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Bihar Technical Assistance Support Team (BTAST)

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## INTERVIEW

### To undertake development interventions in state like Bihar, it's best to partner with the government

*Prakash Kumar, Team Leader, Bihar Technical Assistance Support Team (BTAST), a health sector reform programme in Bihar supported by DFID-UK, says that the Sector Wide Approach to Strengthening Health (SWASTH) programme has come a long way since it was conceptualised in 2008 and all major indicators of health, social welfare & public health department have improved in the state. Excerpts from the interview:*

**OneWorld:** The SWASTH programme is embedded in the government system. How has been the experience of working closely with the government?

**Mr Kumar:** SWASTH was conceptualised in 2008 to support Bihar government to have a coordinated approach on improving the state of health, nutrition, water and sanitation in the state. The actual implementation of the programme started in 2010.

It was a first of its kind experiment where everything -the annual plan, log frame indicators, the targets, and the results-had to be worked together with the state counterparts.

It was not easy in the beginning and also the government counterparts had no prior experience of working with development partners in such a project. Initially, the government counterparts wanted to know about the value addition to the ongoing programmes.

So, after initial hiccups, the government started strengthening the main objective of the programme instead of creating something new or work in a parallel way. This made things easier.

**OneWorld:** How has the SWASTH programme helped enhance health, nutrition, or WASH in Bihar?

**Mr Kumar:** Yes, there have been many substantial changes from 2010 to 2016. The major indicators of health, social welfare & public health department have improved.

One example is that of having more Additional Primary Health Centres (APHCs) at the block level so that the burden on PHCs could be reduced. Today, about 430 APHCs are residing in the state, with one PHC at the block level and catering to a population of 1,50,000-2,00,000. Now, the State Health Society has got APHCs operational. We have supported these health facilities from the beginning by doing the gap analysis.

**OneWorld:** How did you address the challenge of human resource management for such large infrastructure?

**Mr Kumar:** Earlier, the state did not have its own database for human resources working in the health



sector. This programme has successfully created a complete Human Resource Information System (HRIS) for the state. The database prepared by the BTAST has been fully handed over to the state and the state is now regularly updating the database. Now, the decision makers have the numbers of staff working here along with their domains. It has made decision making easier.

We also helped the state in addressing the shortage of nursing faculty with the help of virtual classrooms. Another big contribution to the state has been continuous capacity building in the last six years. The capacity building is not only on the clinical and diagnostic side but also on the system strengthening like accounting and auditing.

We also supported creation of skills labs where in-house training is provided to the nursing staff. Two such nursing labs are operational. One is in Muzaffarpur medical college and the other is in Bhagalpur medical college.

After the success of these two skills labs, the state decided to have two more skills labs. One at Bhagalpur and other at Gaya, and now four skills labs are fully operational in the state.



**OneWorld:** How did you address the infrastructural gaps?

**Mr Kumar:** We are supporting six medical colleges because there are a lot of infrastructural gaps in them. We are supporting medical colleges with financial assistance of Rs 170 crore to fill those gaps, so that they can get recognition from Medical Council of India.

When we started supporting the Government of Bihar in 2010, the total number of seats available for MBBS was 275, but with our regular support and advocacy the number has increased to 550, raising demand for better infrastructure.

BTAST and DFID supported the state government in its plan to set up two medical colleges. One of them, Nalanda Medical College is now fully operational with financial assistance of Rs 150 crore.

On the social welfare front, some of the notable interventions are the conditional cash transfers. This is being implemented in Gaya with support of the Government of Bihar wherein the pregnant women and children are the beneficiary of the programme.

**OneWorld:** What have been the achievements on the nutrition front?

**Mr Kumar:** We are supporting the Bihar Government on nutrition initiatives because the state has a large number of children who are severely malnourished. We are also supporting the Community-Based Management of Acute Malnutrition (CMAM) initiative in Purnea district. We have already identified 5,500 children and their treatment will start from next month.

This is the largest treatment of the malnourished in the world, and after the success of this pilot, the state government will scale up with its own resources.

Besides, we are engaged in capacity building of the social welfare staff. We have planned regular orientation and refresher courses for all the frontline functionaries including Anganwadi Sevikas, Child Development Project Officers (CDPOs), Lady Supervisors, District Programme Officers (DPOs), and also the state government staff.

**OneWorld:** What kind of work has been done in the area of water and sanitation?

**Mr Kumar:** We have successfully advocated to the state government the benefits of adopting community participation as one of the major strategies before going in for toilet constructions. This has also helped in community sensitization and also in sensitization of various stakeholders on similar lines to support the state government for piloting such initiatives in Bihar. Another major support that we have provided to the

Public Health Engineering Department has been for the ranking of water testing and also geo-tagging of the sources. Now, the state has got data of all the sources with water quality to prepare the mitigation plan for safe water supply to the community.

One of the very important objectives of this programme was also to create an enabling environment so that other bilateral agencies or funding agencies come and support the Government of Bihar on this development agenda.

This was also one of the major objectives of the programme because the government counterparts did not have any prior experience of having any interaction with funding agencies. This programme also created a sensitization and capacity building environment.

**OneWorld:** What have been the lessons?

**Mr Kumar:** SWASTH is a very good programme. This is the way forward, if other bilateral or donor agencies want to come to Bihar. They have to plan development interventions in complete partnership with the Government of Bihar. Working in parallel is not going to help and be sustainable. So, that's the learning from this programme. Working with the system or government takes some time in the beginning, but once it is embedded in the system it's going to sustain itself and cover a larger number of groups in the future.

The other key learning is that the economics of scale-up are very important. Having a small pilot without going through the economics of the scale up is not going to help a state like Bihar because it has a huge population. So, when other agencies or bilateral agencies coming to work in Bihar, they have to be very careful about economics while doing any pilot. We did exactly that.

The third learning has been for the state government, which has understood the advantage of working with all the stakeholders. Now Bihar is the first state where Bihar Vikas Mission (BVM) has been established. BVM will be the nodal agency for all development work in the state.

I can see that in the next 2-3 years BVM will be playing a larger role in supporting all departments to take up the development agenda to achieve the targets. I can also see very clearly that SWASTH has a role for these three departments.

So, we are very happy that we are exiting this programme when there is a body like BVM to be the nodal agency for all development work in the state. So, this is the way forward and the last thing which I want to mention is that any bilateral agencies if they want to come and work in Bihar, then they should first start consultation with BVM, which will give them a very good beginning and understanding of the work and sustainability to their programmes, too. □

## FEATURED UPDATES

### DFID-India applauds WDC and SWASTH for addressing Gender and VAW issues

*Women Development Corporation (WDC) hosted a meeting in the city on March 8, 2016, to welcome Marshall Elliott, Head of Office, DFID-India, to discuss issues regarding women's empowerment and Violence Against Women (VAW).*

THE Government of Bihar (GoB) and the Women Development Corporation (WDC) hosted a meeting in the city on March 8, 2016, to welcome Marshall Elliott, Head of Office, DFID-India, to discuss issues regarding women's empowerment and Violence Against Women (VAW). Marshall was on a visit to review the progress of the interventions and engage with key departments and stakeholders about DFID-India's support in Bihar. Among those present on this occasion were Vandana Kini, Principal Secretary, Social Welfare Department; V N Sinha, Hon'ble Justice (Retired); Om Prakash, Member Secretary, State Legal Services Authority, Bihar; SWASTH nodal officials from Women Development Corporation (WDC), and members from Bihar Technical Assistance Support Team (BTAST).

Dr N Vijaya Laxmi, Managing Director, WDC, made a presentation about the multiple interventions including a package of VAW interventions; Gram Varta through the existing Self Help Groups (SHGs), and setting up of a Gender Resource Centre that are being implemented by WDC under the Sector Wide Approach to Strengthening Health (SWASTH) programme.

She acknowledged BTAST's support to WDC in conceptualising and supporting implementation of the comprehensive approach to address gender inequality and VAW issues in Bihar through deep engagement with

multiple departments (including health, and education,) and other stakeholders (including police and judiciary) using both responsive and preventive approaches. She also appreciated the role of BTAST in supporting WDC in adopting a proactive approach to implement women specific legislations like the Protection of Women from Domestic Violence Act (PWDVA), Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, Protection of Children from Sexual Offences Act (POCSO), in the state.

Marshall mentioned in his speech that gender and VAW and gender have been the central focus for DFID country programmes including SWASTH programme in Bihar. He was glad to note that Bihar has made rapid advancement



on gender issues, which is reflected in the improved women's empowerment indicators and reduction in the incidence of spousal violence (as per the latest NFHS 4 survey). He was especially impressed with the cooperation between various sectors including police, judiciary and social sectors like health, education, etc.

Whilst expressing pleasure with the fact that the Bihar Government has made progress in institutionalizing majority of interventions through their own efforts, he also emphasised the need to focus on sustainability of interventions too. Applauding BTAST, Mr. Marshal added that the Independent Commission for Aid Impact – an

organisation that undertakes independent review of UK aid spending and its contribution to development results – had appreciated DFID's work in Bihar on VAW in their recent learning review conducted in Bihar in Nov, 2015.

Hon'ble Justice (Retired) Mr V N Sinha also expressed his satisfaction with the integrated working of Bihar Technical Assistance Team (BTAST), WDC and the judiciary and urged DFID to continue supporting the state. In her remarks, Vandana Kini, Principal Secretary, Social Welfare Department, also commended BTAST for its support to the department and expressed the need for all development partners to align with the priorities of the state. □

## OTHER UPDATES

### WDC sensitises teachers on gender issues

*The training to reorient teachers on gender issues under the Gender Equity Movement in School programme was organised by the Women Development Corporation (WDC).*

**T**HE recently held gender sensitisation training for teachers in Patna got an enthusiastic response from the participants. The training to reorient teachers on gender issues under the Gender Equity Movement in School programme was organised by the Women Development Corporation (WDC) on 2-4 March, 2016.

The participants were mostly teachers from all the 38 districts of Bihar who had received prior training related to Gender Equity Movement in Schools and staff from WDC. The training started with the distribution of pre-test sheets and setting of rules regarding time management and discipline.

After Rupesh Kumar Sinha, Programme Director, WDC, opened the workshop proceedings, Mohd Ezaz Ahmad, Project Manager, WDC, gave an overview of the collaboration between WDC and the Education Department. The objective and the background of the programme were explained by Madhuri Das of the Bihar Technical Assistance Support Team (BTAST). The first day closed with presentations on gender issues, gender stereotyping, patriarchy, division of labour in society etc.

On the second day, the training focused on gender, power and human relationships. Dr Seema Kumari from WDC spoke on gender-based violence, gender privileges and restrictions and the power play in relationships.



The highlight of the last day was Krishna Mohan Sinha's talk on how assertive communication skills can help in emotional management along with violence and conflict management. □

### LISTEN



#### PROVISIONS OF DOMESTIC VIOLENCE ACT (A Radio Drama)

The radio programme features a drama on key provisions of Protection of Women from Domestic Violence Act (PWDVA), 2005. It talks about the role of District Protection Officers (DPOs) in providing relief and support to aggrieved women.

URL: <http://edaa.in/edea/Provisions-of-Domestic-Violence-Act>



## Need to integrate climate change and disaster management with health and nutrition in Bihar

*A state level workshop in Patna underlines the importance of integrated approach towards health, nutrition, water & sanitation, and disaster management.*



A state level workshop was organised in Patna on 9th March on Integrating Climate Disasters with Health and Nutrition in Bihar by TARU Consultancy under the Sector Wide Approach to Strengthening Health (SWASTH) programme of Government of Bihar (GoB) and DFID, UK.

The workshop was organised in the backdrop of the efforts being made by the Bihar Technical Assistance Team (BTAST) towards linking health, nutrition and water and sanitation (WATSAN) issues with climate related disasters. For example, Bihar is extremely vulnerable to floods with 15 out of its 37 districts being the worst affected, and the increasing frequency and severity of such natural disasters are being seen as the consequences of climate change.

Experts and policymakers from the field of health, nutrition, water and sanitation, disaster management; State Government officials and members of BTAST attended this workshop. The discussion aimed to identify and address the issue of climate change as an emerging and significant factor contributing to increasing the disease burden because it multiplies traditional risk factors.

Prabhakar Sinha, Director, WASH, BTAST, began the discussion by welcoming the participants and gave an insight into the impact of climate change, especially on the health and nutrition of women and children. Shyamala Mani from the National Institute of Urban

affairs said that climate change is a major threat to the urban areas owing to the high population density and the vulnerability of women and children. She said that climate change not only affects food availability, conservation, access and utilization but also increases the prevalence of diseases from water, food and vectors.

Prakash Kumar, Team Leader, BTAST talked about the initiatives taken under the SWASTH programme on climate disasters and health. He said that though climate change is considered as a distal determinant of public health, it is fast gaining in importance. He also highlighted various limitations to effective implementation of the initiatives in Bihar, due to poverty, gender issues and overall governance challenges.

Anup Sarkar from the State Disaster Management Authority, Bihar and other experts from the State Government reflected on the lack of an effective policy to deal with climate change and its health implications. Sarkar spoke about the initiatives that are being launched in the state to address the issue of climate change and also shared about the design of disaster management plan for all 38 districts of Bihar.

Towards the end of the workshop Dr Nitish Dogra, Sector Adviser (Health & Nutrition) from TARU Consultancy, emphasized the need for a paradigm shift in health planning from the point of vulnerability, climate resilience, disaster preparedness and development of robust climate risk early warning systems. □

## BTAST releases DLSS data at cross-sectoral knowledge sharing workshop

*The findings of DLSS survey show that Bihar has made progress in achieving key development indicators on health, nutrition and water, sanitation and hygiene (HNWASH).*

**B**IHAR Technical Assistance Support Team (BTAST) released the key findings of District Level SWASTH Survey (DLSS) at a cross-sectoral knowledge sharing workshop held in Patna today. The findings of DLSS survey show that Bihar has made progress in achieving key development indicators on health, nutrition and water, sanitation and hygiene (HNWASH).

Through DLSS, BTAST also monitored the progress of nine high priority districts supported under Sector Wide Approach to Strengthening Health (SWASTH) programme of the Government of Bihar, which is supported by the Department for International Development (DFID). The results of the survey in these nine districts show how SWASTH interventions have catalysed a change leading to appreciable progress in the areas of HNWASH.

DLSS covered 77,748 households across 38 districts of the state. If compared to NFHS-IV, the sample size of DLSS is more than double.

This survey captured information on the status of selected indicators at the state and district level, focussed on the socio-economic-demographic status of the population; knowledge, practices and perceptions of women, unmarried adolescent girls and male decision makers of the households on maternal and child healthcare and services; maternal mortality; and violence against women.

The survey also covered information on enabling environment for health and hygiene, access to drinking water, use of toilet facilities and services provided by

health and Integrated Child Development Services (ICDS) facilities and utilisation of the services offered under Village Health Sanitation & Nutrition Day (VHSND) by the target groups. The nutrition status of children under 5 years of age was also measured through anthropometric methods.

The key findings of DLSS show reduction in Bihar's Crude Birth Rate to 24.8 per thousand in 2015-2016 from 27.8 per thousand as per the Census of 2011. Infant Mortality Rate (IMR) and Under-Five Mortality Rate (U5MR) is estimated 47.8 and 58 per thousand live births respectively and there is a slight reduction as compared to Annual Health Survey 2012-2013.

The state's progress on health indicators reveals that Ante Natal Check ups increased by 23 per cent (from 59 per cent in 2007 – 2008 to 82 per cent in 2015-2016). According to DLSS, institutional deliveries increased to 69 per cent, which were 28 per cent in 2007-2008 (DLHS-3). The institutional deliveries increased by 40 per cent in rural areas and 25 per cent in urban areas.

The nutritional status of children under 5 years was measured in DLSS. Data reveals that the number of underweight children reduced by 10 per cent (from 55 per cent to 45 per cent) and wasting reduced by 9 per cent (from 33 per cent to 24 per cent) if DLSS (2015-2016) findings are compared with NFHS-3 (2005-2006).

A comparison between the results of DLHS-3 and DLSS shows that 51 per cent children aged 0-23 month olds were breastfed immediately/ within one hour of birth, which was 38 per cent in 2007-2008. Similarly, colostrum feeding to newborns increased to 85 per cent from existing 69 per cent recorded during DLHS-3 In 2007-2008.

The results from WASH sector show that 97 per cent households have improved drinking water in Bihar. In urban areas 30 per cent households have access to toilet facility. However, the situation is poorer in the rural areas, where only 20 per cent households are using improved toilet facility.

The DLSS data can be used for state level planning and evidence-based decision-making by development partners and the government. The data was shared at the BTAST's cross-sectoral knowledge sharing workshop, where representatives from various government departments. □



## VOICES FROM THE FIELD

### Making villages open defecation free in Bihar: A matter of effort and will

*Even for a small village like Rampur in Bihar, which houses about 35 families, it takes multi-pronged efforts to achieve ODF status..*

**P**ARAS Nath Ojha wakes up as early as four in the morning to keep tight vigil in Rampur village, Buxar, along with a small contingent of villagers armed with whistles and torches. What they do in the early mornings and also late evenings is very unusual. They stand vigil not against any law breakers, but against those who defecate in the open. Ojha heads the Nigrani Samiti (Vigilance Committee) in Rampur - a village that is populated by 35 families.

Prabhat Pheris or morning walkabouts by the Nigrani Samitis, rallies by school children and local people are being organised by Panchayats to impress upon local communities to stop defecating in the open and about the benefits of owning and using a toilet. Thanks to the active participation of the Nigrani Samiti, the Mukhiya (headman) of the village, the Gram Sabha and its several villagers, today Rampur is open defecation free (ODF). On the 21st of December the village panchayat assessed and declared itself as ODF, which is being verified by the district and state authorities.

Open defecation is widespread in Bihar as it is in many other Indian states. According to the 2011 Census, over 75% of the population in Bihar defecates in the open. The Community Led Total Sanitation (CLTS) approach encouraged by several non-governmental agencies, and supported by the Government of Bihar and most importantly adopted by Gram Panchayats has now triggered a collective behaviour change in local communities. Many other villages like Rampur are progressing steadily to become ODF villages.

The daunting task of making Rampur ODF was achieved through CLTS, wherein the community is at the centre of the sanitation campaign, and drives it to its success. Gram Panchayat leaders play a crucial role on a daily basis along with government officials in dissuading fellow villagers from defecating in the open. Out of a total of seven villages that comprise Umarpur Panchayat, Rampur is the third village that has become ODF as a result of the community actively taking responsibility for bringing about the change.



Rampur clearly is a good example of how diffusion of messages and positive deviance can encourage change. Shiv Mali, Up-Pradhan (Deputy Village Head) of Umarpur Panchayat, reports that residents of Rampur decided to make their village ODF, when they saw villages of Ahrauli Panchayat located close-by become ODF. In one of their Gram Sabha meetings, they undertook to achieve this status. "We made people swear in the name of sacred river Ganga to ensure that people collectively participate in the ODF process," he says.

Vijay Paswan, Mukhiya, confides that media reports on nearby villages being declared ODF came as a big boost in convincing the local people. "But addressing the issue of 'missing toilets' (i.e. those where incentives had been released but construction was never done) are still a challenge for us. Also many toilets constructed under previous schemes are not usable now. And unfortunately there is no provision of providing funding to people who own such toilets, to construct new ones," he says.

The CLTS approach has encouraged neighbouring villages also to raise demand for toilets. Communities



are now actively asking for toilets, instead of the government thrusting the construction of facilities on them. Brij Kishore Upadhyay, Mukhiya of the nearby Ahrauli Panchayat, who earned accolades for his efforts for making villages ODF villages, says, “Although people are now raising the demand for toilets, it is still not easy to change their behaviour.” This is the real challenge that most villages face as many in the past had continued with open defecation, despite having toilets at home.



Shri Niwas Ojha, a retired government servant and former Mukhiya, however, feels that the case of Rampur therefore is exemplary as it had the complete backing of the Panchayat members and several other villagers who were keen to see the change happen. He feels that the motivation for that was triggered through the CLTS approach, and the financial support from the government catalyzed the movement in the village. “It could not be achieved without active participation of all the villagers. If it were not for the community mobilisation, Swachh Bharat Mission-Gramin (SBM-G) would have failed to achieve the desired success. Many Panchayat members have visited individual families to counsel them and discourage open defecation. SBM-G was preceded by other ambitious schemes such as Central Rural Sanitation Programme (CRSP) and Total Sanitation Campaign (TSC), which was later renamed as Nirmal Bharat Abhiyan (NBA).

Despite these multiple efforts, the pace of the sanitation programme has remained sluggish in the state for a long time. DFID supported Bihar Technical Assistance Support Team (BTAST) in partnership with the Public Health and Engineering Department (PHED) and in agreement with the Bihar State Water & Sanitation Mission (BSWSM) signed a Memorandum of Understanding (MoU) with a non-profit organisation - Action for Community Empowerment (ACE) - to accelerate the implementation of SBM-G in project blocks through the use of participatory CLTS approach.

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Krishna Kumar, Project Manager, ACE, Buxar, says that unlike other programmes the focus of SBM-G is on community sensitisation and mass mobilisation. He says, “Earlier, the focus was on construction of toilets but the supply-driven approach failed because very little attention was given to community awareness and preferences. He adds how ‘triggering’ – a tool used in the CLTS approach – almost shocks the community into taking appropriate action by demonstrating how flies contaminate food and how in effect people then eat each other’s waste.

Other activities like the ‘walk of shame’ involve taking the community to areas where open defecation takes place frequently and encouraging a feeling of disgust amongst them about the practice. ODF status is said to have been achieved only when no visible human faeces are found on the ground anywhere in the community and its vicinity; and the community uses toilets on a regular basis. Kumar also elaborates that a community is made to acknowledge how toilets help to promote health and dignity of the community. “We highlight a toilet as a place where adults can go with dignity, and also a facility that ensures dignity and security of women,” he says.

Several villagers took an active role to ensure that no member of the community digresses from the community decision to make their village ODF. The local priest Narbadeshwar Pathak, for example, feels that given his position in the village, he had to set an example. “I started using toilet because unless I used it myself, I couldn’t ask other people to use it,” he says. He thinks toilets at homes have encouraged people to be conscious about cleanliness at homes. Many who were practising open defecation now acknowledge that this is a welcome change. Subhash Chand Yadav, a 52-year-old farmer, also a member of the village monitoring committee, who has been using a toilet for the past three months, agrees that it is an advantage for him during inclement weather like the rainy season.

Jagdish Prasad Kharwal, a 58-year-old retired teacher, says that regular usage of toilets has brought respect to the villagers, especially women. “Earlier, women would not have a full meal for fear of going out at odd hours to answer nature’s call. But with the provision of toilets at home, not only are women encouraged to eat properly which will have a positive impact on their health, but they are also within safe environs here,” he says.

Smita Kumari, a young college-going woman, agrees with this. Construction of a toilet at her home has come as a big relief to her and she says, “I would avoid going out at odd hours as I did not want to be noticed. I used to feel uncomfortable sitting in the open with men walking about in the same area.” Meera Devi, a 35-year-old mother also feels open defecation is inconvenient as well as unhealthy for women like her and her children. “It becomes really difficult during bad weather like the rainy and winter season, and it also makes our children sick.” she says. The PHED plays an important role in disbursing funds to the Panchayats that have resolved to attain ODF status. Subodh Shankar, the Sub Divisional Officer, PHED, at Buxar, says that agencies such as BTAST and ACE help bridge the gap between the community and PHED. Talking about the importance of the CLTS approach, Mobin Ali Ansari, the Deputy Development Commissioner (DDC) of Buxar, says, “We are now demonstrating the hazards of open defecation. The

community-centric approach has brought a behavioural change leading to a stage wherein people are racing towards making their village ODF.”

Making a village ODF is a daunting task. Manoj Kumar, Block Development Officer, Buxar, feels, “Only behavioural change will make the once attained ODF status long lasting.” There are several cultural reservations such the reluctance of a man in using the same toilet used by his daughter-law, which need to be addressed. The Panchayat in Rampur, through their counselling and monitoring as a part of the CLTS approach, has played an important role in this regard. Examples like Rampur demonstrate that despite challenges, it is possible to make villages, Gram Panchayats and Bihar ODF. Concerted efforts from the Government and supporting agencies to catalyse action at the local level and the will of the local communities are the essential ingredients for success. □

## FOOTNOTE

*The Sector Wide Approach to Strengthening Health (SWASTH) programme aims to improve the health and nutritional status of people of Bihar by increasing access to better quality health, nutrition, and water and sanitation services, particularly for the underserved groups. The focus of this programme is to strengthen the systems through better planning, organisational strengthening and human resource management, decentralisation and convergence among key departments. The programme also uses community level processes to manage, demand and monitor services.*

## Sector Wide Approach to Strengthening Health (SWASTH) Government of Bihar Initiative, Supported by DFID, UK

SWASTH programme aims to improve the health and nutritional status of people of Bihar by increasing access to better quality health, nutrition, and water and sanitation services particularly for the underserved groups. The focus of this programme is to strengthen the systems through better planning, organizational strengthening & human resource management, decentralization and convergence among key departments. The programme also uses community level processes to manage, demand and monitor services.

### Bihar Technical Assistance Support Team (BTAST)

Sector Wide Approach to Strengthening Health in Bihar (SWASTH)

Main Office: House No. 10, IAS Colony, Kidwaipuri, Patna - 800 001, Bihar, India.

Phone: +91 612 2535577/2523049 | Fax: +91 612 2285674

Website: <http://swasth.btast.oneworld.net/>

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