Rural women in sanitation programmes

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ABSTRACT

As a part of an integrated water-sanitation study 754 twin-pit latrines were provided to about 4500 people of two villages in Mirzapur subdistrict, Bangladesh. Women were motivated to contribute in the ownership of individual family-based latrines. They were encouraged to participate in site-selection, construction of latrine superstructures, and maintenance of the latrines. More than 91% of the latrines were in use. Local women participated in the construction of more than 60% of the Project-community built 280 latrine superstructures. When pits of 276 latrines needed desludging, local women with some training from the project desludged 65% of the pits at a cost of about one-fourth of the price demanded by professional scavengers. These participations by the women was accepted by the society and since the area is representative of the country, this finding has implication for sustainable and effective use of two-pit latrines.

INTRODUCTION

Although investments in water supplies had grown rapidly in the post-war years, sanitation had been largely neglected. In 1985 the percentage of population in rural areas of developing countries with adequate access to sanitation facilities was 18% compared to 41% in water supply of the same area "(ref.1)". Only 3 countries out of the 9 selected 9 of the South-Asian region are likely to meet their national rural sanitation target for International Drinking Water and Sanitation Decade by 1990 "(ref.2)". Bangladesh had its target set at 13% coverage and is most likely to meet the target. Only about 5% of its population has sanitary latrines. But more than one studies have found significant association between use of sanitary latrines and childhood mortality and morbidity "(ref.3,4,5)".

This study presents benefits experienced in a rural sanitation programme by involving local women in it’s different stages. The sanitation programme was a component of the Mirzapur Handpump Project which aimed mainly to evaluate the health impacts of integrated water, sanitation, and hygiene education intervention.

PROJECT DESCRIPTION

The Mirzapur Handpump Project was funded by Canadian International Development Agency through UNDP/World Bank and conducted by International Centre for Diarrhoeal Disease Research, Bangladesh, in rural areas of Mirzapur Sub-district. The project has launched in early 1984 and the field activities ended in December 1987. During this study improved water supplies, two-pit water-seal sanitary latrines and hygiene education were provided to the people of two villages (intervention area). Handpumps were provided free of cost, on average 1 handpump to about 30 people. But the latrines were sold at a subsidized cost to encourage a feeling of ownership in the users. The details of the Project may be found in literature "(ref.5)".

The intervention population comprised approximately 800 households and 4856 people. About half of the people were female and approximately 89% of the adult women were housewives. In older than 15 years people 58% male and 83% female could read or write. About 70% of the households were muslim and agriculture was primary or secondary occupation of more than 44% of the people.

SANITATION PROGRAMME

Acceptance of latrine

Around the end of 1984 the people of intervention area was formally approached with the concept of latrines. More than 97% of the people were habituated in fixed place, unsanitary way of defecation practices. Following this community approach of motivation extensive door to door visits were undertaken to make the housewives realize the importance of latrines in health benefits.

Housewife of every household was requested to contribute about U.S.$ 10 for a latrine, which is about 30% of the actual cost. After some motivation the relatively more wealthy families agreed to buy latrines, and these served as demonstration latrines to encourage other household to invest. In total 754 households agreed to take latrines and 2.6% of the households paid the requested full payment. But 54% (409) of the households contributed some money with
The agreement of paying more at later dates. Since project staff contacted housewives, it was them who motivated the male members of their families to take the latrines.

**Latrine installation**

The project had certain criteria for site selection of a latrine and one of the most important ones was to ensure its social and cultural preference by latrine’s users. The housewife and female members of the family were invariably requested to participate in the selection of the site and they always did that.

When it was observed that female members of the household often supervised the installation of their household latrines, project staff explained the housewives about installation requirements. It was decided that the installation contractors would be paid for a latrine at completion report from the respective household. This agreement helped to transfer the knowledge of technology in the community, to promote ownership feeling in the users and to provide dual supervision on the quality control of the installation.

Households were than given the responsibility of building their latrine’s fencing. But about 36% (268) of the latrines were found to have no fencings. The households were either unable or reluctant to build the fencings. Twelve groups, each with 2 males or 2 females from the area, were contracted to do the work at the rate of about U.S.$ 0.27 per latrine. Out of these 12 groups, 8 groups were formed by females. These groups motivated the members of the households to provide materials (Jute sticks, bamboo sticks or at least jute sacks) for fencings. They then built the fencing at no cost to the household. Out of 268 fencings more than 50% were built by women groups.

**Latrine use**

About 91% of the latrines were used by the households. Females, in general, used latrines a little more than males (about 89% females and 87% males). More than 70% of the children in 3 to 5 years of age used the latrines. However, only 20% of mothers threw the feces of younger children in the latrines.

**Maintenance**

Female members of the household were told to keep the latrines clean and make the cleaning water available near latrines. Majority of the latrines (73%) were found clean and free of foul smell by the observer. Sixty nine percent of latrines had a water pitcher available nearby (containing some water in 95% of cases).

Local women were also involved in desludging (emptying) of latrines. They were trained to do the job in hygienic way without polluting the area and contaminating themselves. During the desludging work fifteen community women emptied the contents of 170 pits (about 65% of 276 desludging pits) in groups of 3 or 4 women. These groups did their job efficiently at a very competent price. They were paid about U.S.$ 1.2 equivalent per pit.

**DISCUSSION**

The children in the intervention area experienced 25% less diarrhea than the children in the control area. There is little doubt that such an achievement could not be possible without success in the sanitation programme. In this study local women were found to participate in all phases of the project.

The community seemed well satisfied with the latrines, after their initial reluctance. The high usage rates by adults and children aged 3 years or more were impressive. The mothers must have taken special attention to keep the latrines clean, make the water available at use and to make the children use the latrines. However, the low use of latrines for disposing younger children’s feces need to be carefully considered in future sanitation program.

There are obviously economic constraints in a poor community such as Mirzapur, and it is likely that other household expenditures were given priority over sanitation. Thus, it was encouraging to observe that the housewives of the majority of the households could convince their male members to accept the proposal. Studies could be undertaken for recovery of full cost by providing alternate cheap technologies or system for collection of money in instalments.

Women’s participation in site selection and latrine installation had implications for likeness, comfort, convenience, and ownership feelings, and hence, for effective use.

Women in the fencing construction groups helped the project to promote the use of latrine in women community where male cannot get easy access due to purdah tradition. Furthermore, when household women saw that the women labours were constructing their fences they came forward to help them in every possible ways.

The participation of local women in the emptying of pits was another significant achievement for the project. Desludging of the pit was not foreseen and so it’s cost
was not included in the project budget. At that closing period of the study the project could not have afforded to hire the professional scavengers who intentionally demanded a high cost and were planning to take actions against the project if it attempted to hire scavengers from other area. Local women helped out the project at 20% of the demanded cost and the work within the span of the framework. Desludging by local women has an implication for sustained and effective technology transfer in the community. Because, desludging in general, belongs to a professional group of the society. Local women doing the job without objection from the community could be taken as an indication for community acceptance of such act.

Therefore, the rural women played an effective role in the success of the sanitation programme.

REFERENCES


