



Bringing health in: PHAST – South Africa

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COMMUNITY DEVELOPMENT CAN be a learning process only if people really participate. Participation does not mean that people should only be brought into a project when physical labour is required. By the implementation stage people should already have been involved in project analysis, design and planning for a long time. Local people should therefore participate in the very first survey action to establish their needs and resources, and use their information to set priorities and objectives for their project. Only if they participate in a meaningful manner can they learn to improve their own situation and gain in self-sufficiency and self-reliance.

In South Africa, development trainers, Environmental Health Officers, non-governmental organizations and government departments have been faced with the daunting task of helping historically-disadvantaged communities overcome their poverty. In an effort to overcome the effects of apartheid, the new Government and many development agencies have implemented projects rapidly. And, despite the rhetoric, participatory development remains elusive. Many communities are relying on outsiders to help make the decision that they (the outsiders) believe might best solve their problems.

This paper documents the lessons learned since the initiation of PHAST (Participatory Hygiene and Sanitation Transformation) in South Africa, and highlights the initial impact this methodology is having in trying to increase local participation and decision-making in water and sanitation development.

PHAST - South Africa

A national capacity building and implementation programme in Participatory Hygiene and Sanitation Transformation (PHAST) has been initiated in South Africa. PHAST is a participatory methodology that has been designed for the water supply and environmental sanitation sector. It has been effective at integrating meaningful health components into sector-based projects, increasing community participation in the analysis, design and implementation of sector initiatives, and enhancing the potential for project sustainability in the long-run.

PHAST also provides sector role players with a methodology that can, if facilitated well and supported over time, meaningfully integrate participation and health into water supply and environmental sanitation programmes. Instead of forming a water or sanitation committee, PHAST could help communities explore how they wish to manage their projects. Instead of offering generic, pre-designed training

in financial management or hygiene education, PHAST starts by exploring what local capacity exists and suggests ways in which this capacity can not only be further exploited but also strengthened with carefully designed and targeted training support.

A National Training Workshop was held in Namaqualand, Northern Cape, from 9-19 March 1998. The workshop was designed to introduce PHAST to provincial development workers and trainers who will form part of the provincial team of facilitators. These provincial facilitators then become responsible for organizing a provincial workshop in their respective provinces. 25 participants were trained from six different provinces namely: Northern Province, Mpumalanga, KwaZulu-Natal, North West, Eastern Cape and Northern Cape Provinces. These original provincial facilitators will provide on-going field-based support and retraining in PHAST to ensure that the skills which are transferred to trainees are applied in the field.

Example of a PHAST tool

PHAST has proven that people, regardless of age, gender, social and economic status, or educational background, are capable of analyzing their situation and solving their own problems. PHAST does not teach per se, but rather creates the conditions, through good facilitation, sound questions and visual aids/materials, for effective community-based learning and planning.

PHAST does not only stimulate local decision-making around health, but also increases community participation in the implementation of sector initiatives and the sustainability of a project, e.g. Operation and Maintenance issues.

Issues pertaining to the difficulties of paying for services in South Africa is a problem which the government can not address alone. With PHAST, a pilot training session was conducted in the Northern Province where Mvula Trust Project Development Facilitators, Project Agents and Trainers were introduced to a tool which can help community members explore the consequences when communities refrain from paying for O&M (Operation & Maintenance). The activity which was used is called "pump repair issues".

The purpose of the exercise was to stimulate understanding among community members, project staff, trainers and field workers of the roles and responsibilities involved in maintaining water and sanitation facilities. The materials used were three pictures of a water vendor and his broken-down cart, a village scene showing a broken pump

and the same village scene with the pump repaired and functioning. Mind you, the material has to suit the local cultural context. Ten small cards were used, each depicting one factor that is important in pump maintenance and repair, for example:

- purchasing tools
- sweeping the pump area
- paying the pump attendant
- paying for the diesel
- people contributing money
- using a tool to repair the pump
- people speaking with an official

To conduct the exercise, we started by holding up a picture of the water vendor with his broken down cart. We then asked the participants to suggest what the vendor needed to do in order to repair the cart. Next, we held up the picture of the scene with the broken pump and asked the participants what the community must do in order to repair the pump. We then engage the participants in a discussion by asking questions such as, “Who is responsible for making the repairs in each case? Who must pay for the repairs? Which is more difficult to maintain in good working order—a pump or a cart? Why?”

Next, we held up the large drawing of the village with the pump repaired. We then informed the participants that this drawing shows the same village one month later. We then asked them to discuss the factors that could have produced the change between the two pictures. We then pass around the 10 small cards to help stimulate discussion. Which steps were most important? What action did the villagers take first? What was the order of the actions?

We then asked the participants to discuss how the pump can best be maintained once it had been repaired. Who will keep it clean? Who is responsible for storing the tools? How should the pump’s functioning be monitored?

Impact of PHAST

Since the demonstration of this and other activities, Trainers and Project Agents started using the methodology towards improving the sustainability of their projects with regards to O&M, project and programme planning, training needs assessments and many others. Project Agents who at first considered technology and health to be the domain

of outside experts with significant academic credentials were convinced that in fact, technology and health are central aspects of local culture and practice.

For the Project Agents who attended the demonstration, they were also convinced that PHAST may force them to expand their repertoire of sanitation and water technologies. And instead of infrastructure driven sanitation or water projects, PHAST demonstrated to them that they will have to begin by asking local people what they think can be done to improve the health situation in the village. Water and sanitation may, in the end, be important part of a broader health intervention, as it should be.

Conclusion

PHAST is not a panacea, and there have been problems with its implementation in other countries that will require consideration in South Africa (Breslin and Dau, 1998). A pilot programme, which has been initiated with the support of the EU/Mvula NGO Programme, will highlight the strengths and weaknesses of PHAST in South Africa and suggest when, where and in what context it is appropriate and effective. The pilot will be started towards the end of June 1998 in all six provinces mentioned above. The purpose of the provincial workshops will be to broaden capacity in PHAST throughout the country, and to test the tools in different provincial contexts.

To date, and with few notable exceptions, community participation has been limited and health impact elusive in the vast majority of water and sanitation sector projects. PHAST is a concrete, field- tested methodology that could support the sector’s efforts to overcome this gap.

References

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