal as that of ensuring that the most number of awards were won and this job was given to the HPVHA. Both for the DRDA and HPVHA, the Panchayat and Mahila Mandal served as effective instruments to achieve this end while at the same time preserving the participatory rhetoric that the NGP guidelines demand. Many researchers have commented about this gap between the policy ideals of participation and the actual implementation of participatory processes in the context of participatory programs. The NGP is no exception to this phenomenon.

As researchers have pointed out, this gap is partly a consequence of a difference in interpretation toward what the policy and program stands for at the level of the policy maker and the policy implementer. In the case of the NGP, the policy makers see the award as a means to an end – sustainable sanitation through strong local governments. However, while the policy implementers see the award as the end in itself. This difference may perhaps partly be explained by the fact that historically our bureaucracy has been driven by procedures and input driven measures for getting things done. As a result, when faced with implementing programs through complex, unfamiliar means, implementers always search for ways of re-introducing the familiar – in this case focusing on the procedural aspects of the award, such as filing the application, meeting the demands of the application and finally on the visible input the award itself. The real challenge for NGP is perhaps to initiate a mindset shift at the implementation level that doesn't see the NGP as an end but as instead a means to achieving genuine, participatory demand for sanitation.

Prepared by Shannon Philip, Mandakini Devasher Surie & Yamini Aiyar.

Field Work by Ipshita Roy & Nisthasri Awasthi.

For more details email: mdevasher@accountabilityindia.org.

The field notes in this series seek to document accountability mechanisms built into key government programs for service delivery. These include programs such as the National Rural Health Mission, Mahatma Gandhi National Rural Employment Scheme, Public Distribution System and others. Information from this document may be reproduced or redistributed for non-commercial purposes in part or in full with due acknowledgement to the Accountability Initiative ("AI"). The opinions expressed are those of the author(s). More information on the work of AI can be found at <http://www.accountabilityindia.in/>