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# WATER, SANITATION AND HYGIENE: SUSTAINABLE DEVELOPMENT AND MULTISECTORAL APPROACHES

# Is there possibility to have an open defecation free environment? Experience of RWSEP on WASH in rural settings of Amhara Region

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**REVIEWED PAPER - LOCAL** 

Rural Water Supply and Environmental Programme RWSEP has been operational in Amhara Region for the last 14 years since 1994. Phase four has been started in July 2007, with the purpose of institutionalized capacity building at all levels to implement and maintain sustainable community managed water supply with Community Development Fund CDF funding, and sanitation facilities and hygiene promotion activities. The programme is working in 14 Woredas/districts and benefiting 2,454,016 people. Training, development and distribution of Water Supply, Sanitation and Hygiene WASH promotional materials is part of capacity building practiced by the programme to implement hygiene and sanitation activities at household level. Training is primarily given to Woreda and Zonal focal persons represented from all WASH sectors and cascaded to the community. Each trained community sanitation promoter constructs his/her own household latrine and these are referred as model households in that Kebele. After constructing his/her own latrine each community sanitation promoter has a responsibility to make change in 50 households in his/her respective "Gottes"/sub-Kebeles. As a result of this, in some programme Kebeles Open Defecation Free Environment ODF has been launched; Ankasha Woreda of Awi Zone which has launched ODF in 27 Kebeles out of 30 rural Kebeles and Farta Woreda of South Gonder Zone which has also launched in 4 rural kebeles are examples of program Woredas,. Moreover almost all programme Woredas have shown tremendous change in hygiene and sanitation performance. Through all these efforts put in place throughout the life of the RWSEP, it is anticipated that the beneficiary communities have gained the necessary knowledge which enables them to bring change in their cultural habits, behaviors, attitudes and practices which, in turn, would help them to have better and healthy lives. Therefore if we can empower and work with community, there is a great possibility to have ODF at Kebele, Woreda, Zonal and Regional level.

#### Introduction

The Amhara National Regional State has an area of about 170,752 square kilometers and a projected population of 20,128,805 of which more than 17,000,000 (85 percent) live in rural areas .The region is divided into 11 Zones and the Zones are further divided into 151 Woredas (districts) and 3418 Kebeles, among which 318 are urban.

RWSEP in Amhara region is a regional development programme supported by the government of Finland (GoF) and Ethiopia (GoE) since 1994. In phase I (1994-1998) the programme focused on the capacity building at the regional level, while phase-II (1998-20002) shifted the focus to Zones and Woreda level. Phase III continued the decentralization trend down to the community level. Phase IV, started in 2007 aims to achieve the universal access plan targets through Community Development Fund CDF and is aiming for scaling-up the programme approach replication and institutionalizing of the best practices.

## Scale of WASH challenge

The health status of the population of Ethiopia is among the lowest in the world. More than 250,000 children die before they reach 5 years of age due to diarrheal diseases associated with poor hygiene, sanitation, unsafe water and nutritional problems; from this one third of the cases is in Amhara region.

In Ethiopia majority of people especially from the rural settings gather water from unprotected source, either from springs, lakes and/or rivers etc. Nationally the number of people's access to safe water supply is at about 48 % (MWRD, 2007) and in the region it is at about 41 % (BWRD, 2007). Calculation is made from the compiled report, which is taken by counting the number of protected schemes like springs, boreholes, shallow wells and deep wells.

According to this report we cannot conclude that the whole population who has access to safe water will always take the safe water to the mouth. This is confirmed (Plan Ethiopia, 2006), since 49 % of the samples collected for bacteriological analysis at household was found to be positive for coliform (indicator organisms) while samples from the source were free from coliforms. This finding strongly indicates that risky hygienic practices and lack of appropriate sanitation facilities exists in majority of households in Ethiopia and in Amhara region in particular.

Some progress on latrine construction in the rural areas has been seen since 1995 where the latrine coverage was only less than 5.3 %. Many international agencies and non-governmental organizations have been working to improve sanitation by constructing latrines with subsidies like provisions of Sanplat at different rates. Among these organizations are RWSEP, UNICEF, CARE, CONCERN, EOC (Water Aid Ethiopia), which are working on WASH in the region.

The contribution of these stakeholders has shown incremental trend when we quantify the number of people accessed to latrine usage in the region (e.g. 12.9%, 2004, 23.5%, 2005, 40.2%, 2006, 50.7% in 2007-2008). But even after a decade of such efforts it is difficult to find 100 % latrine coverage in all Kebeles (Gotte) in the region until 2007. Success has generally been measured on the basis of the number of latrines constructed within a given period of time instead of the extent of its cleanliness, usage and sustainability (Yimenu Adane, 2007).

## The sanitation vision

The government of Ethiopia is not only striving to fulfil the Millennium Development Goals (MDG) but it also has plans for a Universal Access Plan (UAP) for a 100% latrine coverage and 98% safe water supply coverage by 2012 and has designed a national satiation strategy and protocol for on-site sanitation. The Amhara Regional state WASH sector Bureaus are also striving for 100% sanitation coverage and for 98% safe water supply coverage through the involvement of every organization (multilateral and bilateral), donors, NGOs etc.

One of such bilateral organization that jointly pioneered the region in water supply, sanitation and hygiene promotion is RWSEP which aimed to promote and implement WASH activities jointly through Community Development Fund (CDF) approach by involving every person in the community and through capacity building.

The main objective of the project is to organize and mobilize the community for a sustainable change in constructing a functional latrine with hand washing facilities by themselves without any external subsidies and in development of different water schemes through CDF approach which proofs the sustainability of the project in program Woredas in the region (Yimenu Adane, 2008).

### Success stories of the programme

Success is the result of actions made by committed people, Government, and supporting program (RWSEP). As a result almost all program Woredas have shown tremendous results in hygiene and sanitation activities. Moreover Ankasha Woreda of Awi Zone has launched ODF in in 27 Kebeles out of 32 Kebeles, and Farta Woreda of South Gonder has also launched ODF in 4 Kebels. Generally Ankasha has reached more than 80% in 2000 EC and has planed to launch ODF at Woreda level in 2001 EFY.

## Methodologies

Training using new sanitation tools (CLTS) is primarily given to Woreda and Zonal focal persons represented from all WASH sectors and cascaded to the community. In each training session trainees are equipped with training materials and they will train Health Extension Workers, Development Agents,

Teachers, Contact Women and Community Sanitation Promoters at Kebele level for 3 days (1 day theoretical and 2 days practical).

The practical work is mainly focusing on latrine construction; hence after each session in each programme Kebeles one demonstration latrine is constructed at farmers training center/FTC or at a health post using locally available materials.

Each trained community sanitation promoter constructs his/her own household latrine and these are referred as model households in that Kebele. After constructing his/her own latrine each community sanitation promoter is expected to make change in 50 households in his/her respective "Gottes"/sub-Kebeles. The system of changing 50 household is by informing by a local newsletter called Mikkikir, advising, and negotiating on issues of WASH especially on household latrine construction with hand washing facilities.

In addition to the Mikkikir, there is "Buna Tetu", a coffee ceremony with a gender mix of 15-20 members per group every fortnight. In each session the central point of discussion is on topics of health packages such as safe storage of water supply, proper housekeeping, liquid & solid waste management, latrine construction with hand washing facilities, vaccination of children under 5 years, family planning etc. in which > 70 % of health packages are environmental health issues, WASH being the main agenda.

In each session detailed discussion and arguments are always made on the selected topics. According to the consensus and agreement each household practices the package as per its priority. Facilitation, follow up and technical support will be made by Contact Women and Community Sanitation Promoters, and each Community Sanitation Promoter is supervised by Health Extension Worker at Kebele level and regularly by Sanitation Focal Person from Woreda. When each household owns latrine in each Kebele, the report is compiled by Health Extension Worker and certified by Woreda Sanitation Focal Person, Woreda officials and natural leaders from community.

After the certification, the launching of ODF is celebrated in each Kebele in the presence of higher officials from Woreda, Zone, natural leaders from selected Kebeles, technical advisors from the programme and other stakeholders. If one Kebele launches in one Woreda, other Kebeles who lack behind are invited to participate in the ceremony and to acquire the methodology of the success and to share the experiences. The Kebele who launched ODF is known by hanging a white flag in Farmers Training Center FTC. Sustainability of ODF is supervised by the Kebele Health Extension Worker and Community Sanitation Promoters. If open defection is seen in any Gotte of the ODF Kebeles at any time, the flag at FTC will be taken down by the Health Extension Workers and hang up only after correction.

The new phenomena of taking down the flag will become the discussion point by the community. If the Health Extension Workers will witness the presence of open defection in a Gott, the community members will systemically identify the household who has exercised open defection. As the household is identified, advice will be given by natural leaders for not to repeat such bad and shameful habits. After correction the flag will be returned to the formal place.

#### Lessons learned

RWSEP is working in line with the government structure from region to kebele level such that Focal person from each WASH Sector Bureaus, Zones and Woredas are assigned by each respective WASH sectors and at Kebele level RWSEP has trained WASHCOs, Contact Women , Community Sanitation promoter per Woreda. Such human resources are in place and working in each RWSEP Kebeles. Such that refresher training is given each year by the technical assistance of the program.

Generally the program (RWSEP) IN Amhara region is pioneer to make WASH real in the ground .Following these RWSEP is promoting CLTs at large in its program Woredas and share the experience to other stakeholders in the region and in the country too.

## Conclusion

Concerning knowledge of the community in programme Woredas it can be said that people has no problem with hygiene and sanitation knowledge; however the problem comes with behavior.

In the experience of RWSEP most Woredas has shown tremendious positive results such that Ankash of Awi Zone will launch 100 % latrine coverage in the year 2001 EC. And Gonji Kollela of W/Gojjam Zone after CLTS training at Woreda level have shown an increment in latrine coverage that is from 27% to 68 % in three month interval.

Therefore it can be concluded that if we can work with community having good methodologies and approaches and if we can empower the community we can launch 100% latrine coverage and ultimately we can launch ODF at community (Gott level, Kebele, Woreda and even at region and National level.

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#### **Acronyms**

CDF	Community Development Fund
EOC	Ethiopian Orthodox Church
FTC	Farmers Training Center
GoE	Government of Ethiopia
GoF	Government of Finland
HEW	Health Extension Workers

MWRD Ministry of Water Resources Development

NGO Non-governmental organizations
ODF Open Defectaion Free Environment

RWSEP Rural Water Supply and Environmental Program
UNICEF United Nations International Childs Emergency Fund

WRDB Water Resource Development

WASH Water Supply, Sanitation and Hygiene

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