

# Converting Dry Latrines in the District of Budaun, Uttar Pradesh:

A Story of Commitment, Determination and Dignity



An Initiative of the District Administration, Budaun, UP

This initiative of District Administration, Budaun was documented by UNICEF Office for Uttar Pradesh in August, 2011



## EXECUTIVE SUMMARY

In July 2010, a survey initiated by the district administration in rural Budaun estimated there were around 50,000 dry latrines. This meant there were about 3,00,000 users and at least 2,000 women engaged in manual scavenging across the district. The administration was moved to conduct this survey following the visit of Amit Gupta (District Magistrate, Budaun August 2009 – June 2011) to Ramzanpur, a village estimated to have more than 1200 dry latrines. The Budaun district administration took on the task of converting all dry latrines to pour flush toilets in a campaign mode: over 47,000 dry latrines have been converted in less than one year. Much of the district is now free of this practice, and work is under way to ensure the task is completed in the entire district.

A dry latrine is a place to defecate in the house, which is cleaned once a day by a scavenger who removes the faeces and discards it in a field outside the village. Almost all scavengers are women and girls. Proximity of the dry latrine to living space in homes causes serious health hazards, especially among children who have a lower immunity.

The campaign owes its success to the determination and commitment of a dynamic District Magistrate. Forging partnerships with multiple stakeholders, effective community mobilisation, mobilisation of all the departments falling under the district administration, quick rehabilitation of scavengers are all elements that have made this campaign a success. District Magistrate Amit Gupta recounts that when he first arrived in Budaun in August 2009 and visited some of the villages, he was overcome by the stench and flies. "It took me a while to know the reason behind this." A similar thought is expressed by many other government officials who were new to the district at the time. Clearly, while open defecation is high across rural areas in the State of Uttar Pradesh (and in India as a whole), the practice of dry latrines is confined to some districts.

Although legally the practice of cleaning dry latrines and transporting human excreta has been banned in India since 1993, manual scavenging continues in some parts of the country.

This is the story of determination and commitment led by a District Magistrate who took on a public health and dignity issue full-on, leading to successful results in a period of one year. It is a story that may inspire many of us that we can do much more and take on hard issues that stand in the way of improved public health and better results for children.

## BACKGROUND AND RATIONALE

### Budaun: Children are at Disadvantage

Budaun district with its total population of 3.7<sup>1</sup> million is largely rural. Health and development indicators are extremely poor. It has one of the highest estimated infant mortality rates<sup>2</sup>. Routine immunisation is poor. Uttar Pradesh has some of the lowest rates of routine immunisation in the country: while the State average reports that 30.3% of children 12-23 months old are fully immunized, in districts such as Budaun it is as low as 10.6%. The national average stands at 54<sup>3</sup>. In addition, Budaun has been a polio 'hotspot'.

### Budaun: A Polio-endemic District

Across the world, Budaun heads the list of 25 worst-affected districts with the maximum number of polio cases over the last five years: Budaun (187 cases) is followed by Moradabad (186) and Ghaziabad (144), neighbouring districts.

**Graph 1: Hotspots Globally 2005-2010**

Country	Province	District	Grand Total	P1	P3
India	Uttar pradesh	Budaun	187	74	113
India	Uttar pradesh	Moradabad	186	70	116
India	Uttar pradesh	Ghaziabad	144	73	111

Budaun district has been of paramount importance for polio eradication. Since 2008, it has had 101 polio cases – the highest for any district in the worst affected polio-endemic state. The year 2009 had a staggering 52 cases – the highest in the last five years – with blocks such as Mion (7 cases) and Rajpura (6 cases) being the worst affected.

**Graph 2: Hotspots in Uttar Pradesh 2008-2010**

District	Grand Total	2008	2009	2010
Budaun	187	48	52	1
Moradabad	186	18	74	–
Ghaziabad	144	05	75	2

Of the 66 blocks identified as high risk blocks for polio in Uttar Pradesh in 2010, 16 are in Budaun alone.

<sup>1</sup> 3,712,738 Source: Census of India 2011 [http://www.censusindia.gov.in/2011-prov-results/data\\_files/up/Census2011UttarPradeshPaper1.pdf](http://www.censusindia.gov.in/2011-prov-results/data_files/up/Census2011UttarPradeshPaper1.pdf)

<sup>2</sup> IMR for Budaun is 110 per 1000 livebirths according to Infant and Child Mortality in India: District level estimates (Population Foundation of India, May 2008). IMR for India is 50, and 63 for Uttar Pradesh (2009), SRS Bulletin, January 2011.

<sup>3</sup> DLHS 3 MHFW District Level Household and Facility Survey 2007-08



## 2009: Visit to Budaun Villages by the District Magistrate

In August 2009, Amit Gupta took over as District Magistrate of Budaun. During his field visits he found an in explainable stench in some villages. Probing into the matter led him to the high number of dry latrines in those villages. In addition, officials said diarrhea– also known to be associated with poor sanitation and hygiene – was very high in these areas. According to the DM, since dry latrines was possibly the root cause of many public health problems, it was decided to focus on converting all dry latrines into pour flush toilets at the earliest.



Also related to this issue was the concern of women engaged in manual scavenging. Hence, it became important for the administration to help them leave this work and rehabilitate them with alternate livelihoods at the earliest.

The convergence plan adopted by the Government of Uttar Pradesh for polio eradication in the 66 high risk blocks of the State (which brings interventions from various sectors to converge on the polio high risk blocks) offered an opportunity to focus on this sanitation campaign. In fact, the '107 Block Plan' (since it includes 41 high risk blocks in Bihar in addition to the 66 of Uttar Pradesh) was an opportunity to go beyond delivering OPV vaccination to children and into a wider focus on interventions to improve water, sanitation and hygiene, raise routine immunization levels among children, and improve child nutrition to ensure better protection of children and sustain the results achieved by the Polio Vaccine drive.

Although there may not be established evidence of the link between the circulation of the polio virus and poor sanitation, yet it is well established that the polio virus spreads through the faeco-oral route – which means that food and drinking water contaminated with faecal matter facilitates transmission of the virus. Ensuring safe disposal of faeces, preventing drinking water contamination with faecal matter, ending open defecation are vital to ensure safety. Hence, converting dry latrines into toilets was seen as an urgent priority. This was also very much in line with the decision of the Supreme Court of India for stopping all manual scavenging and restoring dignity to those working in this job.

Partners working in Budaun, especially UNICEF were called upon to assist the campaign. UNICEF had already been actively engaged in providing support to the implementation of the 66 High Risk Block plan.

## The Campaign to Convert Dry Latrines into Pour Flush Toilets

The administration's survey on presence of dry toilets in the district validated the extent of the problem. Block level resource persons supported by UNICEF helped do this survey. In July 2010 work began in earnest to convert all of these dry latrines to pour flush.

In the first phase of the campaign, 78 of the district's 497 villages which had the maximum number of dry toilets were identified as priority. In October 2010, the second phase of the campaign began in another 119 villages. By May 2011, more than 47,000 toilets had been converted, with 440 villages being completely free of this practice. About 2,000 dry toilets still remain but the practice of manual scavenging has been stopped completely. It is worth mentioning that this task has been achieved despite the administration's involvement in panchayat elections and unprecedented events such as flood relief. Village Motivators and Block Motivators along with the District Project Officers of the Total Sanitation Campaign played a critical role in ensuring this work did not get neglected at any time.

The success of the campaign has led to distinct pride and confidence among community and officials alike that change is possible. Users of the new toilets report satisfaction: No flies, no stench, no dependence on manual scavenger. District officials say the impact post conversion is so high it is difficult for someone to imagine the extent of the problem before the conversion took place. Scavenger women who could barely eke out a living earlier now have bank accounts with some becoming small scale entrepreneurs. Clearly, change was possible – all it required was a strong driver and motivation to get it going.

*“Earlier when I used to go to any of these villages there were so many flies it was impossible to sit there. You cannot imagine the change this conversion has brought about. As we know, flies are the main carriers of all kinds of diseases and infections.”*

– Manoj Kumar, District Supply Officer (DSO)

*“The results are very good. Today, everyone agrees the practice of dry toilets was wrong. We did it, but it was wrong, people admit.”*

– Manjulata, Education Officer.

District Panchayati Raj Officer R S Chaudhuri – one of the key stakeholders of the campaign – says the strategy adopted was to approach the problem at two ends: one focused on mobilizing communities to convert dry toilets by raising awareness on its health hazards and another focused on ensuring quick rehabilitation of scavengers and providing them with alternate source of livelihood. It was important to ensure the scavenger community did not feel threatened by this change. It was also clear that once the scavenger community had moved on, it would put pressure on the villager to convert their dry latrines, as cleaning services would no longer be available. “It is unlikely that a household used to a toilet in the home will go back to open defecation,” says Chaudhuri. Getting support from the scavenger community, who would have otherwise seen this change as a threat to livelihood, was a masterstroke of sorts and a key for the success in the campaign.

Funds under the Total Sanitation Campaign – flagship programme of the Government to ensure sanitation facilities in rural areas with the



broader goal of ending the practice of open defecation – were used to provide subsidies to rural poor households for construction of pour flush toilets. Quick disbursement of Rupees 1500 incentive helped give momentum to the campaign. In villages such as Bhasrala all dry latrines have been converted and all 800 households now have pour flush toilets. Local village leaders say construction labour worked double shift to complete the task in record time. District officials say most people were easy to mobilise and understood the benefits of a pour flush toilet when explained to in community meetings. Most said they were using dry latrines because no one had ever told them about its hazards. A handful of those unwilling to convert were mobilised through intense interpersonal communication by the motivators. In addition, a crisis of sorts was created by discontinuing the dry latrines and the work of manual scavengers, hence making it impossible to avoid constructing the toilet at home. The campaign has also had an impact on those practising open defecation with many now having built the toilet in their home.

District officials report a substantial drop in the disease occurrence although an epidemiological study may be required to validate this. Data collected by the Integrated Disease Surveillance Project in Budaun shows a down trend in occurrence of Acute Diarrheal Diseases and Poliomyelitis. In April 2010 the reported cases of Acute Diarrheal Diseases was 1152; by April 2011 this was down to 768. The number of children reported sick during the polio rounds has come down: while in April 2010 there were 155 cases, in April 2011 this was down to 72 cases. There has been no polio case in the district since January 2010.

### Community Mobilisation: UNICEF as a Key Partner

Community mobilization was done through more than 500 community meetings chaired by district officials. Village pradhans (elected representatives) were taken into confidence. Village meetings were held bringing together as many as 250-300 people where district officials such as the District Panchayati Raj Officer explained the reasons for the campaign citing health hazards associated with the dry latrine practice,

primarily faecal contamination of food and drinking water. Village level motivators appointed by the Panchayati Raj department using TSC-IEC<sup>4</sup> funds did intense interpersonal communication to help mobilise the community. In about 60 villages, UNICEF-supported SMNet (Social and Mobilisation Network) mobilised communities in the high risk areas having dry latrines. The newly appointed block level resource persons – supported by UNICEF – helped educate communities on the need for better sanitation.

The village meetings served to address the community's concerns, explaining how the technology works and giving a message about the strong commitment of the administration to see this change through. Public and village meetings were followed by public notices painted on village walls signed by the District Magistrate himself indicating that using manual scavenging is a punishable offence. The threat itself was a deterrent for people to abstain from this practice. A combination of clear orders and instructions, community mobilisation, provision of incentives for construction of toilets and finding alternative sources of income for manual scavengers contributed to the success of the campaign.

DPRO Chaudhuri recalls that the most difficult part of community mobilisation was to win over the first household in a village. "Once the first family starts digging its pit, the rest follow." Given that sanitation practices of a household affect the entire neighbourhood – stench, flies etc – community pressure towards change builds on its own, he observes. It is a change in social norms that can easily spread to the rest of the community.

*"Both sides need to be mobilised: Scavengers who fear loss of livelihood, and users who argue that this is an old practice and why do they need to change it now. The caste and untouchability dynamics are strong and play a role in sustaining old practices. The community wants the oppressed to remain that way. There were also some who argued that Rupees 1500 is too less to build a toilet."*

– Mujahid Nafiz, Block Motivator

Opting for low-cost technology: Government and UNICEF hand in hand

The technology used is the soak pit or septic tank technology, the soak pit being the preferred one, as it is low cost and requires less space. The soak pit is 1 metre deep and 1 metre in diameter and honeycombed. For an average five-member household, the soak pit will take about five years to fill. Once filled, it is sealed, and another similar pit is constructed next to it for use. Sewage in the first pit takes 6 months to decompose completely and turn to compost. This can then be removed manually and the pit is ready for re-use. Users are advised not to use any acid to clean the toilet as that would kill the germs and prevent the organic waste decomposition.

<sup>4</sup> Total Sanitation Campaign – Information-Education-Communication



UNICEF's extenders in the field, mostly sanitation specialists provided advice to families on the appropriate technology and on selecting an appropriate site for the pit. A minimum distance of 10-15 feet from the water handpump is recommended. In case that is not possible, then the side of the soak pit that faces the handpump is cemented to ensure no seepage happens. UNICEF's IEC material was of much use in advocacy with community.



While a soak pit takes about 2-3 days to build and can cost as little as Rupees 1500, the septic tank takes about a week and costs at least three times as much. However, in some villages such as Lakshmipur, many families preferred septic tank over soak pit as they felt the latter would 'contaminate ground water or cause dampness leading walls to crumble'. Experience so far has underlined again the importance of listening and respecting the concerns raised by the families and communities, as this affects the rate of change and the acceptability of the new practice.

### Users' Response and Stakeholders' Views

#### Users' response

In villages such as Bhasrala where the toilet conversion is complete, users said they were happy with the change: no flies, no stench, no dependence on scavengers. They said there was a marked difference in cleanliness and hygiene, the toilet was easy to clean and maintain, and there were fewer illnesses to deal with. About 90% of the population of Bhasrala village are Muslims; many of them said they were happy women did not have to go out for defecation – which they had to earlier if the scavenger did not come for a day or two.

In the same village (Bhasrala), an extended family in a Muslim household comprising about 20 people converted all three dry latrines in their house into pour flush toilets. The head of the family, an elderly tailor, is happy with the change but it is the women in the household who are especially happy and see this conversion as a blessing. They said there was a marked difference in cleanliness of their living environment; earlier there were too many flies, and food would be cooked and eaten close to the dry latrine. Saira, 60, the elderly man's wife – the eldest woman of the household – said if the scavenger did not come for two days family members would be forced to go to the field for defecation. Surrounded by younger women of the family – daughters and daughters-in-law – she said that she did not want them to go out for defecation for safety reasons. Women are glad they no longer have to depend on the scavengers. Clearly, engaging the manual scavenger is also demeaning for the user and the women are happy to be freed of this indignity.

In Lakshmipur, a village of 1800 households where 900 toilets have been built, most users preferred septic tank over soak pit. Nanhi, a

60 years old widow in Lakshmipur village said she preferred the septic tank over soak pit as she believed the soak pit 'would contaminate ground water, weaken walls'. She built two toilets for a family of seven. She lives with her son who runs a tonga (horsecart). A neighbouring household who also built the septic tank have two toilets for two families comprising 14 people. Md Abrar, 40 years old carpenter, and wife Sameena, 32 years, says improved hygiene is the biggest advantage with the conversion into pour flush toilet. In another household Chand, 40 years old hair dresser spent Rupees 3,000 to build a soak pit toilet for a family of seven. It took two and a half days to construct, an older woman said it was good because 'we don't want our young women to go out'.

In villages such as Bhasrala which have a 90% Muslim population, practice of dry latrines was higher, and hence, since the conversion, all 800 households now have pour flush toilets. In villages such as Lakshmipur while all dry latrines have been converted, open defecation continues in some households.

### Rehabilitation of scavengers

The scavengers in Budaun are possibly one of the most marginalised communities in India today. Considered 'outcaste', the community lives on the outskirts of the village, men do little or no work and live off the women who get food or grain, and in some cases money, from households. Alcoholism and domestic violence is reported to be high in the community. Of the estimated 2,500 scavengers in the district, 99% of them are women and girls.

High ranking officials such as the District Panchayati Raj officer and the pradhans spent a lot of time assuring the scavenger community of all support in this transition phase in their lives. In Rehadia village, 40 years old Meenadevi recounts how in one such meeting the scavenger community collectively decided they would quit their work, and even went to the extent of burning their brooms and baskets as a symbolic measure.

The response of manual scavengers varied from one village to another. Where rehabilitation was in the initial stages (Lakshmipur), scavengers were aggressive about loss of livelihood and demanded the administration provide them jobs. They said they were landless, there were hardly any opportunities for manual labour and the work under the National Rural Employment Guarantee Scheme (MNREGS)<sup>5</sup> would be there for a limited time. In contrast, in Rehadia village where scavengers had left the trade over six months ago and excellent rehabilitation work had happened, women were happy to be free of this 'hell'. All the 12 families were given a loan of Rs 25,000 each which they used to buy a buffalo. All are now selling milk to the government's Dairy Development Board van which comes to the village every morning. Each family is able to sell 8-10 kg of milk per day at a rate of Rs 18-22 per litre.

<sup>5</sup> The Mahatma Gandhi National Rural Employment Guarantee Act – which is aimed at enhancing the livelihood security of people in rural areas -- guarantees 100 days of wage-employment in a financial year to a rural household whose adult members volunteer to do unskilled manual work.

The district administration, on its part, is making all efforts to ensure scavengers get some immediate relief in the form of benefits and schemes such as the Antyodaya<sup>6</sup> and BPL cards for subsidised ration, and the MNREGS card that guarantees a family at least 100 days of labour in a year. Access to loans for setting up alternate livelihood such as dairy, piggery etc are also being given. While the District Magistrate says actual rehabilitation will take time and cannot be done overnight, the strategy to approach both user and scavenger at the same time for change has led to good results.



Health camps were organised for the community by the administration. Children from the community have been given scholarships and are now enrolled in schools. In some cases, UNICEF's sanitation experts are training men from the scavenger community to work as masons in constructing pour flush toilets. Women were given Rs 2200 to build the toilet in their home so that scavenger families who earlier practiced open defecation now have toilets in their home. Women consider this a great advantage as safety of girls and young women was always an issue.

In Rehadia village where rehabilitation is most visible, women are now part of self-help groups and have even opened bank accounts. The pallu (sari edge) pulled low over the face is now unveiling to show women with a new-found confidence.

*"Earlier we hid our face so we can see everyone but no one can see us. It also helped ward off the stench while at work. We don't need to hide our faces any more."*

– Meenadevi, 40, scavenger now into dairy farming, Rehadia

*"We have always been treated as 'untouchables', villagers would never buy milk from us. It is a blessing to have the dairy board van come to the village and give us a fair price for the milk."*

– Suneeta, 35, scavenger now into dairy farming, Rehadia

Rehabilitated women scavengers say they earlier suffered from skin diseases and respiratory disorders because of the nature of their work but all of this is now under control.

## Factors Contributing to Success of the Campaign

Mobilisation of the entire district government machinery: The drive turns into a movement

One of the most effective strategies employed by the District Magistrate was to mobilise all the groups of personnel who work in the district administration to form a movement against dry latrines and promote their discontinuation. All government frontline workers in various departments such as education, ICDS, Health were asked by the District Magistrate to build a pour flush toilet in their home – whether this meant replacing a dry latrine or ending the practice of open defecation. More

<sup>6</sup> The Antyodaya card is given to extremely poor families for subsidized ration. While the BPL (Below Poverty Line) card guarantees a family 20 Kg rice and 15 kg wheat @Rs 193 per month, the Antyodaya card gives a family the same amount of ration per month at a further subsidized rate of Rs 90 per month.

than 8,000 toilets were built by mobilizing government personnel. "When the government is putting out a strong message on ending manual scavenging and open defecation, government workers have to be good role models, and how can they be if they don't practice it themselves," says District Magistrate Mr. Amit Gupta. The drive led by him turned into a movement for change in which all government workers were involved. It was an inclusive process where the ones giving the orders participated also in the action and led by model.

Education Officer Manjulata explains further: "the Education Department has a good network of teachers and other staff across Budaun. A quick survey found that about 650 toilets needed among the teaching fraternity, to be built. Teachers and para teachers were given 15 days to build the toilets. We were able to put pressure and mobilise everyone in this direction."

#### Highly motivated team led by missionary zeal

The District Magistrate says different methods and strategies had to be employed for different villages. In some villages, giving scavengers other means of livelihood forced people to convert the latrine as there was no one left to clean it. In other villages, the public notice making manual scavenging illegal was what had an impact in getting people to construct toilets.

According to a block motivator, the district administration made the necessary actions based on the observations, feedback and suggestions they got from the field staff; this in turn increased the motivation of the field workers and enlisted further their strong drive to stop manual scavenging and convert dry latrines into pour flush toilets. For instance, when field staff reported that an Asha worker refused to convert her toilet, the Chief Medical Officer (CMO) issued a directive immediately. "Not only did she get hers built, she motivated four other households to also convert," says block motivator Nafiz.

#### Forging Partnerships with Multiple Stakeholders

- Rallying all government departments behind the conversion drive

While it was expected and normal for departments such as Health, Panchayati Raj, and Sanitation to get involved in this sanitation work because they had a direct stake in this, other government departments such as Education and Supply and even Home Guard played a supportive role, though outside their line of duty.

In schools, children were taught about health and hygiene in classrooms and they participated in awareness building rallies. Teachers spoke to them about why open defecation is harmful, risk of polio virus transmission and other infectious diseases, the benefits of hand-washing and other hygiene rules. All schools now have pour-and-flush toilets for boys and girls. "The idea was to get children into the habit of using toilets in school. We are now trying to see how to





make toilets more child-friendly, says Education Officer Manjulata. In addition, scholarships were given to children of manual scavengers. While all children belonging to scheduled castes get an annual scholarship of Rs 300, children of manual scavengers are given Rs 1880 per annum from Class 1-8. About 3,400 children have benefitted from these scholarships. Children from the community of manual scavengers were earlier discriminated against in school. The change of livelihood and additional incentive will hopefully reduce their drop-out rate.

Over 1500 Kotedar (fair price shopkeepers) across the district of Budaun were told to build pour flush toilets in their homes and were asked to motivate at least five other households to do the same. The Supply department also helped expedite the process of giving out Antyodaya and BPL<sup>7</sup> cards to manual scavengers which would entitle them to subsidised ration. More than 500 of these cards were given out to families of manual scavengers.

- UNICEF

UNICEF's role as a partner in advocacy with the district administration and providing technical assistance and support has been important to the success of this campaign. Technical experts advised families on site selection and supervised toilet construction. They also trained men from the scavenger community as masons in construction of pour flush toilets. Block motivators helped mobilise users as well as the scavenger community to adopt this change. UNICEF also played an important role in taking this initiative beyond the district by advocating with the district administration in other districts and also with the State government.

<sup>7</sup> The BPL card guarantees a family 20 Kg rice and 15 kg wheat @Rs 193 per month. The Antyodaya card gives a family the same amount of ration per month at the further subsidized rate of Rs 90 per month

- Media

Throughout the drive, media was a strong supporter. Leading local journalists say the media reported positively and even promoted the programme. Kamlesh Sharma, from Dainik Jagran, said people's participation had led to good results; Vinod Bharadwaj, from Amar Ujala, said high ranking officials visited villages time and again sent out a strong signal of the Government's commitment to the programme. Om Prakash, from Hindustan, felt the programme has given the district a whole new face and it was a matter of great pride that this success story was being talked about in other districts and States as well.

- Community leaders from 'Balmiki Samaj'

Being able to get support of the manual scavenger community who would have opposed it seeing it as a threat to livelihood was clearly a masterstroke of sorts. Almost all scavengers in the district are Hindu and belong to the community called Balmiki Samaj. The administration sought support of the community leaders. While many scavengers wanted to quit themselves, they were under social pressure from the upper-caste not to do so. Community leaders say they are happy this work has now stopped and urge the govt for manual labour jobs 'as people will still not buy things from us'.

## Way Forward

It is clear that dry latrines have a direct impact on health and hence conversion to pour flush toilets has led to improved health. The number of children reported sick in subsequent polio rounds is decreasing, and diarrhea – which was a major problem here – is now under control. There has been no polio case since January 2010. As of May 2011, the task of dry latrine conversion in rural Budaun is close to completion with 47,000 of the 49,000 toilets converted. The programme is likely to be expanded to cover urban Budaun. In villages where the conversion has taken place the district administration now aims to create an open-defecation free environment. Water safety interventions will be addressed to further reduce risk to polio, and sanitation facilities in schools are likely to be improved.

Even as this campaign demonstrates how crucial community participation is to behaviour change, other districts in Uttar Pradesh such as Gautam Buddha Nagar, Ghaziabad, Bareilly, Shahjahanpur and Moradabad have already begun to adopt the learning lessons made here. Budaun is showing the way.





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