For the first 40 years of her life, Karmaben Rakhya Ahir had no idea what a toilet was, until the day she happened to use one at a bus stop near her village. That too would have remained a cherished memory but for her son’s decision to construct one years later in their house in Bhalot village, Kutch district, Gujarat. After years of urinating and defecating in sand pots at home or trudging to nearby fields in the wee hours, always poised to flee in case men came by, Karmaben finally has a toilet in her house. She is now 75.

Married off at 10, Karmaben has since lived in Bhalot. When her husband – a small farmer – died 10 years ago, his landholding was divided among his three sons. Karmaben now lives with her youngest son Menandbhai, daughter-in-law Daiben, and five grandchildren. Menandbhai dropped out after primary school and Daiben has never been to school. However, their eldest daughter Hasmita (12) attends the village school.

With his annual income of Rs. 40,000 (US$ 920), Menandbhai managed to construct a “pucca” two-room house in place of the ancestral “kuchha” one. When he was told that agencies of the Aga Khan Development Network (AKDN), were constructing sanitation infrastructure in his village, as part of the European Commission-funded “Multi Sector Rehabilitation and Reconstruction Programme” (M SRRP) in Kutch, he decided to add a toilet and bathroom to the house, at a cost of Rs. 8000 (US$ 177). Karmaben’s excitement knew no bounds. She told her son, “My life would improve if a toilet is constructed.”

For most rural women without access to a toilet, there is absolutely no privacy, which is especially needed during menstruation. Pregnancy is yet another challenge. Until the last day of her pregnancy, Daiben made her way to the forest to relieve herself, accompanied by Karmaben. This was impossible after childbirth, so she used a sand pot inside the house. Earlier, as a new bride in an unfamiliar household, Daiben was too embarrassed to tell anyone that she wanted to attend to the call of nature. She would request one of her sisters-in-law to escort her to the forest, with a bottle of water (to clean herself) secreted somewhere on her person, lest someone noticed.

Till the age of five, Daiben’s daughters defecated outside their house; then started accompanying their mother to the forest. The only significant change over three generations is the decreasing vegetation cover in
The Multi-sector Rehabilitation and Reconstruction Programme, is working to assist rural communities affected by the earthquake that struck Gujarat in 2001. Interventions have included the provision of disaster resistant housing, education centres and sanitation infrastructure (drinking water supply systems, toilets and bathrooms). Water harvesting structures have been introduced and primary health care services are operational. Savings and credit schemes are helping the poor regain their livelihoods. Disaster preparedness and management training is also provided.

The Aga Khan Foundation (AKF) is a private, non-denominational, development agency, established by His Highness the Aga Khan in Switzerland in 1967. The Foundation seeks sustainable solutions to long-term problems of poverty through an integrated, community based, participatory approach that reinforces civil society and respects local culture. AKF, although formally a funding agency, involves itself actively in the planning and execution of its projects. In India, AKF works essentially in three thematic areas: Health, Education, Rural Development. It also works to strengthen civil society institutions.

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Karmaben finds the link between health and sanitation confusing. “I haven’t fallen ill in the last 40 years. And I have healthy drinking water from ponds. Water cannot cause any disease.” However, Daiben, is aware that diarrhoea, cholera and typhoid are water-related health risks and malaria mosquitoes breed in dirty, stagnant water. She filters and boils drinking water, disposes solid waste into a compost pit and keeps the area outside her house clean, hoping that if everyone followed her example, the village would be much cleaner.

What does having a toilet in the house mean to these women? It means the world, really. No longer do they have to walk a mile to the nearby forest at dawn to defecate. No longer do they have to endure the humiliation of being spotted by men. No longer do they have to undergo the agony of restraining themselves for hours on end, nor pray for the rains to cease, so they can venture out, instead of urinating in a mud pot. For Karmaben and other women like her, the health benefits of having a toilet are incidental. Far more important is the access, privacy, and above all dignity that having one provides.