



Sanitation promotion through mobile centres

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IN SPITE OF concerted efforts of government, NGOs and private sector the level of rural sanitation coverage in Bangladesh crawls at a rate far below expectation. The decade old countrywide rural sanitation programme is structured on a network of nearly 1000 sanitation centres. The mandate of these centres is to provide hardware and software services to the people under their respective jurisdiction. Programme monitoring reveals that the performance of these centres is declining and gradual increase in stockpiling of latrine components is an emerging problem. The primary reason is being the saturation of demand within the natural command area of a centre. In this context, promotion of sanitation through mobile centres is being conceptualized recently. These proposed mobile centres are expected to render similar services to their respective command area, while the nature of their establishment set up will allow their relocation to another place identified on a demand driven basis. This continued relocation process will optimize resource investment and will accelerate sanitation coverage particularly in remote areas. A recent evaluation on a few pilot mobile centres, indicates encouraging response and viability of the concept. The paper aims at highlighting the evaluation findings and drawing conclusions relating to sanitation promotion through mobile centres.

Methodology of the study

There are about 300 mobile sanitation centres operating throughout the country of which 55 per cent belong to the Department of Public Health Engineering (DPHE), while 25 per cent and 20 per cent belong to non government organisations (NGOs) and private producers (PP) respectively. On random selection basis altogether 90 numbers (30 per cent) of recorded mobile centres from six administrative divisions of the country were visited maintaining the above mentioned proportions among DPHE, NGO and PP run centres, of which a total of 67 numbers (22 per cent) were found to be of actual mobile nature and were surveyed and investigated intensively. Pre-designed and pre-tested questionnaires were applied for information collection apart from consultative process where intensive dialogue with the community and various stakeholders were held by the consultant and his field enumerators to retrieve field situation relating to operation of mobile centres. With computer aided analyses interpretations were made and then conclusions were drawn.

Feature of a mobile sanitation centre

The essential features of a mobile centre are:

- The centre is established on a demand driven and on a purely temporary basis for a period of one to three years depending on the local demand for the services.
- The mobile centre is established beyond five kms. of distance from existing permanent sanitation centres.
- Initiative either from local bodies, community based organisation, youth club, or any other informal institutions or local elites and entrepreneurs is to be there to qualify for establishing a mobile centre and subsequent management, technical and software support from nearest thana¹ sanitation centre of DPHE.

Study findings and observations

Remoteness of the centres

Altogether 67 mobile sanitation centres were surveyed and investigated. As regard nearness to an existing sanitation centre of permanent nature it was revealed that 19 per cent of these centres were found to be within a distance of 5 kms, 30 per cent within 5-10 kms, while 51 per cent of these centres were located beyond 10 kms. In the present rural set up and considering communication linkage, over 81 per cent of the mobile centres surveyed are in the remote rural areas.

Operational period

Out of these 67 centres, 48 were run by DPHE, 10 by NGOs and the rest nine by the PPs. Only 20 per cent of these centres were found operational at the time of carrying out the investigation, while 80 per cent ceased their operation after functioning for a period of one to three years. This gives an indication of natural die out phenomenon once saturation of demand is attained.

Factors behind establishing a centre

The key factors which influence the establishment of mobile centres were assessed as follows:

- Demand of latrine (43 per cent).
- High transportation cost from nearest thana sanitation centre (34 per cent).
- Initiative of local influential (16 per cent).
- Profitable business (7 per cent).

Problems inhibiting establishing a centre

As regard problems for establishing a new centre the following were found to be prominent:

- Insufficient fund (33 per cent).
- Security of man and materials (30 per cent).
- Poor monitoring and supervision (33 per cent).

Transportation cost

Although transportation of latrine products to the intended users were still reported to be a major problem (69 per cent), it has been observed that in 95 per cent cases users took the responsibility of carrying the latrine components to their respective places from the mobile centres while in the remaining five per cent cases this responsibility was taken by the private producers.

Cost and mode of payment

In 93 per cent instances it was observed that full cash payment was made by the potential users in advance for their latrine components and the rest seven per cent payment was made through treasury challan². The sale price for a water seal slab was Tk³. 75/- in DPHE run centres, while in centres run by either NGOs or private producers the price was around Tk. 100/. As for sale price of concrete ring the price in DPHE centres was lower (Tk. 75/-) than in the centres run by NGOs or private producers (Tk. 100/-).

The products of the DPHE centres were not marketed on commercial basis rather these were sold on subsidized price. The NGO centres were run on no loss no profit basis which means that the products were sold at cost price, while the private producers reported that they were making some profits. Although the price levels are different in these three categories of centres yet the demand for latrine units was found significant and more or less similar.

Use of communication and promotional materials

For sanitation promotion various communication approaches were undertaken. Posters and leaflets were displayed. Film shows and mikings were also undertaken.

However, for dearth of requisite manpower interpersonal communication through yard meeting could not be undertaken. Survey indicates the effectiveness of display of poster, leaflet and film show.

Problems reported by the community

- High transport cost (69 per cent).
- No sale beyond office hours (25 per cent).
- Advance payment for the latrine components (34 per cent).
- Non-uniform quality of products (15 per cent).

Problems reported by the management

- Uncertainty as regard duration of the mobile centres (78 per cent of the centres).
- Security of man and material (22 per cent of the centres).
- Fluctuation of demand for latrine sets (70 per cent of the centres).

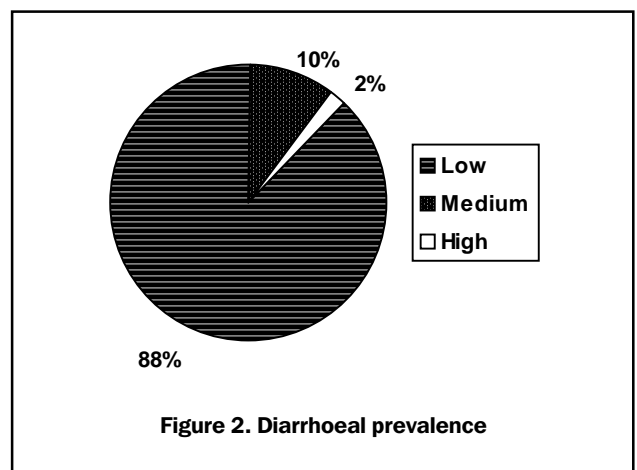
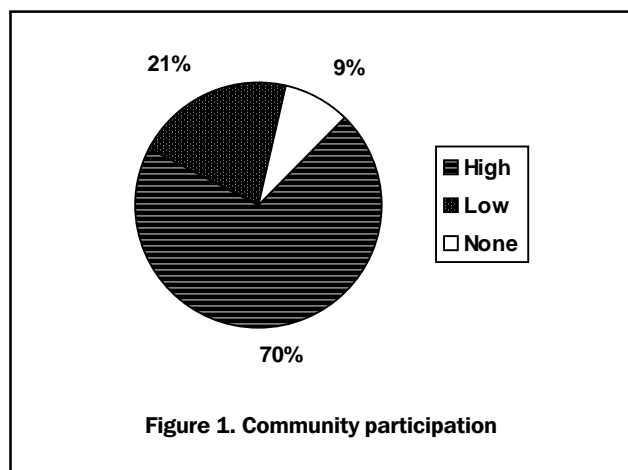
Production and service coverage

On an average 156 sets of latrines were produced and sold to the community in a year by a mobile centre which had the potential to serve about 780 people. In terms of coverage about 44 per cent of the population of an average village got the access of a sanitary latrine through mobile centre in a year. As regard quality of products 82 per cent of the centres were found to produce latrine components of good quality, while 18 per cent were unsmooth products.

Community participation

Significant community participation (70 per cent) has been observed within the command area of the centres, while low level of participation (21 per cent) has been observed in some cases and no participation in nine per cent cases only as depicted in Figure 1.

About 82 per cent of the members of the community around the sanitation centre are aware of the need and use of a sanitary latrine which clearly demonstrates the impact



of the sanitation centre towards building an upward trend in sanitation promotion.

About 60 per cent of the people were found to be happy to have a sanitation centre in their locality.

Community members (43 per cent) around mobile centres were found communicating sanitation messages among themselves

Emergence of private producers

The growth of private sector in sanitation in the country in recent years is significant. The number of PPs (2650) is nearly three times that of DPHE centres. This growth of private sector is to a great extent the reflection of the decade long impact of sanitation promotion activities of DPHE sanitation centres. Similar impacts of the mobile centres have also been noticed. With the demand generation within the command area of a mobile centre private entrepreneurs were found picking up the business.

Prevalence of diarrhoea and dysentery

A low prevalence of diarrhoea and dysentery has been observed in the command area of 88 per cent of the centres while medium category of prevalence in 10 per cent and a high prevalence in two per cent only as shown in Figure 2.

Conclusions

The concept of mobile sanitation centre for promotion of sanitation is viable.

The existing thana sanitation centres of DPHE may function as information and promotion centre providing technical and software backstopping support.

Local support either from the Chairman or members of the union parishad⁴ or informal institutions or elites of the community is essential for the purpose of security of man and materials and for the space for the construction and storage of latrine products.

The latrine products have seasonal and fluctuating demand with low potential for profit making. A marketing strategy is needed to promote latrine products in quest of ensuring financial sustainability of the centre.

Seed money for establishment and operation of a centre seems necessary. This amount will have to be reimbursed from the sale proceeds of the products.

Extensive promotional work needs to be undertaken applying appropriate communication approaches.

Subsidy is to be withdrawn to support growth of private entrepreneur.

References

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¹ Thana is a sub-district.

² Challan is an advance payment process through government treasury.

³ Taka (Tk.) is the Bangladesh currency. Current exchange rate is Tk. 42 to a US dollar.

⁴ Parishad is a Bengali word for council.

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