## **BACKGROUND OF WATER SUPPLY PROGRAMME**

## INTRODUCTION

When India achieved freedom, organised water supply was restricted to larger towns/cities only, but that too was inadequate. The rural population which constitutes approx 80% of the total population was without any safe drinking water supply. Water supply at that time was a provincial or a state subject and the State Governments were independently pursuing their own programme to a limited extent, depending on their financial resources.

The Bhore Committee (1946) and the Environmental Committee (1949) recommended comprehensive plans to provide water supply and sanitation on a priority basis. No concerted efforts could be taken to implement the recommendation. In the year 1954, The Government of India provided assistance to the states to establish special investigation divisions in the fourth Five Year Plan to carry out identification of the problem villages. A problem village was defined as one where no source of safe water is available, within a distance of 1.6 km or where is available at a depth more than 15 metres or water source has excess salinity, iron, fluorides and other toxic materials or where water is exposed to the risk of Cholera or Guinea Worm. Taking into account the magnitude of the problem and to accelerate the pace of coverage of problem villages, the Central Government introduced the Accelerated Rural Water Supply Programme (ARWSP) in 1972-73 to assist the states and the Union territories with 100% grants in aid to implement the schemes in such villages. This programme continued till 1973-74. But with the introduction of the Minimum Needs Programme (MNP) during the fifth five year plan (From 1974-75), it was withdrawn. The Programme was however, reintroduced in 1977-78 when the progress of supply of safe drinking water to identified problem villages under MNP was not found to be focusing enough on the problem villages.

The Minimum Needs Programme (MNP) was introduced with the objective to provide certain basic minimum needs and thereby to improve the living standards of the people.-It was the expression of commitment of the Govt. for the social and economic development of the community. The programme apart from others included rural water supply. It was decided in the 30th World Health Assembly of WHO in 1977 to launch a movement known as "Health For All By The Year 2000" for" attainment of level of Health, that will enable every individual to lead a socially and an economically productive life. "In 1978, the Alma Ata International Conference on Primary Health are reaffirmed health for all as the major social goal of the governments and called up on all the governments to formulate national policies, strategies and plans of action to achieve the objective. In 1981, a global strategy for "HFA" was evolved by WHO. The" Govt. of India also launched the "INTERNATIONAL WATER SUPPLY AND SANITATION DECADE (81-90) PROGRAMME" in 1981 with a target of :

- (i) 100% coverage of rural and urban population with safe drinking water supply facilities:
- (ii) 80% coverage of urban population with sanitation;
- (iii) 25% coverage of rural population with sanitation; by 1990.

To supplement the effort of the State Govt. in providing drinking water, Technology Mission for drinking water [TM] was set up in 1986 by Govt. of India to establish area based Mini Mission Projects for \. sustainable supply of safe drinking water and to establish Sub-Mission of scientific source finding of water, control of Flurosis, eradication of Guinea Worm, removal of excess iron and control of brackishness. In 1991, TM was renamed as Rajiv Gandhi National Drinking Water Mission [RGNDWM] with the broad objective of providing sustainable safe drinking water to all uncovered/no source villages and creating awareness among the rural people about the hazards of using unsafe water.

In order to give focused attention towards attaining the goal of providing safe drinking water to all rural habitations in the next five years in consonance with the National Agenda for Governance of the Government, the Department of Drinking Water Supply has been created in the Ministry of Rural Development in October 1999.

During the year 1991-92, a field survey was conducted all over the country to ascertain the status of water supply in the habitations, as per the directives of Govt. of India. According to

the survey, a village is generally made up of 'Main Habitation' and 'Other Habitation'. The definitions are as follows:

Main Habitation: - Is the part of the village having major facilities like school, market, health centre, post office etc.

Other Habitation: - Are the hamlets/areas surrounding the main habitation.

## **OBJECTIVE**

The prime objectives of the Mission are:-

- "to ensure coverage of all rural habitations especially to reach the un- reached with access to safe drinking water;
- · to ensure Sustainability of the systems and sources; and
- to tackle the problem of water quality in affected habitations and to preserve quality of water by institutionalising water quality monitoring and surveillance through a Catchment Area Approach.

## **NORMS**

The following norms are being adopted for providing safe drinking water to rural population in the habitations:

- 40 liters of safe drinking water per capita per day (lpcd) for human beings.
- 30 lpcd additional for cattle in the Desert Development Programme Areas.
- One hand-pump or stand post for every 250 persons.
- The water source should exist within the habitation / within 1.6 km in the plains and within 100 Mts. elevation in the hilly areas.