

# Impact of Jal Jeevan Mission on Rural Livelihoods and Women Empowerment: A Case Study of Anjani Village, GPM District, Chhattisgarh, India

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**Abstract:** The accomplishment of SDG 6 is especially important for India. India, a country with more than 1.4 billion people and a wide range of ecological and socioeconomic circumstances, has significant issues with water stress, contamination, and access disparities. Nearly 600 million Indians face high-to-extreme water stress, and by 2030, the demand for water is expected to double the supply, according to NITI Aayog (2019). The Indian government established the JJM in 2019 under the Ministry of Jal Shakti to fulfil the water demands. The present study was designed to assess the benefits of JJM in Anjani village of GPM district with objectives, to assess how the Jal Jeevan Mission has affected the everyday activities, socioeconomic condition and health outcomes. The implementation of the JJM has brought significant improvements in this situation. Universal tap connections, reliable supply, and better water quality have not only ensured household-level water security but also positively impacted education, health, women's empowerment, and livelihoods. Children no longer miss school due to water-fetching duties, women save valuable time for productive work, and households report reduced medical expenses due to fewer waterborne diseases.

**Keywords:** Functional Household Tap Connections (FHTCs), Jal Jeevan Mission (JJM), Swachh Bharat Mission (SBM), Village Water and Sanitation Committees (VWSCs), Gaurela-Pendra-Marwahi (GPM)

## I. INTRODUCTION

Globally, access to clean drinking water is seen as a basic human right and as essential to sustainable development, public health, and dignity. Millions of people worldwide are still afflicted by waterborne illnesses like cholera, dysentery, typhoid, and diarrhoea, which are linked to unsafe and inadequate water supplies. According to WHO (2018) estimates, poor sanitation, inadequate hygiene, and contaminated drinking water contributed to almost 1.4 million deaths worldwide in 2014. In 2015, the UN included Goal 6: Ensure availability and sustainable management of water and sanitation for all to the SDGs in recognition of this critical need. By 2030, this international commitment aims to ensure that everyone has access to sufficient and safe water (UN, 2023).

The accomplishment of SDG 6 is especially important for India. India, a country with more than 1.4 billion people and a wide range of ecological and socioeconomic circumstances, has significant issues with water stress, contamination, and access disparities. Nearly 600 million Indians face high-to-extreme water stress, and by 2030, the demand for water is expected to double the supply, according to NITI Aayog (2019). The situation is exacerbated by groundwater depletion, climate variability, and iron, fluoride, and arsenic poisoning (Sarkar & Bharat, 2021). Rural women and girls bear a disproportionate amount of the responsibility

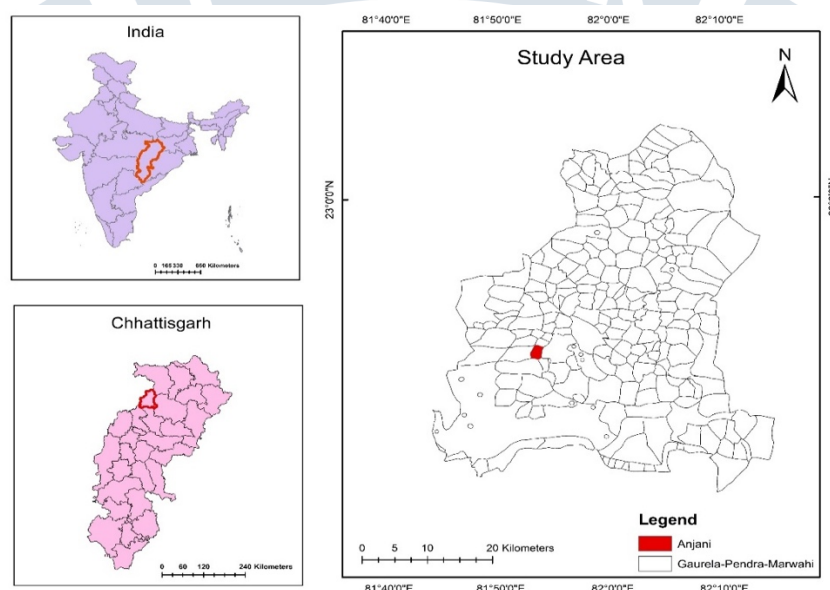
of collecting water; they frequently spend several hours a day doing so, which restricts their access to jobs, education, and political engagement (Kumari, 2022).

The Rajiv Gandhi National Drinking Water Mission (1991–1992), the National Rural Drinking Water Programme (2009), and the Accelerated Rural Water Supply Program (1972–1973) marked the beginning of India's rural water supply adventure. Even though these projects increased infrastructure, problems with functionality and sustainability remained. Only 22.6 percent of rural homes have functional tap water connections, according to a Government of India report; in Assam, that number was only 1.9 percent (Government of Assam, 2018). The Indian government established the JJM in 2019 under the Ministry of Jal Shakti to fulfil these gaps. Its main goal is to install Functional Household Tap Connections (FHTCs) in every rural home by 2024, guaranteeing a daily supply of 55 liters of drinkable water per person. In contrast to earlier programs, JJM priorities source sustainability, service delivery, and participatory governance (Ministry of Jal Shakti, 2019).

The 33rd district of Chhattisgarh, Gaurela-Pendra-Marwahi (GPM), was established in February 2020 after a division from the district of Bilaspur. It is mostly home to tribal people and is situated in the northern region of the state. Its economy is based on agriculture and forest products. As of the 2011 Census, there were 336,420 people living in the district, which is around 2,307 km<sup>2</sup>. The district recorded a sex ratio of 997 girls for every 1,000 males and a literacy rate of just 55.92% (Govt. of Chhattisgarh, n.d.). The present study was designed to assess the benefits of JJM in one selected village of GPM district with following objectives (i) To assess how the Jal Jeevan Mission has affected the everyday activities and socioeconomic participation of rural women in Anjani village, GPM district, Chhattisgarh and (ii) To evaluate how the Jal Jeevan Mission has affected rural households' health outcomes in Anjani village, GPM district, Chhattisgarh.

## II. STUDY AREA :

Anjani is a village in Chhattisgarh's GPM district that is dominated by tribal people. There are 1,154 people living in the village, according to the 2011 Census. There is a significant gender difference in schooling as the general literacy rate is 64.5 percent, with male literacy at 79.7 percent and female literacy at 49.6 percent. Scheduled Tribes make up about 70.4 percent of the population. With a total land area of 355 hectares and 308 built-in homes, Anjani exhibits the socioeconomic and demographic characteristics typical of tribal settlements.



**Map No. 1 : Village Map of GPM district**

### III. METHODOLOGY :

The current study focusses on household-level water access and its socioeconomic and health effects, utilizing a descriptive and analytical research design. It is cross-sectional in nature, integrating qualitative information from institutions at the village level with quantitative survey data. Respondents from Anjani village were chosen using a random sample technique. This approach made sense because the study's specific goal was to document how JJM affected rural households' access to water, health, and women's socioeconomic engagement. In order to ensure that the sample included households directly impacted by the JJM intervention, only those households with existing tap connections were chosen for the study. One hundred Anjani village homes were included in the study. Direct observation, household surveys, and pre-tested structured questionnaires are used to gather data.

### IV. RESULT :

#### Demographic and Socio-Economic Profile of Anjani Village :

Out of total respondent, (73 %) females and (27 %) males were interviewed. Marital status data reveal that 87 percent of respondents are married, while 13 percent remain unmarried. Majority (58 %) of respondents belongs to 30-to-44-year, age group, out of which 67 percent belong to nuclear families. Economic classification based on ration cards highlights that 86 percent of households fall under the Below Poverty Line (BPL) category. Educational attainment remains low, with 48 percent uneducated. Occupational patterns show that 57 percent are engaged primarily as farmers with 26 percent combine farming with wage labour, 11 percent are labours, 2 percent work in government jobs, and 4 percent in private employment. Landholding distribution shows that 73 percent are marginal farmers, 14 percent small farmers, and 13 percent landless. Largest population 65 percent of households earn between ₹20,000–₹50,000 per year. Majority of respondents, 46 percent live in thatched houses and 33 percent in cemented houses. Sanitation facilities indicate that 67 percent of households have toilets, among the former, out of which 44 percent are government-constructed, 23 percent self-made. Personal water sources are available to only 18 percent of respondents, while 82 percent depend on common sources.

#### Sources of Water in Anjani Village :

For general water use, 63 percent of households depend on hand pumps, followed by 16 percent on wells, 12 percent on tube wells, 9 percent on ponds, and 8 percent on rivers, while as many as 87 percent report access through JJM pipelines, to meet the daily water requirements of households. Drinking water sources are primarily hand pumps (55 %), supplemented by JJM tap connection (89 %), tube wells (9 %), and wells (8 %). Bathing water is mainly drawn from hand pumps (65 %) and JJM tap connection (81 %), with smaller contributions from rivers (14 %), ponds (13 %), and tube wells (7 %). Cooking water shows similar dependence, with 69 percent relying on hand pumps, 11 percent on tube wells, 6 percent on wells, and 87 percent on JJM tap connection. For washing clothes, 72 percent use hand pumps, 17 percent ponds, 16 percent rivers, 13 percent wells, and 8 percent tube wells, while 87 percent access JJM tap connection. In household cleaning, 47 percent depend on hand pumps, 16 percent on tube wells, 6 percent on wells, and 85 percent on JJM tap connection. For water used in animal shelters, 47 percent depend on JJM tap connection, 19 percent on hand pumps, 12 percent on tube wells, 6 percent on wells, 4 percent on rivers, and 3 percent on ponds. Gardening water is primarily sourced from JJM tap connection (45 %), followed by hand pumps (12 %), tube wells (8 %), wells (6 %), rivers (4 %), and ponds (5 %). Finally, agricultural water use relies only on tube wells (6 %). Collectively, these figures reflect that while traditional sources like hand pumps, wells, and ponds continue to play an important role, the Jal Jeevan Mission has emerged as the most significant and reliable source of water supply for multiple household and livelihood needs.

## V. PROBLEMS AND SUGGESTIONS RELATED TO WATER STORAGE, USAGE, AND QUALITY UNDER JJM :

The survey reveals several concerns related to the storage, usage, and quality of water under the Jal Jeevan Mission. With regard to storage and maintenance, 47 percent of respondents emphasized the need for regular cleaning of tanks, 38 percent suggested overcoming the shortage of water storage tanks, and 27 percent stressed the use of quality materials in construction, while 9 percent called for increasing the height of tanks. Problems reported included lack of regular cleaning (48 %), use of poor-quality materials (40 %), lack of adequate tanks (25 %), and low tank height (18 %).

In terms of water usage, 78 percent of respondents pointed to improper use of water after JJM, with 37% noting wastage due to poor maintenance of taps and 10 percent highlighting excessive usage through submersible/tullu pumps. To address these issues, 73 percent suggested awareness campaigns for proper water use, 30 percent recommended higher water charges for excessive consumption, and 20 percent emphasized repairing taps to stop leakage. Suggestions for water supply improvement included ensuring good pressure in taps (89 %), adequate water quantity (65 %), and at least twice-daily supply (18 %). Regarding water quality, 46 percent stressed the need for regular chemical testing, 51 percent recommended the installation of purification systems, 36 percent suggested repairing pipelines to eliminate microorganisms, and 25 percent called for removing physical impurities.

## VI. WATER MANAGEMENT PRACTICES AND RELATED ISSUES :

Absence of proper drains (65 %), lack of regular drain cleaning (37 %) and insufficient infrastructure for water storage or harvesting (13 %) is the major issue related to waste water management. Regarding the methods of managing used water, the majority of households (66 %) using it for irrigation of gardens and fields, about 21 percent disposed it directly into drains, while (13 %) used open pits. Drinking water treatment practices before and after the implementation of the JJM reflects a significant shift. Earlier, 87 percent of households relied on cloth filtration, and 13 percent used the method of transferring water from one pot to another. After JJM, the proportion using cloth filtration reduced to 22 percent, while direct consumption of potable water increased to 73 percent. Only 5 percent continued with the pot-transfer method. The data also revealed that after implementation of JJM the water storage is increased up to 39 percent.

### Infrastructure and Service Delivery under Jal Jeevan Mission :

All respondents reported that water supply through tap connections with cement platforms had started in 2024. 76 percent of respondents correctly identified the height of the water tank, while 24 percent expressed dissatisfaction. Furthermore, most respondents (95 %) were satisfied with the quality of the pipes. Regarding repairs and maintenance, 42 percent of respondents relied on the panchayat (local council), 28 percent on mission officials, and the remaining 30 percent stated that they had not yet required any repairs. A water charge of ₹50 per household is paid to the panchayat. Overall, the results indicate that the infrastructure provision has been standardized, with high satisfaction levels among households.

## VII. WATER QUANTITY AND SUPPLY METHODS :

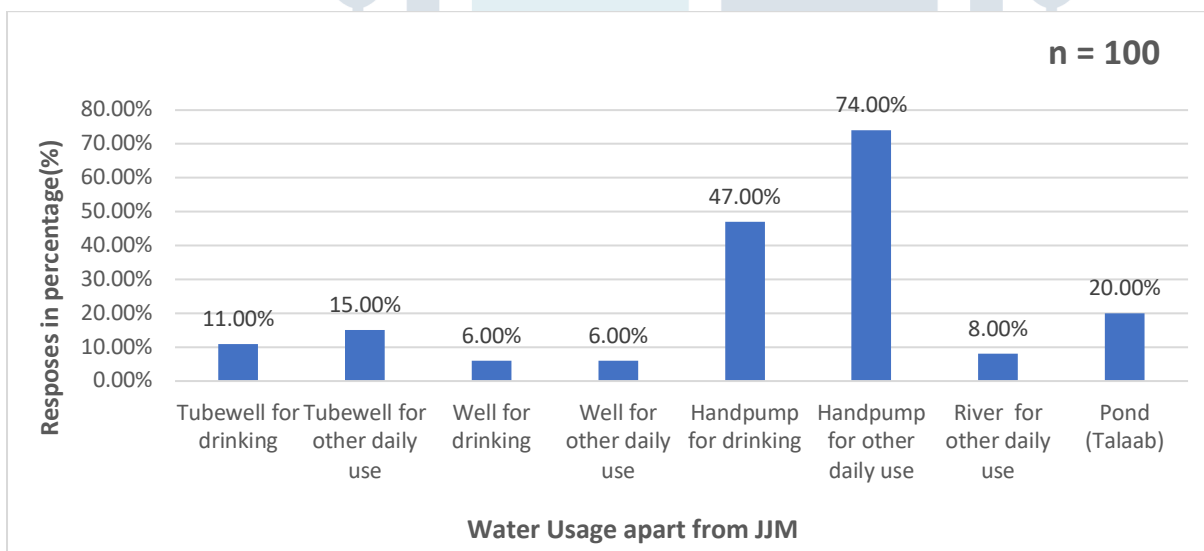
A total of 87 percent of respondents were satisfied with the quantity of water supplied both in the morning and evening, while only 13 percent expressed dissatisfaction. Regarding the method of water supply, the majority of households (76 %) received water through a water tank system, whereas 24 percent depended on tubewells. This reflects a transition towards tank-based piped supply as the primary mode of service delivery.

## VIII. COMMUNITY PARTICIPATION AND SOCIO-ECONOMIC IMPACT OF JJM :

The findings suggest that the Jal Jeevan Mission (JJM) has significantly improved not only access to drinking water but also aspects of community participation, education, health, and livelihood opportunities. Community engagement in the scheme has been encouraging. About 73 percent of households reported that Gram Sabha

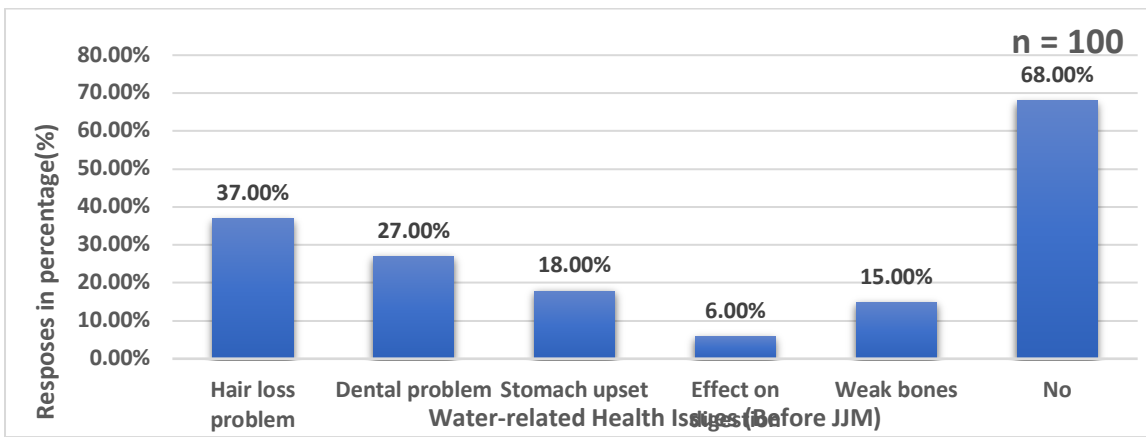
approval was obtained before implementation, while 62 percent confirmed attending VWSC meetings at least once. Similarly, 37 percent of respondents regularly participated in water and cleanliness-related meetings, indicating a gradual rise in awareness and collective responsibility. Socio-economic benefits were also visible. Nearly 47 percent of households stated that children now have more time for school, and 18 percent linked this improvement directly to education outcomes. Importantly, no household reported children missing or being late for school due to water-fetching responsibilities after JJM. This highlights the scheme's positive effect on children's education and daily routine.

In terms of income, 23 percent of respondents reported an increase in household earnings, with 11% experiencing a gain of ₹1,000–₹1,500 per month and 12 percent noticing additional sources of income generation through farming or wage activities. Moreover, 39 percent of households stated that their medical expenses had reduced because of fewer waterborne diseases, with 14 percent reporting high savings and 25 percent reporting moderate savings. Women benefitted substantially from JJM. Around 28 percent of women reported saving daily time previously spent fetching water, which they could now use for productive activities like farming, stitching, or wage labour. Additionally, 21 percent of households stated that women's daily routines had become easier, allowing them to contribute more effectively to both income and household management. Looking towards sustainability, 27 percent of households expressed optimism about future employment opportunities in JJM-related maintenance and repair works, while others felt that the Panchayat and VWSC would continue to manage the responsibilities. Overall, the results indicate that JJM has gone beyond its primary goal of water supply. It has also helped to enhance education opportunities, reduce health expenditures, empower women, and build the foundation for future livelihoods through local water governance structures.



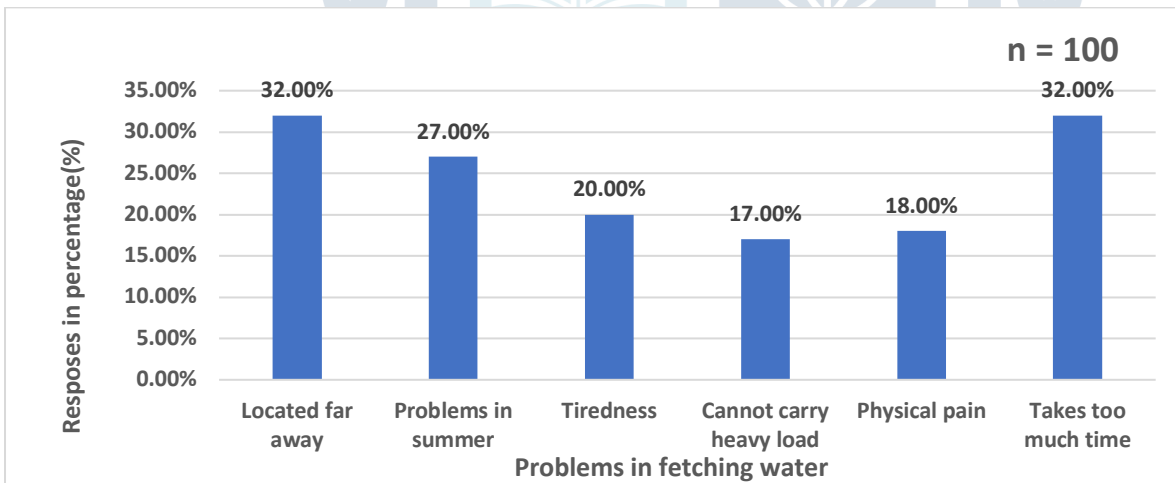
**Figure 1 : Distribution of respondents according to water usages apart from JJM**

The data represent in figure 1, illustrates that although the JJM has become the primary source of water in Anjani village, households continue to rely on traditional sources for supplementary needs. Hand pumps remain the most significant, with 47 percent of respondents using them for drinking and 58 percent for other daily purposes. Ponds also play a considerable role, as 35 percent of households depend on them, particularly for washing and cleaning. Tube wells contribute both for drinking (18 %) and other daily uses (14 %), while wells are used by smaller proportions, 8 percent for drinking and 5 % for daily use. Rivers continue to be accessed by 18 percent of households for daily needs. These findings suggest that despite improvements under JJM, traditional water sources remain important, especially for households requiring additional water for domestic and livelihood-related purposes.



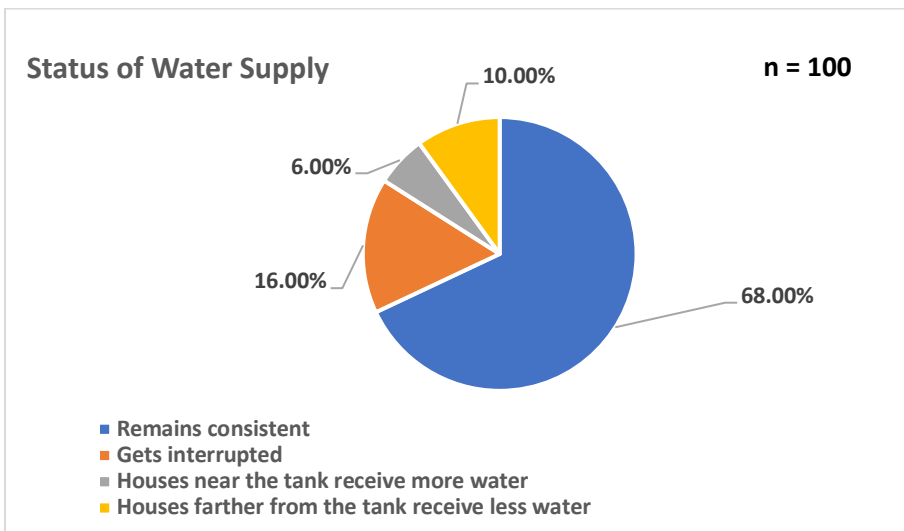
**Figure 2 : Distribution of respondents according to Water-related Health Issues (Before JJM)**

The data from figure 2, illustrates that Before the implementation of the Jal Jeevan Mission (JJM), a considerable proportion of households in Anjani village reported health problems associated with water usage. The most common issue was hair loss, reported by 37 percent of respondents, followed by dental problems (27%). Stomach upset was experienced by 18 percent, weak bones by 15 percent, and difficulties in digestion by 6 percent. However, a majority of households (68%) did not report any noticeable health problems. These findings indicate that although not universal, a significant section of the community faced water-related health concerns prior to JJM, largely reflecting the poor quality and unsafe nature of traditional water sources.



**Figure 3 Distribution of respondents according to problems in fetching water**

The data revealed from figure 3 shows that prior to the implementation of the Jal Jeevan Mission, households in Anjani village faced multiple difficulties in fetching water. The most frequently cited problems were the long distance of water sources (32%) and the excessive time required to collect water (32%). Seasonal scarcity also created challenges, with 27 percent of respondents reporting problems during summer months. Physical strain was another concern, as 20 percent experienced tiredness, 18 percent reported physical pain, and 17 percent noted difficulty in carrying heavy loads. Collectively, these findings highlight the burden of water collection on households, indicating that distance, time, and physical exertion were the most significant constraints in accessing water prior to JJM.



**Figure 4 : Distribution of respondents according to status of JJM water supply**

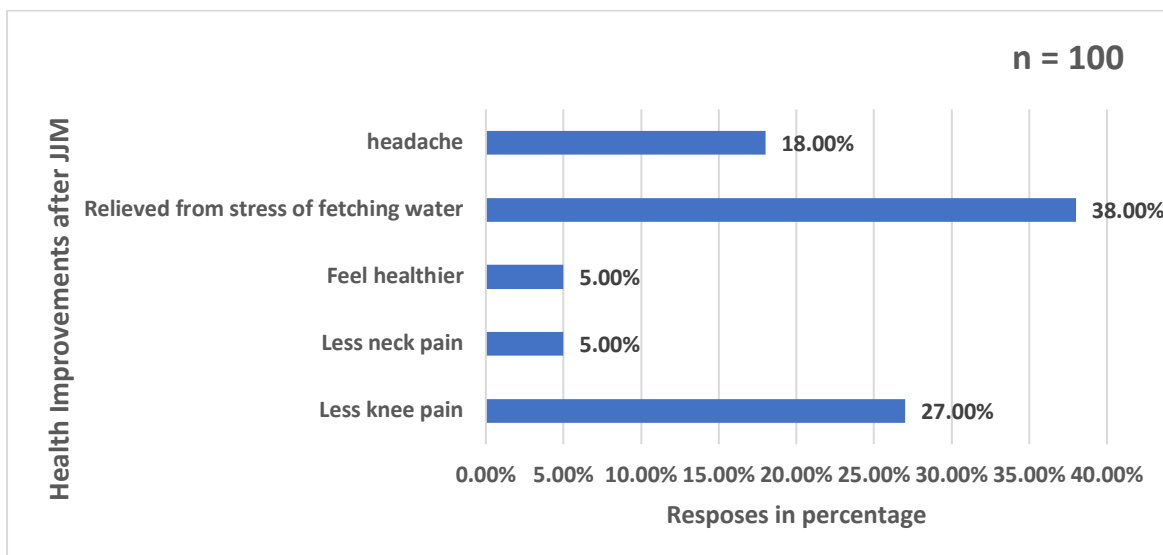
The assessment of water supply status in Anjani village indicates in figure 4 illustrated that the majority of households (68 %) reported a consistent and reliable supply under the Jal Jeevan Mission. However, interruptions were experienced by 16 percent of respondents, suggesting occasional irregularities in distribution. Spatial variation in access was also observed, as 6 percent of households located closer to the tank reported receiving more water, while 10% of those farther from the tank reported receiving less. These findings demonstrate that although the overall supply is largely stable, inequities in distribution and periodic interruptions continue to affect a section of the community.

## IX. DEPENDENCY JJM WATER SUPPLY

A question was asked from respondents about dependency on JJM for water requirement. The findings reveal that a majority of households is depend extensively on the Jal Jeevan Mission for their daily water needs. About 67 percent of respondents reported being largely dependent on JJM, while 18% indicated complete reliance on it. In contrast, only 15 percent of households mentioned lesser dependence, suggesting continued use of alternative water sources. Overall, the data demonstrate that JJM has become the principal source of water for most households, significantly reducing reliance on traditional sources.

### Duration of water supply :

The answer related to duration of water supply under JJM tanks, the respondent majority of respondents (79 %) receive water for a duration of 1–2 hours per day, which indicates a relatively stable but time-bound distribution system. A smaller proportion (18 %) reported receiving water for less than one hour daily, while only 3 percent had access for 2 hours. These findings suggest that although most households have adequate access within a fixed time window, the overall supply remains limited in duration, thereby constraining flexibility in water use. Time saved post JJM that implementation of the JJM has led to notable time savings in Anjani village. A majority of households (57 %) reported saving up to one hour daily, while 16 percent each saved between 1–2 hours and 2–3 hours. Additionally, 11 percent of respondents experienced a time gain of 3–4 hours, reflecting substantial relief from the burden of water collection. However, 20 percent of households reported no time savings, suggesting uneven benefits within the community. Overall, the findings highlight that JJM has significantly reduced the time spent fetching water for most households.



**Figure 5 : Distribution of respondents according to status of health improvement after JJM water supply**

Implementation of the JJM has contributed to notable improvements in the health and well-being of the villagers. The most significant change was the relief from stress associated with fetching water, reported by 38 percent of respondents. Physical strain was also reduced, with 27 percent noting less knee pain, 18 percent experiencing fewer headaches, and smaller proportions reporting relief from neck pain (5 %) and an overall feeling of improved health (5 %). These findings indicate that the scheme has not only enhanced water accessibility but also alleviated health burdens linked to the physical effort of water collection.

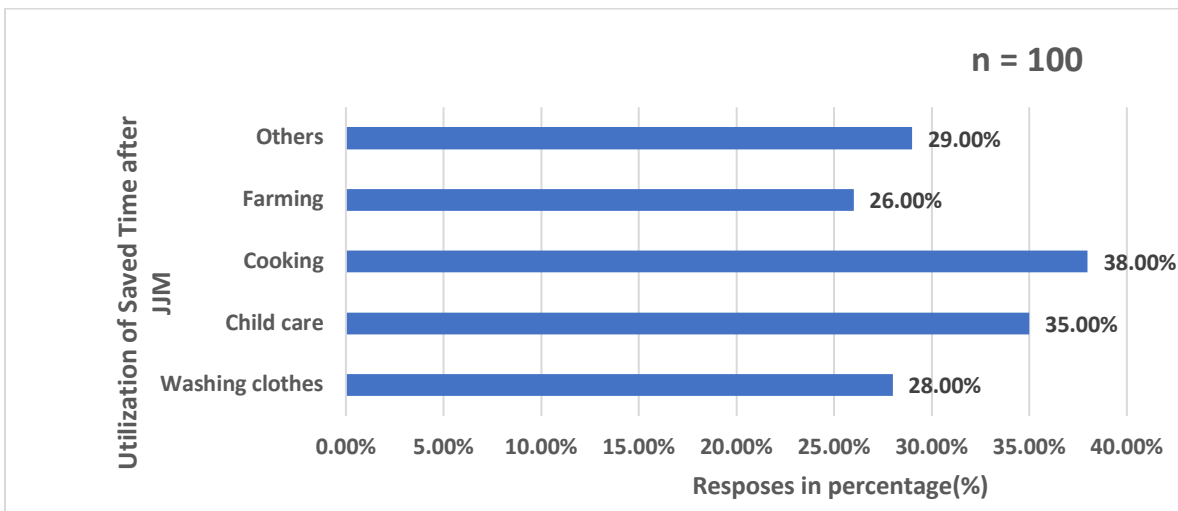
#### **Number of trips to fetch water :**

The result illustrates that a majority of households (68 %) had to make up to five trips per day to fetch water, showing a considerable burden of daily collection before JJM. Additionally, 22 percent of households reported making 6–10 trips daily, while 6 percent made 11–15 trips and 4 percent made 16–20 trips. These findings highlight that prior to JJM, households faced substantial physical effort and time investment in water collection, reflecting the lack of assured access and dependence on multiple or distant sources.

#### **Time spent on fetching water :**

The data illustrates the analysis of time spent on fetching water which reveals that a considerable proportion of households (42 %) had to spend up to one hour daily, while 38 percent reported spending between one to two hours. A smaller share of respondents experienced even longer durations, with 7 percent- taking 2–3 hours, 9 percent- taking 3–4 hours, and 4 percent- spending as much as 6–7 hours per day. These findings indicate that before JJM, households faced a substantial time burden in water collection, reflecting inequities in availability and the distance of water sources.

Time saved post JJM illustrates that the implementation of the Jal Jeevan Mission has significantly reduced the time burden of water collection in Anjani village. A large majority of respondents (84 %) reported saving time after JJM, while only 16 percent indicated no change. This demonstrates the positive impact of the scheme in easing household water access and reducing the drudgery traditionally associated with fetching water.

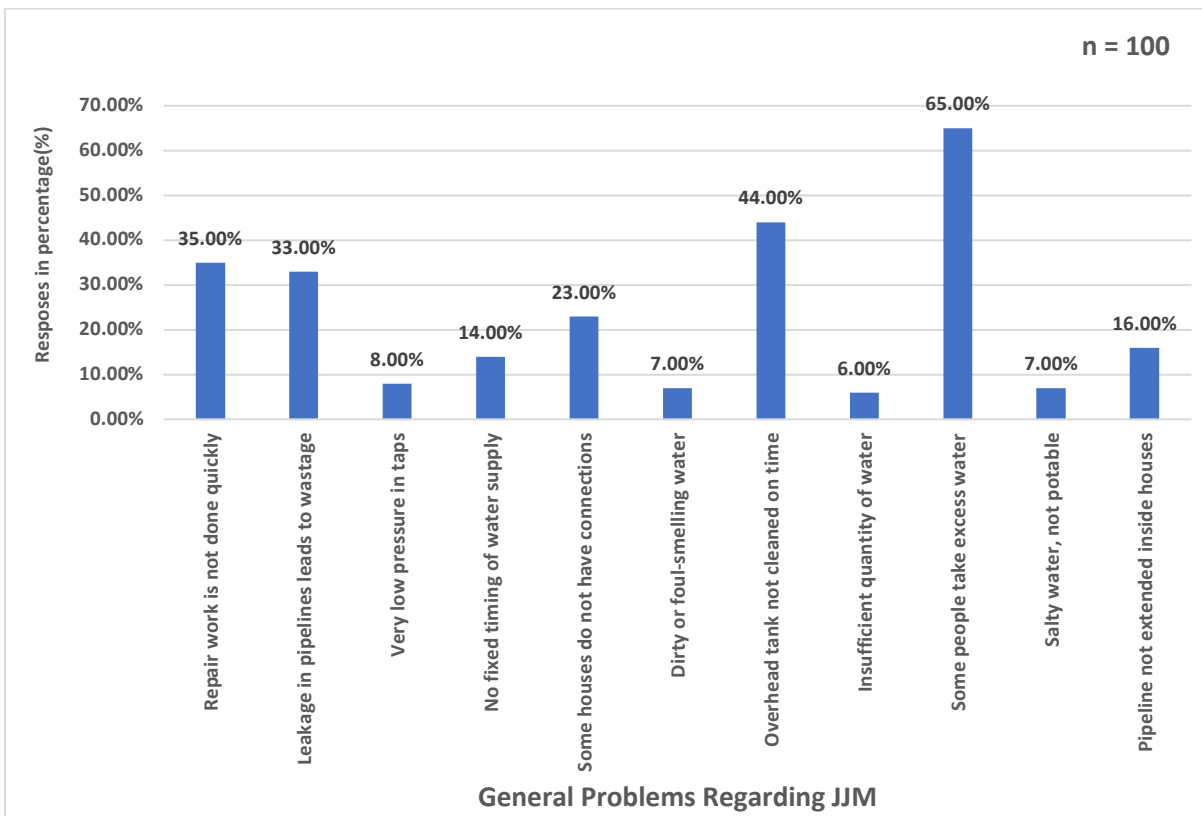


**Figure 6 : Distribution of respondents according to utilization of saved time after JJM**

The data in Figure 6 illustrates that the time saved through the Jal Jeevan Mission has been utilized by households in multiple productive and domestic activities. A considerable proportion of respondents reported using the saved time for cooking (38 %) and child care (35 %), followed by washing clothes (28 %) and farming (26 %). Additionally, 29 percent of households engaged in other activities. These findings indicate that the scheme not only reduced the drudgery of water collection but also enabled households to reallocate time toward essential household responsibilities and livelihood-related tasks.

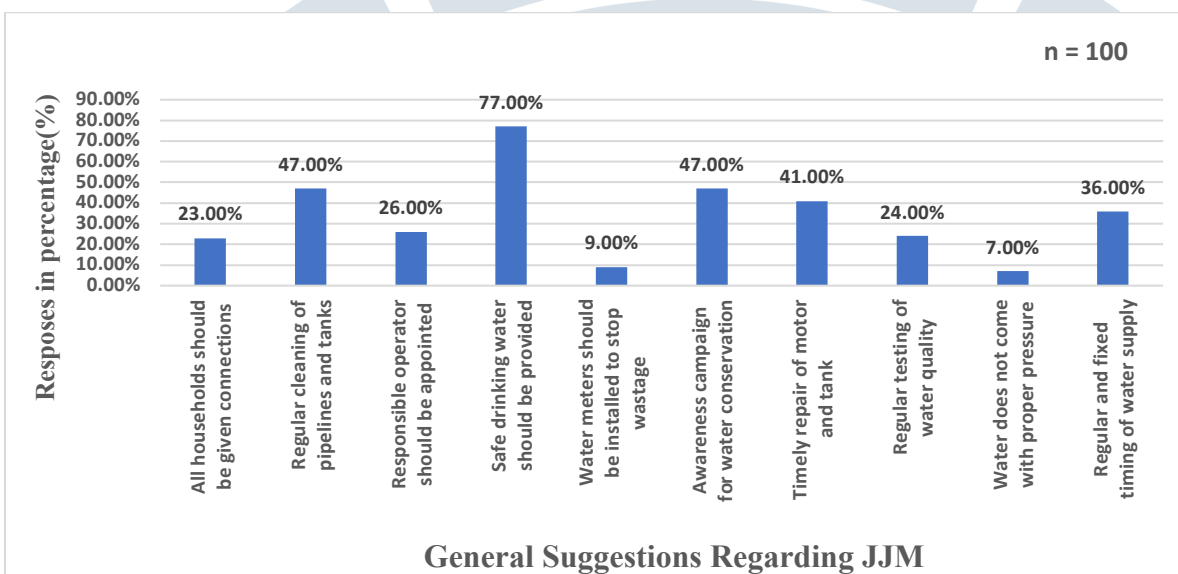
An answer to a question related to problems in wastewater management from respondents. The obtained data illustrates that wastewater management remains a significant challenge in Anjani village. A majority of households (68 %) reported the absence of proper drainage facilities, while 34 % highlighted the lack of regular drain cleaning. Additionally, 15 % pointed to the absence of infrastructure for water storage and harvesting. These findings indicate that although the Jal Jeevan Mission has improved water availability, the parallel issue of wastewater disposal remains inadequately addressed, posing risks to both sanitation and sustainability.





**Figure 7: Distribution of respondents according to general problems related to JJM**

The figure 7, highlights several operational and quality-related issues in the implementation of the Jal Jeevan Mission. The most frequently reported problem was the excessive use of water by some households (65 %), which often leads to shortages for others. Poor maintenance was also emphasized, with 44 percent noting that overhead tanks were not cleaned on time and 35 percent complaining that repair work was not carried out promptly. Leakage in pipelines was reported by 33 percent of respondents, while 23 percent pointed to the lack of household-level connections. Other concerns included irregular timing of supply (14 %), low pressure in taps (8 %), dirty or foul-smelling water (7 %), insufficient quantity (6 %), and limited pipeline extension inside houses (16 %).



**Figure 7: Distribution of respondents according to suggestion regarding JJM**

The data shows in figure 8, highlights range of suggestions from villagers to improve water supply and management. The majority (77 %) demanded the provision of safe drinking water, while 47 percent stressed the importance of regular cleaning of pipelines and tanks, as well as awareness campaigns for water conservation. Timely repair of motors and tanks was recommended by 41 percent of respondents, and 36 percent suggested ensuring a fixed schedule of water supply. Additionally, 26 percent called for the appointment of responsible operators, 24 percent for regular water quality testing, and 23 percent for universal household connections. A smaller fraction (9 %) suggested the installation of water meters to control wastage, and 7 percent highlighted the issue of inadequate pressure in taps. Collectively, these findings underline the community's concern with both infrastructural maintenance and equitable access, while also emphasizing safe, reliable, and sustainable water management practices.

### **Discussion :**

The case study of Anjani village underscores both the transformative potential and the persistent challenges of the Jal Jeevan Mission (JJM). The findings reveal that prior to JJM, dependence on traditional water sources such as handpumps and wells imposed a heavy burden of time, distance, and physical strain, especially on women and children. Post-implementation, the universal coverage of tap connections in 2024 has significantly improved water access, reduced drudgery, and enhanced health and livelihood outcomes. These local results strongly resonate with broader research on JJM's impact across India. Studies by Joshi and Patel (2024) and Rani & Choudhary (2023) similarly document that JJM has improved rural quality of life by reducing the time spent fetching water, lowering the incidence of waterborne diseases, and promoting women's empowerment. Anjani's case aligns with these findings, as women reported saving substantial time, which they could redirect towards income-generating activities and childcare. This echoes Sharma (2023), who highlights that access to household water connections directly contributes to women's participation in education and local governance.

The Anjani findings also reveal significant socio-economic benefits: children's school attendance improved, health expenditures declined, and household incomes showed modest gains. These outcomes mirror global evidence that access to safe water is closely linked to better health, nutrition, and education (WHO, 2017; Black et al., 2013). The case further illustrates JJM's role in advancing India's commitments under Sustainable Development Goal 6, which seeks universal access to safe water and sanitation by 2030 (UN, 2023).

Yet, challenges persist. Issues of water wastage, poor maintenance of infrastructure, unequal distribution, and inadequate wastewater management were reported in Anjani. Similar concerns are highlighted in other studies, such as Boro (2022) and Deshpande (2022), which point to irregular supply, weak institutional capacity, and seasonal scarcity as barriers to JJM's long-term success. Scholars like Bain et al. (2018) and Singh et al. (2013) argue that sustainability depends on source recharge, community ownership, and effective local governance—dimensions that remain only partially addressed in Anjani. Thus, while JJM has delivered significant short-term gains, its long-term sustainability requires systemic improvements. Strengthening infrastructure maintenance, promoting awareness on water conservation, ensuring equitable distribution, and integrating wastewater management are crucial. Importantly, greater community involvement through Village Water and Sanitation Committees (VWSCs) can reinforce accountability and sustainability, ensuring that JJM's benefits extend well beyond immediate access to water.

### **X. CONCLUSION :**

The study reveals that Anjani village, a predominantly tribal settlement, long depended on traditional water sources such as hand pumps, wells, and ponds. Collecting water from these sources involved considerable challenges like distance, time, and physical strain, with the greatest burden falling on women and children. The implementation of the JJM has brought significant improvements in this situation. Universal

tap connections, reliable supply, and better water quality have not only ensured household-level water security but also positively impacted education, health, women's empowerment, and livelihoods. Children no longer miss school due to water-fetching duties, women save valuable time for productive work, and households report reduced medical expenses due to fewer waterborne diseases. However, challenges remain in the form of water wastage, leakage in pipelines, inadequate cleaning of storage tanks, unequal distribution, and lack of proper wastewater management. Addressing these gaps will be crucial for making the benefits of JJM sustainable and equitable in the long term.

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**Conflict of interest :** The authors have no relevant financial or non-financial interest to disclose.

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