Sujal

Pilot Project on Safe Drinking Water
About Dishantar:

Dishantar firmly believes that “Democracy works when citizens and the most marginalized people have the capability to ask questions, seek accountability from the state and participate in the process of governance. Democracy becomes meaningful when people can shape the state and the state, in turn, creates enabling social, political, economic and legal conditions wherein, people can exercise their rights and realize the freedom from fear and want”.

Dishantar is a grassroots NGO presently working in Ratnagiri district of Maharashtra. The organization’s goal is to empower the underprivileged community in their drive for freedom and development. The organization has brought forward model Adivasi hamlet i.e. Nirbade Khindwadi in Chiplun block of Ratnagiri district. Dishantar has supported the Nirbade Khindwadi’s efforts for getting mainstreamed. Before 12 years, this hamlet was living in medieval ages and today they are taking privileges of hi-tech goods and services e.g. water purifiers, solar lights, POS banking service and so on. Few other hamlets in the district are trying to follow this model with Dishantar’s hand-holding support.

Dishantar is also working with the primitive shepherd (Dhangar) community which is far away in terms of distance and far behind in terms of development. They do not have access to basic public amenities even after 68 years of India’s Independence. Dishantar is trying to mainstream them in development by increasing their access to education, public amenities and enhanced standard of living.

Other activities of Dishantar include supporting education of underprivileged children through Course Book Banks for college students and provision of scholarships for bright needy students. We have been engaged in Adolescents’ capacity building to make them competent enough to shape their future in right directions with due recognition to Indian values.

Health initiatives for rural community especially for women and children are also conducted. Dishantar’s health camps are not just a one day event but the community who seem to get further treated or needing surgery are supported by making financial provisions in support with medical trusts in metro cities.

Development initiatives cannot be succeeded without active participation of women and hence Dishantar conducts activities for economic and social empowerment of women. Natural resource based livelihood activities for sustainable development are an integral part of Dishantar’s initiatives.
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Background:

While part of our nation lives in the 21st century, another part is still living in the medieval ages. No nation can progress much beyond the "national average". When these differences are too wide, they create not only social tensions but slow tensions slow down progress and make it expensive, as we are finding. In Ratnagiri district, Adivasi Katkari (ST) and Dhangar (shepherd - NT) communities are inhabitants of Sahyadri mountain Ranges. These communities are still deprived of access to basic amenities and infrastructures e.g. clean water, shelter, roads, electricity, education, health care and gainful employment.

Nirbade Rajawadi prior to Dishantar’s intervention:

We have initiated our social contribution from hamlets of Katkari community. We have been supporting them in strive for economic and social development. We have witnessed their journey from 2002, when they were living in acute poverty. There was no electricity, no concrete houses. They used to live in thatched houses. All the community members (male & female) were alcoholic. Most of them started their morning with a bottle of liquor. In the evening, it was very tragic scene in their hamlet. You could see typical scenes i.e. men beating or abusing their wives or children, quarrels amongst men or women and so on. It was difficult to step in their hamlet after 7.00 pm. Their primary livelihood activity was farm and non-farm labour especially for woodcutting in forests. At that time, they never got full wages. Their daily wage was around Rs. 100/-, but they used to get Rs. 25/- to Rs. 50/- and for rest amount they would be given liquor (alcohol). Deliberate efforts were made by the superior class people to keep them alcoholic as it was easy to cheat them or get much work done by them, paying meager amounts.

Dishantar’s Efforts for Community Betterment:

On this background we have initiated our work in Dalvatne, Nirbade, Moravne, Akle, Kadvad, Kutre and so on where this community was inhabited. The interventions were small. We used to provide them warm support through health
camps, distribution of clothes, utensils, blankets, sweets & fruits for children, seeds for their backyard gardens, etc.. In some hamlets, we got their children admitted in schools, tried to make available their caste certificates from Revenue Dept. & follow up the hamlet development issues. Based on their expectations and needs, we have tried to support them. This helping hand was not just to support them but to make them aware about their inner strength and their rights as citizens.

Today, after 12 prolonged years, we can see some noteworthy changes in their hamlets. E.g. Nirbade Katkari hamlet has turned out to be an ideal Katkari Hamlet today. Not only materialistic but we can see the change in behavior pattern of the community. Almost 95% hamlet is non-alcoholic. All the children above 3.5 years go to Z.P. schools. 3 youngsters are taking higher education in colleges; one of them is studying software engineering degree. 94% households have concrete houses through Indira Awas Yojana. 7 houses are in the process of construction under schemes for Adivasi Community.

**Demographic feature:**

Nirbade Rajawadi hamlet is in Chiplun block of Ratnagiri district. It is at the distance of 20 kms. from Chiplun block place. The total population of the hamlet is 117 out of which 56 percent (66) is male and 44 percent (51) is female.

**Issue:**

Widespread water pollution and contamination is making much of the available water unsafe for consumption. Both negligence of authorities and lack of willingness of people are responsible for deteriorating quality of water resources. Serious illnesses observed in the intervened area, transmitted via polluted drinking water include **Cholera, Typhoid fever, Hepatitis A** and **Dysentery**.

Underprivileged community becomes the first victim of the above diseases due to lack of proper hygiene and sanitation. Every year they suffer from water transmitting diseases like cholera, typhoid, hepatitis A and dysentery amounting to expenses around 2500 per family. Being economically weaker, diseases increase the borrowings of the community and they have to miss their daily wages.

Hence, we felt the need to provide them domestic water purifiers (DWP). Making the DWPs available was not a difficult task but making the plan successful and sustainable was a difficult task as we had to intervene in the day to day life of the community and make them cultured enough to follow the better hygienic practices at household level. So we have designed definite plan for conducting this pilot project.
**Objectives of the Pilot Project:**

- To bring change in drinking water practices of rural community through comprehensive awareness creation and capacity building.
- To facilitate access to safe drinking water and adopt good hygienic behaviors.
- To aware the rural community regarding the importance of safe drinking water and provide primary inputs to facilitate the micro plan.
- To exercise control over prevailing drinking water related diseases.

**Main activities:**

- Mobilization for active community involvement
- Organize meetings with hamlet members.
- Frame out general rules and regulations to govern the Pilot Project.

**Project Components:**

- Awareness about Safe Drinking Water
- Installation of DWPs
- Hand-holding support for O & M
- Capacity Building of Community for effective use of DWP

**Implementation:**

Through this initiative low cost, without electricity domestic water purifiers have been connected to the 19 households (26 families) of Nirbade Khindwadi. Data collection has been made with regards to water transmitting diseases in the hamlet (type of diseases, expenses of the families on treatment and the frequency of diseases). The regular support and guidance has been provided to make this micro plan success. After 6 months, data has been collected which has brought forward the significance of safe drinking water. The responses of the beneficiary HHs were awesome: “Now, we drink only purified water”, “we take the water to farms, school
even when we visit block place”, “we don’t like any other water than purified”, “We have seen the first monsoon when there are no diseases in our families”, “our expense on health care has been reduced”.

**Sustainability:**

Technical guidance and training has been imparted to youth members from the hamlet. Quarterly visit of the technician takes place and Dishantar do have ongoing interventions in the hamlet. These all led to the successful implementation of this pilot project.

**Domestic Water Purifier Product Description:**

![Image of Domestic Water Purifier Product Description]
Outcome:

This project brings health and joy to underprivileged rural households, enabling and empowering them to improve their quality of life, offering them independence from the water borne diseases and providing substantial fiscal savings to them.

Photograph:

Media Coverage: