



**DEPARTMENT OF DRINKING WATER & SANITATION
MINISTRY OF RURAL DEVELOPMENT
GOVERNMENT OF INDIA**

**Background Note and Agenda for
The National Conference of the
State Ministers In-charge of Sanitation**



**28th October 2010
Hall No.-4, Vigyan Bhawan, New Delhi**

BACKGROUND NOTE AND AGENDA FOR **THE STATE MINISTERS CONFERENCE**

State Ministers Conference is scheduled to be held on 28th October, 2010 at Vigyan Bhawan, New Delhi.

The main objectives of the Conference would be to provide a forum for the participation of the political leadership at State level, NGOs and international resource agencies to develop a Strategic Plan of Action for up-scaling Total Sanitation Campaign (TSC) and making India a Nirmal Bharat where the traditional habits of open defecation and contamination of the physical environment are completely eradicated and conditions are established such that the dignity and worth of each human being are preserved and quality of life is improved. Some of the issues linked to the rural sanitation and TSC in particular are as follows;

1.1 Policies, Principles and Reforms

1.1.1 Policy Framework for Sanitation and Hygiene

The responsibility for provision of sanitation facilities in the country primarily rests with local government bodies –Gram Panchayats in rural areas. The State and Central Governments act as facilitators, through enabling policies, budgetary support and capacity development. In the Central government, the Planning Commission, through the Five Year Plans, guides investment in the sector by allocating funds for strategic priorities. While the first five plan periods were characterized by relatively negligible investments in sanitation, it received a major fillip from the Sixth Plan (1980-85) onwards and the launch of the International Drinking Water Supply and Sanitation Decade in 1980. Responsibility for rural sanitation was also shifted from the Central Public Health and Environmental Engineering Organization to the Rural Development Department of Government of India.

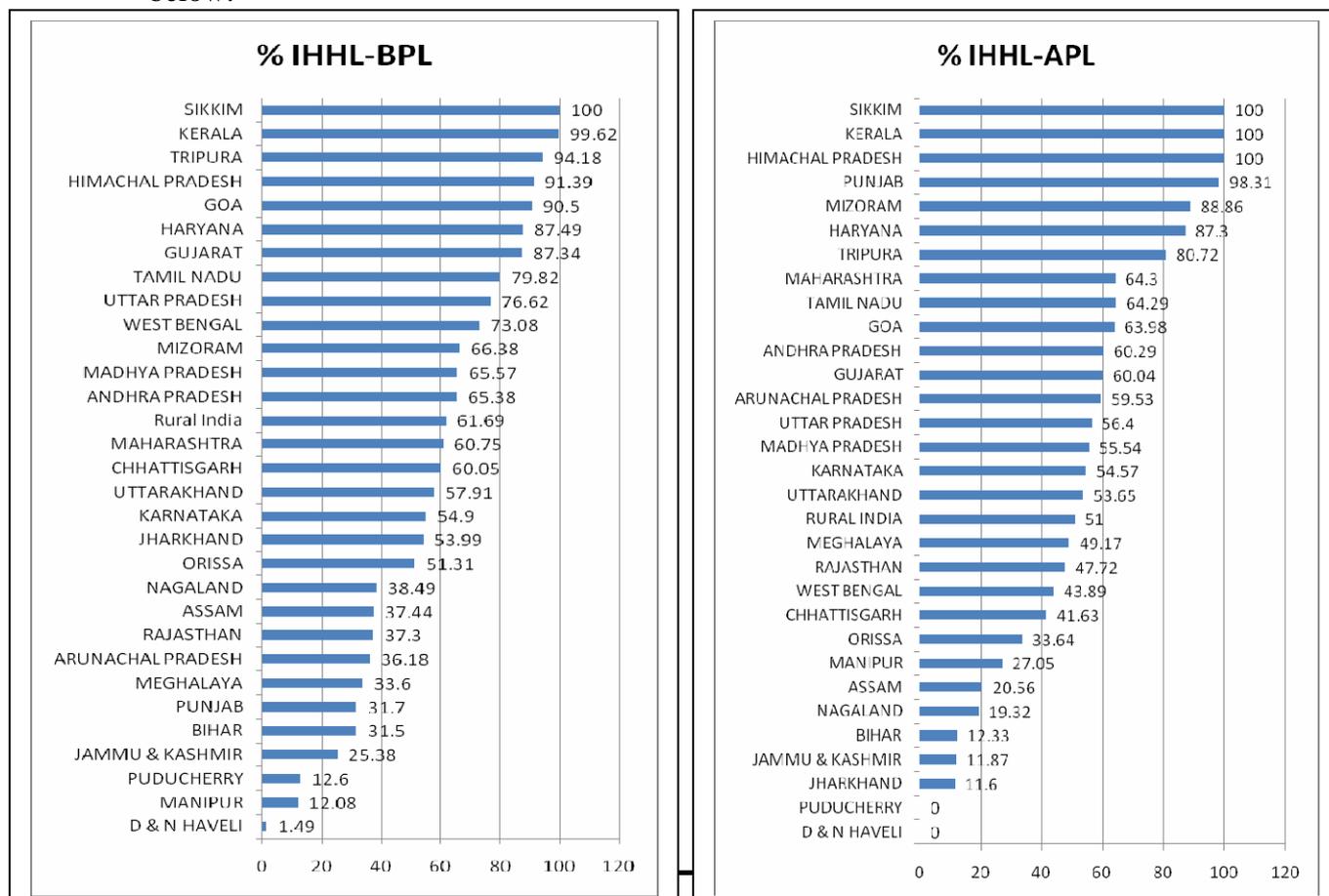
In 1986, the Rural Development Department initiated India's first nation-wide program, the Central Rural Sanitation Program (CRSP). The CRSP focused on provision of household pour-flush toilets and relied on hardware subsidies to generate demand. This approach failed to motivate and sustain high levels of sanitation coverage as it was based on the erroneous assumption that provision of sanitary facilities would lead to increased coverage and usage. It also did not include adequate attention to 'total' sanitation which includes improved hygiene behaviour, school and institutional sanitation, solid/liquid waste management and environmental sanitation. Despite an investment of more Rs. 6 billion and construction of over 9 million latrines in rural areas, rural sanitation grew at just 1 per cent annually throughout the 1990s and the Census of 2001 found that only 22 per cent of rural households had access to a toilet.

1.1.2 Sector Reforms and their Impact

In the light of the relatively poor performance of the CRSP, Government of India restructured the program with the launch of the Total Sanitation Campaign in 1999. TSC advocates a participatory and demand driven approach, taking a district as a unit with significant involvement of Gram Panchayats and local communities. It moves away from the infrastructure focussed approach of the earlier programs and concentrates on promoting behaviour change. Some key features of the TSC include:

- A community led approach with focus on collective achievement of total sanitation
- Focus on Information, Education and Communication (IEC) to mobilize and motivate communities towards safe sanitation
- Minimum incentives only for BPL households/poor/disabled, post construction and usage
- Flexible menu of technology options
- Development of supply chain to meet the demand stimulated at the community level
- Fiscal incentive in the form of a cash prize – Nirmal Gram Puraskar (NGP) – to accelerate achievement of total sanitation outcomes.

TSC is being implemented at scale in 607 districts of 30 States/Union Territories (UTs). Against an objective of 12.57 crore Individual Household Latrines (IHHL), the sanitation facilities for individual households reported to be achieved is about 7.07 crore as of September 2010. In addition, about 10.32 lakh school toilets, 19,502 sanitary complexes for women, and 3.46 lakh *anganwadi* (pre-school) toilets have been constructed. The state-wise% achievement is given below:-

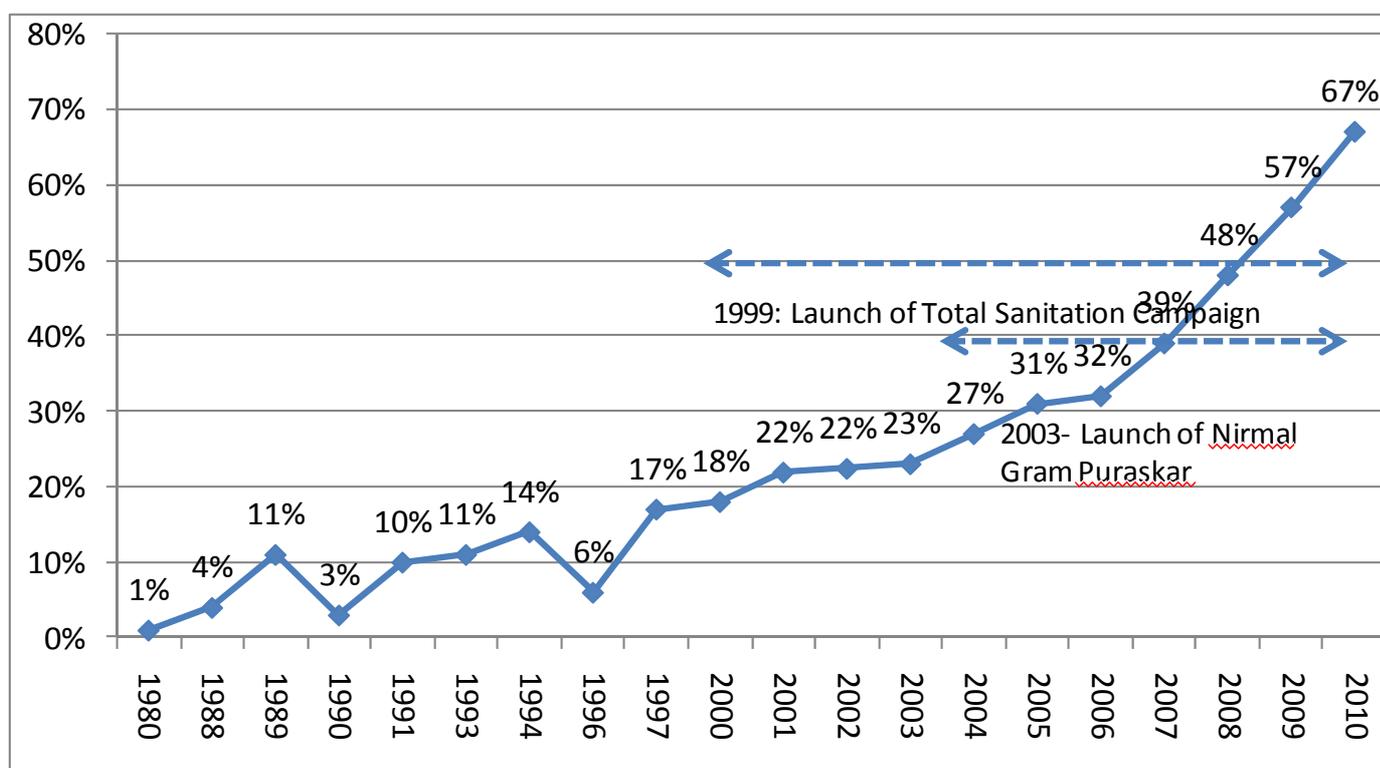


1.2. Strategies Adopted to Achieve Scale and Sustainability

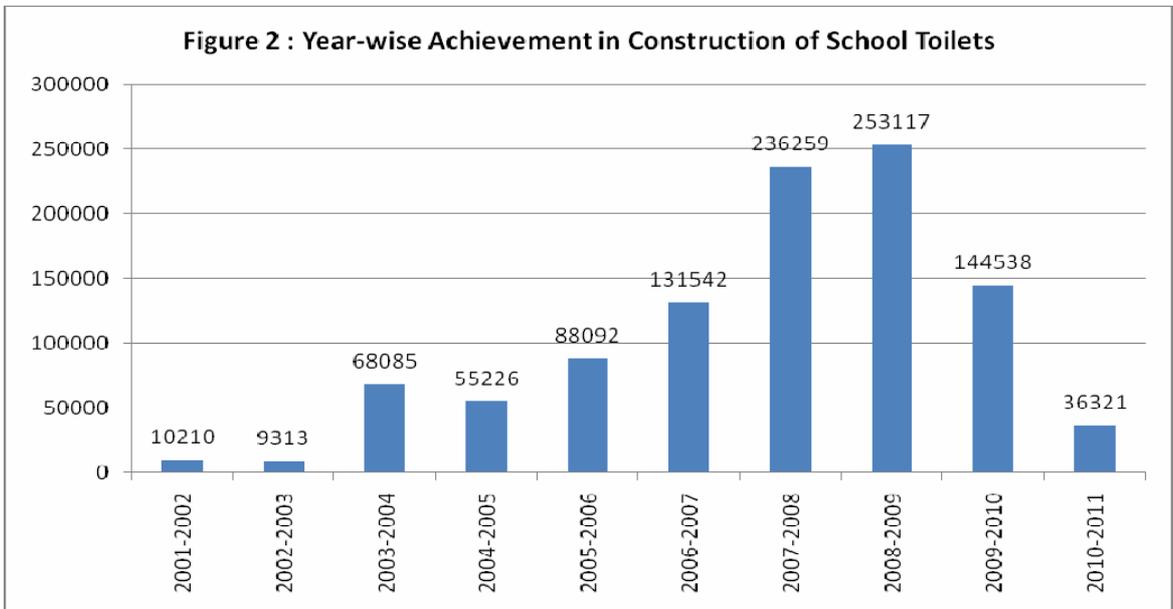
1.2.1 Coverage

After sluggish progress throughout the eighties and nineties, rural sanitation coverage received a fillip with the implementation of TSC. As can be seen from Figure 1 below, individual household latrine coverage has more than tripled, from around 22 per cent in 2001 to 67 per cent in September 2010.

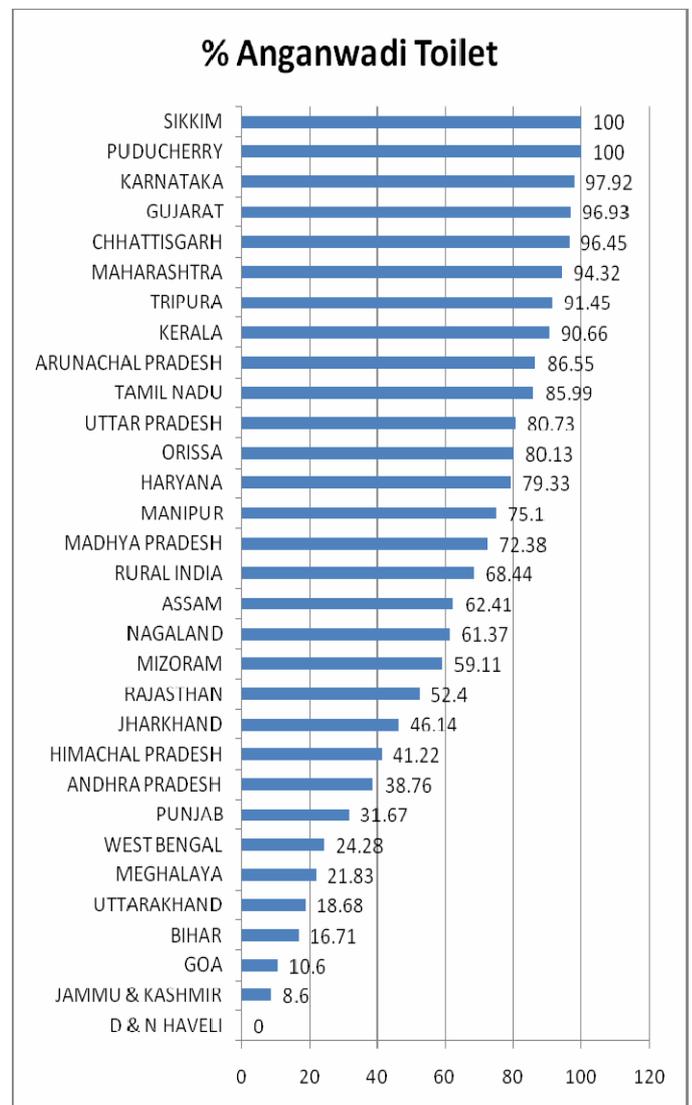
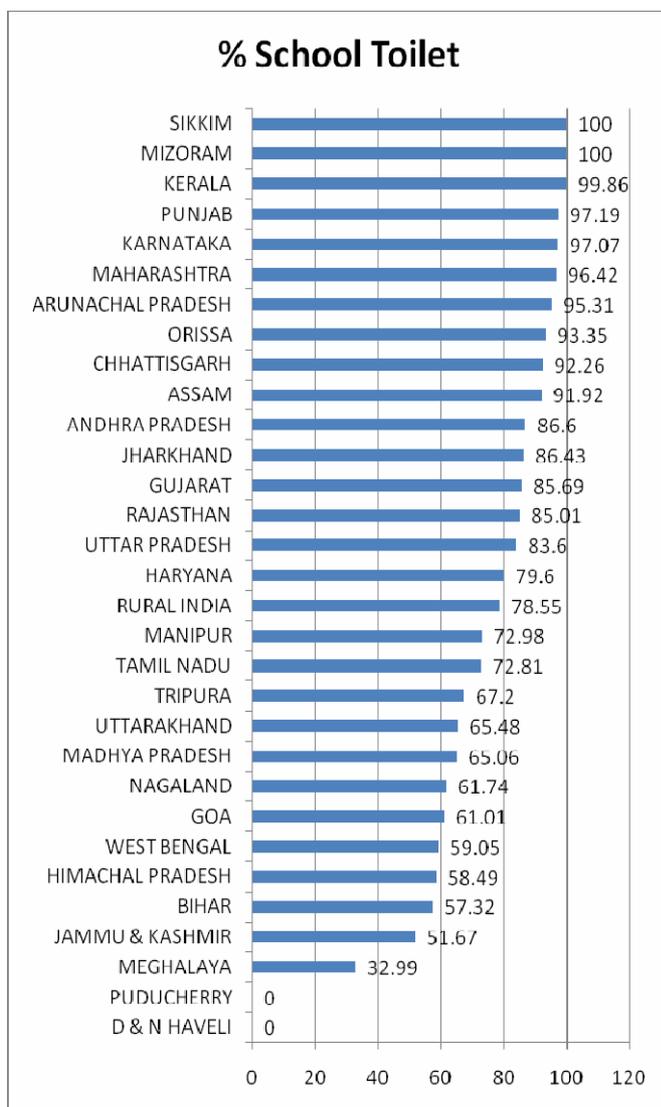
Figure 1: Rural Sanitation Coverage in India



In addition to individual household toilets, TSC lays emphasis on school sanitation. Since inception, a total of 10.32 lakh school toilet units have been constructed against an objective of 13.14 lakh. The year-wise physical progress on this component is shown in Figure 2 below.



Similarly provision of Sanitary Facilities in Anganwadi is also an important component of TSC. 3,46,981 Anganwadi toilets have been reported to be constructed as against the project objectives of 5,06,968 as of September 2010.

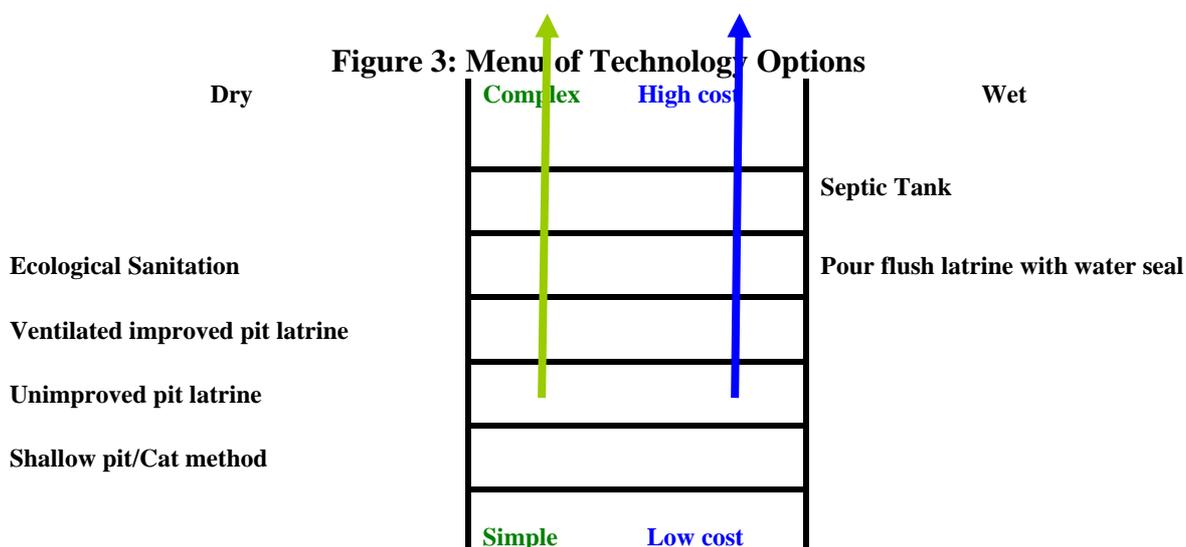


While the coverage reflected above appear to be very impressive, there are issues linked like

- The figures above only reflect the number of households/schools/anganwadis that have a toilet and do not take into account sanitary conditions of the toilet or its usage.
- They do not consider sanitation more broadly e.g. by considering improved hygiene behaviors such as hand-washing with soap.
- Initial indications of an evaluation study show that around a quarter of household latrines are not being used (Planning Commission, Eleventh Plan Document, page 173).
- Field studies have pointed to lower levels of latrine usage because of inadequate awareness of the importance of sanitation, water scarcity, poor construction standards and the past emphasis on expensive standardized latrine designs.

1.2.2 Community Led Approach and Technology Choices

The TSC strategy is to make the campaign community led through leadership by the local bodies, youth and women organization and schools in implementing the campaign. The community is sensitized by creating awareness about the impact of open defecation and lack of sanitation on health, dignity and security especially of women and children. In rural sanitation, ‘encouraging cost-effective and appropriate technologies for ecologically safe and sustainable sanitation’ has been one of the main objectives of the approach. The implication for technology is that this should be improvised to meet consumer preferences ‘in an affordable and accessible manner by offering a range of technological choices’.



1.2.3 Convergence with Related Sectors

Integrating sanitation programs with initiatives to improve water availability and health care would increase the likelihood of achieving public health outcomes such as reduction in diarrheal and other water borne & infectious diseases. TSCs,

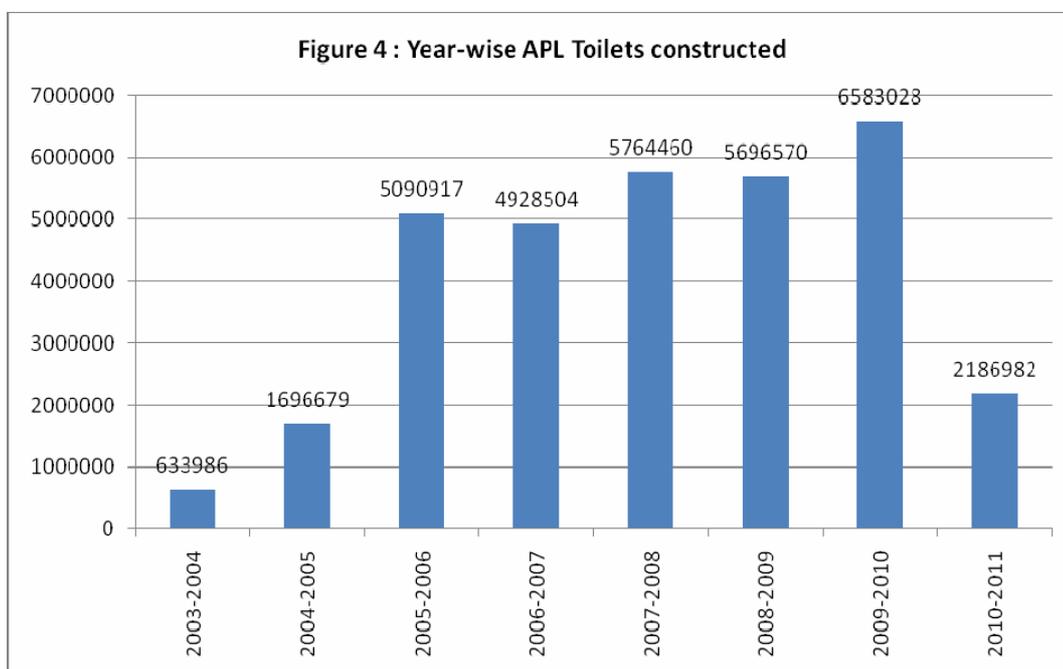
convergence with the rural water supply programs and the National Rural Health Mission (NRHM) program is of utmost importance.

The Rajiv Gandhi National Drinking Water Mission (RGNDWM), National Rural Health Mission (NRHM) and Total Sanitation Campaign (TSC) are all identified as social sector flagship programs by the GoI. In principle, all three programs are implemented through the same district-level institutions. Many activities of the programs are complementary, such as community mobilization, IEC campaigns, capacity development and others, and there are many complementarities e.g. *Anganwadi* (crèche) workers are included as motivators for taking up interpersonal communication at the grassroots level.

Since school sanitation and hygiene education is an integral part of TSC, convergence is established with Department of School Education and Literacy (DSEL) and the Sarva Shiksha Abhiyan (SSA), the flagship program of GoI to achieve universal elementary education. The emphasis is on providing a school environment equipped with necessary inclusive sanitary facilities as well as ensuring these facilities are safe and well maintained and help to inculcate improved hygiene behaviour in children. Training of teachers is also organised at district and sub-district levels to impart hygiene education in the schools.

1.2.4 Motivating APLs

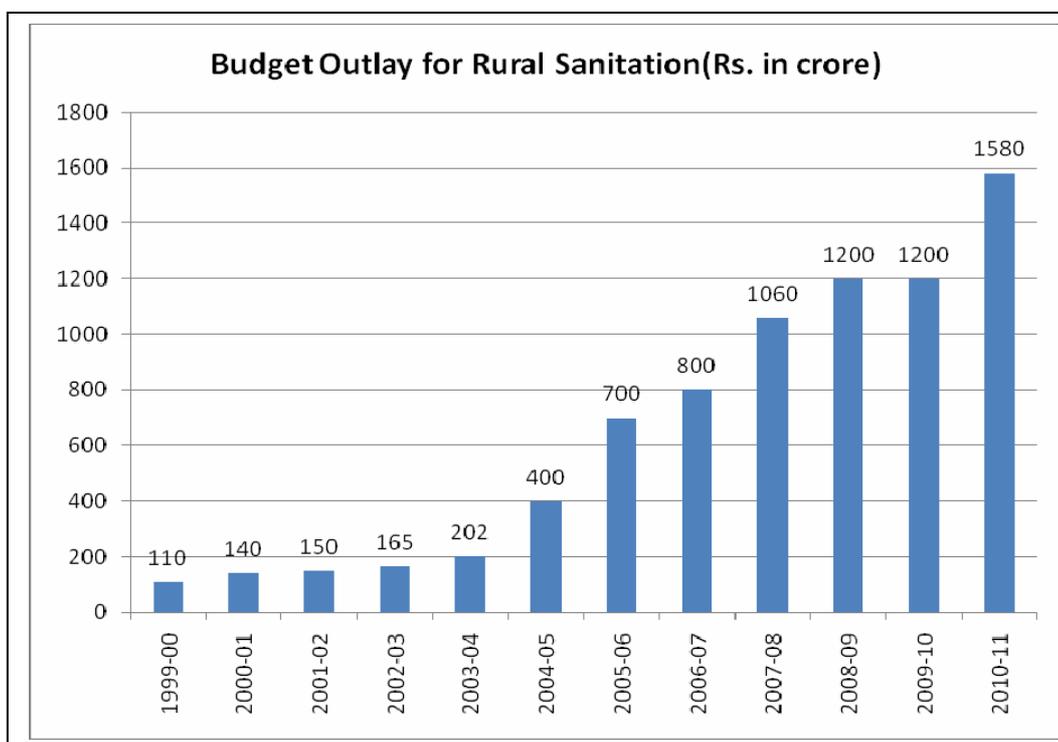
Under the TSC, Above Poverty Line (APL) households are expected to build household toilets without any household incentives. To date, more than 3.25 crore APL household toilets have been constructed as compared to 3.81 BPL household toilets. The trend in APL toilet coverage is shown in the graph below.



1.2.5 Resource mobilization

Reflecting the high priority attached to rural sanitation, a budget of more than Rs 5800 crore has been allocated for TSC projects since inception in 1999 (details in graph below).

Fig 5: TSC Fiscal Year-wise Budget Allocated (in crore)



2. Review performance of states under TSC

(a) Physical progress

The total project objectives and achievements under TSC as of 30.09.10 are as under :

Component	Sanctioned	Achievement
IHHL(BPL)	6,18,38,909	3,81,46,127
IHHL(AP)	6,38,87,805	3,25,81,126
Total IHHL	12,57,26,714	7,07,27,253
School Toilets	13,14,636	10,32,703
Anganwadi Toilets	5,06,968	3,46,981
Community Complexes	33,684	19,502

In construction of individual household latrine (IHHL) the performance of Dadra & Nagar Havelli, Puducherry, Manipur, Jammu & Kashmir, Bihar, Assam,

Nagaland, Meghalaya, Jharkhand, Arunachal Pradesh, Rajasthan, Orissa, Chattisgarh, Karnataka and Uttarakhand is below the national average. When it comes to school toilet the performance is below the national average in Meghalaya, Jammu & Kashmir, Bihar, Himachal Pradesh, West Bengal, Goa, Nagaland, M.P., Uttarakhand, Tripura, Tamilnadu and Manipur. State-wise percentage physical performance is given below:-

State	IHHL BPL%	IHHL APL%	IHHL(APL+ BPL)%	Sanitary Complex%	School Toilet%	Balwadi-Toilet%
ANDHRA PRADESH	65.38	60.29	63.58	100.00	86.60	38.76
ARUNACHAL PRADESH	36.18	59.53	39.37	18.55	95.31	86.55
ASSAM	37.44	20.56	31.64	9.95	91.92	62.41
BIHAR	31.50	12.33	22.96	26.21	57.32	16.71
CHHATTISGARH	60.05	41.63	50.15	29.77	92.26	96.45
D & N HAVELI	1.49	0.00	1.49	8.33	0.00	0.00
GOA	90.50	63.98	74.47	0.00	61.01	10.60
GUJARAT	87.34	60.04	70.43	100.00	85.69	96.93
HARYANA	87.49	87.30	87.36	82.10	79.60	79.33
HIMACHAL PRADESH	91.39	100.00	98.81	24.74	58.49	41.22
JAMMU & KASHMIR	25.38	11.87	18.32	59.91	51.67	8.60
JHARKHAND	53.99	11.60	38.05	11.22	86.43	46.14
KARNATAKA	54.90	54.57	54.73	50.11	97.07	97.92
KERALA	99.62	100.00	100.00	81.01	99.86	90.66
MADHYA PRADESH	65.57	55.54	59.82	47.32	65.06	72.38
MAHARASHTRA	60.75	64.30	62.98	51.10	96.42	94.32
MANIPUR	12.08	27.05	15.97	50.00	72.98	75.10
MEGHALAYA	33.60	49.17	38.01	25.17	32.99	21.83
MIZORAM	66.38	88.86	70.30	87.32	100.00	59.11
NAGALAND	38.49	19.32	35.65	64.73	61.74	61.37
ORISSA	51.31	33.64	44.87	7.09	93.35	80.13
PUDUCHERRY	12.60	0.00	12.60	0.00	0.00	100.00
PUNJAB	31.70	98.31	62.76	15.82	97.19	31.67
RAJASTHAN	37.30	47.72	44.79	26.30	85.01	52.40
SIKKIM	100.00	100.00	100.00	100.00	100.00	100.00
TAMIL NADU	79.82	64.29	72.21	100.00	72.81	85.99
TRIPURA	94.18	80.72	90.53	71.68	67.20	91.45
UTTAR PRADESH	76.62	56.40	64.52	100.00	83.60	80.73
UTTARAKHAND	57.91	53.65	55.77	13.83	65.48	18.68
WEST BENGAL	73.08	43.89	60.52	64.74	59.05	24.28
Total	61.69	51.00	56.25	57.90	78.55	68.44

State-wise detailed physical progress is at Annexure-I

(b) Financial Progress

The total financial outlay under the TSC is Rs. 19626.43 crore. Central, State and beneficiary shares of the projects are Rs. 12273.81 crore, Rs. 5205.79 crore and Rs. 2146.83 crore respectively. An amount of Rs.5870.61 crore has already been released by the Government of India for implementation of these projects, out of

which Rs. 4730.28 crore has been reported to be utilized as reported by the States. Expenditure against centre release is below national average in Punjab, D & N Haveli, Manipur, Assam, Andhra Pd, Arunachal Pradesh, Orissa, Himachal Pradesh, Rajasthan, Karnataka, Tripura, Bihar, Jharkhand, Meghalaya, West Bengal and J & K

State-wise status is given below-

(Rs. in crore)				
State	Approved-Centre share	Centre-Release	Centre-Exp	% Exp. against released
ANDHRA PRADESH	955.07	467.34	312.73	66.92
ARUNACHAL PRADESH	41.28	25.78	17.47	67.76
ASSAM	543.42	267.93	173.14	64.62
BIHAR	1249.39	424.65	328.89	77.45
CHHATTISGARH	402.57	229.06	197.39	86.17
D & N HAVELI	0.71	0.03	0.02	53.02
GOA	5.74	1.72	1.50	87.01
GUJARAT	360.13	242.00	212.62	87.86
HARYANA	127.50	90.44	74.55	82.42
HIMACHAL PRADESH	99.99	44.25	31.12	70.33
JAMMU & KASHMIR	224.61	44.83	36.04	80.39
JHARKHAND	492.70	201.71	158.71	78.68
KARNATAKA	589.62	210.35	161.06	76.57
KERALA	113.58	84.38	73.67	87.31
MADHYA PRADESH	991.49	484.67	400.33	82.60
MAHARASHTRA	823.71	439.95	372.10	84.58
MANIPUR	64.58	23.49	13.51	57.51
MEGHALAYA	77.31	31.83	25.12	78.93
MIZORAM	31.51	22.19	18.92	85.29
NAGALAND	46.76	18.25	17.03	93.33
ORISSA	849.02	368.19	254.77	69.20
PUDUCHERRY	4.53	0.95	0.79	83.37
PUNJAB	136.82	18.08	8.77	48.48
RAJASTHAN	517.46	207.81	147.14	70.81
SIKKIM	12.64	11.23	10.10	89.95
TAMIL NADU	608.24	325.29	317.87	97.72
TRIPURA	55.27	46.35	35.68	76.97
UTTAR PRADESH	1779.38	1177.60	1041.69	88.46
UTTARAKHAND	94.61	36.95	30.38	82.21
WEST BENGAL	974.15	323.31	257.17	79.55
TOTAL :-	12273.81	5870.61	4730.28	80.58

State-wise detailed financial progress is at Annexure-II

3. Online Data up-dation

(a) **NGP village data not updated in online monitoring system:** 395 NGP awarded GPs are not showing hundred percent coverage as per Online Monitoring Data. State-wise status is given below :

List of NGPs Where 100% Achievement not showing in Online MIS					
Sl.No	State Name	Total GPs	Total NGP Awarded GPs	GPs which have achieved 100%	Remaining NGPs for which
				Project Objective as per online data	100% achievement to be entered
1	ANDHRA PRADESH	21870	1085	1052	33
2	ARUNACHAL PRADESH	1744	8	8	0
3	ASSAM	4006	24	22	2
4	BIHAR	8504	195	112	83
5	CHHATTISGARH	9839	519	519	0
6	GUJARAT	14457	1651	1650	1
7	HARYANA	6234	977	977	0
8	HIMACHAL PRADESH	3243	518	518	0
9	JAMMU & KASHMIR	4009	5	0	5
10	JHARKHAND	4560	211	193	18
11	KARNATAKA	5654	845	845	0
12	KERALA	999	863	863	0
13	MADHYA PRADESH	23072	1507	1507	0
14	MAHARASHTRA	28195	8309	8307	2
15	MANIPUR	1261	1	1	0
16	MEGHALAYA	5562	52	52	0
17	MIZORAM	759	22	22	0
18	NAGALAND	1110	44	42	2
19	ORISSA	6234	155	150	5
20	PUNJAB	12813	100	100	0
21	RAJASTHAN	9234	207	163	44
22	SIKKIM	163	131	131	0
23	TAMIL NADU	12617	2095	2032	63
24	TRIPURA	1062	112	88	24
25	UTTAR PRADESH	52690	1236	1236	0
26	UTTARAKHAND	7589	415	415	0
27	WEST BENGAL	3354	1036	923	113
Total		250834	22323	21928	395

(b) **Uploading of Beneficiaries details :** As a recent development, Cabinet Sectt has sought comments from all the Ministries/Departments regarding use of 'ADHAAR' for identifying the beneficiaries in all Centrally Sponsored Schemes (CSS). The Department as per decision taken in the past has already requested all the states to upload beneficiary details to make the details on the website more authentic and transparent. **With the support from states, beneficiary's details of 1,03,63,312 households, out of 2,38,32,258 households are available on web-site. State-wise status is given below :-**

Sl. No.	State Name	BPL Target	BPL HH Reported		
			(From Progress)		
			From MPR	Available Details	Remaining Details
1	ANDHRA PRADESH	5612894	2235356	290305	1945051
2	ARUNACHAL PRADESH	89079	8759	2683	6076
3	ASSAM	1709056	328535	51909	276626
4	BIHAR	5714885	949550	62503	887047
5	CHHATTISGARH	1546901	572266	306688	265578
6	D & N HAVELI	0	0	0	0
7	GOA	5423	772	0	772
8	GUJARAT	2067505	1370771	1200120	170651
9	HARYANA	513525	413426	302823	110603
10	HIMACHAL PRADESH	210641	157654	131012	26642
11	JAMMU & KASHMIR	0	0	0	0
12	JHARKHAND	2172236	639730	82647	557083
13	KARNATAKA	2415184	1247731	869121	378610
14	KERALA	921608	962144	921017	41127
15	MADHYA PRADESH	3198957	1707072	1065189	641883
16	MAHARASHTRA	2969756	1860805	1289007	571798
17	MANIPUR	39748	5134	1763	3371
18	MEGHALAYA	182965	37531	27456	10075
19	MIZORAM	57975	52244	49190	3054
20	NAGALAND	64431	19615	12306	7309
21	ORISSA	4329841	1611150	380365	1230785
22	PUDUCHERRY	0	0	0	0
23	PUNJAB	254804	15548	3463	12085
24	RAJASTHAN	1515116	327161	173651	153510
25	SIKKIM	51302	61770	0	61770
26	TAMIL NADU	2931492	1950944	494605	1456339
27	TRIPURA	147641	213871	3125	210746
28	UTTAR PRADESH	6963384	2797410	750105	2047305
29	UTTARAKHAND	411400	176011	80302	95709
30	WEST BENGAL	4792706	4109298	1811957	2297341
Total		50890455	23832258	10363312	13468946

4. Completion of all school and anganwadi toilets by March, 2011

Objective for school toilet unit construction at present is 13,14,636, out of which 10,32,703 (78.55%) unit school toilets have been reported to be constructed. All states had committed themselves to cover all uncovered rural schools and anganwadi with sanitation facilities by March 2011. Mizoram and Sikkim have already achieved the targets set under TSC for building school toilets. Other States are required to accelerate the pace of implementation as they are registering slow progress.

In addition to creation of hardware in the schools, it is essential that hygiene education is imparted to the children on all aspects of hygiene. For this purpose, at least one teacher in each school must be trained in hygiene education who in turn should train the children through interesting activities and community projects that emphasize hygiene behaviour.

5. Information, Education and Communication

Information, Education and Communication(IEC) is important component of the Programme. These intend to create demand for sanitary facilities in the rural areas for households, schools, Anganwadis, Balwadies and Community Sanitary Complexes. Each project district should prepare a detailed IEC action plan with defined strategies to reach all sections of the community and get it approved by DWSM. Detailed IEC guidelines were recently released by the Department and distributed during the last State Secretaries meeting held on 5th and 6th May 2010.

6. Document required for the fund release for 2010-11 :

Format for Compiled Utilisation Certificate for centre and state share and Annual Performance report are already uploaded on department's website and communicated to all the States vide letter dated 21.06.10. 50% of central share of annual eligible funds has already been released to all the states pending receipt of these documents. The same need to be provided by States at earliest so that balance 50% of funds could also be released to States. During the meeting by Secretary DDWS on 22nd July 2010, all the representatives from States committed to provide the same by 31.08.10. The same is however still awaited from most of the states as either the documents have not been forwarded at all or incomplete documents have been provided which are not acceptable to Integrated Finance division. The details of funds available with the states as of September 2010 state-wise are at **Annexure III**.

7. Community Sanitary Complex :

Community Sanitary Complex is an important component of the TSC. These Complexes, comprising an appropriate number of toilet seats bathing cubicles, washing platforms, wash basins etc, can be set up in a place in the village acceptable to women/men/ landless families and accessible to them. These Sanitary Complexes may be constructed in weekly markets, fair/exhibition grounds, places of religious & tourist significance and bus/taxi stands etc, in particular, are areas where people gather in large numbers and more often than not are forced to go out in the open for their toilet requirements. Highways, where people perform long journeys are another area where small hotels/dhabas may be found in plenty, but toilets are rarely seen. The maintenance of such complexes is very essential for which Gram Panchayat should own the responsibility and make alternative arrangements at the village level.

8. HRD and Capacity Building :

Training sufficient personnel for dissemination of knowledge throughout the country regarding sanitation is a major issue. Though training through CCDUs, Key Resource Centres and CBOs is undertaken, the efforts need to be up-scaled. DDWS has released guidelines on Block Resource Centres also recently.

9. Independent assessment of rural sanitation

Provision of sanitation and a clean environment are vital to improve the health of our people, to reduce incidence of diseases and deaths. To address this challenge

the international community has pledged to halve the proportion of people without access to safe drinking water and basic sanitation facilities by 2015 as part of the Millennium Development Goals.

The Department of Drinking Water Supply, Ministry of Rural Development, Government of India has taken on this enormous challenge by pledging to provide sanitation facilities in all rural areas and ensure an open defecation free rural India by 2012 through its flagship programme “Total Sanitation Campaign” (TSC). While 67% sanitation coverage has been achieved under TSC it is crucial to assess the impact of the programme on rural sanitation vis a vis international assessment reports on Sanitation.

The Joint Monitoring Programme (JMP) for Water Supply and Sanitation published by WHO/UNICEF describes the status and trends with respect to the use of safe drinking-water and basic sanitation, and progress made towards the MDG drinking-water and sanitation target. As the world approaches 2015, it becomes increasingly important to identify who are being left behind and to focus on the challenges of addressing their needs. This report presents some striking disparities: the gap between progress in providing access to drinking-water versus sanitation; the divide between urban and rural populations in terms of the services provided; differences in the way different regions are performing, bearing in mind that they started from different baselines; and disparities between different socio-economic strata in society.

The figures based on data of 2008 with respect to access to sanitation facilities world- wide reported by the WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation report 2010 which are based on the figures of DLHFS-3 are alarming. Improved sanitation facilities are used by less than two thirds of the world population and while virtually the entire population of the developed regions uses improved facilities, in developing regions, only around half the population use improved sanitation. Among the 2.6 billion people in the world who do not use improved sanitation facilities, 72% that is 1070 million populations by far the greatest number, live in Southern Asia. According to the report the use of improved sanitation facilities in India is less than 50%, quite low compared to many other countries. The fact looks further grave when we find that the scenario reported for rural India is still worse at improved sanitation coverage of only 31% as of 2008. More alarming is that the sanitation progress towards the MDG target is reported not on track. The objective set out by the MDG on sanitation is surely achievable but the task is daunting and challenging.

While JMP 2010 figures based on 2008 data states that rural India has achieved sanitation coverage of 31%, the Online Reporting Data from Department of Drinking Water Supply states that India has achieved 67% sanitation coverage as on date. Comparative statement of State wise figures with respect to Rural Sanitation coverage as per DLHFS-3 Survey and TSC Online Monitoring System 2009-2010 is as under.

Comparison of Rural Sanitation Coverage				
As per DLHFS-3 Survey and TSC Online Monitoring System in 2009-10				
S.N.	State Name	Sanitation Coverage DLHFS-3 (2007-08)	Sanitation Coverage as per TSC Online(2009-10)	Difference
1	ANDHRA PRADESH	22.60	68.24	45.64
2	ASSAM	66.10	58.08	-8.02
3	BIHAR	12.30	32.26	19.96
4	CHHATTISGARH	9.80	50.03	40.23
5	GOA	66.70	89.78	23.08
6	GUJARAT	28.20	91.14	62.94
7	HARYANA	45.20	88.85	43.65
8	HIMACHAL PRADESH	52.70	100	47.30
9	JHARKHAND	4.80	37.85	33.05
10	KARNATAKA	23.00	60.7	37.70
11	KERALA	95.90	100	4.10
12	MADHYA PRADESH	10.10	62.4	52.30
13	MAHARASHTRA	31.00	67.3	36.30
14	MEGHALAYA	61.50	53.79	-7.71
15	MIZORAM	97.10	98.85	1.75
16	ORISSA	10.50	41.46	30.96
17	PUDUCHERRY	28.80	52.76	23.96
18	PUNJAB	69.80	91.42	21.62
19	RAJASTHAN	12.90	47.36	34.46
20	SIKKIM	90.80	100	9.20
21	TAMIL NADU	19.50	74.7	55.20
22	TRIPURA	92.40	99.5	7.10
23	UTTAR PRADESH	15.40	69.04	53.64
24	UTTARAKHAND	43.70	66.36	22.66
25	WEST BENGAL	45.40	89.75	44.35
	India	30.90	65.37	34.47

There appears to be a big data gap between the JMP figures and the data reported by the Department. We therefore need to identify the reasons for this data gap and take suitable measures to plug this gap so that a unified and authentic picture of the sanitation coverage in India may be reported and appropriate plan of action may thus be prepared.

The census 2011 has already begun which shall report on the sanitation status in India. All States should facilitate the census to report actual coverage as it will form the basis for future reports on sanitation coverage by independent agencies.

10. Impact Assessment of TSC by WSP

In order to achieve the vision of a Nirmal Bharat by 2012 there is a need to have a clear understanding of the processes that underpin scale up replication and sustainability of best practices implemented by Districts.

Water and Sanitation Programme (WSP) has conducted two studies on various aspects of TSC implementation.

1. **Rapid assessment of the Total Sanitation Campaign processes and outcomes in 22 Districts.** The objective of the study was to collect and analyze primary and secondary data on TSC/NGP processes at District level, understand how process adopted influence performance on outcomes, identify successes, challenges and the lessons and flag gaps and programmatic approaches to address these.
2. **Study on patterns of toilet usage and quality of construction under TSC.** The main objectives of the study were to understand the pattern of access and usage of sanitation facilities and important hygiene practice, assess process of demand creation and supply chain and assess quality of construction and sustainability.

The key findings will be presented during the conference by WSP.

11. Ensuring sustainability of NGP villages and Utilisation of incentive money

To give a fillip to the Total Sanitation Campaign (TSC), Government of India launched the Nirmal Gram Puraskar (NGP) in October 2003 and gave away the first awards in 2005. NGP seek to recognize the efforts made by PRIs and institutions who have contributed significantly towards ensuring full sanitation coverage in their areas of operation. TSC lays strong emphasis on Information, Education & Communication (IEC), capacity building and hygiene education for effective behavior change with the involvement of PRIs, CBOs and NGOs etc.

(a) Empowering Communities:

The NGP since its introduction has created opportunity for rapid scaling up of Total Sanitation Campaign (TSC) by strengthening the community action in the villages which has resulted in a large number of PRIs coming forward to make their villages open defecation free. It has emerged as one of the empowering and motivational tools for the PRIs/local leaders for promoting sanitation. The local leaders have now taken up the big challenge of eliminating the practice of open defecation in their respective areas. NGP has contributed enormously to the rapid expansion of sanitation coverage in the last 5 years. Since the NGP started, more than 22444 Gram Panchayats, 165 Block Panchayats and 10 District Panchayats have been awarded NGP. Sikkim has become the first Nirmal State in the country by achieving 100% rural sanitation coverage in 2008.

Year wise award money status:

Year	Actual Release (Rs. in crore)
2007-08	92.36
2008-09	196.02
2009-10	139.20

(b) Utilization of NGP Award Money for Sustainability

PRIs that receive the incentive amount should use it for improving and maintaining sanitation facilities in their respective areas. Some of the activities that could be taken up using this incentive money are:

1. Ensuring maintenance of community sanitary facilities and sustaining ODF status
2. Creation of additional sanitation facilities in the panchayat area such as at market places, schools, anganwadis, Primary Health Centres, dispensaries etc.
3. Solid & liquid waste management requirements over and above the funds provided under TSC and those sourced from other sources.
4. Purchase of land for solid & liquid waste management purposes subject to approval by DWSM/ ZP
5. Promotion of vermin-composting and ECOSAN
6. Promotion of toilets for differently-abled persons
7. Production of sanitary napkins and construction of incinerators or any other means of disposal
8. Any other innovative means of sanitation promotion such as biogas units etc
9. Providing individual toilet facility for SC/ST families Below Poverty Line

Blocks and districts may use funds to set up monitoring mechanisms for sanitation. They may also allocate additional funds to Gram Panchayats for maintenance of cleanliness and promoting collection of user charges for community facility.

GPs awarded NGP should function as training centers for people from other GPs aspiring to achieve full sanitation coverage and Pradhans from such GPs may be used as facilitators and motivators. Blocks and districts may use the NGP funds for providing remuneration to such Pradhans

(c) NGP Impact Study

The Department of Drinking Water Supply is undertaking a study titled “**Assessment Study of Impact and Sustainability of NGP**” on the NGP awarded GPs during 2005-2008. The main purpose of the study is to assess the impact of NGP on the pace of progress of sanitation availability and usage in the country under TSC and its related impacts on health, education, gender empowerment, social inclusion in rural areas on different user groups particularly the rural poor. This study will also assess the durability and sustainability of the provision and usage of sanitary facilities over time. The rationale of this evaluation study will be to provide important evidence on NGP component of the

TSC. The study will provide a national level report on assessment of impact of NGP.

A sampling methodology was framed in consultation with the Adviser (Stat) of MoRD and Unicef. The study is being carried out through the agency **Centre for Media Studies, New Delhi**. The study is being conducted in 12 States of **Kerala, West Bengal, Tripura, Haryana, Maharashtra, Uttar Pradesh, Himachal Pradesh, Andhra Pradesh, Rajasthan, Bihar, Chhattisgarh & Karnataka**. 664 NGP GPs from 54 districts of 12 States are being surveyed with a sample of 15 households in each GP. The survey teams at present are in the field with detailed questionnaire.

12. ECOSAN- Experiences :

Every sanitation system consists of five components namely of toilet, collection, transport & treatment of excreta and disposal/use of waste products. Ecological sanitation, or “Ecosan”, is an on-site sanitation system which combines all components together. “Ecosan”, is a new paradigm that aims at the systematic closure of material flow-cycles. It supposes that rather than being pollutants or waste, excreta can be useful resource. It is based on an overall view that material flows are part of an ecologically and economically sustainable wastewater management system that can be tailored to the needs of the users and local conditions. It is based on the idea that urine, faeces and water are resources in an ecological loop. This approach seeks to protect public health, prevent pollution and at the same time return valuable nutrients and humus to the soil. The recycling of nutrients helps to enhance food production.

Under conventional systems, large quantities of clean water, suitable for drinking are applied for flushing and carriage of waste. Significant energy is also consumed for conveying and treating wastewater in centralized treatment plants that are often electro-mechanized.

The principles of ecological sanitation involve preventing pollution rather than attempting to control it after pollute, sanitizing urine & faeces and using the safe products for agricultural purposes. Ecosan incorporates the following principles:

- An effort to conserve resources in the management of sanitation and wastewater
- recycling and reuse of waste matter
- Rendering recyclables from waste (human and animal excreta, grey water) safe for reuse
- Minimization of the use of energy and water in sanitation and wastewater management
- Pollution prevention

In ecological sanitation urine and faeces are separated at source and are not mixed with water. This sanitation system avoids the contamination of large volumes of water with pathogens. In addition, the separation of urine and faeces makes it easier to recover and recycle nutrients such as phosphorous and nitrogen. The separated urine can be applied to the soil as a hygienic fertilizer after dilution

and/or processing. Faeces, on the other hand, can be safely composted in-situ and allows for the integration of organic waste treatment into food production. The compost and application urine can reduce our dependency on use of chemical fertilizer and enhance food production. TSC guidelines of June 2010 have been amended to include provision of ECOSAN. **A presentation on ECO SANITATION shall be made in the conference by IIT Delhi.**

13. Up-scaling Solid and Liquid Waste Management activities :

Solid and liquid waste management (SLWM) is one of the components of Total Sanitation Campaign. The TSC aims at achieving the goal of open defecation free rural India by 2012. The clean village/GP concept takes into account that the waste material of the GP would be managed in a sustainable and environment-friendly manner. The target of SLWM activities would be to achieve a status of a zero waste society with zero disposal and discharge by adopting reducing, reusing and recycling the waste material in total.

As of now, up to 10% of District project outlay can be spent for meeting capital cost on the SLWM activities with Centre, State & beneficiary share of 60: 20: 20. The Department is in the process of up-scaling the SLWM activities in the rural areas.

Experiences and approach on SLWM activities shall be shared by EXNORA GREEN in the conference which is considered pioneer in the field of SLWM.

14. Caring for adolescent girls and young women

Sanitation is a key issue for adolescent girls and women, consistent with their need for privacy, dignity, safety and self respect. Lack of basic sanitation and safe water significantly impacts the health and safety of women and leads to low enrollment and high drop particularly for adolescent girls at puberty in schools. Many households do not have toilet facilities and most women are forced to take care of their daily needs before and after sunlight. The dignity of women is compromised many times and particularly the adolescent girls feel highly embarrassed to be seen defecating in public. Lack of awareness on menstrual hygiene lead to many girls either completely dropping out of school at puberty or miss out on crucial learning hours due to absence from School during menstruation. The result of a pilot project of providing toilets to schools in rural areas near Lucknow showed that even girls from conservative Muslim families started coming back to schools once toilets were provided in the schools (Report in Daily News Analysis Sunday, Mumbai edition, Nov 13th 2005).

The demand driven Total Sanitation programme gives a special focus to address the sanitation needs of women who play role in planning, implementation, monitoring of the programme. Women and Self Help Groups as change agents in the Total Sanitation Campaign have had a tremendous impact in many Panchayats. They have been involved not only in mobilizing communities to create a demand for sanitation facilities but also actual construction of toilets and managing production centers and rural sanitary marts for provision of affordable sanitary ware.

The main areas where the sanitation needs of adolescent girls and women have been addressed under are:

(a) School Sanitation and Hygiene Education:

Under the SSHE component of TSC special sanitation needs of women and young girls are being addressed by making a gender sensitive school sanitation programme. Under TSC there is a provision of separate toilet and urinal facilities for girls in all Co-Educational Government Schools in rural areas. Apart from this efforts are being made by some states like Madhya Pradesh, Tamil Nadu and Haryana to ensure facilities for safe disposal of sanitary napkins through incinerators provided and menstrual hygiene education is imparted in Girls schools. The Nirmal Gram Puruskar guidelines state that for a Gram Panchayat to be eligible for NGP *“All coeducational schools above primary level must have separate urinals and toilet blocks for boys and girls. Adequate toilets and urinals should be available separately for boys and girls”*.

Letters have been written by Secretary (DWS) to Ministry of Health and Family Welfare and Ministry of Women and Child Development for ensuring the availability of sanitary pads and menstrual hygiene education in schools. The financial assistance for school and Anganwadi toilets has also been revised recently. The provision in case of school toilets is as under:

‘Funding for School Sanitation in a TSC Project is provided by the Central and State Government in the ratio of 70:30. Accordingly the Central assistance per unit will be restricted to 70 percent for a unit cost of Rs.35,000/- (Rs. 38,500 in case of hilly and difficult areas). Separate toilets for girls and boys should be provided in all co-educational schools, which are to be treated as two separate units and each unit is entitled to Central assistance . The number of toilet units to be constructed should be adequate to meet the requirements of the school as per the strength of the students attending the school. State/UT Governments, Parent-Teachers Association and Panchayats are free to contribute from their own resources over and above the prescribed amount.’

The provision for Anganwadi toilet is as under:

‘In order to change the behaviour of the children from very early stage in life, it is essential that Anganwadis are used as a platform of behaviour change of the children as well as the mothers attending the Anganwadis. For this purpose each anganwadi should be provided with a baby friendly toilet. One toilet of unit cost upto Rs 8,000 (Rs. 10,000 in case of hilly and difficult areas) can be constructed for each Anganwadi or Balwadi in the rural areas where incentive to be given by Government of India will be restricted to Rs 5,600 (Rs 7,000 in case of hilly and difficult areas). Additional expenses can be met by the State Government, Panchayats or funds from Twelfth/Thirteenth Finance Commission, MPLADS, MLALADS etc. Since there are a large number of Anganwadis operating from private houses, following strategy as per TSC guidelines may be adopted;

- (a) In all the Anganwadis, which are in Government buildings, baby friendly toilets should be constructed from out of the TSC funds to the extent laid down.

- (b) Those Anganwadis, which are in private buildings, the owner must be asked to construct the toilet as per design, and, he/she may be allowed to charge enhanced rent for the building to recover the cost of construction. Alternatively, the toilet may be constructed from revolving fund component under the TSC and, suitable deductions made from the monthly rental paid to the owner to recover the cost over a period of time.
- (c) For new buildings, which are going to be hired for Anganwadis, buildings having baby friendly toilet facility only should be hired.'

15. TSC in 12th Plan – Expectations and suggestions from States :

Total Sanitation Campaign is being implemented in 607 districts in the country. The project outlay for 607, TSC projects sanctioned so far is Rs. 19626.43 crore. As a result of the initiatives taken under TSC, following achievements have been made against project objectives:

Component	Sanctioned	Achievement
IHHL(BPL)	6,18,38,909	3,81,46,127
IHHL(AP)	6,38,87,805	3,25,81,126
Total IHHL	12,57,26,714	7,07,27,253
School Toilets	13,14,636	10,32,703
Anganwadi Toilets	5,06,968	3,46,981
Community Complexes	33,684	19,502

While, schools and Anganwadis shall get covered with sanitation facilities by March 2011, It is expected that approximately 2.4 crore more households shall be covered with sanitation facilities by the end of 11th Plan.

Planning for 12th plan

(i) Finishing the unfinished objectives

At the current annual trend of fund availability for TSC, it is seen that approximately 1.2 crore rural households are being provided sanitation facilities each year. 3.18 crore households, therefore, shall still be required to be provided sanitation facilities in rural areas by the end of 11th Plan. This balance number of 3.18 crore rural households approximately, shall be required to be covered for sanitation facilities during the 12th Plan as per present project objectives. **Any change in the definition of BPLs or identification of new households not having sanitation facilities shall change the requirement accordingly.** It has also been revealed through analysis of various survey reports that increase in sanitation coverage for the poorest in the wealth quintiles has been minimum and the benefits at present are more tilted towards the beneficiaries lying in the higher wealth quintile zones. It would therefore be required to be ensured

that poorest of the poor including SC/ST and minorities are all covered while achieving the cent percent rural sanitation coverage.

(ii) Special focus on difficult areas

Difficult areas like flood affected, coastal, and hilly and desert areas will now require focused attention and specific solution. This may also involve development of appropriate technologies which are cost effective, combined with credible means of social mobilization.

(iii) Solid & Liquid Waste Management(SLWM)

Total Sanitation Campaign has initially focused on provision of sanitation facilities in rural areas to prevent open defecation and disposal of human excreta. The 'Way Forward' now is to emphasize on Solid & Liquid Waste Management activities. Gram Panchayats need to be motivated to evolve institutional mechanisms for collection and disposal of biodegradable and non biodegradable waste in the GPs. For **bio degradable waste**, simple technologies like composting, vermi-composting and bio-gas plants shall be promoted. For **non-bio degradable waste**, appropriate technologies like recycle and reuse shall need to be promoted under the Campaign. Concept of **Zero Waste Management** would be promoted for maximizing waste recovery through recycling and reuse.

Another area under Solid & Liquid Waste Management which requires attention is proper disposal and reuse of **Grey Water**, wherever possible. The emphasis shall be on proper treatment of Grey Water and its use for a variety of purposes including irrigation. Grey water reuse for domestic purposes like watering of kitchen gardens would require promotion. In **peri-urban areas**, its usage for toilet flushing needs attention.

(iv) Personal Hygiene Management

Though school sanitation and hygiene is an important component of TSC at present, attention is on coverage of schools with sanitation facilities. But thrust shall now be required to be made for the following :

- Provision of hand-washing as an integral part of sanitation facilities in schools and Aganwadis
- Provision for menstrual hygiene for rural women and adolescent girls.

(v) Eco Sanitation

Once the behavior change efforts now being made through pour-flushed toilets are successful, Eco Sanitation shall be required to be promoted to save water and to close the loop of sanitation through ecological means for which efforts need to begin early.

(vi) Disabled friendly toilets

Total Sanitation Campaign (TSC) aims at achieving universal sanitation coverage in the rural areas. Therefore, the Campaign cannot afford to ignore sizeable population of physical challenged persons. At least one

toilet for persons with special needs would be required to be provided in all institutions in rural areas.

(vii) Special Sectors for Convergence/Sanitation coverage

There are various sectors wherein there is a need of greater convergence of TSC to clean and health environment in the country as a whole. Some of these sectors which shall require convergence with TSC in 12th Plan are:

- a) Sanitation in Railways
- b) Sanitation and food hygiene at Tourists and religious places, weekly marketing areas
- c) Sanitation facilities on Highways and at petrol pumps.

States are requested to provide suggestions in this regards

16. Research and Development

R&D is a support activity for which DDWS provides 100 per cent funding to research organizations. Traditionally, research funding has focused on water sector but the need for focusing concerted research efforts for sanitation has been highlighted. The three major areas identified for R&D inputs to enrich and sustain the current sanitation program are:

- **Technology related:** Initiatives are required in sanitation technologies particularly in the product/design, evacuation, decomposition and maintenance and construction with regard to leach pit technology or any improvement in existing installed septic tank technology. More investments are needed in solid and liquid waste technologies, bio-gas, eco-sanitation, methane recovery from landfill sites, etc.
- **Program related:** Innovations in planning, communication, monitoring and financing the sanitation program with more effective IEC strategies are needed to ensure faster and sustainable implementation of the sanitation program.
- **Other areas that impact sanitation sector:** Initiation of impact studies on the importance of sanitation interventions in the areas of cognitive development of children, nutritional status, other health and disease indicators, education: drop out and enrolment rate, water quality improvement, cost benefit analysis (increase in income, reduction in loss of man-days), overall child development, women empowerment, etc. Initiation of other R&D initiatives in the excreta decomposition technology for railway coaches, developing standards/norms for food hygiene, using of solar/wind energy in sanitation, innovation in sanitary pad technologies and its promotion, improvement in incinerator-cost, design, standardization, disposal of used sanitary pad, school friendly waste management technologies and systems, inclusive designs for households and institutions.
- **Solid & liquid Waste Management(SLWM)** is also one area which needs to be concentrated both in implementation and R & D work. New simple methods of SLWM if worked out through R & D shall help a lot in ensuring clean environment in the rural areas. Some of the areas which need to be explored are compost technologies, Handling waste water & its re-use etc.

Availability of adequate water is a factor that influences demand for sanitation e.g. hand washing after defecation and flushing excreta require sufficient quantity of water. In turn, sanitation can impact quality of water e.g. appropriate technology, especially for pit latrines, is a must to prevent groundwater contamination. According to WHO 3.3 million people die every year from diarrhea diseases and at any time there are 1.5 million suffering from parasitic worm infections stemming from human excreta and solid wastes in the environment. As such sanitation is more important than water from the point of view of impact on the health, dignity, and quality of life of the poor. There is scope to address the linkages between sanitation and water quality and quantity through convergence with the Government of India flagship rural water program (NRDWP) which is being implemented by DDWS parallel to the TSC.

TOTAL SANITATION CAMPAIGN (TSC)

Sl.	State/District Name	Project Objectives								Project Performance							
		IHHL BPL	IHHL APL	IHHL TOTAL	SCW	School Toilets	Balwadi Toilets	RSM	PC	IHHL BPL	IHHL APL	IHHL TOTAL	SCW	School Toilets	Balwadi Toilets	RSM	PC
1	ANDHRA PRADESH	6636229	3629688	10265917	575	115908	14990	220	0	4339007	2188513	6527520	914	100379	5810	418	23
2	ARUNACHAL PRADESH	115560	18301	133861	318	3944	1866	39	0	41807	10894	52701	59	3759	1615	5	0
3	ASSAM	2220017	1161020	3381037	211	34772	16819	115	0	831157	238748	1069905	21	31963	10497	58	122
4	BIHAR	6195779	4975535	11171314	2362	76581	6595	364	0	1951525	613640	2565165	619	43895	1102	380	720
5	CHHATTISGARH	1568600	1823853	3392453	618	52338	10211	100	6	941900	759264	1701164	184	48287	9849	66	11
6	D & N HAVELI	2480	0	2480	12	0	0	1	0	37	0	37	1	0	0	0	0
7	GOA	17935	27388	45323	150	731	547	3	0	16231	17522	33753	0	446	58	0	0
8	GUJARAT	2046857	3331630	5378487	1671	28617	23460	168	0	1787805	2000252	3788057	1737	24523	22739	365	2
9	HARYANA	636940	1458494	2095434	1335	9160	7599	16	1	557257	1273230	1830487	1096	7291	6028	94	9
10	HIMACHAL PRADESH	218154	632583	850737	1229	17863	10408	59	0	199366	641263	840629	304	10448	4290	19	2
11	JAMMU & KASHMIR	703071	767732	1470803	1080	27277	1070	99	4	178411	91110	269521	647	14095	92	12	0
12	JHARKHAND	2327306	1402189	3729495	1203	42687	11472	249	0	1256425	162724	1419149	135	36893	5293	226	516
13	KARNATAKA	2889224	2981691	5870915	1305	39267	26353	290	6	1586081	1626961	3213042	654	38116	25804	212	14
14	KERALA	961831	111911	1073742	1090	3600	4957	98	0	958203	142883	1101086	883	3595	4494	66	24
15	MADHYA PRADESH	3614346	4852847	8467193	1602	137730	27595	356	29	2369977	2695366	5065343	758	89608	19973	363	28
16	MAHARASHTRA	3623439	6104904	9728343	8210	87452	60076	329	26	2201132	3925533	6126665	4195	84318	56662	1507	48
17	MANIPUR	194887	68367	263254	386	3919	1201	35	0	23549	18493	42042	193	2860	902	17	3
18	MEGHALAYA	216333	85500	301833	290	10331	1851	36	0	72695	42040	114735	73	3408	404	4	0
19	MIZORAM	89903	18975	108878	560	3219	1543	20	0	59679	16861	76540	489	3219	912	0	0
20	NAGALAND	180092	31254	211346	275	2972	1302	29	0	69310	6038	75348	178	1835	799	11	0
21	ORISSA	4485050	2571598	7056648	818	70663	25160	289	0	2301475	865138	3166613	58	65961	20161	283	718
22	PUDUCHERRY	18000	0	18000	0	26	16	3	0	2268	0	2268	30	0	16	2	0
23	PUNJAB	623198	544370	1167568	411	7464	3274	81	0	197557	535175	732732	65	7254	1037	7	0
24	RAJASTHAN	1960903	5023430	6984333	1544	68134	21198	317	0	731434	2397072	3128506	406	57918	11107	214	42
25	SIKKIM	51302	35712	87014	789	1604	340	12	0	58104	36496	94600	913	1606	416	0	0
26	TAMIL NADU	4422133	4244955	8667088	1438	53678	27970	249	0	3529837	2729055	6258892	1546	39084	24051	194	65
27	TRIPURA	454757	169017	623774	226	6833	6024	35	0	428285	136423	564708	162	4592	5509	143	432
28	UTTAR PRADESH	8303794	12372693	20676487	2366	269860	107302	404	24	6362377	6978509	13340886	2379	225601	86629	259	80
29	UTTARAKHAND	441631	444670	886301	470	3925	1601	71	10	255729	238585	494314	65	2570	299	24	1
30	WEST BENGAL	6619158	4997498	11616656	1140	134081	84168	409	32	4837507	2193338	7030845	738	79179	20433	353	229
30	Total	61838909	63887805	125726714	33684	1314636	506968	4496	138	38146127	32581126	70727253	19502	1032703	346981	5302	3089

Annexure-II

TOTAL SANITATION CAMPAIGN (TSC)

(Rs. in Lakhs)

Sl. No.	State Name	Total Projects Outlay	Approved Share			Release of funds				Expenditure Reported			
			Centre	State	Benef	Centre	State	Benef	Total	Centre	State	Benef	Total
1	ANDHRA PRADESH	164613.07	95507.49	50254.63	18850.94	46733.53	34267.56	13832.08	94833.17	31273.01	27073.10	10098.76	68444.87
2	ARUNACHAL PRADESH	6073.86	4128.04	1485.92	459.90	2578.31	414.65	102.92	3095.88	1747.08	403.81	88.05	2238.94
3	ASSAM	80110.33	54342.19	18887.70	6880.44	26793.36	6678.49	1795.57	35267.42	17313.70	5453.68	1596.59	24363.97
4	BIHAR	196711.08	124938.75	51739.35	20032.98	42464.73	13906.23	3307.29	59678.25	32888.69	12224.55	2888.16	48001.40
5	CHHATTISGARH	61938.92	40257.32	16502.53	5179.07	22906.39	12844.87	2077.19	37828.45	19739.10	9377.67	1953.20	31069.97
6	D & N HAVELI	78.64	70.97	0.00	7.67	3.15	0.00	0.00	3.15	1.67	0.00	0.00	1.67
7	GOA	972.92	574.40	266.30	132.22	172.32	112.86	0.00	285.18	149.93	97.97	0.00	247.90
8	GUJARAT	58841.32	36013.12	14882.98	7945.22	24199.57	11868.39	6853.92	42921.88	21262.08	8951.57	4028.17	34241.82
9	HARYANA	21350.38	12749.85	5308.03	3292.50	9044.34	4408.53	3515.55	16968.42	7454.62	3127.75	2277.04	12859.42
10	HIMACHAL PRADESH	15041.47	9998.66	3793.53	1249.28	4424.88	1737.10	636.91	6798.89	3112.01	1165.31	409.98	4687.30
11	JAMMU & KASHMIR	32835.87	22460.89	7890.67	2484.31	4483.33	1914.09	788.82	7186.24	3604.15	1791.07	481.82	5877.04
12	JHARKHAND	76801.39	49269.83	20164.90	7366.66	20170.50	17262.37	2258.03	39690.90	15871.03	8759.20	1669.50	26299.72
13	KARNATAKA	93854.26	58961.90	24443.30	10449.06	21035.21	9156.11	16355.15	46546.47	16106.48	8268.17	3798.53	28173.18
14	KERALA	21512.48	11358.22	5258.10	4896.16	8438.23	3668.40	6400.32	18506.94	7367.20	3135.80	5542.44	16045.44
15	MADHYA PRADESH	150970.22	99149.23	38002.94	13818.05	48466.94	16782.92	9891.32	75141.17	40033.44	14910.03	6191.22	61134.69
16	MAHARASHTRA	128735.43	82370.84	32542.56	13822.03	43995.48	22408.06	9474.38	75877.92	37210.11	16891.40	5548.75	59650.26
17	MANIPUR	9482.30	6458.46	2243.71	780.13	2348.56	475.47	119.22	2943.25	1350.62	336.71	99.19	1786.52
18	MEGHALAYA	11193.33	7730.66	2689.28	773.39	3183.31	946.13	199.03	4328.47	2512.45	686.94	123.58	3322.97
19	MIZORAM	4651.55	3150.70	1079.64	421.21	2218.70	602.65	274.54	3095.89	1892.24	583.92	266.08	2742.23
20	NAGALAND	6811.77	4675.53	1553.86	582.37	1824.88	407.23	159.71	2391.82	1703.08	402.63	159.47	2265.19
21	ORISSA	131320.04	84902.24	33617.43	12800.37	36818.76	13467.64	4378.91	54665.31	25477.33	9299.66	4332.79	39109.78
22	PUDUCHERRY	516.78	453.08	0.00	63.70	94.84	0.00	0.00	94.84	79.07	0.00	0.00	79.07
23	PUNJAB	21444.64	13682.20	5578.11	2184.33	1808.25	676.72	66.29	2551.26	876.57	232.40	53.82	1162.78
24	RAJASTHAN	79488.97	51746.47	20822.66	6919.84	20780.82	7416.25	2384.28	30581.35	14713.96	5401.64	1473.06	21588.66
25	SIKKIM	2059.79	1264.22	520.35	275.22	1123.07	1051.82	729.45	2904.34	1010.21	1051.82	729.45	2791.48
26	TAMIL NADU	101108.75	60823.80	25801.72	14483.23	32528.73	18649.26	11050.92	62228.92	31786.91	14742.10	9437.52	55966.53
27	TRIPURA	9071.25	5527.36	2279.32	1264.57	4634.96	1718.10	1388.93	7741.98	3567.58	1496.09	932.65	5996.31
28	UTTAR PRADESH	301053.36	177937.68	91454.50	31661.18	117760.41	108099.67	32821.83	258681.91	104168.95	85858.77	24000.99	214028.71
29	UTTARAKHAND	14010.80	9461.28	3238.01	1311.51	3694.95	1113.99	541.93	5350.87	3037.71	927.72	515.31	4480.74
30	WEST BENGAL	159988.79	97415.41	38277.39	24295.99	32330.50	10855.97	21994.94	65181.40	25717.46	9641.05	21710.71	57069.22
	TOTAL :-	1962643.76	1227380.79	520579.43	214683.54	587061.01	322911.52	153399.43	1063371.96	473028.44	252292.54	110406.80	835727.78

Annex-III

State-wise Opening Balance, fund released and Un-spent balance

<u>Sl.</u>	State Name	Opening Balance	Release During Year	Exp. During Year	Balance During Year
1	ANDHRA PRADESH	9884.81	6940.00	1170.42	15654.39
2	ARUNACHAL PRADESH	1178.68	8.50	340.00	847.18
3	ASSAM	6724.32	4805.48	1717.16	9812.64
4	BIHAR	9258.77	5629.88	4694.29	10194.36
5	CHHATTISGARH	1135.77	2739.79	571.34	3304.22
6	D & N HAVELI	1.48	0.00	0.00	1.48
7	GOA	22.39	0.00	0.00	22.39
8	GUJARAT	1407.44	2346.18	642.30	3111.32
9	HARYANA	1388.32	605.00	266.25	1727.07
10	HIMACHAL PRADESH	926.35	753.00	327.07	1352.28
11	JAMMU & KASHMIR	945.10	0.00	2.68	942.42
12	JHARKHAND	3502.74	2733.49	1553.03	4683.20
13	KARNATAKA	4190.70	2229.33	1450.01	4970.01
14	KERALA	583.00	585.65	82.71	1085.94
15	MADHYA PRADESH	5864.80	7201.30	3701.53	9364.57
16	MAHARASHTRA	1525.51	6455.85	851.62	7129.74
17	MANIPUR	1218.31	80.30	300.66	997.94
18	MEGHALAYA	1060.57	381.40	765.58	676.38
19	MIZORAM	486.46	0.00	98.13	388.33
20	NAGALAND	132.36	111.99	108.83	135.51
21	ORISSA	10838.08	3150.27	2095.97	11892.38
22	PUDUCHERRY	18.68	0.00	2.91	15.77
23	PUNJAB	793.66	285.96	128.69	950.93
24	RAJASTHAN	4751.23	2789.80	1194.27	6346.76
25	SIKKIM	0.00	112.86	0.00	112.86
26	TAMIL NADU	2538.92	0.00	1599.29	939.62
27	TRIPURA	753.64	339.62	25.88	1067.38
28	UTTAR PRADESH	4488.58	11298.00	1846.54	13940.04
29	UTTARAKHAND	613.55	437.41	282.92	768.04
30	WEST BENGAL	5456.52	4163.75	2296.54	7323.73
	Grand Total	81690.72	66184.81	28116.62	119758.92