

Populist Welfare Interventions and Sanitation Outcomes in Greater Warangal Municipal Corporation

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INTRODUCTION:

Urban sanitation has become one of the most critical challenges facing Indian cities in the twenty-first century. Rapid urbanization, population growth, migration, and unplanned expansion have placed enormous pressure on urban infrastructure and municipal service delivery systems. Among various urban services, sanitation occupies a central position due to its direct link with public health, environmental quality, and human dignity. Poor sanitation conditions contribute to the spread of diseases, environmental degradation, and social inequalities, particularly affecting the urban poor.

In recent years, populist welfare interventions have emerged as a key governance approach adopted by governments to address basic needs and gain public legitimacy. These interventions are characterized by targeted benefits, high visibility, and direct engagement with citizens. In the sanitation sector, populist welfare measures include free or subsidized toilet construction, door-to-door garbage collection, cleanliness drives, deployment of sanitation workers, and grievance redressal mechanisms. While such initiatives aim to improve service delivery, their long-term effectiveness and sustainability remain debatable. The Greater Warangal Municipal Corporation (GWMC), located in Telangana, represents a medium-sized urban local body that has implemented various sanitation-related welfare programmes as part of broader urban governance reforms. Despite visible improvements in sanitation infrastructure, issues such as irregular waste collection, inadequate maintenance, and uneven cleanliness persist. This raises important questions regarding the actual impact of populist welfare interventions on sanitation outcomes at the grassroots level.

This study attempts to examine how populist welfare interventions influence sanitation outcomes in GWMC by analysing access to sanitation facilities, waste management services, public satisfaction, and perception of cleanliness based on primary data collected from households.

CONCEPTUAL UNDERSTANDING OF POPULIST WELFARE INTERVENTIONS:

Populist welfare interventions refer to policy measures designed to deliver immediate and tangible benefits to a large section of the population, often framed as pro-poor and people-centric. In the Indian context, populist welfare politics has become a significant feature of governance, especially in competitive electoral environments. Such interventions are often promoted as rights-based entitlements and are implemented through direct state or municipal action.

In the urban sanitation sector, populist welfare interventions focus on improving access to sanitation infrastructure and services with minimal financial burden on beneficiaries. These include construction of household toilets, provision of community toilets, free waste collection services, mechanized cleaning, and sanitation awareness campaigns. While these measures have increased coverage and visibility, critics argue that populist welfare approaches often prioritise short-term gains over long-term institutional capacity building. Sanitation outcomes, on the other hand, encompass not only the availability of infrastructure but also its usage, maintenance, cleanliness,

environmental impact, and public satisfaction. Effective sanitation outcomes require coordinated efforts involving municipal institutions, sanitation workers, and citizens. Therefore, analyzing sanitation outcomes through the lens of populist welfare interventions provides valuable insights into urban governance dynamics.

REVIEW OF LITERATURE:

Several studies have examined the relationship between welfare policies and urban service delivery in India.

MUKHERJEE (2018) argues that populist welfare policies improve access to basic services but often fail to address systemic governance issues, resulting in uneven service quality. Gupta and Arora (2019) emphasize that sanitation outcomes depend not only on infrastructure but also on behavioral change and community participation.

Rao (2020) highlights the financial and administrative constraints faced by urban local bodies in implementing welfare schemes effectively.

According to Sharma (2021) sanitation reforms have led to significant improvements in toilet coverage in urban areas, but challenges related to solid waste management and maintenance continue to persist.

Patil and Deshpande (2022) stress the importance of citizen engagement in sanitation governance, arguing that welfare interventions are more effective when citizens actively participate in monitoring and maintenance.

Although the existing literature provides useful insights into urban sanitation and welfare governance, there is a lack of micro-level empirical studies focusing on medium-sized municipal corporations such as GWMC. This study seeks to bridge this gap.

NEED FOR THE STUDY:

Despite the implementation of multiple sanitation-related welfare programmes, GWMC continues to face sanitation challenges such as open dumping, clogged drains, and uneven cleanliness across wards. There is limited empirical evidence assessing whether populist welfare interventions have translated into improved sanitation outcomes from the perspective of citizens. The present study is necessary to:

- Assess the actual impact of welfare interventions on sanitation services
- Understand public perception and satisfaction
- Identify gaps between policy intent and ground-level outcomes
- Such an analysis is essential for strengthening urban sanitation governance and improving service delivery in GWMC.

OBJECTIVES OF THE STUDY:

- I. To examine the nature of populist welfare interventions related to sanitation in GWMC.
- II. To assess sanitation outcomes in terms of access, waste management, and cleanliness.
- III. To analyse public satisfaction and perception regarding sanitation services.
- IV. To identify challenges in the implementation of sanitation welfare programmes.

RESEARCH METHODOLOGY:

The study adopts a descriptive and analytical research design. Primary data were collected through a structured questionnaire from 120 households selected using stratified random sampling across six wards of GWMC. Secondary data were collected from government reports, municipal

records, journals, and books. The data were analyzed using percentage analysis and descriptive statistics. Six tables were prepared to interpret sanitation outcomes and public perception.

DATA ANALYSIS AND INTERPRETATION:

1. Socio-Economic Profile of Respondents:

Socio-economic characteristics of respondents play a crucial role in understanding access to sanitation facilities and perception of welfare interventions. Variables such as gender, income, occupation, and housing conditions influence awareness, utilization, and satisfaction with sanitation services. Hence, the present table analyses the basic socio-economic profile of the respondents selected for the study.

Table 1:

Category	Number	Percentage
Msle	72	60
Female	48	40
Total	120	100

The table shows that a majority of the respondents are male (60 per cent), while females constitute 40 per cent of the sample. This indicates adequate gender representation in the survey. The socio-economic diversity of respondents ensures that the study captures varied experiences of sanitation services in GWMC. Such diversity strengthens the reliability of findings related to welfare interventions and sanitation outcomes.

2. Access to Household Toilets:

Access to household toilets is a key indicator of sanitation outcomes and an important objective of populist welfare interventions. This table presents data on the availability of toilet facilities among the surveyed households in GWMC.

Table 1:

Response	Number	Percentage
Yes	98	81.7
No	22	18.3
Total	120	100

The table reveals that 81.7 per cent of the households have access to household toilets, while 18.3 per cent do not have such facilities. The high percentage of toilet coverage reflects the impact of sanitation-related welfare schemes implemented by GWMC. However, the existence of households without toilets indicates the need for further policy attention, especially in low-income and slum areas.

3. Type of Sanitation Facility Used:

Merely providing sanitation infrastructure is insufficient unless appropriate facilities are regularly used. This table examines the type of sanitation facilities used by respondents, highlighting the extent of dependence on household toilets, community toilets, and open defecation.

Table 3:

Facility Type	Number	Percentage
Individual Household Toilet	85	70.8
Community Toilet	21	17.5
Open Defecation	14	11.7
Total	120	100

The table indicates that 70.8 per cent of respondents use individual household toilets, while 17.5 per cent depend on community toilets. A small yet significant 11.7 per cent of households still practice open defecation. Although populist welfare interventions have reduced open defecation, the findings suggest that infrastructural gaps and behavioral issues continue to affect sanitation outcomes in certain areas of GWMC.

4. Frequency of Garbage Collection:

Solid waste management is a core function of urban local bodies and a visible outcome of welfare-oriented sanitation policies. This table analyses the frequency of garbage collection services provided by GWMC in the surveyed localities.

Table 4:

Frequency	Number	Percentage
Daily	64	53.3
Alternate Days	38	38
Irregular	18	18
Total	120	100

The table shows that 53.3 per cent of households receive daily garbage collection services, while 31.7 per cent report alternate-day collection. However, 15 per cent of respondents experience irregular garbage collection. This uneven service delivery indicates operational challenges faced by GWMC and highlights the need for improving consistency and coverage of waste management services.

5. Satisfaction with Sanitation Services:

Citizen satisfaction serves as an important measure of the effectiveness of welfare interventions. This table presents respondents' level of satisfaction with sanitation services provided by GWMC.

Table 5:

Level of Satisfaction	Number	Percentage
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Satisfied	52	43.3
Neutral	34	28.3
Dissatisfied	34	28.3
Total	120	100

The table reveals that 43.3 per cent of respondents are satisfied with sanitation services, while 28.3 per cent are dissatisfied. An equal proportion remains neutral. The moderate level of satisfaction suggests that although welfare interventions have improved service availability, issues related to quality, maintenance, and responsiveness continue to affect public perception.

6. Perception of Cleanliness in Locality:

Perception of cleanliness reflects the overall impact of sanitation interventions on the urban environment. This table analyses how respondents perceive the cleanliness of their surrounding localities in GWMC.

Table 6:

Perception	Number	Percentage
Clean	46	38.3
Moderately Clean	50	41.7
Unclean	24	20
Total	120	100

The table indicates that 38.3 per cent of respondents perceive their locality as clean, while 41.7 per cent consider it moderately clean. However, 20 per cent of respondents perceive their surroundings as unclean. These findings highlight spatial disparities in sanitation outcomes and suggest that welfare interventions need to be more area-specific and outcome-oriented.

DISCUSSION:

The analysis reveals that populist welfare interventions have significantly improved access to household toilets in GWMC. Door-to-door garbage collection has expanded, reflecting institutional commitment to sanitation. However, satisfaction levels remain moderate, indicating gaps in service quality and consistency. The persistence of open defecation in some areas highlights behavioural and infrastructural challenges. The findings suggest that welfare-driven sanitation initiatives must be complemented by awareness programmes and stronger municipal monitoring.

MAJOR FINDINGS:

1. Populist welfare interventions have significantly expanded sanitation access but with uneven outcomes.

The study reveals that sanitation-related welfare interventions implemented by the Greater Warangal Municipal Corporation have substantially increased household-level access to toilet

facilities. A large proportion of respondents reported ownership or usage of individual household toilets, indicating the success of welfare-driven infrastructure provisioning. However, access remains uneven across wards, particularly in slum and low-income areas, suggesting that welfare benefits have not reached all segments of the urban population equally.

2. Infrastructure availability has outpaced behavioral change and sustained usage.

While toilet construction has increased, the continued practice of open defecation among a section of respondents highlights the limitation of infrastructure-centric welfare approaches. Behavioral, cultural, and awareness-related factors continue to influence sanitation practices. This finding indicates that populist welfare interventions have focused more on visible infrastructure creation than on long-term behavioral change communication and community engagement.

3. Solid waste management services show partial effectiveness and operational inconsistencies.

Door-to-door garbage collection services have expanded under welfare-oriented sanitation initiatives, benefiting a majority of households. However, irregular collection in several localities points to operational inefficiencies, workforce constraints, and inadequate monitoring mechanisms. These inconsistencies undermine the overall sanitation outcomes and contribute to negative public perception in certain areas.

4. Public satisfaction with sanitation services remains moderate despite increased service coverage.

The findings show that less than half of the respondents expressed satisfaction with sanitation services provided by GWMC. This moderate satisfaction level reflects a mismatch between service availability and service quality. Issues such as delayed waste collection, poor maintenance of community toilets, and lack of responsiveness to complaints adversely affect citizen trust and confidence in municipal service delivery.

5. Perception of cleanliness varies significantly across urban spaces within GWMC.

Respondents' perceptions of cleanliness differ widely between localities, indicating spatial disparities in sanitation outcomes. Planned residential areas generally report better sanitation conditions, while densely populated and marginalized areas experience poorer outcomes. This highlights the need for area-specific sanitation strategies rather than uniform welfare interventions.

6. Citizen participation in sanitation governance is limited and underutilized.

The study finds low levels of citizen involvement in cleanliness drives, monitoring, and feedback mechanisms. Although populist welfare interventions emphasize citizen-centric delivery, limited participation reduces community ownership and weakens accountability. This suggests a gap between policy rhetoric and participatory practice in urban sanitation governance.

7. Institutional capacity constraints affect the effectiveness of welfare interventions.

The findings indicate that GWMC faces administrative and operational challenges in sustaining sanitation services. Inadequate manpower, limited financial flexibility, and weak grievance redressal mechanisms constrain the effectiveness of welfare interventions. These institutional limitations hinder the translation of welfare inputs into consistent sanitation outcomes.

8. Sanitation outcomes are influenced by socio-economic factors.

Socio-economic characteristics such as income level, housing type, and education significantly shape access to sanitation facilities and perception of service quality. Households in pucca housing and higher income groups report better sanitation outcomes, while economically weaker sections face

greater challenges. This underscores the intersection between urban poverty and sanitation inequality.

9. Populist welfare interventions tend to priorities visibility over sustainability.

The study finds that welfare-driven sanitation initiatives often emphasize immediate and measurable outputs—such as toilet construction numbers and cleanliness drives—over long-term sustainability. The absence of robust maintenance systems and community-based monitoring limits the durability of sanitation improvements.

10. A gap exists between welfare policy intent and ground-level sanitation realities.

Overall, the study identifies a clear disconnect between the objectives of populist welfare interventions and the lived experiences of urban residents. While policies aim to deliver inclusive sanitation, their impact is constrained by behavioral, institutional, and governance-related challenges at the local level.

SUGGESTIONS:

1. Shift from infrastructure-centric welfare to outcome-based sanitation governance.

Sanitation interventions should move beyond toilet construction and cleanliness drives to focus on sustained outcomes such as regular usage, maintenance, and environmental cleanliness. Monitoring mechanisms must priorities service quality and long-term impact rather than short-term achievements.

2. Strengthen institutional capacity and accountability within GWMC.

The municipal corporation should enhance manpower availability, technical capacity, and supervisory mechanisms for sanitation services. Clear accountability structures and performance-based evaluation of sanitation workers and contractors are essential for improving service consistency.

3. Integrate behavioral change communication with welfare interventions.

Sanitation outcomes depend significantly on behavioral practices; therefore, awareness campaigns, community education, and local leadership involvement should be integrated with welfare schemes. Such efforts can reduce open defecation and improve hygienic practices across communities.

4. Promote citizen participation and community ownership.

Active involvement of residents through ward committees, resident welfare associations, and local sanitation monitoring groups can enhance accountability and service responsiveness. Community participation also fosters a sense of ownership over sanitation infrastructure.

5. Adopt area-specific and inclusive sanitation strategies.

Sanitation interventions should be tailored to the specific needs of slum areas, peri-urban localities, and marginalized communities. Targeted welfare measures can address spatial inequalities and ensure equitable sanitation outcomes across GWMC.

CONCLUSION:

The study demonstrates that populist welfare interventions in the Greater Warangal Municipal Corporation have contributed significantly to improving access to sanitation infrastructure and expanding basic sanitation services. However, the findings reveal that improved coverage has not uniformly translated into effective sanitation outcomes. Persistent issues such as irregular waste collection, moderate levels of public satisfaction, and continued dependence on community facilities and open defecation in certain areas highlight the limitations of welfare-driven approaches. Sustainable sanitation outcomes require more than populist provisioning; they demand strong

municipal capacity, consistent service delivery, behavioral change, and active citizen participation. The study underscores the need for an integrated urban sanitation strategy that balances welfare interventions with long-term governance reforms to ensure inclusive, equitable, and sustainable urban cleanliness.

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