ABSTRACT
Jalswarajya is the project which has impact on community to great extent on rural masses. As Jalswarajya supply clean and pure water is reached up to the community in which there is increase in hygiene and sanitation. Due to which health problem reduced to great extent. Tap water save the time in collection of water and reduced the efforts for collection of water.

KEYWORDS— Sustainable drinking water Decentralization, Sanitation, diseases, women self help group.

INTRODUCTION
What is “Jalswarajya” Project
The word Jalswarajya itself tell us about its importance. Jal means water and Swarajya means self rule or home rule. The concept of Jalswarajya depends on ideal village of the Mahatma Gandhi.

The “Jalswarajya” project has been designed by the Govt. of Maharashtra throughout the statewide with involvement of Grampanchayat, informal institutions, village water supply committee, women involvement and mainly approach of each citizen.

Role of women in Jalswarjya:
As we know the power of women in society, in this project women also play great role. The women empowerment not only helped in water supply and sanitation issues but also took part in village development activities.

The village water supply and sanitation committee is set up with 75% women as the member to implement the activities under the women empowerment fund, the women participation is in Mahila Mandal, Yuvati Mandal and self help group.

Training Programmes for Women
The separate training programs and workshops are arranged to highlight the roles and responsibilities of women members and in the project activities and encourage their active participation in decision-making. The women development committee is supported by gender facilitators. The district Facilitation team and the support organization to develop women achieved not only by transferring the above function to them but by

AIM
a) The main aim of project is to get clean and pure water to the community with sustainable sanitation service.

b) Institutionalization the decentralization of Rural Water Supply and Sanitation service delivery to local governments and communities using a combined community based approach.

Funding:
Funding is the main part of the project without funding project can’t be move forward. Different parties, group, village government, state government women and each citizen participated in different aspect for funding.
An incentive fund has been provided on a pilot basis to improve management and governance of VPs and GPs.

Integrated Approach:-
The project will promote cross-sectoral linkages, with watershed development, health, rural development and women’s development programs to maximize health and economic benefits to improved water supply services.

Ensuring Sustainability:-
The project will integrate indigenous knowledge and practices with modern methods to give sustainable solutions for water supply and sanitation needs. Sustainable solutions will also be achieved through participatory planning and implementation, communities contributing towards operation and maintenance costs.

How was people response for work of sanitation after Jalswarajya Project?
After Jalswarajya project there was good response people started building Gutters, managed of dust, absorbed soak and arranged for drainage.

How Jalswarajya Project played role to enhance the stink of spread out to disease due to drainage?
Due to open drainage dengue disease was spread. But after Jalswarajya the ratio of dengue is reduced to great extent.
Also the peoples preferably using the closed gutters. And 100% started using bathrooms, toilet, all family person use the home toilet, sanitation and urinal facilities is available in the school premises.

Changes after the Jalswarajya Project in different locality
People started using

The project will assist the Govt. of Maharashtra in scaling up the sector reforms statewide. To this end, in especially to support these path-breaking reform initiatives and to fill in certain gaps (e.g. lack of institutional follow-up support and lack of allocation of funds for process management) not covered in the various programs completed before Jalswarajya. It specifically aims to: (a) increase rural communities’ access to improved and sustainable drinking water and sanitation services, and (b) institutionalize the decentralization of RWSS service delivery to rural local governments and communities using a combined programmatic and community-based approach.

The project will assist the Govt. of Maharashtra in scaling up the sector reforms statewide. To this end, a number of strategic choices have been made, such as:

a) Concentrate on the deprived, tribal’s and women and building their ownership and capacity. The extent of “Below Poverty Line” population in a Grampanchayat will be a key criterion for its prioritization for project hold up. The Women Empowerment Fund and the Tribal Development Program will target and build Capacity of weak groups to ensure their successful participation.

b) Mainstreaming Decentralization: The project will devolve decision-making of society and fund approval to ZPs, Panchayat Samitis, provide a central role to Grampanchayats in project implementation (planning, design and construction) with responsibility for Operation & Maintenance of Rural Water Supply and Sanitation services, build ability and consciousness and provide public education to rural local governments. The project will establish links between Grampanchayats, informal institutions and Village Water Supply Committees to remove conflicts and to avoid creating parallel power centers at the local level. The Grampanchayats strengthening will be achieved not only by transferring the above functions to them but also by empowering communities.

c) Promoting Responsive Public and Private Service Partnership: The project will promote the development of responsive and accountable public and private service providers and local governments (GPs, PS, and ZPs) and smooth fund flows within this system. This would be achieved by widening the choice of service providers, making service providers directly accountable to the communities, building capacity of the community to negotiate with them and monitor their performance. An incentive fund has been provided, on a pilot basis, to improve management and governance of VPs and GPs.

d) Incorporated Approach: The project will promote cross-sectoral linkages, with watershed development, health, rural development, and women’s development programs to maximize health and economic benefits of enhanced water supply services.
e) Ensuring Sustainability: The project will integrate indigenous knowledge and practices with modern methods to give sustainable solutions for water supply and sanitation needs. Sustainable solutions will also be achieved through participatory planning and implementation, and communities’ contribution towards O&M costs.

DRINKING WATER
The clean and pure drinking water supply means clean, constant and cheap water supply for the use of personal and every family. The minimum per capita water supply in rural areas prescribed by Government of Maharashtra is 40 Liters per capacity per day (LPCD) round the year.

Drinking water provides to Person – The ideal standard of Jalswarajya is to provide 40 liter per day. Majority of the respondents get the target of Jalswarajya. Only 5 percentage respondents get only 20 liters water per day. In addition to that 76.67 percent respondents get water more than 40 liters per day. And 18.33 percent respondents get water more than 80 liters per day.

Dirty water effect - Before Jalswarajya there was the dirty water effect on the health of the people in different villages. The 53.33 percent respondents are said that the increased disease and 32.5 percent respondents said that the increased stomach disease and 14.17% respondents said that the increased disease and stomach disease. But after Jalswarajya there is decrease in diseases overall.

Spending time for fetching water - The highest number of respondents were spending the time more than two hours for the fetching water before Jalswarajya. But after Jalswarajya the highest numbers of respondents are said that they spending the time only one hour for the fetching water. Utilized of saved time - The 22.5 percent respondents are utilizing the saved time for homework. The 15.83 percent respondents used saved time to care the children. The 20 percent respondents are utilizing the saved time for getting income and 9.17 percent respondents are utilizing the saved time to other work. The highest number of respondents utilized saved time to homework, second agriculture work and third getting income.

Remedies of pure drinking water – The 68.33 respondents are using to the remedies of pure drinking water to drop the in water in cloth. The 12.5 percent respondents are using to move round the water in alum. The 0.83 percent respondents are not using the remedies of the pure drinking water. The highest respondents to use the remedies to drop the water in cloth, second is to move round the water in alum and third is none of this.

Health and Sanitation -
The sanitation means total sanitation personal, family, home, village and environmental sanitation covers total sanitation. The toilets privately owned by better families are kept functional. These families could afford the construction, operation and maintenance cost and have easier access to water. In many cases, toilets constructed utilizing Government funds are not properly utilized. The reasons of the same as under.

1) Scarcity of water, which prevents the use of toilets.
2) Improper technology.
3) Improper construction and drainage.

The common perception among villagers is that access to sanitation is not as important as access to water. In absence of functional toilets open defecation is the most common practice and has several associated problems. The concept of sanitation in different types is in the following manner.

1) Kitchen Sanitation -
The Kitchen waste and wastewater disposal is a problem due to lack of drainage facilities and of clearly designated waste disposal space in most of the villages.

2) Drainage –
The Most villages do not have proper roadside drains. If they are constructed, they are either improperly maintained or no longer functional.
3) **Personal Hygiene and Health** -
The personal hygiene is not a major problem. People follow basic norms of cleanliness. No infectious diseases due to lack of hygiene were reported in any of the villages.

1) **Built the Bathroom** –
The majority respondents said that they built the bathroom after Jalswarajya.

2) **Built the toilets** –
The 67.5 percent respondents said that they built the toilets after Jalswarajya.

3) **Sources of expenditure toilets** –
We have seen that the maximum respondents have built a toilet at their own cost. The 70.84 percent respondents built a toilet at their own cost. The 29.16 percent respondents built a toilet with the Government subsidy.

4) **Type of Toilet** –
The 50 percent respondents use pit toilet, the 47.5 percent respondents use safety tank toilet and only 2.5 percent respondents use Bio-gas toilet.

5) **Demolish the waste material** –
The maximum respondents demolished the waste material through open and free place. The second majority is through the pit and the third is the burning. No one has demolished the waste material through the street.

6) **Work about Sanitation** –
The majority respondents said that they built the gutters, managed of dust, absorbed soak and arranged for drainage. The 10 percent respondents said that the built a gutter. The 6.67 percent respondents said regarding the arrangement of drainage. The maximum respondents said that the work about sanitation is completed after Jalswarajya only.

7) **Remedies about flow drainage** –
The 61.37 percent respondents said that they built a gutter. The 30.83 percent respondents said that they built a absorb soak and the 7.5 percent respondents said that they used the flow drainage through the street. The maximum respondents used the remedies about flow drainage the built of a gutter secondary built the absorb soak and third is through the street.

8) **Stink of spread out to disease due to drainage** –
The 41.67 percent respondents said that stink of spread out to dengue disease due to drainage before Jalswarajya. However, after Jalswarajya only 6.67 percent respondent said that stink of spread out to dengue disease due to drainage. The percentage of spread to disease due to drainage is decreased after the Jalswarajya. Majority of the respondents said that the spread of disease is due to drainage before Jalswarajya. However, after Jalswarajya drainage facilities are available so the disease ratio is decreased as compared to before Jalswarajya.

9) **Build the Gutter** –
The 68.33 percent respondent said that they built the gutter open. The 31.67 percent respondents said that they built the gutter close. The 100 percent respondents said that the built the separate bathroom, built toilet, all family persons use the home toilet, sanitation and urinal facilities is available in the school premises. The positive change is in the situation after Jalswarajya.

**WOMEN EMPOWERMENT**
There is increase in the participation of the women in Jalswarajya project. This component has aimed to empower the women and prepare them to play an effective role in the village development activities even beyond water supply and sanitation issues. The mainstream women participation is in water management sanitation and village development activities. The institutional model and implementation processes have specified clear roles for women in the activities...
of village water supply and sanitation committee and Gramsabha. A women development committee is set up in each of the participating village panchayatas. The village water supply and sanitation committee is set up with 75% women as the member to implement activities under the women empowerment fund. The women participation is in Mahila Mandal, Yuvati Mandal and self help groups. The Separate training programmes and workshops are organized to highlight the roles and responsibilities of women members and in the project activities and encourage their active participation in decision-making. The women development committee is supported by gender facilitators. The district facilitation team and the support organizations to develop women empowerment plans. It includes requirements of capacity building, development of skills and financial resources for undertaking economic and village development activities. The women empowerment plan will have its focus on water and sanitation.

The women participation is full in women Gramsabha and main Gramsabha. It is also in the village water supply and Sanitation Committees, social audit committee and other committee by empowering them with leadership roles and responsibilities. The technical support will be given to set up village savings thrift and credit societies by involving women in the community. For eligible women members in the community especially the youth skill development trainings will be provided of different vocations so as to enable them to start income generating activities.

1) Number of Self Help Groups –
In all total the self-help Groups are before Jalswarajya increased after Jalswarajya. This number automatically increases the empowerment of the women in rural areas and gives the opportunity of leadership.

2) Subscription per month in savings Groups-
The total 200 saving Groups subscription per month is 10 Rs to 50 Rs. and 120 savings groups subscription per month is 51 to 100 Rs.

3) Number of small businesses started by the women-
The few women started the small business from saving Groups.

4) Type of Business-
The number of business started by the women includes in Self Help Groups. The business are selling milk, goat farming, sheep farming, Buffalo farming, poultry farming and cattle farming. The few women started the business for the fast food center, homemade food Tiffin, the Bangle shop Gulal and Mithai shop, provisions shop fruit channa grocery shop and Stationery shop. Some women started the business of preparation of candle split pulse incense stick, chili Powder the camphor, washing powder, Biscuit Indigo and Phenol, Papad, Pickle Spice etc. and some women preparation of doormat from sadi prepare the leaf-bowl and leaf-plate. The number of women started the business of the photography, Mushroom Production, Earthworm compost and sewing machine, noodle machine flourmill, Beauty Parlar etc. The few women started the business of the ready-made cloth center imitation Jewellery. In addition, the few women started the business of the preparation of the nutrition food in Anganwadi and school.

5) Information about village action plan –
The major percent respondents said that the information about village action plan is collected from the discussion with Gramsabha only few percent respondents said that the information is collected about village action plan through members of the committee.

6) Selected three committees –
The total 100 percent respondents said that they selected three committees under the project from the discussion with Gramsabha. The information in any case is not collected either by the villagers or by the members of the committee. Total information is collected the discussion with the Gramsabha.

7) Information about budget –
The 70 percent respondents said that they get information about budget under project through the committee member and the 30 percent respondents said that they get information about budget under project from the discussion of Gramsabha.
8) Change the attitude towards women.
9) Women became aware about baking knowledge.
10) Economy empowerment for women.
11) Increase in the self-dependence of women by savings Groups.
12) Women started to come out of their houses.
13) Control for the money lending because of savings Groups.
14) Various chances for the women so the women became brave.
15) Personality development of women
16) Increase in self-employment
17) Women become motivated for the business
18) The usefulness of savings Groups for education

REFERENCES