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CIVIL SOCIETY ACTIVISM AND INCLUSIVE SLUM SANITATION IN INDIA: SOME REFLECTIONS

Abstract

The paper has two inter-related objectives; first it presents a brief account, based primarily on available secondary sources, of the current status of sanitation facilities and services in urban India slums; and second, it outlines strands of vibrant civil society activism mediated through The Alliance and Shelter Associates which are actively engaged in providing inclusive sanitation facilities and services in urban India slums. The findings of Census 2011, National Sample Survey (NSS) 69th Round on urban slums in India 2012 and NSS Report No. 584: Drinking Water, Sanitation, Hygiene and Housing Condition in India (NSS 76th Round, July- December 2018) have been referred to in the paper. It emerges that the sanitation facilities in urban slums fall short to cater the needs of sanitation to slum dwellers and are in urgent need of maintenance and expansion. The paper concludes by arguing that civil society organisations (CSOs) play a vital role in assisting the state in providing inclusive urban slum sanitation.

Keywords: Sanitation, Slum, India, The Alliance, Shelter Associates.

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Introduction

In today's time the issue of sanitation has become an important agenda at the global level. According to The World Bank, 'globally 2.4 billion people live without access to improved sanitation: Almost 1 billion of these people practice open defecation. Despite significant gains - almost 2.1 billion people gained access to toilets or latrines since 1990 - sanitation was one of the most off-track Millennium Development Goals (MDG) globally. Only 68% of the world's population has access to improved sanitation, but 70% of the Sub-Saharan Africa population and 53% of South Asia still lack access. The world missed the MDG target for sanitation by almost 700 million people'.¹ Under the rubric of

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Global Water and Sanitation Initiative, various global institutions and organizations like World Health Organization (WHO), and now jointly by WHO and the United Nations Children's Fund (UNICEF) have committed themselves towards providing affordable and inclusive sanitation facilities to the people. Such a move is warranted on priority basis as of November 16, 2017 United Nations (UN) notes that 2.4 billion people lack access to basic sanitation services, such as toilets or latrines, more than 80 per cent of wastewater resulting from human activities is discharged into rivers or sea without any pollution removal and each day, nearly 1,000 children die due to preventable water and sanitation-related diarrhoeal diseases.² Some of the global major initiatives taken in this regard include the International Drinking Water Supply and Sanitation Decade (1981-1990), importance of sanitation in Agenda 21, Bellagio Principles for Sustainable Sanitation (2000), Millennium Development Goal (MDG) # 7 and Sanitation (2000), International Year of Sanitation (IYS) 2008 and Sustainable Development Goal (SDG) # 6 and Sanitation (2015) and South Asia Conference on Sanitation (SACOSAN) at regional level. The Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS) as a UN-Water initiative implemented by World Health Organization (WHO), UN-Habitat's water and sanitation (WATSAN) programmes and Water, Sanitation and Hygiene (WASH) by UNICEF are major initiatives taken for universal access to sanitation services primarily focusing on the disadvantaged and marginal sections of the society in terms of class, race and ethnicity and gender. Inclusive sanitation for the World Bank is manifested in 'Citywide inclusive sanitation which means that everybody benefits from adequate sanitation service delivery outcomes.'³

In India, the issue of sanitation has resurged strongly at the forefront of both the official as well as public discourses primarily as a consequence of Swachh Bharat Mission (SBM) which was launched by the Prime Minister of India on 2nd October 2014. The Swachh Bharat Mission emanates from the vision of the Government articulated in the address of the President of India in his address to the Joint Session of Parliament on 9th June 2014: "We must not tolerate the indignity of homes without toilets and public spaces littered with garbage. For ensuring hygiene, waste management and sanitation across the nation, a 'Swachh Bharat Mission' will be launched. This will be our tribute to Mahatma Gandhi on his 150th birth anniversary to be celebrated in the year 2019." The aim of the SBM is to achieve Swachh Bharat by 2019, as a fitting tribute to Mahatma Gandhi on his 150th birth anniversary. The SBM has two sub-missions, the Swachh Bharat Mission (Gramin) and the Swachh Bharat Mission (Urban). Ministry of Drinking Water & Sanitation, Government of India is the nodal Ministry for SBM (Gramin) and Ministry of Urban Development is the nodal Ministry for SBM (Urban). It needs to be noted that in India, water supply and sanitation is a State subject. State Governments/ Union Territories (UTs) and Urban Local Bodies (ULBs) are responsible for providing water supply and sanitation services through planning, design,

implementation, operation and maintenance. According to *Swachhta Status Report 2016* by National Sample Survey Office, Government of India (GoI), 'At the core of the concept of swachhta is access to sanitation facilities, arrangement of system for solid and liquid waste disposal and access to safe and adequate water. Attaining swachhta presupposes using clean and safe toilets and disposing of waste water and garbage safely. Access to safe water and hygienic sanitary facilities are essential for healthy living. Further, for ensuring a clean environment surrounding the dwelling units of the households, adequate arrangement of systems for garbage and waste water disposal are essential.²⁴ Since its launch, 'the SBM has become an even stronger force through the country and is inspiring people to play their part in this transformational journey. It has captured the imagination of the country and is being owned by one and all' (Iyer 2017: 7). Looking back, the Slum Sanitation Programme (SSP) as a component was added to the World Bank-funded Bombay Sewage Disposal Project during 1995-1997 (Moulik and Sen 2006: 19). At the policy level, slum sanitation programme related activities were also included in the National Urban Sanitation Policy 2008 which recommended development of special strategies for slums and poor settlements as an integral part of the City Sanitation Plans (CSPs).

The paper is structured in such a way that it begins with definitional aspects of slum and dwells upon addressing the issue of slums as a development priority at the global level as evident in Millennium Development Goals 2000 and Sustainable Development Goals 2015. The paper then shifts to the official discourse on slums in India and subsequently presents an overview of the status of the sanitation in slums. Further, the paper discusses civil society activism mediated through The Alliance which includes Society for the Promotion of Area Resource Centres (SPARC), the National Slum Dwellers Federation (NSDF) and Mahila Milan in providing inclusive sanitation to the urban poor in the slums. It also considers the possible ways in which these civil society organisations (CSOs) play a vital role in assisting the state in urban slum sanitation. Towards the end, the concluding section summarises the main arguments of the paper.

Understanding Sanitation

According to the World Health Organization (WHO), 'Sanitation generally refers to the provision of facilities and services for the safe disposal of human urine and faeces. Inadequate sanitation is a major cause of disease world-wide and improving sanitation is known to have a significant beneficial impact on health both in households and across communities. The word 'sanitation' also refers to the maintenance of hygienic conditions, through services such as garbage collection and wastewater disposal.'²⁵ Accordingly, 'Sanitation services refer to the management of excreta from the facilities used by individuals, through emptying and transport of excreta for treatment

and eventual discharge or reuse.⁶ According to Evans, ‘sanitation’ as a whole is a “‘big idea” which covers inter alia safe collection, storage, treatment and disposal/re-use/ recycling of human excreta (faeces and urine); management/ re-use/ recycling of solid wastes (trash or rubbish)” and goes very much beyond it (2005: 18). World Health Organization and United Nations Children’s Fund Joint Monitoring Programme (JMP)⁷ for Water Supply and Sanitation in its 2008 Report titled *Progress on drinking water and sanitation: special focus on sanitation* has outlined Improved and Unimproved Water and Sanitation Facilities as given in Table 1.

Table 1: Improved and Unimproved Water and Sanitation Facilities

<p>An improved drinking water source defined as a drinking water source or point that, by nature of its construction design, is likely to protect the water source outside contamination, in particular from The JMP uses the following classifications to differentiate improved from unimproved drinking water sources.</p>	<p>An improved sanitation facility is defined as one that hygienically delivery separates human excreta from a n d human contact. The JMP uses the from following classifications to faecal matter. differentiate improved from unimproved sanitation facilities. However, sanitation facilities are not considered improved when shared with other households, or open for public use.</p>
<p>Improved drinking water sources</p> <ul style="list-style-type: none"> · Public tap/stand pipe· Tube well/borehole· Rainwater collection sewer systemü septic tankü latrine· 	<p>Improved sanitation facilities</p> <ul style="list-style-type: none"> · Piped water into dwelling, plot or yard· Protected dug well Protected spring· · Flush or pour-flush to:ü p i p e d pit latrine· Ventilated improved pit Pit latrine with slab· Composting toilet
<p>Unimproved drinking water sources</p> <ul style="list-style-type: none"> · spring· Surface water (river, dam, lake, pond, stream, canal, irrigation channel)· · Flush or pour-flush to elsewhere· Bucket· No facilities or bush or field (open defecation) 	<p>Unimproved sanitation facilities</p> <ul style="list-style-type: none"> · Unprotected dug well· U n p r o t e c t e d Cart with small tank/drum· Tanker truck· · Bottled water Pit latrine without slab or open pit· Hanging toilet or hanging latrine·

Source: pp. 39, *Progress on drinking water and sanitation: special focus on sanitation* (2008). World Health Organization and United Nations Children’s Fund Joint Monitoring Programme for Water Supply and Sanitation (JMP), UNICEF, New York and WHO, Geneva. Available at: https://www.who.int/water_sanitation_health/publications/jmp2008/en/ [06 March 2018].

WHO/ UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation in *WASH in the 2030 Agenda: New global indicators for drinking water, sanitation and hygiene* (2017) devised a ‘Sanitation Ladder’ to indicate the level/ degree of sanitation and sanitation service /facility. This is grounded in the idea of incremental progression between service levels of different quality, ranging from a very basic service (or no service at all) to a very advanced level of service’ (Giné-Garriga et al. 2017: 1113). At the topmost first sanitation

facility is the Safely Managed facility which is use of an improved sanitation facility which is not shared with other households and where excreta are safely disposed in situ or transported and treated off-site. The second rung is the Basic sanitation facility which is the use of improved facilities which are not shared with other households. The Limited sanitation facility is the use of improved facilities shared between two or more households (Heijnen et al. 2014) whereas the Unimproved sanitation facility is the use of pit latrines without a slab or platform, hanging latrines and bucket latrines. At the bottom most of the ladder is the practice of Open defecation which is the disposal of human faeces in fields, forest, bushes, open bodies of water, beaches or other open spaces or with solid waste. Taking Sanitation Service Ladder as the reference point, Crowley (2017) has highlighted that ‘39% have access to a ‘safely managed’ sanitation service; 29% have access to ‘basic’ sanitation; 8% have access to ‘limited’ sanitation; 12% use an ‘unimproved’ toilet; and 12% practice ‘open defecation’.⁸ The Asian Development Bank (ADB) in *Dignity, disease, and dollars* (2007) focussed on ‘three needed sanitation results for stakeholders — better facilities for the individuals so they can regain their dignity, disease prevention and healthy environmental outcomes for the wider community, as well as financial viability of sanitation services for provider governments and utilities in tandem with affordability for households.’⁹ From the above discussion it is clear that sanitation is one of the basic determinants of quality of life and human development index closely linked to the issues of availability, quality/safety, acceptability, physical accessibility and affordability - the so-called ‘AAAAQ’ criteria of sanitation services.

Slum Sanitation as a Global Development Priority

United Nations Human Settlements Programme Report titled *The challenge of slums: Global report on human settlements, 2003* [Revised and updated version (April 2010)] notes that ‘In developing countries, the term ‘slum’, if it is used, mostly lacks the pejorative and divisive original connotation, and simply refers to lower-quality or informal housing. Large, visible tracts of squatter or informal housing have become intimately connected with perceptions of poverty, lack of access to basic services and insecurity. Terms such as slum, shanty, squatter settlement, informal housing and low-income community are used somewhat interchangeably by agencies and authorities’ (pp. 11-12).¹⁰ The significance of slum in the development discourse can be gauged from the fact that it was included in the United Nations Millennium Declaration in September 2000 giving way to the United Nations Millennium Development Goals (MDGs) (8 in total). It was under the Millennium Development Goal # 7: Ensure environmental sustainability that the issue of slum was noted and was thus aimed to achieve the Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers. *The Millennium Development Goals Report 2015* has noted that ‘the proportion of urban population living in slums in the developing regions fell from approximately

39 per cent in 2000 to 30 per cent in 2014. Although the target was met, absolute numbers of urban residents living in slums continue to grow, partly due to accelerating urbanization, population growth and the lack of appropriate land and housing policies. Over 880 million urban residents are estimated to live in slum conditions today, compared to 792 million reported in 2000 and 689 million in 1990' (United Nations 2015: 60).¹¹ In the Twenty First Session of the Governing Council (16-20 April 2007, Nairobi, Kenya), UN-Habitat spoke of 'slums of hope' and 'slums of despair'. According to it, 'The first are settlements on an upward trend, largely made up of newer, usually self-built structures, and that are in or have recently been through a process of development, consolidation and improvement. The second group comprise "declining" neighbourhoods in which environmental conditions and services are in a process of seemingly inevitable decay. Unfortunately, the history of slums in Europe, North America and Australia has demonstrated that, without appropriate interventions, slums of hope can all too easily yield to despair, a self-reinforcing condition that can continue for a very long time.'¹² It is important to note that varying degree of understanding and defining slum deeply impinges upon the state's policies to address the related developmental issues, primarily health issues (Nolan, 2015: 59-84). With effect from January 2016, Sustainable Development Goal # 11 Make cities and human settlements inclusive, safe, resilient and sustainable having Target 11.1 By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums with its associated indicator Proportion of urban population living in slums, informal settlements or inadequate housing is another significant move towards addressing the issue of slum in a holistic manner. Sustainable Development Goals (17 in total) are within the framework of 2030 Agenda for Sustainable Development.¹³ Fawcett has noted that 'Slums around the world have several common features: inadequate infrastructure and services for water supply, sanitation, drainage, and electricity; often makeshift shelter, lacking durability; insecure tenure, resulting in lives under the threat of eviction by authorities or private landlords; overcrowding, exacerbating poor health conditions, increasing social tensions, and giving rise to congested lanes that make access to goods and services difficult; and lack of legal recognition, resulting in the term informal settlements' (2016: 764). Thus, we see that the health and sanitation issues with reference to slums and informal settlements are very much a part of development discourse.

Slums in India: Towards an Official Discourse

Valmiki Ambedkar Awas Yojana (VAMBAY), launched in December 2001, was a national level housing scheme of the Ministry of Urban Employment & Poverty Alleviation, Government of India for the benefit of slum dwellers. The objective of VAMBAY is primarily to provide shelter or upgrade the existing shelter for people living Below Poverty Line in Urban Slums, with a view to achieve the goal of 'Shelter for All'. For the purpose of VAMBAY it was proposed

to adopt the following slum definition in the 2001 census:

- a) All areas notified as 'Slum' by State /Local Government and UT Administration under any Act.
- b) All areas recognized as 'Slum' by State/Local Government and UT Administration, which have not been formally notified as slum under any Act.
- c) A compact area of at least 300 population or about 60-70 households of poorly built congested tenements, in an unhygienic environment usually with inadequate infrastructure and lacking in proper sanitation and drinking water facilities.

Definitions of Slums as per Census 2011 are as follow:

- i. All notified areas in a town or city notified as 'Slum' by State, UT Administration or Local Government, Housing and Slum Boards etc. under any Statute including a 'Slum Act' are considered as Notified Slum.
- ii. All areas recognized as 'Slum' by State/Local Government, UT Administration, Housing and Slum Boards etc., which may have not been formally notified as slum under any statute are categorized as Recognized Slum.
- iii. A compact area of at least 300 populations or about 60-70 households of poorly built congested tenements, in unhygienic environment usually with inadequate infrastructure and lacking in proper sanitary and drinking water facilities in the State/UT are categorized as Identified Slums.

The Model Property Rights to Slum Dwellers Bill 2011 (Ministry of Housing and Urban Poverty Alleviation, 2011) proposed some definitions for states to consider in their acts and rules:¹⁴

- i. 'Slum' or 'Slum Area' means a compact settlement of at least 20 households with a collection of poorly built tenements, mostly of temporary nature, crowded together usually with inadequate sanitary and drinking water facilities in unhygienic conditions.
- ii. 'Untenable Settlements' are those settlements which are on environmentally hazardous sites (such as riverbank, pond sites, hilly or marshy terrains, and so on), ecologically sensitive sites (mangroves, national parks, sanctuaries, and so on), and on land marked for public utilities and services (such as major roads, railway tracks, trunk infrastructure, and so on).

- iii. 'In-situ Slum Redevelopment' means the process of redevelopment of slum areas by providing dwelling space and other basic civic and infrastructural services to the slum dwellers, on the existing land on which the slum is based.
- iv. 'Slum Resettlement' means the process of relocation and settlement of slum dwellers from the existing untenable slums to an alternative site with dwelling space, basic civic and infrastructural services.
- v. 'Basic Civic Services' means services of drinking water supply, drainage, sewerage, solid waste disposal and street lighting.

According to the estimates of United Nations Economic & Social Commission for Asia and the Pacific (UNESCAP), 29.4% of India's urban population lived in slums in 2009. In India, the level of urbanization as a whole increased from 25.7% in 1991 to 27.82% in 2001 and to 31.14% in 2011. According to the Ministry of Housing and Urban Affairs, Govt. of India, out of the total population of 1210.2 million as on 1st March, 2011, about 377.1 million are in urban areas.¹⁵ Furthermore, the net addition of population in urban areas over the last decade is 91.0 million. The percentage of urban population to the total population of the country stands at 31.6. There has been an increase 3.35 percentage points in the proportion of urban population in the country during 2001-2011. Large scale migration from rural to urban areas along with lack of urban governance and lopsided urbanisation has resulted in the growth of slums in the urban areas in developing countries like India (Aijaj 2016: 10). *Annual Report 2016-2017*, Ministry of Urban Development, Government of India (2017) has aptly underlined that 'Urbanization in India has become an important and irreversible process, and an important determinant of national economic growth and poverty reduction. The process of urbanization is characterized by a dramatic increase in the number of large cities, although India may be said to be in the midst of transition from a predominantly rural to a quasi-urban society' (pp. 1).¹⁶ It further acknowledges that 'this transition to a quasi-urban society, however, has not been accompanied by a commensurate increase in the supply of basic urban services like water supply, sewerage and drainage network, garbage disposal facilities, citywide roads, public transport, and public safety systems like street lighting and pedestrian pathways. The supply of land and housing has not kept pace with the increase in urban population' (p. 1). According to the Census 2011, a total of 65.49 million slum inhabitants live in 13.92 million households; out of 4041 statutory towns, 2613 cities/towns (including 19 census towns in National Capital Territory of Delhi (NCT), and one census town in Uttar Pradesh) have reported slums; these towns are spread across 31 States/UTs of the country; four States/UTs - Manipur, Daman & Diu, Dadra and Nagar Haveli and Lakshadweep have not reported any slum; the non-slum population was 311.61 million; the slum population constitutes 5.4 percent of the total population of the country; the

slum population constitutes 17.4 percent of the total urban population; the slum population constitutes 22.4 percent of the total population of the 2613 slums reporting towns.¹⁷ According to *Handbook of Urban Statistics 2016* by Ministry of Urban Development, Government of India, out of 4,041 statutory towns, 2,613 are towns which reported slums with an estimated population of over 6.5 crore living in slums. In terms of state share of slum population to total slum population of India, Maharashtra followed by Andhra Pradesh reported highest share of slum population in 2001-11.

Sanitation in Slums in India: An Overview

Before getting into the availability and nature of sanitation services and facilities exclusively in slums, the paper briefly outlines the scenario of latrine availability at India level. For this purpose, NSS Report No. 584: *Drinking Water, Sanitation, Hygiene and Housing Condition in India* (NSS 76th Round, July-December 2018) is being referred to. It is based on the survey spread over 8,992 first stage units (5,378 in rural areas and 3,614 in urban areas) covering 1,06,838 households (63,736 in rural areas and 43,102 in urban areas). Table 2 reflects the percentage distribution of households by access to latrine (all-India).

Table 2 Percentage distribution of households by access to latrine (all-India)

Access to latrine	Percentage distribution of households		
	Rural	Urban	All
Exclusive use of the household	63.2	77.6	68.1
Common use of households in the building	7.3	15.6	10.1
Public/Community use without payment	0.2	1.5	0.7
Public/Community use with payment	0.0	1.2	0.4
Other type of access	0.5	0.4	0.5
Households having access to latrine	71.3	96.2	79.8
No latrine (households without having access to latrine)	28.7	3.8	20.2

Note 1: Figure 0.0 indicates negligible percentage of households corresponding to particular type of access to latrine. Note 2: The results are to be used considering the explanation given in Section 1.4.2 and 1.4.2.1 regarding possible respondent bias.

Source: pp. 32, NSS Report No. 584: *Drinking Water, Sanitation, Hygiene and Housing Condition in India* (NSS 76th Round, July-December 2018). [http://www.mospi.gov.in/sites/default/files/publication_reports/Report_584_final_0.pdf] Accessed 14 November 2019

According to Census 2011, in case of urban households, out of total urban 788.7 lakh households, 641.6 lakh (81%) households have latrine facility within the premises and remaining 147.0 lakh (19%) households does not avail latrine facility in their homes. In slum, only 66 % slum families have toilet facility in their homes. Out of 46.7 lakh (34%) slum households which do not have toilet facility in their homes, 20.7 lakh households used public latrine and 26.0 lakh households used open space for latrine purpose. As per Census

2011, 90.7 lakh slum households having latrine facility within the premises, 79.3 lakh (87%) slum households had access to flush/pour flush latrine connected to piped sewer system, septic tank and other system in their homes (including 33.7 lakh slum households with piped sewer system, 43.1 lakh slum households with septic tank and 2.5 lakh slum households with other system), 8.5 lakh slum households (9%) had access to pit latrine facility, 2.2 lakh (2%) slum households had access to night soil disposed into open drain and 0.9 lakh (1%) slum households had access to service latrine facility within the premises (including 0.4 lakh slum households night soil removed by human and 0.5 lakh night soil serviced by animal). According to Registrar General of India's report on slums of urban India, about 37 % of the total slums households had closed drainage connectivity for waste water outlet, 44% slum households had open drainage and 19% slum household had no drainage connectivity for waste water outlet. While in urban areas 350.9 lakh households (44%) had closed drainage connectivity for waste water outlet, 293.9 lakh households (37%) had open drainage connectivity and 143.8 lakh households (18%) had no drainage connectivity for waste water outlet.

National Sample Survey Office (NSSO) definitions of slum can be discussed now (Govt. in India 2015: 6). NSSO attempted to define slums in its surveys conducted in 1976-77, 1993, 2002, 2008-09 and 2012. While the 1976-77 survey had two major categories - Declared and Undeclared slums - the 1993, 2002, 2008-09 and 2012 surveys defined slums as notified and non-notified. The definitions of declared and notified were similar, as being "those areas notified by the respective municipalities, corporations, local bodies or development authorities". Undeclared slums were defined in the 1976-77 survey as a cluster of 25 *kutcha* structures with inadequate access to sanitation and water. In the surveys conducted during 1993-2012, however, the non-notified slums were defined as a cluster of 20 households with pre-defining criteria as crowding, inadequate access to sanitation and drinking water and unhygienic conditions. Operational definition of slum in the 69th Round survey is as follow:

- i. Areas notified as slums by the concerned municipalities, corporations, local bodies or development authorities were termed notified slums.
- ii. Also, any compact settlement with a collection of poorly built tenements, mostly of temporary nature, crowded together, usually with inadequate sanitary and drinking water facilities in unhygienic conditions, was considered a slum by the survey, provided at least 20 households lived there. Such a settlement, if not a notified slum, was called a non-notified slum.
- iii. Slums: The word "slum" covered both notified slums and non-notified slums.

According to the National Sample Survey (NSS) 69th Round on Urban Slums in India 2012, an estimated total of 33510 slums existed in the urban areas of India, of which 13761 were notified and 19749 were non-notified. An

estimated 8.8 million households lived in these slums, 5.6 million in notified slums and 3.2 million in non-notified slums. Maharashtra, with an estimated 7723 slums, accounted for about 23% of total slums in urban India, followed by Andhra Pradesh, accounted for 14% and West Bengal, which had a share of about 12%. The 69th Round (2012) NSS Survey's results shows that nearly 31% of the residents of slums (including 15 % of notified slums and 42% of non-notified slums) had no latrine facility, 53% of all slums at All-India level used flush/ pour flush latrine facility and nearly 10% of slums used dry pit latrine facility. As per the 49th Round NSSO (1993), lack of latrine facility was observed in 54% of the slums. About 18% of the slums had latrines with a septic tank and another 18 % slums had flush systems. Service latrine facilities existed in around 7% of the slums in Urban India. The 58th Round (2002) NSSO survey shows that the conditions of latrine facility have improved significantly in slums over a period of time, i.e. after 1993. The percentage of slums not having any latrine facility reduced sharply from 54% in 1993 to 33% in 2002. The sanitary conditions have improved considerably in 2012 as compared to 2009. At the all-India level, the proportion of slums not having any latrine facility has increased from 14.7% in 2009 to 31.3% in 2012.

As per 69th Round results, an estimated 31% of slums had no drainage system i.e. no system for carrying of waste water and liquid wastes of the slums. The open pucca drainage system prevailed in 35% of all slums, 19% slums had an underground drainage system. The proportion of slums having underground drainage and covered pucca drainage system decreased from 15% in 2009 to just 7% in 2012. The share of slums with open drainage both *pucca* and *katcha* has also decreased from 52.5 % in 2009 to 43% in 2012 and those without any drainage increased from 16% in 2009 to 30.9% in 2012. According to NSSO 58th Round (2002) results, about 22.5% of the total slums had underground sewerage system in 2002, and 78%, reported the non-existence of underground sewerage system in slums. According to 69th Round (2012) results, about 28.9% of the slums had underground sewerage system and 71.1% reported the non-existence of underground sewerage system in slums. The 49th Round NSSO (1993) results show that around 35% of urban slums did not have any arrangement for garbage disposal. Disposal of garbage was arranged by the residents for around 11% of the urban slums. In 52% of the urban slums, garbage is disposed off by the Municipal Corporation/ Municipality. NSSO 58th Round Survey (2002) shows that 61 percent of urban slums had garbage disposal by the Municipal authority. About 31 per cent of the urban slums had no system of garbage disposal. Residents themselves disposed off garbage in 7 per cent of slums. There was remarkable improvement in garbage disposal arrangement by Municipal Corporations in 2009. NSS 65th Round (2009) shows that 65% of garbage is removed by Municipal Corporations and in 7 percent of slums, garbage was removed by residents themselves. The component of other arrangements for disposal of garbage has also increased to 11 percent across the three rounds of NSSO survey. As per NSS 69th Round (2012) survey, the

municipality had arranged for garbage disposal in 62% of slums, in 11% of slums, the residents had arranged for garbage disposal, while 27% of slums had no arrangement for garbage disposal.

Elledge and McClatchey have noted that 'In slums, space constraints make it difficult to install individual household toilets and build the requisite infrastructure. Community dynamics are often less cohesive than in rural areas, and confused or insecure land tenure rights make it difficult to change behaviors, assign and collect tariffs for communal toilets, or build expensive permanent structures' (2013: 1). The status of urban sanitation in slums in India reflects moving towards a positive picture though much more has to be done in the areas of civic challenges being faced in the areas of water, sanitation and Municipal Solid Waste (MSW) management (Nandi and Gamkhar 2013; Chirst at. al 2016: 308-324). Sarkar et al. (2006) in Water and Sanitation Program-South Asia Report titled *The Mumbai slum sanitation program: partnering with slum communities for sustainable sanitation in a megalopolis* have discussed Slum Sanitation Program (SSP) - a component of the World Bank-financed Mumbai Sewage Disposal Project approved in 1995 and implemented by the Municipal Corporation of Brihan Mumbai (MCBM) - have noted that an estimated 400,000 slum dwellers have benefited. The 'Right to Pee' campaign, a collaborative effort of 33 non-profits, is calling attention to the lack of free, clean and safe public toilets for women in Mumbai, Maharashtra.¹⁸ It needs to be underlined that the universalisation of good sanitation and drainage system is a necessary requirement to ensure betterment of community health and hygiene primarily of the urban poor.¹⁹ Thus we see that lack of sanitation facilities and services in slum areas in urban India pose a major developmental challenge in terms of health and hygiene.

Civil Society Activism and Inclusive Sanitation in Urban Slums

In India (as elsewhere in other countries across the world), civil society in terms of non-governmental organizations (NGOs) have engaged with facilitating sanitation services primarily to the poor and marginalized sections of the society. The Orangi Pilot Project (OPP) started in 1980 by Dr. Akhtar Hameed Kahn in Orangi, Karachi, Pakistan²⁰ and Indian Alliance in Mumbai and Pune (both in Maharashtra, India) during late 1990s are some of the major examples of civil society initiatives based on local collective action towards inclusive and affordable sanitation among urban poor (Mcgranahan and Mitlin 2016). Joshi at el. have aptly argued that 'Among the multiple distinctions that differentiate the urban poor, the two most critical aspects related to sanitation are first spatial, where one lives, and second gender, or the complexities of gendered identities and related sanitation needs and responsibilities in these diverse settings' (2011: 91). Similarly, Narain in *Excreta Matters* (2013) has noted that 'It is also important to understand the internal excreta divide of each city. In the political economy of defecation, cities have huge inequity in

the use of water; they also have huge inequity in the disposal of excreta. The most glaring is within slums or within unauthorized settlements' (ibid.: 27). Burra et al. (2003) have studied the 'involvement of an Alliance of three Indian organizations in community-designed, built and managed toilet blocks that now serve more than half a million low-income urban dwellers in eight cities in India.' It was followed by another study by Patel (2015) which focused specifically on the ongoing engagement in Mumbai through the Society for the Promotion of Area Resource Centers (SPARC) Team.²¹ According to Mcgranahan and Mitlin, 'The Indian Alliance's approach to sanitary improvement worked implicitly to address the four challenges. They put the community residents and local organization at the center of the initiative (addressing the collective action challenge), secured contributions from the government (developing a coproductive relationship), innovated with communal block latrines (prioritizing affordability) and used toilet construction alongside other development efforts to change the negative imagery toward informal settlements and their residents (intended to improve housing security)' (2016: 311). Appadurai (2001: 25-44) has analysed the workings by The Alliance which include Society for the Promotion of Area Resource Centres (SPARC), the National Slum Dwellers Federation (NSDF) and Mahila Milan. SPARC, NSDF and Mahila Milan within the rubric of 'urban activist movement with global links' (ibid.: 24) and has explored 'how it has articulated new relations with urban governmentality' (ibid.: 25). He concludes that 'They are, or can be, instruments of deep democracy, rooted in local context and able to mediate globalizing forces in ways that benefit the poor. In so doing, both within nations and globally, they are seeking to redefine what governance and governability mean' (ibid.: 23).

Shelter Associates (SA) is based in Pune which comprises architects, social workers, geographic information systems (GIS) analysts and community workers. SA is a team of architects, social workers, geographic information systems (GIS) analysts, and community workers.²² SA facilitate access to sanitation in informal settlements by: (1) setting up a very robust spatial data platform to pinpoint families who lack access to basic sanitation, (2) facilitating the construction of individual toilets, (3) conducting workshops to increase awareness within the community of environmental issues, (4) providing a forum for sanitation issues to be discussed and (5) establishing solid waste collection systems.²³ SA has been active in community toilet block project²⁴ and subsequently 'From building community toilets, we have moved towards a vision of 'One Home-One Toilet', as a more complete, end to end end-to-end solution to the sanitation crisis.²⁵ Hobson (2000) has discussed the role of Shelter Associates in a communal toilet construction programme initiated in May 1999. While studying sanitation activism in two Indian cities in the state of Maharashtra: Mumbai and Pune; McGeough views 'the Indian toilet festivals as a form of sanitation activism that illuminates the processes leading up to the festival as integral and constitutive to social change' (2013: 363). So as to

explore inter-linking between the Indian civic activism and 'filth', Taguchi has studied the attempt of the Mumbai middle class to deal with filth through the case of 'fight the filth' campaign within the framework of civil society (2013: 89-101). It was found that 'people without civic sense are conjured to represent filth and serve as the targets of the civic movements' (ibid.: 98). Taking the case of slum sanitation in Darukhana slum of Mumbai, Power and Wanner have attempted to investigate whether a human rights-based approach (HRBA) could be a useful strategy for local NGOs in Mumbai slums (2017: 209-226). They caution that the right to sanitation and clean water need not be achieved through adversarial approaches such as litigation against the government. Rather, they argue that 'human rights-based approaches (HRBAs) are a viable means for local NGOs to achieve their development objective of improving sanitation in Mumbai slums. NGOs as intermediaries between the poor and the state can utilise HRBAs as important political instruments because they focus on the empowerment of the impoverished slum dwellers and the root causes of poverty, and allow for facilitation and cooperation with duty-bearers (in particular the Municipal Corporation of Greater Mumbai)' (2017: 222). It emerges from the workings of the CSOs engaged in slum sanitation that Community toilet blocks may be the most appropriate sanitation provision in slums provided that 'improved governance structure' and 'adequate budgeting' from the state is already being taken care of (Panda and Agarwala 2013: 24-28).

Based on the experience of slum sanitation initiatives implemented in a number of urban centers in India (Ahmedabad, Pune, Mumbai, Bhopal, Trichy, and Kalyani among others), over the last decades, *Community slum sanitation in India: a practitioner's guide* a joint publication under the aegis of International Bank for Reconstruction and Development/ The World Bank Group and Water and Sanitation Program (WSP) by Bapat et al. (2016) has outlined the following factors or drivers of successful slum sanitation initiatives:

- i. Enabling frameworks for slum sanitation (tenure and provision of services)
- ii. Political will, executive engagement and local government institutional capacities
- iii. Addressing indignity and promoting public health
- iv. Promote participation of the poor and institutionalize special roles for women
- v. Choice of location, technology and design features
- vi. Frameworks for partnerships and contracts
- vii. Empower communities to take the responsibility of managing community toilets

- viii. Management models and financial viability as key elements for successful long-term operation
- ix. Performance monitoring and evaluation

Dasra's report, *Squatting rights: access to toilets in urban India* (2012) focuses on urban sanitation systems in India and outlined the important roles of the role of non profits and other stakeholders in urban sanitation.²⁶ These included BISWA, CDD Society, CEPT, Ecosan Services Foundation, Mahila Housing SEWA Trust, NIDAN, Shelter Associates, SPARC WASH Institute. Furthermore, it recommended five cornerstones that are crucial in providing universal urban sanitation in India viz. developing a gendered approach, improving hygiene, fostering champions within government, nurturing community ownership, and customizing solutions and creating standards (for gender issue in slum sanitation and urban poor see Sharma 2006; Kulkarni et al. 2017: 167-183). McFarlane et al. noted that (Sanitation necessarily connects a variety of contexts, from toilets and drains to state (dis)investments, land politics, the work of cultural stereotypes of certain groups of the poor) and the variegated experiences of 'shame, exploitation, alienation, and struggle that so often characterize poverty' (2014: 1009). Slum sanitation thus depends on various socio-economic factors. The state mechanisms according to the available resources and 'political will' address the inequity in accessibility and availability of descent and safe sanitation services and facilities.

Conclusion

Sanitation is a basic necessity that contributes to better human health, dignity and quality of life. Its prime objective is to protect and promote human health. An appraisal of the status of sanitation in urban slums in India attempted in this paper reveals that the overall status of sanitation in urban slums is abysmal. The myriad reasons of the same are not that far to be overlooked. The political economy of the post-colonial urban planning of India has not given adequate attention to the sanitation services in any town or city in a planned way. Furthermore, the governance deficit in terms of addressing the large-scale migration from the rural and semi-rural areas/ regions added complexity to the matter at hand. The lack of appropriate sewerage system in the urban areas has been another point of concern. Given such a scenario, the urban poor living in slums do not have access to the adequate sanitation services and thus is 'excluded' from the same. In a way, the urban poor are forced to accommodate and compromise a fragile sanitation system in terms of poorly maintained & ill-managed toilet facilities. The exclusion of the urban poor residing in slums from the accessible and affordable sanitation facilities is not only due to their low-income status which results in poor purchasing capacity in terms of 'buying' sanitation services but also because of their 'temporal' ownership of the land on which they live. One can also argue that lack of

political currency so as to influence the local level election out-coming is one of the factors in the sorry state of affairs of sanitation in urban slums. It can be safely argued that the stark lack and inadequacy of sanitation services in urban slums has negative impacts upon the overall survival and healthy-long life of the individual and community. Against this backdrop, the initiatives taken by the civil society organisations (CSOs) like The Alliance and Shelter Associates regarding the availability, quality/ safety, acceptability, physical accessibility and affordability - the so-called 'AAAAQ' criteria of sanitation services, have assumed great significance in the present context. The neo-liberal Indian state is in a kind of fix as on one hand it has to promote the institutions of freely functioning markets and on the other has to perform the duties & responsibilities of welfare state as enshrined in Preamble of its Constitution. While engaging with the issue of sanitation among the urban poor and slums, the state accords less priority to the same. The emergence of vibrant civil society organisations (CSOs) like The Alliance and Shelter Associates has proved to be very beneficial in this regard. They in order to ensure safe, hygienic and affordable sanitation services in the slums initiate the dialogue with the state mechanism, provide logistic support and bargain with the authorities regarding the viability of their various sanitary projects. In doing so, they negotiate with the bureaucratic hurdles, use the 'language' of the state and cut through the red-tapism involved in getting the financial / budgetary allocation for establishing and maintaining sanitation facilities inclusive in nature. Hence it may be concluded that play these CSOs play vital role in assisting the state in making urban slum sanitation more inclusive, dignified and humane.

Notes

- 1 Available at: <http://www.worldbank.org/en/topic/sanitation> [17 Nov 2017]
- 2 Available at: <http://www.un.org/sustainabledevelopment/water-and-sanitation/> [17 Nov 2017]
- 3 *Citywide inclusive sanitation: a call to action*. Available at: <http://pubdocs.worldbank.org/en/589771503512867370/Citywide-Inclusive-Sanitation.pdf> [03 March 2018].
- 4 Available at: http://mospi.nic.in/sites/default/files/publication_reports/Swachhta_Status_Report%202016_17apr17.pdf [17 Nov 2017]
- 5 Available at: <http://www.who.int/topics/sanitation/en/> [17 Nov 2017]
- 6 Available at: <https://washdata.org/monitoring/sanitation> [17 Nov 2017]
- 7 The WHO/ UNICEF Joint Monitoring Program (JMP) was established at the end of the International Drinking Water Supply and Sanitation Decade in 1990. It is executed jointly by WHO and UNICEF with technical support through an advisory group which is made up of

individuals, academic and UN agencies.

- 8 Available at: <https://washmatters.wateraid.org/sites/g/files/jkxoof256/files/Out%20of%20Order%20report%202017.pdf> [12 Dec 2017]
- 9 Available at: <https://think-asia.org/bitstream/handle/11540/1446/dignity-disease-dollars.pdf?sequence=1> [06 March 2018].
- 10 Available at: https://unhabitat.org/wp-content/uploads/2003/07/GRHS_2003_Chapter_01_Revised_2010.pdf [17 Nov 2017]
- 11 Available at: <http://mdgs.un.org/unsd/mdg/Resources/Static/Products/Progress2015/English2015.pdf> [17 Nov 2017]
- 12 Available at: https://www.preventionweb.net/files/1700_462551419GC202120What20are20slums.pdf [12 Jan 2017]
- 13 Available at: <http://www.undp.org/content/undp/en/home/sustainable-development-goals.html> [12 Dec 2017]
- 14 Available at: <http://mhupa.gov.in/ray/guidelines%20and%20user%20manuals.htm> [12 Dec 2017]
- 15 Available at: <http://mohua.gov.in/cms/urban-growth.php> [06 March 2018]
- 16 Available at: <http://mohua.gov.in/upload/uploadfiles/files/annual%20report%20English%20-%20print.pdf> [06 March 2018]
- 17 Available at: http://nbo.nic.in/Images/PDF/SLUMS_IN_INDIA_Slum_Compndium_2015_English.pdf [12 Dec 2017]
- 18 For details see Regional Campaign in Mumbai: Right To Pee, Available at: <http://www.coroindia.org/about/project/regional-campaign-in-mumbai-right-to-pee> [19 Dec 2017]
- 19 *VISION 21: a shared vision for hygiene, sanitation and water supply* (Water Supply and Sanitation Collaborative Council 2000) has noted that 'Urbanisation, and particularly the situation of the urban poor, requires urgent attention. The world's population growth is concentrated almost entirely in the cities of developing countries, both from natural growth and from migration. In many cases this growth outnumbers the capacities of conventional service provision. The result is that many cities around the world include large sections where the urban poor have grossly inadequate water, sanitation and hygiene services' (ibid.: 8). Available at: <http://wsscc.org/wp-content/uploads/2016/04/Vision-21-A-Shared-Vision-for-Hygiene-Sanitation-and-Water-Supply-and-a-Framework-for-Action.pdf> [24 Dec 2017]
- 20 Orangi Pilot Project (OPP) as an NGO began work in Orangi town in 1980. Orangi situated in the periphery of Karachi is a cluster of 113

low income settlements with a population of 1.5 million. On the success of its five basic programs of low-cost sanitation, housing, health, education and credit for micro enterprise, in 1988 OPP was upgraded into three autonomous institutions. Available at: <http://www.opp.org.pk/> [06 March 2018]. Also see Khan (1992) and Orangi Pilot Project (1995: 227-236).

- 21 The Society for the Promotion of Area Resource Centers (SPARC) was founded in 1984. Since 1986, SPARC has been working in partnership with two community-based organizations the National Slum Dwellers Federation and Mahila Milan. Together, they are known as the Alliance. Today, the Alliance works in about 70 cities in the country and has networks in about 25 countries internationally. Sheela Patel, the Director of SPARC was awarded the Padmashree Award in 2011. Available at: <http://www.sparcindia.org/aboutsparc.php> [06 March 2018]. The Alliance is currently involved with a number of projects aimed at ensuring adequate access to sanitation facilities throughout India. In the past five years, the Alliance has renovated or built over 800 community toilets, for a total of over 16,000 additional seats. Available at: <http://www.sparcindia.org/sanitation.php> [06 March 2018].
- 22 Available at: <http://shelter-associates.org/about.php> [19 Dec 2017]
- 23 Available at: <http://shelter-associates.org/index.php#sanitation> [19 Dec 2017]
- 24 Available at: <http://shelter-associates.org/community-toilet.php> [19 Dec 2017]
- 25 Available at: <http://shelter-associates.org/individual-toilet.php> [19 Dec 2017]
- 26 Available at: http://nidan.in/nidanwp/Documents/SquattingRights_Report.pdf [19 Dec 2017].

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