ACHIEVING HEALTH AND HYGIENE AWARENESS

BY

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BACKGROUND
(International Context)

• Nearly 40% of world’s population (2.4 billion) have no access to basic sanitation.
• Globally, WHO estimates that 1.8 million people die each year from diarrhoeal diseases.
• 5,500 children die every day from diseases caused by contaminated food and water.
• Adoption of millennium goals by United Nations General Assembly in 2000.
• Goals reaffirmed in 2002 at the WSSD in Johannesburg.
“We shall not finally defeat AIDS, TB, Malaria or any other infectious diseases that plague the developing world until we have also won the battle for safe drinking water, sanitation and basic health care.”

Kofi Annan, United Nations Secretary-General
BACKGROUND
(Regional Context)

• Adoption of NEPAD health strategy in Tripoli, 2003.
  • To strengthen commitment, enable stewardship and harness a multi-sectoral effort.
• Securing health systems
• Scale up disease control
• Empowerment of people to improve their health
• Mobilise sufficient sustainable resources
BACKGROUND  
(National Context)

Policy and Legislative framework:

- South African Constitution – Bill of rights enshrines the right of all SA citizens to dignity (section 11), safe environment section 24.
- White paper on Basic Household Sanitation, 2001
- Strategic framework for water services (Sep 2003)
- National Health Act of 2003
“Sanitation relates to all principles and practices relating to the collection, removal or disposal of human excreta, household waste water and refuse as they impact on the environment. Good Sanitation includes appropriate health and hygiene awareness and behaviour…”

(White Paper on Basic Household Sanitation 2001)
Basic Sanitation Service:

“The provision of a basic facility which is easily accessible and to a household, sustainable operation of the facility, including the safe removal of humane waste and waste water from the premises where it is appropriate and necessary and the communication of good sanitation hygiene and related practises”.

(Strategic framework for water services 2003 Section 6.3, Table 2)
BACKGROUND

- SFWS and White Paper on Basic Household Sanitation 2001 defines H&H as an integral and required part of water and sanitation service delivery.

- Two Key Elements:
  - Latrine Construction
  - Health and Hygiene Education

- Health & hygiene Education: aimed at increasing an individual’s knowledge about issues relating to personal habits and practices that affects one’s health particularly in relation to water services”
Roles and Responsibilities: In Relation to Health Hygiene Education

**Department of Health (DoH):**

- Development of health promotion policy, guidelines and material
- Monitoring and support to the provincial health promotion
- Support to WSAs

**Department of Water Affairs and Forestry (DWAF):**

- Water Sector leader
- Framework for Sanitation delivery
- Support to WSAs
- Water Resources Protection
DWAF: To Manage and Protect our Water Resources & Ensure Sustainable Water Services
Roles and Responsibilities: In Relation to Health Hygiene Education Cont.

Department of Provincial and Local Government (DPLG)
- IDP and WSDP Planning
- Capacity building support at local government level
- Oversee MIG process

Department of Education (DoE)
- Implementation of health and hygiene education in schools
- Plan school sanitation projects to address the school sanitation backlogs
Roles and Responsibilities: In Relation to Health Hygiene Education Cont.

Department of Housing and Local Government and Traditional Affairs (DHLGTA)

- Ensure Inclusion of H&H Education in housing projects
- Manage MIG programme

Water Services Authorities (WSAs)

- Primary responsibility for health and Hygiene education related to water services
Approaches

- Focus groups – especially in Health facilities
- PHAST methodology in 90% of both project based and ongoing
- House to house visits
- Educational drama
- Radio broadcast
- School Curriculum
- News Papers
Messages

The message focus on:

- Creating effective barriers that will prevent contamination & disease transmission
- Teaching good practices in relation to water purification and disposal
- Teaching how to identify and treat basic water and sanitation related illnesses
- Teaching effective end user operation and maintenance
- Impact of poor Sanitation to HIV/AIDS victims
Monitoring and Evaluation

• Monitoring has focused largely on quantitative information related to project progress
• Little emphasis on monitoring impacts of health and hygiene education
Challenges

• Huge backlog which demands ongoing awareness creation
• Poor access of some of the areas
• Backlog resulting from poor quality of H&H done by some of the service providers.
• Crisis management (e.g. cholera)
• EHPs – LM vs service providers implementing H&H
• CHWs and CDW definition of roles and responsibilities
• Is H&H funding part of unit cost subsidy?
Challenges Cont.

• Bucket eradication come-backs
• Effective Communication techniques
• Linkages of health personnel to projects
• Responsibility conflicts between local, district, provincial and national government structures
• Resources availability
• Area based approach vs project interventions
• Current Interventions have a Rural Bias, little focus on Urban and peri-urban poor
• Poor M&E of H&H
Challenges Cont

• POOR HEALTH AND HYGIENE AWARENESS IN PERI-URBAN AREAS

• The Case of C-section Duncan Village
One of the Big Polluters of Rivers = Human Settlements

Joint project BCM, DWAF and Community

Andrew Lucas DWAF
The streams which feed our rivers are polluted, particularly those that run through communities.
Slow Bucket/Chamber

Informal system used out of necessity

- Causes pollution when dumped,
- Spreads diseases,
- Dirties and blocks toilets,
- Unhygienic to use.
Different Waste Streams

- Sewage
- Solid Waste Or Refuse
- Grey Water
- Storm Water
MANAGING THE WATER QUALITY EFFECTS OF SETTLEMENTS

WHY DOES POLLUTION OCCUR?

Institutional Factors  ↔  Social Factors

Physical Factors

Pollution & Sickness
MANAGING THE WATER QUALITY EFFECTS OF SETTLEMENTS

THE ROLE OF LOCAL GOVERNMENT CAPACITY

CAPACITY AVAILABLE \[\leftrightarrow\] CAPACITY GAP \[\rightarrow\] CAPACITY REQUIRED

POOR OPERATION AND MAINTENANCE OF WASTE SERVICES

POLLUTION OF THE WATER RESOURCE
Awareness Campaign

- Held Community Workshops (14) & with role-players and training:
  - Understanding flush toilets.
  - Best practice in the use of limited communal toilets,
  - Community responsibility around waste management service,
  - Community responsibility in disposal of grey water,
  - Health & Hygiene awareness,
  - Role & Capacity of Local Authority to perform multiple services.

- Ongoing Awareness Activities
Challenges Cont.

- HEALTH AND HYGIENE
- EDUCATION
Understanding Flush systems
Voluntary Refuse Collection
Results of H&H Education!!!!!
Recommendations

- Peri-Urban and Urban poor areas need attention
- Resources for H&H need to be clarified
- Ongoing H&H awareness programme per WSA
- DOH must take up their leading role in H&H awareness
- Provincial stakeholders must provide a provincial strategy
  - DPLG/DWAF must monitor that WSA provide for H&H awareness from MIG budgets
  - DWAF must assist to set clear H&H KPA’s and deliverables and who should implement, (Quantified)
- All water services projects must include H&H education
CONCLUSION

• Delivery of technical services alone does not lead to positive impacts on community health.

• Health and hygiene education must be implemented on an ongoing basis to achieve long lasting changes in behavior.