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SUSTAINABLE DEVELOPMENT OF WATER RESOURCES, WATER SUPPLY AND ENVIRONMENTAL SANITATION

Experiences of participatory hygiene promotion

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The Third Water Supply and Sanitation Sector Project (TWSSP) is being implemented in six districts in Sri Lanka and apart from the regular benefit monitoring process, it was decided to introduce the Qualitative Information Appraisal (QIA) Technique to evaluate the sub project performance. This assessment included the evaluation of hygiene practices of the poorest participants and was based on percentage of poorest women and men washing their hands at "critical" times and percentage of poorest women and men assisting children to wash hands at "critical" times. According to the results, the key reasons given for not washing hands is the lack of awareness and difficulty to change attitudes of others in own family. According to Q.I.A outcome, a new methodology has been proposed to introduce Participatory Hygiene Promotion Programs to communities. A Pilot level programme has been implemented in one district (Puttalam) out of 4 districts where QIA was carried out and the results and outcomes have been very encouraging.

Introduction

Providing safe water, sanitation and hygiene promotion facilities to rural communities is a main priority of the Sri Lankan Government. According to the 2004 Census, nearly 24% of household in Sri Lanka do not have adequate sanitation facilities. (National Policy for Rural Sanitation, 2004.) Sanitation consists of both the hardware and software components. The software component includes hygiene promotion aspects that are necessary to break the fecal-oral disease transmission route.

There were many donor assisted rural projects in Sri Lanka which implemented sanitation programs with emphasis on hygiene promotion. A significant project among them is the Asian Development Bank (ADB) assisted Third Water Supply and Sanitation Sector Project (TWSSP), which is being implemented in six districts in the Country since 1999 by the Rural Water Supply Section of National Water Supply & Drainage Board (NWSDB). The goal the project is to improve the health and wellbeing of approximately one million people living in selected six districts through improvement of facilities for water supply, sanitation and hygiene education. The TWSSP aims to cover 1000 Village Sub Projects, 47 Small Towns and 07 urban Sub Projects. The Project demonstrates the application of the Demand Responsive Approach, especially in small towns and rural villages. (Guidelines for Implementation of Rural Water Supply and Sanitation Projects in Partnership with Pradeshiya Sabhas, 1999.)

The Hygiene Promotion Objective of the TWSSP was to inculcate to the communities, the practice of hand washing with water and soap before eating and after defecation. The other expected outcomes were;

- Latrines to be cleaned and properly maintained
- availability of means to clean such as brush/broom & soap and
- water to flush and clean latrines to ensure healthy life for the people.

Under the TWSSP hygiene promotion program, the following implementation methodologies were adopted (TWSSP Guidelines for Sanitation Program, 2000);

- Creating awareness among project beneficiaries on water supply and sanitation related health problems
- Making beneficiaries aware of the importance and benefits from using safe water and proper sanitation
- Promoting good hygiene practices by raising awareness using posters, leaflets and structured training sessions

ADB has recently provided a grant assistance to conduct a Qualitative Information Appraisal (QIA) in four out of the six TWSSP districts. In this assessment, it is also expected to identify the issues that encountered during the project process cycle with respect to achievement of sanitation and hygiene promotion goals and objectives (QIA of TWSSP, 2005). This paper highlights the lessons learned from the QIA and the new methodology developed for Participatory Hygiene Promotion based on these lessons. The paper also highlights the implementation of this new methodology in pilot areas, developing the institutional framework and mechanism for planning and implementation of pragmatic hygiene promotion in rural areas.

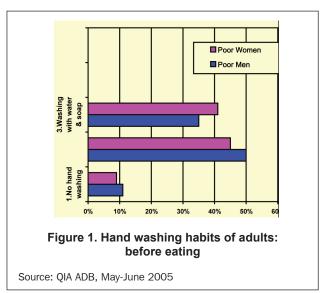
Qualitative information appraisal

The TWSSP was concerned regarding the tools that could be used to measure the agreed project indicators at different stages of the project cycle. The purpose of carrying out this assessment is to qualitatively identify how the project outputs are produced and in what degree the poor men, women and children are participating in hygiene promotion activities and benefiting from the project (QIA Of TWSSP, 2005). The findings and outcome from this QIA is to be utilized to formulate strategies and policies in future Rural Water Supply (RWS) projects. In this context, sanitation improvements are considered as the provision of facilities and inculcating the principles of hygiene and its related practices in the participating communities.

This study was implemented in four districts (i.e Kegalle, Anuradhapura, Puttalam and Moneragala) out of the six districts in TWSSP and covering 104 Grama Niladari Divisions(GNDs). The GND was selected as the basis for this QIA study and more emphasis was given for the sanitation and hygiene, promotion components of TWSSP.

Outcome of QIA Hand washing habit before eating

Majority of poor women and men are washing their hands at "critical" times and also majority of poor women and men are assisting children to wash hands at "critical" times. (See Figure 1.) Further encouragement is needed for using soap in all cases.



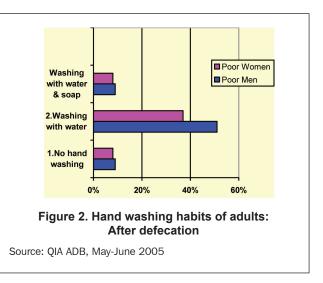
Hand washing habit after defecation

Hand washing after defecation is low among elderly men and women and boys (5-14). Women, adolescent boys and girls are washing their hands at acceptable rates. (See Figure 2)

According to the survey, key reason given for not washing hands is their lack of awareness on hygiene aspects of hand washing and difficulty to change attitudes of other in their own family.

Key reason for not washing hands with soap at critical time

Poor men and women were not fully aware of the importance of washing hands. In many occasions, soap for hand washing was not available. According to them, they cannot easily



convince others in the family for washing hands; especially among the children and elders. Therefore, poor men and women have taken a low interest to maintain better hygienic environment of their families. (See Figure 3)

Participation of the poor in Hygiene promotion trainings

Most of the poorest women and men did not attend the community hygiene and sanitation promotion trainings conducted. (See Figure 4).

Hygiene promotion trainings information did not reach the poorest category of women and men. Therefore participation in hygiene promotion trainings by both men and women was low and decreased over time. All poorest women and men were informed and a fixed group of women attend meetings. In addition, the number of women and men attending these training has grown overtime.

Participation in such trainings by poor men was significantly lower than that of the poor women.

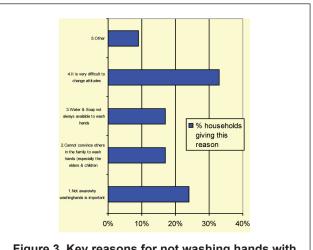
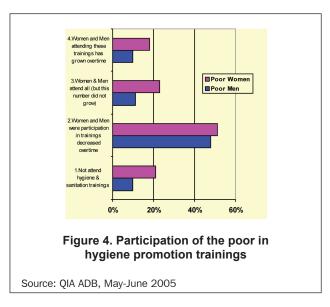


Figure 3. Key reasons for not washing hands with soap at critical times

Source: QIA ADB, May-June 2005



Water and Hygiene in the Households

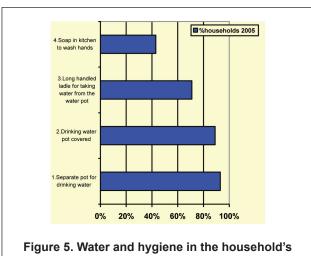
This is a survey example from water and hygiene in the households (HH). (See Figure 5). Majority of HH's used safe water and hygiene methods for their households. Further encouragement is needed for using soap in the Kitchen for washing hands. The main reasons were the lack of better hygiene practices in the HH levels.

Garbage Discarding System in the Households

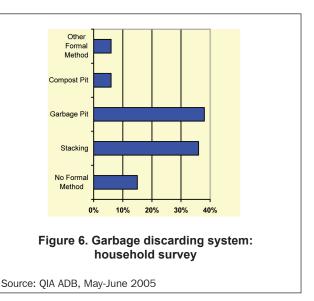
According to the results from the survey on Garbage Discarding System in households, Environmental Protection Program information did not reach the target households. (See Figure 6). Safe garbage disposal systems were not adopted households of the samples selected.

New methodology for hygiene promotion

According to Q.I.A outcome a new methodology has been developed and was named as Participatory Hygiene Promotion Methodology. This new methodology was implemented in 03 selected GNDs in the Puttalam District. These 03



Source: QIA ADB, May-June 2005



GNDs; namely, Veerapura, Tambapanniya and Saliyawewa were within the Karuwalagaswewa Divisional Secretariat. Childrens' societies have been formed in each GND with the help of Partner Organizations (PO) and Community Based Organizations (CBO) to launch hygiene promotion programs. These programs were closely coordinated with Health Department, relevant Pradeshiya Sabas and Education Department.

Strategies utilized in participatory hygiene promotion.

- Form children's societies in each GND with the help of PO, CBO to launch hygiene promotion programs.
- Organize village hygiene promotion activities by PO and CBO to promote good hygiene practices in the village.
- Mobilize hygiene promotion walks in the village with stakeholders
- · Organize street drama
- Train children's societies to perform in street dramas to disseminate the message on good hygiene practices among the community members.
- Encourage children societies to organize art competitions in order to obtain assistance from their parents towards the hygiene education program.

Participatory hygiene promotion (PHP) implemented in pilot level

The Pilot level program has been implemented in one district (Puttalam) out of the 4 districts participating in the QIA. The program was implemented in the above 3 GNDs during a period of 3 months. A total of 850 HHs and 3 schools participated in this program. This was the combined effort to promote sound hygiene practices even though adequate sanitation and safe water helps to improve the living standards. In addition, Participatory Hygiene Promotion is expected to influence children and adults to change their traditional hygiene practices and habits. (See Figure 7)

A strategy for promoting adult hygiene habits thorough children

Influential behavioral changes promote parents to engage children to participate in hygiene promotional activities and to encourage better hygiene practices. Parents and children have opportunities to make themselves aware and observe good hygiene practices and also this is an opportunity for children to show their creative abilities.

Hence motivate individuals and communities to become involved in all aspects of water supply and sanitation activities leading to long term facility sustainability.

Special features in participatory hygiene promotion walk

Under the pilot program, several activities were promoted in the field for better understanding to implement future hygiene promotion activities. Therefore children were trained to display good hygiene practices and to deliver speeches about good hygiene practices.

Traditional dancing and songs were introduces to encourage community to see the hygiene promotion walk, which were passing through paddy fields, village boutiques, working places and households. Hygiene promotion walks and street



Figure 7. A strategy for promoting adults hygiene habits through children

Source: QIA ADB, May-June 2005

dramas were effective methods to educate adults in hygiene practices. Under this program, village children societies were formed to improve the channel of communication through home visits and interviews. CBOs and village children societies prepared posters, handbook, dramas, musical events, announcements through public address systems and public meetings in GNDs for this purpose.

Handbooks have been prepared with brief descriptions on hygiene promotion especially for the children. There were a number of questions in the hygiene promotion booklet for the children to find answers.

Findings of the Participatory Hygiene Promotion (PHP)

It was a pragmatic way to change the present hygienic habits and attitudes of adults through children. Parents and adults were engaged to develop better hygiene massages and activities within children. Hence parents also got opportunities to understand the importance of better hygiene practices within their own families. PHP process was also instrumental in developing creative abilities of children on hygiene promotions, as well as changing their knowledge, skills and attitudes towards to well-being of their society.

Recommendations

- Hygiene promotion programs through village children societies can be established as a base for hygiene promotion.
- Street drams are very effective in raising awareness of hygiene promotion within the community.
- Hygiene education should adopt a pragmatic approach towards the target group.
- Stakeholders who visit villages for the hygiene promotion, should coordinate with the CBOs and village children societies.
- Strong coordination and monitoring mechanism should be developed with CBO hygiene promotion committee and also with the support of the Health Department for the success of the hygiene promotion activities.

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