

MANIDHANAHEYAM FREE IAS ACADEMY – TNPSC GROUP II & IIA

UNIT - III

Rural and Urban Sanitation

1. National Rural Health Program – 2005

1. National Rural Health Scheme - 2005

- i. The project was started to meet the health needs of people in the village who do not get enough government benefits.
- ii. It started by highlighting 18 states with the weakest health index in the country.
- iii. It ensured drinking water, sanitation, education, nutrition and gender balance.

Objectives:

1. Setting IMR = 30 / 1000
2. Bringing MMR = 100 / 100000
3. Reducing the number of deaths due to malaria and dengue
4. Eradication of filariasis by 2015
5. Recovery of tuberculosis patients increased to 85 mo
6. To provide uniform medical quality in all community health centres
7. Making medical facilities available to all people through Panchayats
8. A new concept has been introduced in the scheme.
9. According to this the mission of Aksha is to disseminate information about health (m) preventive drugs to women in rural areas.
10. Expenditure on health was urged to be 2-3% of GDP

Project Successes:

1. Eradication of Polio
2. Vaccination against Japanese N. cephalitis was administered to 9 million children.
3. Eradication of transmitted tetanus in children
4. 2 million deliveries took place in primary health centers or (a) hospitals.
5. Health programs were initiated in schools through 1 million 'Village Health and Hygiene Committees'.

Activities undertaken under the scheme

1. Accredited Community Health Activists (Aksha)
2. Roji Kalyan Samiti

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3. Grants to Sub-centres
4. Janani Suraksha Yojana
5. National Mobile Medical Centers
6. National Emergency Ambulance Service
7. Janani Sisu Suraksha Kariyagiram
8. Rakshtriya Balsvastaya Kariyagiram
9. Maternal and Child Health Division
10. Provision of national iron tablets

2. National Urban Sanitation Plan – 2012

In the 2012 Cabinet meeting, it was decided to continue the National Rural Health Scheme and to start sub-schemes and these schemes will continue till March 2017.

Claims under the Scheme:

1. Setting up of one urban primary health center for every 5000 to 60000 population areas.
2. Setting up of one City Community Health Centers in metropolitan areas where there are 5 to 6 City Primary Health Centers
3. Setting up Nursing Service Centers in areas with population of 10000
4. Establishment of an approved Community Health Officer in areas with 200 to 500 households
5. The scheme focuses more on primary health care of the urban poor.
6. It will be started in 779 towns and cities with more than 50000 inhabitants and will reach 7 crore 75 lakh people.

Expected results of the project

1. Reduction in infant mortality
2. Reduction in maternal mortality rate
3. Making obstetrics accessible to all

Main features:

1. City plans will be implemented through requirements survey.
2. City local bodies will contribute across the board
3. Innovative public primary health care will be made available at the doorsteps of the target population.

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4. Activities initiated in the National Rural Health Programme. Governance systems and institutionalized processes will all strengthen the National Urban Plan.

2. Purity India

Swachh Bharat

1. Biggest cleanliness drive started in India
2. The scheme was launched on October 2, 2014.
3. The Prime Minister asked every citizen of the country to devote 100 hours a year, i.e. 2 hours a week, to spread cleanliness. Rs. 12,000 – Incentive
4. The campaign aims to achieve the goal of a clean India by October 2, 2019, the 150th birth anniversary of Mahatma Gandhi.
5. More than 3 crore toilets constructed.
6. Areas with environmental sanitation increased from 42% to 60%.

Clean Rural India:

1. Indoor toilets have been constructed in more than 3.6 crore houses since the inception of this movement.
2. In 3 states the practice of taking morning loans in public places has been declared completely abolished.
3. Incentive for private toilets increased to Rs 12,000.
4. Between October 2, 2014 and October 2015, 80 lakh toilets have been constructed instead of the expected 60 lakh individual toilets.
5. It is an achievement of 117% of the planned target.
6. 100 High Purity Places are historically (m)culturally important places to be highly purified with world standards.
7. It is planned to completely abolish the habit of people living in the villages on the banks of the Ganga to spend morning loans in public places.

Clean Urban India

1. 31 lakh toilets have been constructed within private households.
2. 1.25 lakh toilets have been constructed for public use.
3. 39,995 urban wards are functioning with 100% door-to-door solid waste collection.
4. Compost production from this waste has increased to several tons.

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5. 614 cities have been declared free from the practice of morning borrowing in public places.
6. All cities in the states of Andhra Pradesh and Gujarat are exempt from this practice.

2. Clean educational institution

11.21 lakh government schools across the country and 13.77 crore boys and girls now have access to toilets.

3. Clean India Movement - Finance (Rs. 365 Crores)

- i. Rs 365 crore has been spent to renovate toilets in schools, non-functioning toilets.
- ii. Contribution is made to the scheme through additional tax for Clean India.

4. Rural drinking water facility

- i. Increase from 73.66% to 77.01% of households with complete drinking water facility as on February 2017.
- ii. 55% of the rural population is provided with piped drinking water facility.
- iii. A target has been set to provide clean drinking water to 28,000 households affected by arsenic fluoride by 2020.

5. Ganga Devotees Program

A grand Ganga Rejuvenation project was launched to clean the Ganges.

6. Green India

- i. All environmental clearances. Online arrangement.
- ii. National Air Quality Index was launched in 2015.
- iii. Ujala Scheme - Providing LED lights at low cost to all
- iv. The project reduces carbon dioxide emissions.

Causes of unsanitary situation in India

- i. Injustice
- ii. Rural Sanitation
- iii. Urban apathy
- iv. The mood of the people
- v. Ordinance on environmental impact
- vi. Water scarcity
- vii. Political situation

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3. What is the reason for the human sanitation industry? What are the solutions to this problem in society?

A method of human disposal of human waste

1. It is sewer cleaning (a) The process of removing waste from latrines without the use of protective equipment.
2. Means removal of undigested human waste from pits

Reasons:

1. Absence of water latrines
2. Persistent presence of unsanitary latrines
3. Poor design of septic tanks
4. Many cities do not have sewerage systems that cover the entire city.
5. Rehabilitation (h) Absence of employments
6. Denying that human waste is not disposed of by humans
7. Continuity of caste systems
8. The participants are 903 women
9. Lack of awareness
10. Illiteracy
11. It does not use technology
12. Dominance of contractors
13. Weakness of Sabai Karamchari National Committee
14. No FIR will be registered against those responsible for the death.

Solutions:

1. Scavengers (a) Recovery of their dependents
2. Providing employment to the rehabilitated
3. Self Employment Scheme for Hand Scavengers – 2007
4. Prohibition of Employment of Human Waste Scavengers (a) Rehabilitation Act - 2013
5. Toilets under Swachh Bharat Abhiyan – 2014
6. Provision of personal protective equipment
7. To improve the socio-economic status of the workers
8. Getting NGO support
9. Provision of preventive medicines to employees

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10. Increasing the minimum wages of cleaners
11. Providing educational assistance to the children of human waste scavengers
12. Construction of bio-toilets
13. Creating social awareness
14. Government to carry out special inspections to detect employers (m) contractors who violate the rules
15. Rehabilitation
16. NGO involvement
17. Indian Penal Code 304 Section A

