Process Evaluation Study of FINISH Program in India

Contents

Executive summary

Background

Several low-income and developing countries face major disease burdens associated with poor sanitation including diarrhea, soil-transmitted worm infections, trachoma, lymphatic filariasis, etc.[1] This hurts the health care cost and the overall economic growth. Even though cost-effective preventive behaviors and investment are known, low uptake of these technologies poses a challenge for global health. In 2011, around 620 million people, or 50% of the population in India defecated in open, acting as a huge barrier in achieving the health outcomes envisaged for the country.[2] To address sanitation related challenges and with an ambitious goal to end open defecation in the country by 2019, the Government of India (GoI) launched the Swachh Bharat Mission (SBM) in 2014. It was a succession of myriads of government sanitation programs such as the Central Rural Sanitation Program (CRSP) in 1986, Total Sanitation Campaign (TSC) in 1999, and the Nirmal Bharat Abhiyan (NBA) in 2012. SBM-G follows GoI's historical rural sanitation programs in adopting a supply-led, incentive-driven approach targeting latrine construction as a primary sanitation outcome. Along with providing government funding, the SBM has also sought active participation from both non-profits and the corporate sector to tackle the issue.

Prior to the launch of SBM, FINISH initiated one of the biggest sanitation programs in India in 2009-10. The program worked on a multi-stakeholder engagement approach with an end-to-end effort on the sanitation value chain, from demand generation to behavioral change to the facilitation of funds by Micro Finance Institutions (MFIs). The focus was on awareness generation at individual and community level to further behavioral change for adopting sanitary practices and generating demand for sanitation systems. Concurrently, there was also a need to mobilize funds for the construction of toilets and other sanitation facilities through government incentives and sanitation loans.

For this purpose, FINISH engaged with government departments, financial institutions, NGOs and co-operatives. After the beneficiaries were funded, FINISH linked them with material & systems supply chain partners to improve affordability. Furthermore, through capacity building and livelihood generation activities for masons, it supported to uplift their socio-economic status. Ensuring proper training of field staff and animators resulted in achieving sustainable usage of sanitation facilities by beneficiaries and effective waste management methods. FINISH partnered with several grassroots organizations, MFIs, NGOs, SHG federations and cooperatives in their program years, where partnerships have grown from 10 in 2011 to 60 partners in 2016-17. Furthermore, FINISH explored collaboration with corporates through their CSR partnerships as well.

In India, FINISH has been able to surpass its set goal of improved sanitation systems for 5,00,000 households. It has been able to aid the construction of over 600,000 sanitation systems by its first closure in 2016, followed by a total of more than 1 million toilets (1,143,026 sanitation systems) by the end of 2020.

Methods

Given the milestones achieved by the program, a process evaluation was conducted to understand the relevance, efficiency, effectiveness, impact, and sustainability of implementation of the program. To understand the nature of the intervention and program, a preliminary desk review of program documents, MIS reports, etc. was undertaken along with stakeholder interactions. Key Informant Interviews (KIIs) were conducted with partner organizations along with Focused Group Discussions (FGDs) with beneficiaries in selective intervention areas. The sampling of partners was finalized as per their representation in each zone of India, coverage, status of engagement (active or closed), organization type, tenure, etc. This allowed thorough assessment of the implementation process and its impact among all stakeholders of selected locations.

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[1] Effectiveness of a rural sanitation programme on diarrhoea, soil-transmitted helminth infection and malnutrition in India

[2] WHO/UNICEF Joint Monitoring Program (JMP) Study on Water Supply and Sanitation (2011)

In alignment with the requirements of the Terms of Refrence (ToR), the evaluation has assessed the questions referred to the OECD-DAC evaluation criteria: Relevance, Effectiveness, Efficiency, Impact and Sustainability.

Relevance- The evaluation team found that the program is fully pertinent in accordance to right-holders' needs around sanitation and hygiene. The program has been designed with due recognition to enabling international and national level policy frameworks governing the water, sanitation and hygiene (WASH) sector. Through FGDs, communities stated that the program was quite relevant to their circumstances. The program strategy was also appropriate as beneficiaries realized the potential that existed within their communities to transform existing circumstances.

Efficiency- In assessing how well resources have been used and the extent to which the intervention delivers in a cost effective and timely manner, the evaluation team finds that FINISH has ensured adequate consideration of value for money and quality inputs for quality outputs through a number of linked approaches and effective strategies. The intervention ensured continuous community engagement in planning and decision making and focussed on locally sourced resources for constructing household toilets. The intervention built capacities and engaged local masons, making use of sweat equity which further brought down the cost of installing sanitation systems.

Effectiveness - The effectiveness of the program can be witnessed by its achievement of over 1,000,000 sanitation systems across 10 States of India by the end of 2020. The program met the key result areas, effectively utilised the resources and leveraged the grant by more than 20 times.

Impact: The evaluation found FINISH program has resulted in positive changes at the community level. The training and capacity-building support has proved beneficial in orienting partners to take up innovative sanitation. The village motivators who were a part of FINISH program have gone ahead to hold block and district level positions under the government sanitation programs.

Sustainability- For program's success, it is important to assess them in the context of the continuing significant challenges toward achieving sustained sanitation. Overall, the sanitation systems have been looked after by the communities and are being used regularly. This has been bolstered through the institutional strengthening and capacity-building elements of the program.

Recommendations

❖ The promotion of double leach pit toilets under FINISH program ensures sustainability within the design component. However, to ensure operational sustainability, the beneficiaries need to empty the composts from one of the pits to use as fertilizers and reuse the pits. Hence, to ensure that leach pits are used sustainably, FINISH should incorporate awareness on emptying and use of fully digested/ treated fecal matter as compost. Additionally, regular workshops should be planned with the farmers, to use the fecal sludge as compost for crop production.

❖ The engagement of multiple stakeholders strengthens advocacy efforts. Hence, it is important to align and sharpen the advocacy initiatives in a homogeneous manner to further scale and sustain the gains achieved in the first phase of the program.

❖ The partnership agreement with grassroot organizations should encompass simplified language and in certain cases, a multi-language approach. This will build confidence and form clarity of roles and responsibilities among the partners.

❖ Strenghthening mason training activities by engaging more masons, revisiting topics, duration etc.including practical training sessions. Special focus should be on learnings based on geographical and environmental challenges along withknowledge on all-inclusive and all accessible family sanitation systems.

❖ Improving evidence-based monitoring mechanisms through community-led real-time monitoring systems holds a crucial role in ensuring program success.

❖ The partner organizations select beneficiaries on their own, which may lead to exclusion of extremely marginalized communities. Further, the study findings revealed that the beneficiaries mobilized by NGOs were relatively more marginalized than beneficiaries mobilized by MFIs. As a result, FINISH should partner with socially inclined MFIs and NGOs to reach the poorest of poor who are otherwise excluded from the traditional MFI lending space.

❖ Exploring innovative financing tools for commercial finance mobilization for MFIs to strengthen WASH portfolios is of utmost importance.

❖ Incorporate formal channels to obtain timely feedback from both partners and beneficiaries for receiving suggestions for program improvements based on field-level experiences.

❖ Develop and document a robust exit strategy from the onset to facilitate the smooth closure of programs and ensure clarity among partners prior to withdrawal of their support.
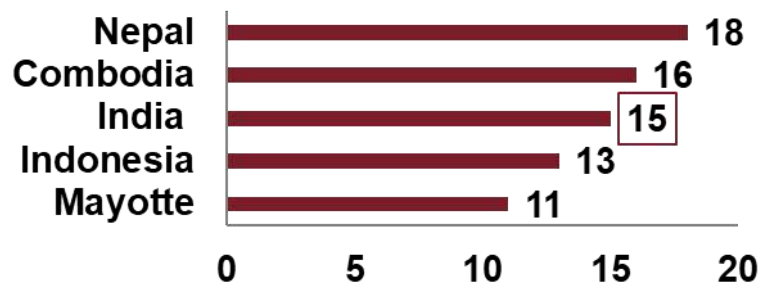
Sanitation and Microfinance: Overview

SDG 6
CLEAN WATER AND SANITATION
Ensure availability and sanitation for all

India is among the top 5 countries whose basic sanitation increased by more than 10 per cent between 2015-2020 (Year on Year)

Country	Value
Nepal	18
Combodia	16
India	15
Indonesia	13
Mayotte	11

(Bar chart axis: 0, 5, 10, 15, 20)

Source: Progress on household drinking water, sanitation and hygiene 2000–2020: Five years into the SDGs Report, WHO and UNICEF

Ranking of States- SDG 6

➢ **Top 2 states: Goa and Telangana**

➢ **Bottom 2 states: Assam and Rajasthan**

If Equality= 1:1, Inequality for Basic Sanitation at Rural Areas,

1:10

As per government of India flagship program, Swacch Bharat Abhiyan (SBM)

✓ **109.48 million toilets constructed since 2014**
✓ **21.10 million toilets constructed in 2021-22**
✓ **711 Open Defecation Free (ODF) Districts**

SBM offers incentive of up to €145.8/- for construction of Toilets

Households take up gap financing over and above subsidy to construct toilets— Through majorly MFIs

Other major need for Credit arises through

Repair of dysfunctional Toilets

Upgradation of Toilets

Enterprises working in sanitation supply chain

Current Water and Sanitation Credit Model

➢ **Credit Linkage to SHGs**
➢ **Direct Lending to SHGs**
➢ **Individual Lending**
➢ **Bulk lending to Business Correspondents**

Safe sanitation means promotion of hygiene, reduced contact between humans, animals and vectors of human waste, and safe disposal of human excreta through the right use of toilet and avoiding open defecation[3]. Even though cost-effective preventive behaviors and investments are known, such as washbasin and soap for handwashing, toilet construction for safe disposal of human excreta, boiling of water etc., low uptake of these technologies poses a challenge for global health. Several studies identify prices to be a key constraint in the large-scale adoption of these technologies.[4] Given the positive health externalities and benefits associated with such investments, several governments offer subsidies to promote adoption and improve coverage. Multiple studies provide evidence that financial support can be effective in increasing the outreach of essential sanitation-based technologies.[5]

In tandem with these studies, the Government of India (GoI) in 2014 launched a nationwide sanitation program called Swachh Bharat Mission (SBM) with a strong commitment to eliminating open defecation. It was a succession of myriads of government programs targeted at improving India's sanitation situation such as the Central Rural Sanitation Program (CRSP) in 1986, Total Sanitation Campaign (TSC) in 1999 and the Nirmal Bharat Abhiyan (NBA) in 2012. The SBM program involves two major components, first, information, education, and communication (IEC) activities on sanitation, and second, the provision of financial incentives to vulnerable groups for construction of private household toilets to the tune of INR 12,000 per household.

The incentive aims to encourage households to construct a toilet, rather than total cost coverage of the toilet. The incentive follows a 'remuneration after verification' model, in which the households bear the total cost of toilet construction and avail the incentive only after verification by local district authorities[6]. This model was criticised because the poor households might not be able to access the required funds to construct a toilet, raising the need for microfinance for sanitation to bridge the funding gap for new toilets, upgrade old toilets, and repair dysfunctional ones.[7] In April 2015, the Reserve Bank of India (RBI), officially included water and sanitation under the purview of Priority Sector Lending, pushing the scope of lending in sanitation. The bank could extend loans to MFIs for on-lending to individuals and SHGs/ JLGs members for water and sanitation facilities.[8] While this was a major development, RBI did not define any specific target for WASH. This affects the sector's ability to garner more funds under PSL, as it is in competition with other sectors such as agriculture, micro enterprises etc. who have been assigned specific targets.

The experience of micro-finance in the sanitation space has been growing in terms of geographical spread and the number of households reached in the country. As of 2017, close to 1.3 million loans, aggregating over INR 18,650 million, have been disbursed in 17 states, reaching approximately 6 million people.[9] Several studies have shown micro-finance to yield positive impacts on health investments[10] and leading international agencies such as the World Bank and United States Agency for International Development (USAID), calling it a promising solution to tackle the challenges of sanitation.

In a field experiment conducted in rural India[11], through the offering of a new loan product: micro-credit for sanitation, it was found that the intervention was effective in inducing household level toilet construction, especially along with large-scale awareness creation and incentive through the government's SBM program.

The study had several interesting insights such as, microfinance enabled households ineligible for the incentive to invest in sanitation upfront by alleviating financial constraints. It helped incentive-eligible households to overcome short-term liquidity constraints as the SBM incentive is given post verification.

[3] Guidelines for Swachh Bharat Mission (Gramin)

[4] Cohen and P. Dupas. Free distribution or cost sharing? evidence from a randomized malaria prevention experiment. The Quarterly Journal of Economics, 125:1–45, 2010.

[5] Guiteras, J. Levinsohn, and A.M. Mobarak. Encouraging sanitation investment in the developing world: A cluster-randomized trial. Science, 348(6237), 2015, Lipscomb and L. Schechter. Subsidies versus mental accounting nudges: Harnessing mobile payment systems to improve sanitation. Journal of Development Economics, 135:235–254, Nov 2018

[6] Guidelines for Swachh Bharat Mission (SBM) Grameen, 2017

[7] RV Ram Mohan, Swachh Bharat Mission (Grameen), Bottlenecks and Remedies, Economics and Political Weekly (EPW), 2017

[8] Master Circular - Priority Sector Lending- Targets and Classification, Reserve Bank of India, 2017

[9] Credit Financing in the Sanitation and Water Sector, 2017, Sujal Swacch Sangraha, Swacch Bharat Mission Gramin

[10] Yishey et al. Microcredit and willingness to pay for environmental quality: Evidence from a randomized-controlled trial of finance for sanitation in rural Cambodia, 121-140, 2017 and Augsburg, B et al. Labelled loans, credit constraints and sanitation investments. Working paper, Institute for Fiscal Studies, 2018

[11] Britta Augsburg et al. Can Micro-Credit Support Public Health Subsidy Programs?, Policy Research Working Paper, World Bank, 2019

1. Introduction

About FINISH Program

FINISH (Financial Inclusion Improves Sanitation and Health) started its intervention in India towards sanitation for all in 2009. FINISH Society was registered in 2010, as a multi-state not-for-profit organization under Societies Registration Act 1860. The FINISH program, with its multi-stakeholder approach, focuses on the entire sanitation value chain, starting with demand generation through behavioral change to facilitating funds through Micro Finance Institutes (MFIs) and NGO partners.
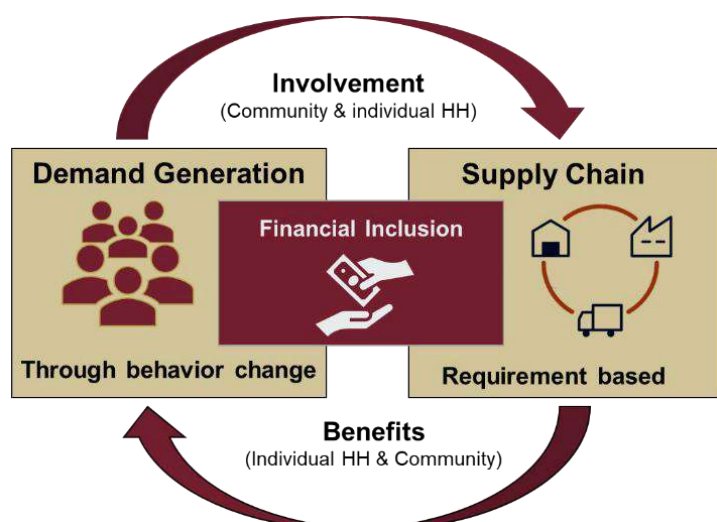
Partnerships established:

The FINISH program was conceptualized with partners including DGIS, WASTE, SNS REAAL, UNU-MERIT, along with an Indian Micro Finance Institution (MFI). The plan was to encourage and involve community members and enterprises in program implementation for bringing a sustainable community level impact. However, for program sustainability purposes, FINISH Society was established in 2010, and it collaborated with five (5) MFIs for implementation support with the idea of 'driving sanitation using micro-credit'. However, after a major setback because of the Andhra Pradesh Microfinance crisis, FINISH decided to introduce diversification in its existing partnership to include NGOs, cooperatives, SHGs, etc. along with MFIs.

Partners of FINISH Program

DGIS	**DGIS** Provided grant support
WASTE	**WASTE** Technical Partner
SNS REAAL	**SNS REAAL** Finance Partner
UNITED NATIONS UNIVERSITY UNU-MERIT	**UNU-MERIT** Academic Partner

Concurrently, FINISH observed the differences between the achievements reported by the partners and the actual on-ground situation. This led to the formulation of a Program Implementation Team (PIT) to cater to issues related to on-ground monitoring & reporting, supervision, and coordination. The PIT largely focused on identifying, selecting, training, and supporting the FINISH partners. Eventually, the number of partners went up from 10 in FY2010-11 to 60 in FY2016-17. This included 15 MFIs, 45 NGOs, and cooperative societies. Furthermore, FINISH explored collaboration with corporates through their Corporate Social Responsibility (CSR) initiatives as well.

Approach adopted:

The approach adopted by FINISH is guided by the principles of ensuring sustainable impact in the sanitation domain. It focused on awareness generation at individual and community level to facilitate behavioral change in adopting sanitation practices subsequently creating demand for sanitation systems. Once the demand was generated, a major challenge that remained is the availability of funds with beneficiaries. FINISH facilitated sanitation loans majorly through MFIs. In due course, FINISH also improved opportunities for vendors and suppliers to sell and provide cost-effective sanitation-related materials due to large scale increase in demand. The vendors were largely benefitted from economies of scale. In case of Rajasthan where FINISH adopted a

self-implementation model, it developed linkages with suppliers for supplying of sanitation-related materials and systems to beneficiaries. These suppliers were provided trainings on cost reduction methodologies to achieve the dual purpose of vendor profitability and consumer affordability. FINISH also supported masons through capacity building activities to facilitate both livelihood generation and better toilet construction. Ensuring proper training of field staff and animators helped FINISH achieve beneficiary coverage and sustainable adoption of effective waste management methods.

The following six-pronged approach has proved effective in creating long-term impact:

1. Creating demand for safe sanitation through awareness generation
2. Enabling communities to create household sanitation assets by facilitating access to finance
3. Facilitating supply chain solutions to meet demand on time
4. Encourage increasing sanitation density
5. Safe reuse of excreta
6. Efficient monitoring to ensure sustainability

Program Progress:
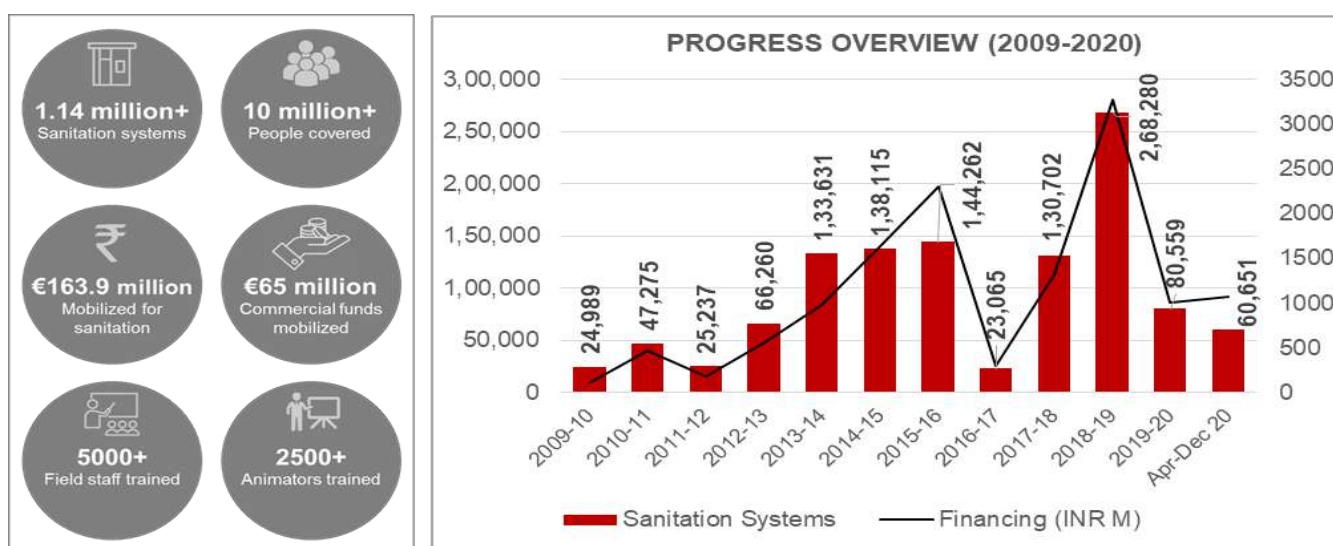
FINISH has been able to surpass its goal of facilitating improved sanitation systems for 5,00,000 households. In India, it has been able to aid the construction of over 600,000 sanitation systems by its first closure in 2016, followed by a total of more than 1 million toilets (1,143,026 sanitation systems) by the end of 2020. FINISH worked towards achieving sustainable WASH by building capacities of grassroots partners including NGOs, MFIs, Cooperatives, SHG federations as implementing partners who in turn use local masons/ contractors/ vendors for the supply of materials and construction. Need-based capacity building initiatives of 177 animators and 107 mason trainings were undertaken where over 5000+ field workers and 2500+ masons were covered.[12] In some locations, FINISH has been successful in creating local entrepreneurs who form a part of the sanitation ecosystem. Additionally, it has promoted waste management and reuse of excreta. In a program initiated with ICCO, WASTE and Valsad Dairy in Gujarat for building toilet linked biogas units, 2400 toilets were built of which 743 toilets were linked to biogas plants. This assisted some of the families to replace LPG with biogas for cooking purposes.

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[12] FINISH program, Closure Report, FINISH Society, 2009-2020

2. Approach and Methodology

Evaluation Approach

The purpose of the evaluation is three-fold: to evaluate the processes adopted, assess the degree of accountability with respect to the extent to which the program fulfilled its objectives and benefitted the target communities as well as inform critical learnings and recommendations for furthering implementation appropriateness. To address the proposed set of questions, CRISIL used the Organization for Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) criteria of relevance, effectiveness, efficiency, impact, and sustainability, in addition to the cross-cutting criteria of gender and equity.

Relevance	Efficiency	Effectiveness	Impact	Sustainability
Is the intervention doing the right things?	How well are resources being used?	Is the intervention achieving its objectives?	What difference is the intervention making?	Will the benefits last?
• Consistency of objectives & strategies with requirement of target groups • Selection of project area • Alignment with other sanitation programmes	• Efficiency in budget allotment • Budgetary provisions to address specific issues like gender, inclusion etc. • Timely deliveries • Cost justification • Efficiency in resources allocation and utilization	• Effectiveness in changing perceptions of various stakeholders • Factors in achievement or non-achievement of program objectives • Strategy and implementation management • Revisions in the strategies and impact		• Exit strategy • Adoption of self-sustaining models by partners • Collaborations and sustainability • Scope for integration of WASH and health in future programs

The ToR provided a set of recommended evaluation questions, the details of which have been provided in Annexure 1. For the process evaluation, CRISIL team reviewed program documents and interviewed key program stakeholders of the FINISH program. A qualitative approach formed the basis of the process evaluation, consisting of Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs). Each subsequent stage of the study is based on our understanding of the tasks/ stages identified in the scope of work. CRISIL followed robust and effective planning for the entire process of data collection on field as well as during online interactions.

Key stakeholder groups and sampling framework for the study

The study involved qualitative and in-depth interaction with the FINISH team, implementation, and the beneficiaries. The criteria considered for the selection of implementation partners as well as beneficiaries have been highlighted below:

Sampled Partners for KIIs

Zone	Program Locations	Key Informant Interviews
North	Bihar	2
North	Uttar Pradesh	1
Central	Madhya Pradesh	1
West	Gujarat	2
East	Odisha	2
South	Tamil Nadu	2
Total	Total	10

Sampling Criteria

- Representation from each geographical region
- Coverage of major intervention states from each region
- Type of partner (NGO, MFI, Cooperatives)
- Current status of partnership
- Tenure of association

Development and finalization of data collection tools

The data collection tools used for the process evaluation include Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs). KIIs were conducted with team members of FINISH to understand the approach adopted towards achieving the objectives of the program. KIIs were also undertaken with partners' representatives to get a thorough understanding of their involvement, collaborative efforts, challenges, and contributions. FGDs were undertaken with beneficiaries to understand on-ground situations including expectations, challenges, and perceptions of beneficiaries & other stakeholders. These tools were finalized post review by the FINISH team. Concurrently, the CRISIL team facilitated the training of enumerators for successful data collection.

Key stakeholders

FINISH Team

Partners (MFI, NGOs, Co-operatives etc)

Community members of the areas under intervention

Evaluation Design

The evaluation consists of three main phases:

- **Phase 1: Inception and document review**
  During the inception phase, a range of documents provided by FINISH were reviewed. The evaluation team initiated a detailed discussion with FINISH officials to understand the program. CRISIL team reviewed documents such as annual plans, FINISH mid-term study report, final program report etc. This helped to understand the intervention, roles, and responsibilities of the stakeholders, identify gaps and focus areas for primary data collection and formulate the questionnaires and guidelines.

- **Phase 2: Stakeholder interaction and data collection**
  Post-development of questionnaires, an inception report was shared with the FINISH team consisting of questionnaires and sampling framework. Post-approval of the same, the field team was trained on the questionnaires. A gender-balanced team with mixed and complementary skill sets was ensured during the field visits in a manner that data collection could be structured to maximize opportunities to gather perspectives from the field. The CRISIL team ensured a rigorous monitoring system through continuous real time engagement with the enumerators, which ensured capturing doubly verified data. Simultaneous discussions were undertaken with the NGO and MFI staff in alignment with the key informant interview schedule developed.

- **Phase 3: Reporting and communication**
  Post completion of the interaction, data was collated by the evaluation team and analyzed extensively across multiple parameters and evaluated the processes in adherence to the OECD DAC criteria of relevance, effectiveness, efficiency, impact, and sustainability. The report highlights the key findings and relevant recommendations.

3. Findings

The findings of the FINISH process evaluation are classified across the two models,

A) FINISH in collaboration with partner organizations, who are responsible for the implementation
B) FINISH as implementation partner in collaboration with the government

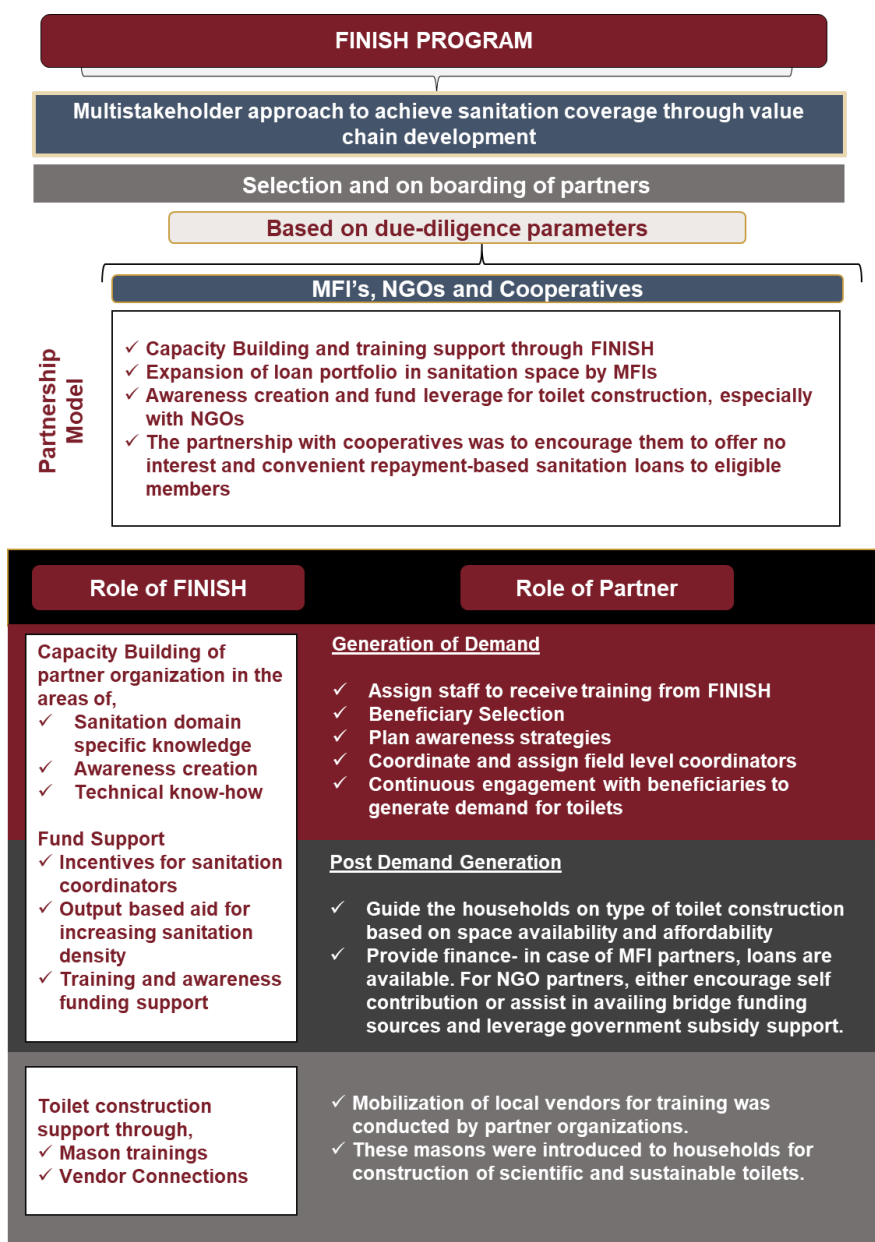## 3.1 Model A: FINISH in collaboration with partner organizations

Model A is the primary mode of delivery of FINISH intervention across India with 60+ partnerships across MFIs, NGOs, cooperatives, etc. The process adopted in this method has been highlighted below:

3.1.1. Program design & implementation

FINISH program adopted a structured approach for program implementation across locations through partners. The partners were trained by experts of FINISH team. Along with guidelines from FINISH for program implementation, they had the liberty to capitalize on their existing experience of implementing similar programs.

A) Selection and on-boarding of partners

The FINISH team approached pertinent NGOs, MFIs, and co-operatives working with marginalized communities with credentials in relevant and intersecting work areas in the field of sanitation. Selection of the right partner was based on a systematic due diligence in which FINISH validated relevant documents of organizations, such as past audit reports, performance reports, etc. Site visits were undertaken to gauge the extent of their reach. Based on the above parameters, the selected organizations entered a mutually agreeable contract with FINISH. The contract covered the objectives, roles & responsibilities, guidelines, budget, targets, deliverables, timelines, legal provisions, etc. for both partners.

FINISH PROGRAM

Multistakeholder approach to achieve sanitation coverage through value chain development

Selection and on boarding of partners

Based on due-diligence parameters

Partnership Model

MFI's, NGOs and Cooperatives

✓ Capacity Building and training support through FINISH
✓ Expansion of loan portfolio in sanitation space by MFIs
✓ Awareness creation and fund leverage for toilet construction, especially with NGOs
✓ The partnership with cooperatives was to encourage them to offer no interest and convenient repayment-based sanitation loans to eligible members

Role of FINISH	Role of Partner
Capacity Building of partner organization in the areas of, ✓ Sanitation domain specific knowledge ✓ Awareness creation ✓ Technical know-how **Fund Support** ✓ Incentives for sanitation coordinators ✓ Output based aid for increasing sanitation density ✓ Training and awareness funding support	**Generation of Demand** ✓ Assign staff to receive training from FINISH ✓ Beneficiary Selection ✓ Plan awareness strategies ✓ Coordinate and assign field level coordinators ✓ Continuous engagement with beneficiaries to generate demand for toilets
	Post Demand Generation ✓ Guide the households on type of toilet construction based on space availability and affordability ✓ Provide finance- in case of MFI partners, loans are available. For NGO partners, either encourage self contribution or assist in availing bridge funding sources and leverage government subsidy support.
Toilet construction support through, ✓ Mason trainings ✓ Vendor Connections	✓ Mobilization of local vendors for training was conducted by partner organizations. ✓ These masons were introduced to households for construction of scientific and sustainable toilets.

B) Capacity building

Following the on-boarding process, capacity-building activities were undertaken with two stakeholder groups: implementation partners (NGOs, MFIs, co-operatives etc.) and the masons. The areas covered under the training include:

- Building domain-specific knowledge on sanitation and technical know-how
- Augmenting understanding and capacity on demand generation for sanitation and behaviour change

The partner organizations leveraged their operational teams and, in some cases, also deployed dedicated human resource teams for the implementation of the FINISH program. These team members were facilitated with the requisite training to acquaint themselves with the program and sector at large. The training module followed a cascading approach where need-based content and delivery was planned for top level, mid-level, and field level staff.

Additionally, masons were also trained on improved sanitation system constructions. Masons play a critical role in sanitation value chain but lack knowledge about toilet construction work in a scientific manner. The FINISH training equipped the masons with scientific knowledge on sanitation technology for constructing improved and cost-effective structures. However, there were few instances of gaps observed in implementation on the ground, for example, in certain areas, toilets were built near to hand pumps even though it should be at least 10 meters away to ensure clean drinking water. To overcome these challenges and to scale up the impacts, FINISH would require expansion of its mason training program through increased mason engagement and improved training modules.

C) Beneficiary selection & mobilisation

The partner organizations were given the liberty to select beneficiaries, with an understanding of reaching out to underserved communities in need of sanitation systems. Because of their previous experience of working with the relevant communities, they were aware of their sanitation needs as well. This formed the basis for selecting beneficiaries from marginal communities, poor financial backgrounds, households without toilets, etc. Many partners sought the assistance of women beneficiaries from Self Help Groups (SHGs) and Joint Liability Groups (JLGs) in reaching out to community members. For better estimation, some partner organizations also conducted need-assessment and baseline surveys in specific locations.

"Selection of right beneficiaries, who will benefit from the social programs is crucial. The partners capitalized their existing relationships with the communities to ensure last-mile reach for selecting the ones with needs"- NGO partner

D) Awareness creation resulting in demand generation

The FINISH program focused on collective behaviour change to encourage beneficiaries to adopt and construct sanitation facilities. For this purpose, the partners undertook awareness generation activities through community-level meetings, focused group discussions, expert sessions, street plays, video screening, etc. In certain cases, the FINISH team also provided awareness generation materials such as videos, charts, pamphlets, etc. FINISH team also had provisions of facilitating incentives to sanitation field coordinators for awareness generation. To improve the effectiveness of mobilization, some partners selected catalysts/ ambassadors for generating community-level awareness around the need for sanitation systems. In most cases, the partners initiated the process through community-based awareness activities and then connected with interested people on a one-to-one basis. Continuous engagement and awareness creation helped partners towards organic demand generation for sanitation systems.

E) Fund mobilization

Since several beneficiaries lacked the financial capability to construct toilets, funds were mobilized through external financing mechanisms or leveraging government funds and subsidies.

- The MFIs developed specific loans to be provided to the eligible beneficiaries. The loans were facilitated after thorough due diligence of the financial status, loan and repayment history, availability of land for construction of toilets, etc., thereby weeding out the ineligible candidates. In the case of SHG and JLG members, the process of availing loans through MFIs and NGOs was easier due to their inherent lending security and past relations with the organizations.

- For beneficiaries, another source of funds included government subsidies, self-contribution, lending from relatives, etc. Some people were able to get loans from cooperatives, and NGO funds at low or no interest rates as well.

3.1.2. Program partnership

In alignment with the vision of the FINISH program, association with MFIs, NGOs, co-operatives, SHGs, JLGs etc. ensured intensive reach across intervention states. The partners adopted their implementation models and lessons from implementing similar programs in the field. These approaches were in alignment with the overall objectives of the FINISH program.

Micro Finance Institutions (MFIs):

While microfinance is primarily associated with income generating activities for small-scale entrepreneurs, sanitation microfinance, in contrast, facilitates loans to households for promotion and creation of sustainable sanitation facilities. Considering the essential role of credit in sanitation space, FINISH has partnered with MFIs since the program inception. As a technical partner, FINISH provided the MFIs with the requisite knowledge and expertise in the sanitation domain allowing them to create and expand their sanitation portfolios. Several MFI partners have credited FINISH for their entry into the sanitation space. Apart from loan support, these MFIs also conducted awareness campaigns to promote demand generation of sanitation loans and to instil positive behavioural change in the beneficiaries towards toilet usage. The issue with respect to interventions by MFIs was presence of high interest rates, tedious documentation exercise and intensive due diligence to ensure repayments from clients. This led to exclusion of relevant marginalized beneficiaries as well.

Non-Government Organizations (NGOs):

FINISH program started partnering with NGOs based on a strategic decision to diversify partnership patterns. The NGOs were selected based on their prior experience of working with the community at the grassroots level. Some of these NGOs were previously engaged in sanitation and water-related programs, while many of them got exposure to the field of sanitation post association with FINISH. Although, FINISH program didn't mandate engagement of partner organizations in direct construction work, few NGOs participated in the construction of toilets, ensuring end-to-end implementation.

Co-operatives:

FINISH partnered with cooperatives to promote them to offer loans/ advances exclusively to eligible members, practically at no interest rate and convenient repayment option, including payment made through milk for sanitation. However, cooperatives did not partake in the behavioral change component of FINISH program considering digression from their core work.

Self Help Groups (SHGs)/ Joint Liability Groups (JLGs):

The partner organizations developed associations with community members/ beneficiaries through existing or formulated Self Help Groups (SHGs) or Joint Liability Groups (JLGs) for better coordination and accountability, especially for loan disbursements. These group dynamics was essential to ensure loan recovery.

Local Government Officials:

Some of the NGO partners were successful in developing partnerships with local government officials to avail subsidies for beneficiaries on priority, since the model suggested by them for toilet construction was as per the government norms. In certain cases, these NGOs also collaborated for their assistance in awareness generation activities. It was pertinent that good relationship with local government allowed the program to function smoothly and efficiently.

3.1.3. Fund Flow Model

The process of fund flow is initiated through an agreement, which is signed between FINISH and the partner organization during the commencement of the partnership. This agreement contains mutually agreed clauses on various objectives, goals, targets, and funds associated with the program. It also highlights the fund amounts to be disbursed by FINISH on mutually agreed timelines. The terms of the agreement vary from partner to partner based on their targets. . The partners were supported with a grant component per sanitation systems subject to results from the random validation. FINISH also had a component of OBA for construction in addition to encouraging and incentivizing the partners for achieving higher sanitation density (above 80 percent). In case of partners who received the funding support, they were expected to generate receipts, vouchers, and payment notes referring to FINISH or the MFI in-charge of FINISH's funds. The auditors scrutinized these credentials, and on the guidance of FINISH, released the funds to other partners.

3.1.4. Monitoring

FINISH team, for on-ground monitoring and co-ordination, set up a Project Implementation Team (PIT) for tracking the field activities along with selecting, training, and supporting the partners. The program adopted a dual approach to monitoring, first at partner level and second at FINISH level.

A) Monitoring and reporting by partners

The monitoring by partners was based on Key Performance Indicators (KPIs) set by the FINISH team. These KPIs collected periodic program outputs with a focus on proper utilization of resources and generic expenditures incurred under the program. Based on these program outputs (target achievements), the partners received funds from FINISH. To ensure adequate documentation of achievements, pre- and post-construction photographs were also collected by partners. However, there remained inconsistencies in the case of reporting frequencies reflecting structural gaps in monitoring. Some partners submitted monthly reports, while others provided quarterly reports. As per the contract template, the partners were required to report quarterly along with mid-term reports after 6 months and end-line reports after completion of the program. Discussions with partners suggested that they were seldom providing mid-term reports. In the case of monitoring of loan disbursements, the MFI partners undertook random loan utilization checks to ensure funds utilization for toilet construction or maintenance work.

B) Monitoring by FINISH through Project Implementation Teams

The FINISH PIT consisted of respective state and area coordinators, who were responsible for undertaking random toilet checks, based on the periodic achievement status submitted by partners. The validation was done at regular intervals by a trained independent team along with concurrent monitoring with review of progress reports. It was primarily conducted through random household visits of beneficiaries using random sampling in accordance with methodology approved by UNU Merit/IFS. It also ensured if the usage of facilities is in order. Based on these checks, FINISH released the tranche payments to the partners. The method of reporting, however, lacked clarity on mechanisms to verify that the toilets were constructed exclusively under the FINISH program. Another issue was delays in validation of infrastructure, which led to delay in payments to partners. In some cases, these delays extended up to six months. At times, a long gap between the construction of toilet and validation led to wear and tear of the structures (due to natural disasters such as floods), affecting the payment of dues further, and discouraging the partner organization. As a result, it is of paramount importance to strengthen the system of monitoring and validation in a timely manner.

C) Program Assessment

A mid-term impact assessment was conducted by FINISH academic partners IFS and UNU-Merit and by an external consultant appointed by WASTE, Dr. Surashree Shome in 2015. The assessment was conducted with a mix of quantitative and qualitative methods including household survey, discussion with communities, partners, and implementation team. The key objectives were to analyse the situation of the progress on milestones set for FINISH

and to develop further strategies to improve the achievements of the programme. A closure report of FINISH program was also prepared by WASTE to map the key impacts of the program.

3.1.5. Management of challenges, support, and feedback under the program

A) Challenges

The most challenging aspect of the program was awareness and demand generation. The aspect of behavioural change was notably testing, especially due to social division and village dynamics, based on gender and caste. The women beneficiaries were more likely to agree to construct toilets than male beneficiaries, as they faced scathing challenges because of open defecation. However, they also seemed to have low decision-making power affecting their influence over household decisions to construct toilets. As a result, the partner organizations had to put in additional efforts to persuade the household heads, mostly men, through constant follow-ups, to achieve results. In a few cases, men were even reluctant to speak on issues surrounding sanitation.

Along with awareness generation, funds availability was a huge challenge. Initially there were issues in convincing MFIs to get into lending for WASH, which is typically classified as 'non-productive' lending but as the program progressed and partners increased, the resistance of MFIs slowly decreased. Moreover, beneficiaries, who were willing to construct toilets were hesitant to take sanitation loans owing to high interest rates. Many beneficiaries identified financial cost and affordability as the key reason for not having a toilet prior to FINISH intervention. Successive motivational meetings by partners and prior acquaintance resulted in mobilizing these beneficiaries in taking up sanitation loans as well as for opting for self-contribution in many such cases.

Beneficiaries also faced difficulties in availing subsidies, however, partners in some cases helped them to complete required procedures. Post-construction of the toilets, the most critical challenge was to motivate people for continuous usage of the systems. Although women and children were highly motivated to use toilets regularly, motivating older men was a key challenge.

B) Support received from FINISH

Partners received well-rounded support from the FINISH team under this intervention. FINISH 's long terms vision and focus on effective and balanced training and capacity building of the partners ensured that they understand the objectives of the program. The technical aspects covered under the training program helped the partners in assessing the challenges of beneficiaries and adopting accurate strategies to create awareness and mobilize the community members. The handouts and training materials aided the mobilization process since the partners ensured that the discussions are visual. Since the training assistance was not limited to partners and covered local masons, it was easier to align the expectations with regards to construction as well. Further, the provision of output-based incentives (OBA) to partners for achieving higher sanitation density encouraged and supported them to put in more effort to ultimately complement the government's vision of ODF villages.

C) Feedback mechanism

In a community driven program, as that of FINISH, engagement of beneficiaries at all levels of program execution becomes crucial. Ensuring experiential feedback from beneficiaries comes in handy, especially in case of a dynamic sector like sanitation which involves constant pursuance to establish a set usage pattern.

In the FINISH program, feedbacks were taken at various stages from different stakeholders from time to time. Several partners suggested that expert feedback from FINISH assisted them in strengthening their work in the sanitation domain. It helped them continuously improve their strategies and modify implementation methodology as and when required. Few partners also took formal feedback from beneficiaries through baseline surveys and informal feedback through door-to-door or community level chats during field work. It helped them understand the challenges and expectations of beneficiaries. However, a formalized structured feedback mechanism with set intervals to be followed by all the partners alike was not in place, which led to non-uniform capturing of feedback.

3.2 Model B: FINISH as implementation partner in collaboration with government

In Model B, FINISH acted as an implementation partner with government partnerships. This model was adopted in Rajasthan and forms a unique case.

In the case of Rajasthan, model A was not feasible since the MFI's penetration was low. As a result, FINISH partnered with the local government of Dungarpur in Rajasthan to achieve at least 90% sanitation density to ensure sustainable health benefits across the population. During the same period, UNICEF was also working on a sanitation program in the area, allowing for a scope of collaboration. UNICEF supported FINISH's advocacy work with the government. Post success of the initial phase, FINISH expanded its model to more districts in Rajasthan along with the adoption of the Public-Private Partnership (PPP) framework. It partnered with private corporates in addition to the government and UNICEF. During inception, responsibilities were assigned to different stakeholders from FINISH as well as the government. FINISH team, at the district level, was led by a program manager. Community mobilizers and motivators were also engaged, where mobilizers reported to the program managers and motivators reported to these mobilizers.

FINISH team was trained by master trainers from agencies recognized by UNICEF and by trainers from WASTE as part of the multi-country initiative, who subsequently trained people from communities. FINISH trainers also conducted capacity-building training for the team members from the government department to effectively implement and monitor the program. Post-training, leaders from communities were identified to participate in the awareness process as motivators. FINISH convinced the state government to allocate INR 3,000 per month for these motivators to ensure their enthusiasm and motivation. FINISH team also delivered training on scientific models and ways of construction to the masons from the communities to further the construction process.

Targeting beneficiaries was undertaken based on baseline surveys and existing government data. This data was further complimented with inputs from district and block level officers. In the finalized localities, almost 90% of the total beneficiaries were from tribal communities. The initial program implementation began in phases covering 10 villages out of 40 villages, followed by scaling the intervention in the remaining villages in subsequent phases within 2 years' span. Awareness generation, being key to the intervention, was undertaken by the local mobilizers and villagers, bringing in a more community-driven approach. Several people were motivated to not only construct toilets but also for providing suggestions and contributions, which reflects the interest levels of the community members.

Post awareness generation, the community reflected a genuine interest in the construction of toilets with the help of government subsidies. However, the government subsidies were to be only received after toilet construction, posing a challenge for the people with a dearth of funds for construction. To overcome this, FINISH collaborated with vendors to supply materials for construction, sans an advance payment. Vendors were assured of their payments from the government subsidies channelized through FINISH after the satisfactory construction of toilets. After the launch of the Swachh Bharat Mission, FINISH lowered its supply chain intervention in the program location, however, it convinced vendors to maintain the connections with the beneficiaries to carry out the earlier model by directly receiving their

payments from subsidies received by beneficiaries. The FINISH team also galvanized the community members to make timely payments to the vendors as soon as they receive the subsidies. This ensured timely delivery of required material and construction of toilets, also maintaining a healthy relationship between the community and vendors.

The intervention in Rajasthan engaged stakeholders in the selected districts with technical support and follow-up for continuous field monitoring for achieving ODF environment, developing state pool of experts on CLTS (Community Led Total Sanitation) and Community Approaches to Total Sanitation (CATS), and knowledge generation on CATS. In case of CLTS, FINISH took a step forward, where not only sanitation systems were promoted with focus on safe management but also financing support was extended for toilet construction.

4. Evaluation

4.1. Relevance

The FINISH program was initiated with a goal of expanding sanitation coverage in India by leveraging government schemes, programs, and activities of micro finance institutions (MFIs) and non-government agencies (NGOs); and establishing convergence among health, sanitation as well as financial inclusion. The evaluation showed that the interventions and outputs of the FINISH program were broadly consistent with the expected results. Its relevance can be mapped through its consistency with requirements of alignment with global and national priorities, target groups, and other processes. In assessing whether the intervention has been relevant, the evaluation team has found resonance with international agenda (SDGs), national strategies related to WASH and most importantly, with the needs of the target group.

Alignment with global & national priorities

Universal access to clean water and sanitation is one of the 17 Global Goals that make up the 2030 Agenda for Sustainable Development. In congruence with SDGs and erstwhile MDGs, Govt. of India launched Nirmal Bharat Abhiyan (NBA) in the duration of 2009 to 2015, closely followed by Swachh Bharat Abhiyan (in 2015) to eradicate open defecation practice in

> **SDG 6** (among the 17 goals formulated by the UN to be achieved by 2030) aims to expand access to basic water and sanitation services and close the gaps in service quality.

> **Goal 6.2:** by 2030, achieve access to adequate an equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations

the country. The FINISH program was on the lines of global standards, focusing on the adoption of sustainable framework through safe management of sanitation whilst the global environment was on MDGs, paving way for smooth and direct adoption of SDGs. In case of national priorities, the FINISH program has been able to contribute towards the same through its targets aligned around creation of sanitation systems and bringing in the necessary behaviour change for ensuring sustained usage among the beneficiaries. The intervention has contributed to the revitalization of the WASH sector priorities of both government and beneficiary communities. FINISH's collaboration with state and local government departments towards providing & improving sanitation facilities not only helped them in recognizing the importance of the initiative but also proved beneficial in ensuring accountability in the long run. Partners have helped beneficiaries avail subsidies under different programs, which has ultimately complemented the government's efforts under NBA & SBM as well as achievement of ODF status.

Alignment with the needs of the target groups in program locations

National Family and Health Survey (NFHS) 2006 suggested that proportion of households without any toilet facility is much greater in rural areas (74 percent) than in urban areas (17 percent). Afterward, District Level Health Survey 2008 showed that 19.2% population in urban and 65.8% in rural was practicing open defecation and 17% of the urban and 74% of the rural population were going out for open defecation. Considering the same, FINISH program was largely implemented in rural areas lacking sanitation facilities and witnessing higher incidences of open defecation. Strategic partnerships with organizations having strong grassroots and regional connect allowed FINISH to leverage their prior experience of working with socio-economically weaker and marginalized communities to target the most needful. The states selected under the intervention suffered from higher rates of open defecation in the country, with woefully low sanitation coverage, especially Odisha (79%), Jharkhand (78%), Bihar (73%), Madhya Pradesh (72%) and

"When a family, not aware of its right to basic sanitation, gets a decent toilet for the first time, it's not just a toilet to them, it's something to celebrate because it represents the chance of having a better and healthier life"

Rajasthan (67%)[13]. The program created awareness around government schemes and facilitated beneficiary access to subsidies. FINISH was able to create an ecosystem by targeting the right beneficiaries in the areas where the partners were operational, generating demand for sanitation systems, and identifying innovative funding avenues for the construction of sanitation systems.

However, since the beneficiary selection was predominantly dependent on the outreach of partners, the process lacked uniformity in beneficiary selection across geographies. While some partners did undertake baseline studies to select beneficiaries, few other partners solely relied on their previous knowledge of the beneficiary groups in need of sanitation systems. This situation may have led to the non-inclusion of certain marginalized communities in need of sanitation facilities. Lack of data in the sanitation sector further added to the existing concern. Additionally, several partner organizations such as MFIs, and NGOs, usurped lending procedures based on standardised loan processes such as repayment capabilities, income of individual etc. which might have led to exclusion of extremely poor households, with very low income to avail funds for toilet construction.

Catering to the unrealized opportunity in the sector

This program provided significant opportunities to financial institutions to create services for the credit starved WASH sector. NGO partners were able to improve their technical know-how related to sanitation programs and mobilize MFIs and banks to lend to the communities in need of sanitation systems. The partner MFIs were able to enter the sanitation domain and expand their loan portfolio, at a time when these loans didn't even form a part of the priority sector lending. Additionally, FINISH's careful consideration for capacity building opened multiple doors for partners and provided them the experience and knowledge to partner and participate in several other sanitation programs. It led to MFIs and NGOs

seeking sustainable financing solutions rather than being dependent on grants. They were able to leverage different financing sources available for the achievement of toilet targets.

The core of FINISH's intervention was catering to both the demand and supply side of the sanitation conundrum. Through the right capacity-building strategy adopted for partner organizations to create awareness among the communities, FINISH was able to generate organic demand in the target areas for the construction of sanitation facilities. This demand was fulfilled through timely interventions by NGOs and MFIs with loan products, thereby catering to dire monetary needs. The technical gap was bridged by building capacities of partner organizations

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[13] National Family and Health Survey (NFHS) 2006

and masons. The value chain was developed through the creation of rural sanitary marts and liasioning with sanitation material suppliers for direct linkages with beneficiaries. FINISH worked both upstream, through influencing and advocacy work, and downstream, mainly with the help of implementation partners for direct engagement with target communities through a range of activities aligned to the government's NBM and SBA strategy and SDGs' priorities at the country level and globally. While there are certain areas of overlaps between the FINISH program and the intervention under SBM, which includes mass scale behavior change, construction of household-owned toilets, focus on sanitation density etc., these have led to the progress of many Indian villages towards open defecation free status.

4.2. Efficiency

The analysis of efficiency in sanitation and hygiene space necessitates a nuanced approach drawing on the organization's ability to improve quality of service delivery, alongside the organization's capacity to raise finance for construction of sanitation systems along with leveraging upon the government's subsidies for the poor. The intervention ensured a judicious approach, with due consideration to the following:

- Demand side, by changing people's behaviour towards adopting improved sanitation practices
- Supply side, by ensuring a well-functioning private sector-based supply chain for sanitation products and services

FINISH has ensured adequate consideration of value for money and quality inputs for quality outputs through a number of linked approaches, effective strategies for utilization of local resources for construction and management of sanitation systems as a measure for managing costs of sanitation. The capacity building of local masons and channelizing sweat equity by community members further brought down the sanitation system costs. The FINISH program interplayed between these parameters to achieve operational efficiency, through funding the partners for capacity building training, awareness generation, staff incentives, and in some cases, output-based aid (OBA) incentives.

Efficiency Parameters:

A) **Selection of partners/ beneficiaries:** The targeting of grassroot organizations with strong regional presence for partnership allowed FINISH to leverage their exposure to target beneficiaries. This process was instrumental primarily in two ways:

- FINISH saved the cost of mobilizing new beneficiaries and developing new connections
- As communities are more responsive to organizations they have worked with, or know of, FINISH was able to relatively diminish the challenge of awareness generation by leveraging the existing relationships of partner organizations.

B) **Community involvement:** The partner organizations had operational autonomy for achieving the objectives of the program. Several of these organizations engaged with the community through SHGs and JLGs. The role of these groups was efficient through various channels:

- **Channel 1:** Various partner organizations engaged women through training them as community health facilitators and field coordinators. These women were responsible for enhancing community awareness. This initiative especially empowered women by providing them livelihood opportunities and exposure in the sanitation space. Further, the involvement of local women created a snowball effect in mobilizing other women as well, by developing a sense of trust among the beneficiaries, thereby increase the impact of awareness activities.
- **Channel 2:** Certain partner organizations, especially the MFIs merged their regular repayment meetings with sanitation awareness sessions. The community-based trainers would attend these sessions to target SHGs or JLGs of women to encourage them for construction of toilets. This method encouraged group borrowings through limited number of training sessions. Additionally, it led to word-of-mouth discussions within the community creating further awareness and demand.
- **Channel 3:** The group lending activity created social pressures among members ensuring timely repayments of loans. Additionally, since all women in the group created toilets together, they developed a sense of belongingness around sanitation issues. This led to natural community level monitoring for usage of toilets.

- **Channel 4:** The involvement of women into this process allowed for empowerment and creating a basis for sustainable impact for next generation. Certain organizations also trained women for construction of their own toilets to reduce dependency on masons, thereby further reducing costs of construction and increasing ownership and accountability. In a program implemented by FINISH in Rajasthan, the community was strategically involved in the construction of toilets as well.

Apart from the SHG and JLG involvement by partner organizations, the local panchayat bodies and leaders were also consulted for smooth processes. This allowed for fewer bottlenecks and timely completion of programs and activities.

C) **Space and affordability-based toilet construction:** FINISH had provided guidelines to partner organizations on the type of toilets that can be constructed. These guidelines were based on the space and affordability of the beneficiaries. The flexibility allowed partner organizations to innovate, leverage, and guide the beneficiaries accordingly. This led to highly efficient outcomes from the perspective of toilet construction. To elaborate,

- A partner organization working in a flood-prone district of Bihar with an extremely vulnerable group of people started constructing toilet pits from bamboo, which were available either free of cost or at extremely low rates. The households themselves were involved in the creation of the pits, which were not only sustainable but also durable. The super-structures were made from flex, curtains, and other waste materials. The partner organizations urged the households to construct low-cost toilets first and upgrade the same as and when they find it feasible. This method was efficient, considering the challenges that the household faced due to lack of income, and areas being disaster-prone in nature.
- Several partner organizations guided the households for building FINISH specified low-cost toilets based on their space and affordability. For example, in case of limited spaces, the twin pits were adjoined and/ or rectangular and for affordability, toilet with junction box connected to single pit was suggested. The idea was to promote the family to build a second pit from junction box once family has sufficient money. In case when families had space, they were guided to properly design twin leach pits and septic tanks instead of extra deep pits and huge holding tanks, which are expensive to construct and maintain. Additionally, the partners ensured that it was in line with government specifications to avail subsidies for the beneficiaries. In certain cases, the NGOs had coordinated with Panchayats to receive the government incentive amount on priority. This led to efficiency in leveraging space and government policies.

The evaluation found evidence of improved efficiency, at scale, with the delivery of ODF results, due to effective triggering and the adoption of a robust approach for community-led sanitation, with sanitation financing and marketing, being some of the notable examples of efficient delivery. While program-related financial resources appear sufficient, challenges in ensuring that fund disbursement take place in a timely manner have been encountered in certain cases. A major barrier to timeliness has been delays in verifying the status of toilet construction in villages, where partners have claimed successful completion. Another issue has been to consistently capture the amount of self-contribution by individual beneficiaries or clients. The program maps the loan amount taken by beneficiaries for construction, but the amount contributed on their own is unknown, affecting the programs' ability to map the total cost of toilet construction. As a result, it proves challenging to trace the benefits of economies of scale through reduction in cost of constructions. The Rajasthan model, however, clearly reveals that if economies of scale are met, the cost of toilet construction falls.[14]

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[14] Discussions with FINISH Team

4.3. Effectiveness and Impact

The effectiveness and impact of the FINISH program can be measured against the program goals and objectives of scaling sanitation efforts across India by leveraging multi-stakeholder participation.

A) **Awareness and capacity building:** From the study, it was revealed that most of the partner organizations found awareness generation and behavioural change to be the most challenging aspect of the program. Since the people from the program areas were habitual of defecating in the open for generations, the thought of investing in sanitation systems was quite unsettling to them. They were even reluctant to have a discussion on issues around sanitation and toilet construction. As a result, the partner organizations adopted innovative methods to bring about awareness. Some of the partner organizations-initiated door-to-door visit for conducting personalised sessions, while some took sessions on awareness building in SHG and JLG meetings. Several other methods such as focused group discussions, street plays, moving screenings, banners, flexes etc. were also carried out. In certain cases, narratives, past experiences, and challenges faced by local people were used to create awareness for transformation of perception around sanitation. To illustrate, a partner organization used a rather unfortunate incident of tiger attacks while open defecation to promote toilet construction. It was a highly effective method for boosting the demand for sanitation systems instantly.

> *"When FINISH and partner organizations started their awareness activity, the farmers stopped allowing us from using their fields, leaving us with no avenue other than construction of toilets."*

This large-scale awareness program was possible due to FINISH's intervention continuous knowledge dissemination. In Rajasthan, FINISH conducted capacity building and training activities of government officials and team members which was effective in strengthening government's existing monitoring system and developing better approach towards sanitation. However, the mason trainings conducted for capacity building of local masons and artisans to construct toilets in a scientific way were not equally effective.

B) **Cost reduction & supply chain strengthening:** Through FINISH program, the partner organizations were able to encourage beneficiaries to construct toilets via loans from MFIs. Several SHG groups from an MFI partner in Buxar in 2012 raised the issue of affordability since the toilets were very expensive. The other challenge was people's reluctance to accept loans at high interest rates for construction of toilets rather than using it in livelihood activities. The partner organizations would connect to those who were eligible for subsidies with the local level institutions for government subsidies after completion of toilet construction. However, since the loans were given based on the eligibility of the borrower, several beneficiaries were left out. They had to slowly collect funds to construct a toilet, hence, delaying the process. This problem was addressed in Rajasthan model, where FINISH connected beneficiaries with construction material vendors to intervene in supply chain side. FINISH provided assurance to vendors about their payments through subsidies received by beneficiaries. This led to construction of toilets by households that weren't able to secure a loan.

> *"My husband didn't want to take a loan for the construction of toilet, but the NGO ensured him certain amount back from the government, so he agreed. It's very comfortable now."*

C) **Participation of MFIs for WASH lending:** The initiation of FINISH program began with only one MFI partner due to reservation and resistance among institutions to facilitate WASH lending, as they considered it to be non-productive. However, consistent efforts on the part of FINISH along with the continuous hand holding and capacity building support led to a change in perception, and as the program progressed, more than 15 MFI partners joined to lend for WASH purposes.

D) **Impact on beneficiaries:** The beneficiaries of the program acknowledged the benefits and convenience of toilet construction because of the FINISH intervention. They cited issues of infectious disease transmission, long-distance travel for relieving themselves, lack of privacy for women, animal attacks etc. prior to construction of toilets, especially during monsoon.

"We feel better now that our girls don't have go out on the fields early in the morning; it was very risky. We also sleep peacefully at night, earlier, we used to worry if we had to relieve ourselves late in the night"

4.4. Sustainability

Through FINISH program, over 1 million toilets have been constructed across the country following a multi-faceted approach involving capacity building, technical guidance, output-based incentives, market linkage, etc. However, the success of the program can be ultimately determined through its long-term impact, and the resilience of the implementation partners in the sanitation space, both forming the basis of sustainability. While the intervention has resulted in positive change at the community level, a paradigm shift in sanitation requires an integrated approach. It seeks multi stakeholder engagement, synergies of vision and participative monitoring of the intervention across the entire sanitation value chain.

A sanitation program's sustainability can be envisaged on multiple fronts; however, it primarily depends on,

1. Development of program ownership among implementation/ partner organizations to ensure achievement of program objectives, even after the completion of the program
2. Continued use and maintenance of sanitation systems among beneficiaries, arising out of change in behavior[15]

FINISH's Sustainability Strategy

The FINISH program was operationally designed for building capacities, to ultimately empower communities through knowledge dissemination on safe sanitary systems and promote construction of toilets. The program recognized that community ownership of sanitation system installation is key to long term sustainability. Households proactively contributing for toilet construction through savings and sweat is a testimony to such efforts. This reflected the communities' desire to have sanitation systems at homes, solely based on needs and requirements.

According to USAID report, "The main obstacle in the use and maintenance of improved water and sanitation systems is not the quality of technology, but the failure in availing qualified human resources for management and organization technique, which leads to an appalling 35 to 50 percent of systems in developing countries become inoperable after five years."

To illustrate,
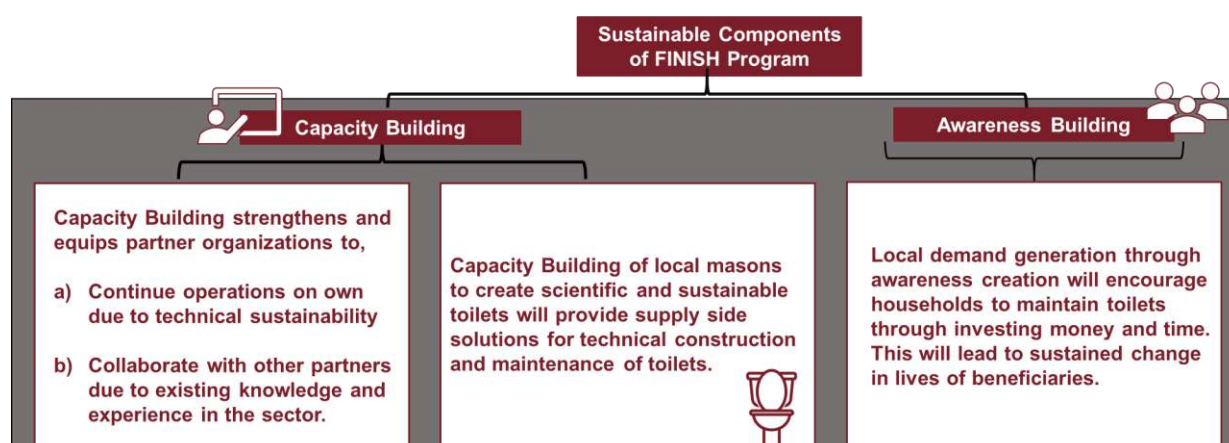
While there is increasing recognition of the complexity underlying WASH conditions in rural areas, we have tried to evaluate the sustainability dimension associated with the program through the FIETS model. FIETS was introduced by the Dutch WASH Alliance (DWA) as a tool to evaluate or monitor the sustainability of their WASH programs in

developing countries. The five key areas of sustainability include: Financial, Institutional, Environmental, Technological and Social sustainability.

Low Cost and Sustainable constructed Toilets under FINISH Program with bamboo

FGD with FINISH program beneficiaries

Applying FIETs sustainability approach to FINISH Program,

Sustainability Parameters	FINISH Program
Financial Sustainability	The collaborations with MFIs helped in catering to the financing needs by provision of loans for sanitation. Moreover, there have been numerous instances where beneficiaries have constructed and upgraded sanitation systems through self-contribution, highlighting a changing attitude about paying for sanitation. In the case of Rajasthan model, the public-private partnership model allowed for a self-sustaining relationship between the government, vendors, and beneficiaries for financing the toilets.
Institutional Sustainability	FINISH program applied a multi-stakeholder approach and involved multiple stakeholders at local, state and national levels, who were aware of their respective roles and responsibilities. The intervention focused on building strong partnerships by facilitating an eco-system of continuous learning for the partners who received adequate training to build their capacity in the sanitation space. This also helped development of dedicated teams for program implementation. The partners, being the facilitators of systemic changes, focused on promoting sustainable approaches to behavior change communication. Many partners helped set up local-level sanitation committees to regularly monitor and take corrective actions as required.
Environmental Sustainability	In the wider context of the natural environment, the FINISH program provided guidelines for the construction of sustainable toilets such as twin leach pit toilets. The twin pit toilet technology is designed to manage the faecal waste locally without polluting water bodies or soil. It ensures faecal sludge management at household levels making it an on-site sanitation solution. The

Sustainability Parameters	FINISH Program
	method also generates compost for improving soil fertility. Additionally, within FINISH program, in certain areas, sustainable materials such as bamboo was used for the construction of twin leach pit toilets. The FINISH program also encouraged and promoted the construction of innovative sanitation systems such as biogas plants and faecal sludge management plants for sustained, effective, and efficient use of human waste in various program locations. However, proactive uptake of the learnings evenly across all program locations is yet to be seen.
Technological Sustainability	Under the FINISH intervention, partners ensured that households were engaged in finalizing the type and structure of the toilet and were informed on maintenance, repair, and replacement measures. The focus was on procuring locally available materials, with due consideration to the geographical needs. In the field locations, the infrastructure exists and is in good working condition. However, there remains a scope of improvement on two fronts: creating disaster-resilient structures and all-inclusive and all accessible family sanitation systems.
Social Sustainability	The FINISH program ensured social sustainability through a multi-pronged approach, acknowledging the needs of the poor, and marginalized as well adopting gender-sensitive and culturally appropriate strategies. It facilitated the involvement of local communities at all levels of interventions, through training for awareness generation, further mobilization, construction work, etc. creating a local level, sanitation experts. Having realized that, the program advocated a gender-inclusive approach, to ensure that women have the required know-how in decision-making related to sanitation. Many partners, who helped form village-level committees for WASH, advocated for due representation of women in such committees. However, there remain variations in the extent of understanding and uptake of sanitary practices by men and women in target communities.

As reflected above, the inherent program features have the tendency to create long-term impact through development of capacities of organizations and facilitating large-scale awareness creation around sanitation. However, to maximize and ensure sustainable impact creation, development programs should have a thorough plan of exit strategy which shall provide the guided route for withdrawal of resources while ensuring that program goals are not jeopardized and the progress towards these goals are continued. However, there remains scope of improvement in the planning and execution of the exit strategy from the outset, in case of program closure. In some cases, partners were informed by FINISH well in advance about the closure of the program. This helped the partners in planning their activities to complete the targeted tasks and smoothly exit from the intervention areas without impacting the beneficiaries. Post exit of FINISH support in some areas, the partners continued the intervention by providing sanitation loans for toilet construction. Alternatively, there also have been cases where the partnership ended abruptly leading to a sudden break in the program activities causing confusion and gaps. However, in the case of Rajasthan, where FINISH was implementing the program on its own, the exit strategy facilitated self-sustainable linkages between vendors and beneficiaries. The linkages ensured a pre-setup on the type of materials, costing, etc. required for the construction of toilets. The pre-decided factors reduced the burden of decision-making for households making the process easy and smooth for the beneficiaries.

5. Recommendations and way forward

The FINISH program was successful in developing capacities of myriads of organizations and partners in the space of sanitation through its extensive knowledge and experience. Its capacity building activities were effective in creating the requisite impact not only through large scale sanitation program with critical focus on sanitation density, but also through expansion of partner's presence in sanitation space. The intervention was especially instrumental in changing the age-old perceptions of beneficiaries around sanitation and breaking barriers on set ways of people around open defecation. Acknowledging the lack of resources among the target groups, the program encouraged partners to actively develop new micro-finance products such as sanitation loans as per the community needs. Further, the involvement of community members helped FINISH program to scale up the impact by achieving greater beneficiary coverage in a comparatively shorter duration. It helped that the intervention was in tandem with the ongoing national level sanitation programs such as SBM, which complemented FINISH intervention and vice versa.

Informed by the analysis, assessment and findings set out in this report, the evaluation makes the following recommendations to further improvise the program delivery and impact:

A) **Development of robust impact and outcome aligned theory of change (ToC) in coherence with sustainability**
The FINISH program focusses on double leach pit toilets ensuring sustainability within the design component. To illustrate, in double leach pit toilets, when one pit is filled, the other pit is operational and the waste from previous pit is left to form compost. The entire process takes around 7 to 8 years. As a result, to ensure operational sustainability, the beneficiaries are supposed to empty the composts from the pits to use it as fertilizers and reuse the pits for future excretion. In this regard, FINISH will require a monitoring plan to ensure if people are continuing the practice in the aforesaid manner. It could be through random household level checks by the partner organizations in a sample of households.

B) **Alignment in advocacy measures to strengthen multi-sector integrated interventions**
The engagement of multiple stakeholders brought in diversified avenues of advocacy. However, it is important to align and sharpen the advocacy initiatives in a homogeneous manner to further scale and sustain the gains achieved in the first phase of the program. The initiatives should focus on fostering collaboration among the key stakeholders of the WASH eco-system to improve gender empowerment, local development, health, and hygiene etc. The intervention should continue to ensure inclusivity and extend its scope to include people with disabilities as well.

C) **Comprehensive contract documentation**
Since FINISH partners with grassroot organizations, it should consider their needs in the finalization of agreements and contracts. The documents shall encompass simplified language to the extent possible, and in certain cases, a multi-language approach (regional language) can be looked at for creating the document. This will build confidence and form clarity of roles and responsibilities among the partners, leading to better execution of program goals.

D) **Improving beneficiary selection process to cater to the poorest of poor**
Currently, the partner organizations are responsible for the selection of beneficiaries based on their own methods and existing community connection, which leads to diversity in the selection process across partners and may also lead to exclusion of extremely marginalized communities. The study findings revealed that the beneficiaries mobilized by NGOs were relatively more marginalized than beneficiaries mobilized by MFIs. As a result, FINISH

should consider partnering with socially inclined MFIs and NGOs to reach the poorest of poor who are otherwise excluded from the traditional microfinance lending space.

E) Strengthening mason training activities

Several partners cited the importance of mason training activity in the FINISH program for scientific and sustainable construction of toilets. However, qualitative discussions revealed that the trainings could be more effective through an increase in training duration. The module shall include practical training to strengthen learnings with focus on geographical and environmental challenges. For example, in case of flood prone areas, the toilet structural design could be innovated through raised platforms, such that it does not submerge or silt even if surrounding areas are submerged. Additionally, FINISH could also consider increasing the number of masons trained to ensure scientific toilet constructions in the area.

F) Improvement of robust evidence-based monitoring mechanism and reporting structure

FINISH should focus on strengthening its real-time monitoring system by involving communities to drive program effectiveness. The key community members or groups could be assigned to ensure complete toilet construction and consistent usage of the toilets by the households. The local level engagement will drive accountability among community members and create social norms against open defecation. Additionally, the program should mandate timely and regular reporting by partners on the status of toilet construction through the inclusion of MIS portals through a robust, efficient, and convenient data collection.

G) Awareness generation on waste management and circular sanitation economy

While villages have attained the open-defecation-free (ODF) status, it is critical that ODF behavior is sustained to ensure that the health and hygiene benefits continue to be realized. Facilitating access to solid and liquid waste management becomes crucial in this regard. The next phase of the program should focus on building further awareness on ease of cleaning of leach pit latrines, to ensure people do not stop using the facilities based on stigma around cleaning pits.

Additionally, regular workshops should be planned with the farmers, especially smallholder ones, to use the fecal sludge from pits as compost for crop production. The farmers can be oriented on the benefits of the same and the crucial steps that can be taken by them to effectively utilize the sludge for improving soil yield. This shall be a crucial step in introducing the farmer community to the concept of climate-smart agriculture and climate-resilient practices.

H) Establishing a proper feedback mechanism

FINISH program should incorporate formal channels to obtain timely feedback from both partners and beneficiaries. Through these channels, partners can suggest improvements and changes in the program design based on field-level experiences and beneficiary feedback. It will also be conducive in developing a systematic feedback loop to map the needs of stakeholders and bring about the required changes for larger impact and long-term beneficiary satisfaction.

I) Developing a clear exit strategy

The FINISH program should develop and document a robust exit strategy from the onset to facilitate the smooth closure of programs and ensure clarity among partners. The strategy shall provide FINISH with a standardized and guided route for withdrawing their support while ensuring that progress towards program goals is continued.

J) Exploring innovative financing for supporting sanitation initiative

To boost sanitation-related investments, FINISH should explore additional funding support for MFIs. There can be an on-lending model with the banks, MFIs and NGO-MFIs to encourage lending into the sanitation space. The program can explore further opportunities in the field of blended finance such as sanitation bonds by mobilizing multiple stakeholders in the sanitation space.

Way Forward

The FINISH program, in the first phase, has touched the lives of numerous underserved communities in need of sanitation systems. However, there remains scope to scale access to safe and cost-effective sanitation for the millions of marginalized communities spread across the country. NFHS 2019 revealed that sanitation coverage is far lower than it was claimed under the Swachh Bharat Abhiyan, especially in five key states. For instance, in Bihar, less than half of rural population lacked exclusive access to sanitation for their households, in case of Gujarat, around 37% residents lacked access to improved facilities. Similar issues also prevailed in Manipur, Assam, West Bengal, and Karnataka, with more than 30% rural households lacking access to sanitation systems.[16] The FINISH program can be scaled in these areas to increase coverage. The program should further promote a gender-inclusive component, engaging women in sanitation-related decision-making process as well. The program should continue to leverage its element of inclusivity and the experiences of its partners in the upcoming phases.

This being only a preliminary step, there's a need for FINISH to relook at the above-mentioned key suggestions which will give the necessary boost to the intervention to effectively impact the large base of the marginalized communities in need of sanitation. The second phase of the program should focus on the principles of "include, upgrade and innovate" across the sanitation value chain to ensure a more sustained impact.

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[16] National Family and Health Survey (NFHS) 2019-20

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ANNEXURE

Annexure 1: Key evaluation questions

Criteria	Key questions to be answered
Relevance	• To what extent have the objectives and implementation strategies of the FINISH INDIA programme been consistent with requirements of the target groups and country needs? • Have the objectives and implementation strategies of the FINISH INDIA programme been consistent with global priorities, as well as partner and donor policies? • Were the program areas well chosen? • How well does FINISH INDIA complement and fit with other ongoing sanitation programmes in the program area as well as other relevant sanitation programmes in India? (a short description of these programmes may be annexed) Are there overlaps or inconsistencies between different programmes?
Efficiency	• Was the budget defined adequately ex ante? Did the program budget make adequate provisions for all important goals, e.g., addressing gender and inclusion related specific objectives/activities? • Were funds and activities delivered in a timely manner? If not, what were the bottlenecks encountered? • How efficiently have resources (human resources, time, expertise, funds etc.) been allocated and used to achieve the program objectives? Did the results achieved justify the costs? Could the same results have been attained with fewer resources? To what extent do the output and outcomes offset the cost of the chosen inputs? Do the (socio-economic) benefits/impacts of the program outweigh the costs? • How have beneficiaries and target groups been involved in decision-making during implementation, and how has feedback been gathered?
Effectiveness and Impact	• Has the program contributed to a significant change in perceptions of consumers and other stakeholders, knowledge, technical capacity, governance, or enabling environment? • What are the major factors that have led to the achievement or non-achievement of the program objectives? Which of these factors are related to the Theory of Change and which to the implementation of the program (such as procurement and co-financing)? • How do achieved results connect to the initial logical framework and the revised logical framework? How well-considered and effective has the change of the program strategy been? • Have the program strategy and program management been steering towards impact? Was the focus on impacts given during the implementation process?
Sustainability	• Has a realistic and effective exit strategy been developed and applied? • What evidence exists to suggest that the benefits of the program will be sustained or institutionalized and scaled in the future? Please base the analysis of this on the FIETS Sustainability Framework (Financial, Institutional, Environmental, Technical, and Social Sustainability). What evidence can be provided in each of the five FIETS areas? • What recommendation can the Consultant(s) give in terms of criteria for future site selection which would improve FIETS sustainability? • How can FINISH improve the integration of WASH and health in future programs? • What are the key lessons learnt that the organization could build on in designing similar program in the future, in shaping the FINISH Mondial scale-up? What are recommendations for future program, particularly with regard to the role of partnerships and the achievement and sustainability of the program results – identified per stakeholder group?

Annexure 2: Overview of various sanitation programs in India

Rural Sanitation Policy Framework in India		
Policy	**Year**	**Description**
Central Rural Sanitation Programme (CRSP)	1986	The CRSP aimed to promote construction of household pour-flush toilets by providing hardware subsidies to generate demand.
Total Sanitation Campaign (TSC)	1999-2012	Under TCS, the goal was to achieve coverage of all households with water and sanitation facilities and to promote good hygiene behavior and practices to improve the overall health of the rural population. It followed a demand-driven, community-led approach towards total sanitation along with IEC to mobilize and motivate communities towards safe sanitation.
Nirmal Gram Puraskar (NGP)	2003	The NGP was an award-based incentive scheme given to Panchayati Raj Institutions (PRIs) for fully sanitized and ODF Gram Panchayats, Blocks, Districts, and States. A cash prize was given to the local governments that had been able to achieve 100% sanitation (ODF + tackled issues of solid and liquid waste management [SLWM]).
Nirmal Bharat Abhiyan (NBA)	2012	The objective of the NBA was to achieve sustainable behavior change and provision of sanitary facilities in all communities in a phased, saturation mode with 'Nirmal Grams' or clean villages as outcomes through a community-based approach in rural India. The provision of incentives for individual household latrine (IHHL) units were widened to cover all Above the Poverty Line (APL) households constituted by Scheduled Castes (SCs)/Scheduled Tribes (ST), small and marginal farmers, landless laborer's, physically challenged or women-headed households as well as for all Below the Poverty Line (BPL) households. Financial incentive for the construction of toilets was raised for all eligible beneficiaries to INR 4600 (with additional provision up to a ceiling of INR 5400) was made available under the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA).
Swacch Bharat Mission- Gramin	2014	SBM, the successor to NBA, received concerted efforts by all stakeholders including political leadership, media agencies, celebrities, CSOs, and NGOs. SBM was intended to be different from the previous programs with a greater focus on behaviour change and sustainability of interventions. However, it also depended largely on a target-oriented construction-centric approach. The SBM aimed to accelerate efforts to achieve universal sanitation coverage, improve cleanliness, and eliminate OD in India by October 2, 2019. In rural India, the SBM looked towards improving the levels of cleanliness through improved solid and liquid waste management and making villages ODF, clean, and sanitized. The Mission also gave flexibility to the State Governments, to adopt state-specific implementation policy as well as in the usage of funds and mechanisms adopted.
Swacch Bharat Mission Gramin Phase 2	2020	The phase -2 of SBM was announced in February 2020. The phase -1 concluded in October 2019 with grand declaration of the Nation as Open Defecation Free, which is challenged under various surveys and studies. The Phase -2 emphasizes upon the sustainability of achievements under phase -1 and to provide adequate facilities for Solid/Liquid & plastic waste management in rural India. SBM (G) Phase-II will be implemented from 2020-21 to 2024-25 with a total outlay of Rs. 1,40,881 crores. It also incorporates schemes such as Galvanizing Organic Bio-Agro Resources Dhan (GOBAR-DHAN). This scheme aims to manage and convert cattle dung and solid waste in farms to compost, biogas, and bio-CNG. Other focus areas of SBM 2 are incentive of INR 15000 for Individual Household Latrine construction and Swacch Vidyalaya Abhiyan to provide separate toilets for boys and girls in school.

Urban Sanitation Policy Framework in India		
Policy	**Year**	**Description**
Integrates low-cost sanitation scheme (ILCS) for urban areas	1980-81	ILCS aimed to convert/construct low-cost sanitation units through sanitary two-pit pour-flush latrines with superstructures and appropriate variations depending on local conditions.
National Water Policy	1987	The policy recognized the need for sanitation and laid targets for the provision of sanitation services in both rural and urban areas.
The 74th Constitutional Amendment Act (CAA)	1993	The act enabled the State Governments to pass their respective legislation. This, in turn, shared the responsibilities of water supply and sanitation services to the ULBs through decentralization and ensuring people's participation.
The Employment of Manual Scavengers and Construction of Dry Latrines (Prohibition) Act	1993	The act prohibited the construction of dry latrines and the employment of manual scavengers paving demand for the creation of sanitary facilities in urban areas in place of dry latrines.
National Health Policy	2000	The policy recognized the relationship of unsafe drinking water and unhygienic sanitation in urban settings, pushing for better sanitation facilities in schemes of urban infrastructure.
The Valmiki Ambedkar Awas Yojana (VAMBAY)	2001	VAMBAY included provisions for sanitation for urban poor and slum dwellers by construction of community toilets for the unserved population
Jawaharlal Nehru National Urban Renewal Mission (JnNURM)	2005	JnNURM had provision for sanitation infrastructure. It intended to provide basic services to urban poor including improved housing, water supply, and sanitation. JnNURM thus supported infrastructure program related to water supply and sanitation, sewerage, solid waste management inter alia other infrastructure in urban areas

Rural Sanitation Policy Framework in India		
Policy	**Year**	**Description**
National Urban Sanitation Policy (NUSP)	2008	NUSP was aimed to transform all urban areas into a community-driven, totally sanitized, healthy, and liveable cities and towns ensuring and sustaining good public health and environmental outcomes for all citizens. The NUSP provided the State Governments with a framework mandating each State to prepare State Level Sanitation Strategy and the cities to adopt a City Sanitation Plan (CSP).
Service Level Benchmark (SLB)	2008	The SLB included 28 performance indicators in the domain of water supply, wastewater management, solid waste management, and stormwater management for assessment and accountability of service levels in the ULBs.
Nirmal Shahar Puraskar	2010	The rating and award were based on improved public health and environmental standards, being two outcomes that cities must ensure for the urban population. It encouraged all cities to strive for 100% access to sanitation facilities and 100% safe disposal of all city-generated waste.
Rajiv Awas Yojana (RAY)	2011	It brought all existing slums, notified or non-notified within the formal system and enabled them to avail the basic amenities including sanitation.
Prohibition of Employment as Manual Scavengers and their Rehabilitation Act	2013	It shifts the onus and responsibility to ULBs to prohibit manual scavenging and provide sanitation infrastructure
Swachh Bharat Mission	2014	The SWM-Urban focuses on creating ODF areas and achieving 100% scientific management of municipal solid waste in all statutory towns in the country
Atal Mission for Rejuvenation and Urban Transformation (AMRUT)	2015	It is meant to provide basic services (e.g., water supply, sewerage, and urban transport) to households and build amenities in cities which will improve the quality of life for all, especially the poor and the disadvantaged.
Swachh Survekshan (Box-1)	2014 - 2019	The policy aims to inculcate competition among urban areas for enhancing the performance of cities on sanitation and cleanliness.
SMART City	2015	The SMART city mission promotes sustainable and inclusive cities that provide core infrastructure (including adequate water and sanitation) and provides a decent quality of life to its citizens, a clean and sustainable environment.
National Policy on Faecal Sludge and Septage Management (FSSM)	2017	FSSM aimed to set the context, priorities, and direction to facilitate the nationwide implementation of services in all ULBs for ensuring safe and sustainable sanitation for every household and city.
Swacch Bharat Mission Urban Phase 2	2020	The SBM-Urban phase 2 was launched in Feb 2022 with focus on Solid Waste Management, Wastewater treatment, including faecal sludge management in all ULBs with less than 1 lakh population, Sustainable sanitation (construction of toilets) and Information, Education and Communication, and Capacity building. The key expectations is to ensure ODF+ certification to all statutory towns, ODF++ certification to all statutory towns with less than 1 lakh population, Water+ certification to half of all the statutory towns with less than 1 lakh population, rating of at least 3-star Garbage Free to all statutory towns as per Ministry of Housing and Urban Affairs (MoHUA's) Star Rating Protocol for Garbage Free cities and Bio-remediation of all legacy dumpsites. The government in the Union Budget 2021 allocated Rs 1,41,678 crores for the Swachh Bharat Mission urban phase 2.