Shame, humiliation and hazard: tribulations of the girl child in Kenya

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I have approached my presentation as a lamentation by a girl appropriately name ‘Hope’. This lamentation involves actual experiences that were told to me by girls and women in Northern Eastern Kenya recently when I was engaged in the EU-UNICEF project on Sustainable Water Management and Governance for the Poor in Drought and Flood-prone areas. Hope talks of the poor water and sanitation facilities in schools in Kenya. She explains how girls miss classes to fetch water or simply because they are menstruating and cannot afford sanitary pads. Through her two sisters—one deceased and the other dying of HIV-AIDS, Hope also narrates the hazards that a girl child is exposed to and the humiliation of having to wait until night fall to go to the toilet. Lastly Hope sets out possible solutions that she views as appropriate in the circumstances.

Introduction

My name is Hope, I am a school girl aged 15 years old. I want to tell you how issues of water and sanitation affect me. But first I wish to take you on a short tour of the water and sanitary facilities in our school in Kenya. If you look at photograph 1 below, it shows two toilets like the ones in our school. Do you notice that the toilets have no doors? See how the floors are soiled with faeces and wet with urine. Remember we are bare-foot children and we must stand in this mess to help ourselves. See the faecal - painted walls, smell the stench and observe the worms and flies. Yet we are supposedly lucky. You see we have toilets, we have a wall, we have some privacy at least or so they say. Across the other side, they have no toilets and they have to go to the bushes, but then again this is the arid and semi arid North Eastern Kenya and there are no bushes. They will have to wait until nightfall.

Where are the toiletries, you ask. Here we use our fingers, we use leaves, we use stones, we use pieces of cloth that are never washed because there is no water, and we cannot even wash our hands. Sometimes we use nothing. Are we ashamed? are we humiliated? are we exposed to hazards? Maybe, but we grow up thinking this is the way it should be.

Sanitation issues

Shortage of toilets

I have two brothers and three sisters. My elder sister has HIV/AIDS and is dying. She was gang raped and infected with the virus whilst going to defecate in the night. Our cultural beliefs and taboos discourage girls and women from using latrines effectively. We are not allowed to share latrines with in-laws for instance. Young people do not use the same latrines with the older members of the family. We are not even supposed to be seen going to the toilet. One is forced to spend long hours without going to toilet thus posing health hazard. Sometimes I just lie down astride and urinate on myself. My sister had to wait as we all do, until nightfall and they knew and waited then pounced on her and raped her repeatedly passing on the virus.

School toilet standards not met

The Ministry of Health recommends a minimum of 1 toilet to 25 girls and 1 toilet to 30 boys. However up to 104 of us share one latrine in North Eastern Province. This is reflected in low enrolment, poor school performance and low pupil retention rates. In most schools, the toilets for girls and boys are semi-separated (back-to-back design), shared or constructed close together. When we reach puberty, it is not easy to go to these toilets. We therefore drop out of school due to the embarrassment of having to share latrines with boys, or because the facilities do not give us privacy and dignity.
Sanitary pads
A large number of girls in rural Kenya skip school at the time of their menstruation because they cannot afford to buy sanitary towels or tampons. They are very expensive in Kenya in particular, where 54% of people live on less than $1 a day. None of us can afford to buy sanitary towels and necessity being the mother of invention we resort to diverse methods. Some of us use and recycle old pieces of cloth or used blankets. Others just remain indoors to contain the menstrual flow. These methods are not only unhygienic, but a health hazard. I usually stay indoors and on average I lose more than 40 days of classes in a school year. When the teacher asks me, I normally lie and say that I was sick. But then again wasn’t I?

There are some NGOs trying to address the problem by providing us with free sanitary towels in some Kenyan schools. However most of us have never come across pads before. Some girls fold them and insert them like tampons. It is not enough to just hand the pads.

Water issues
• Lack of facilities affects both girls and boys, although the negative impact is stronger on girls. Boys do not have to fetch water but being girl’s we must travel long distances oblivious of the dangers we are exposed to. We skip lessons and get exposed to sexual abuse and other forms of violence when looking for water. My younger sister is deceased. She died when a wall collapsed on her inside a well where she was looking for water. My mother is very weak having just delivered. The hardest thing I have endured is to see her nurse a baby with hardly any water. Sometimes I skip school to help fetch water and I always fear getting married one day and giving birth in these conditions.

• Over 90% of primary schools in rural Kenya lack access to safe water and do not have even the simplest hand washing facility. Yet as school children we need water for cleaning toilets, cleaning our hands and face washing, preparation of lunch and wiping or reducing dust in the earthen classroom floors. These habits are known to reduce and even eliminate skin and eye diseases, diarrhoea, intestinal worms and typhoid. The importance of hand washing with soap after handling faeces or hand washing with soap before eating is critical for prevention of diarrhoeal diseases.

• At the community level members fetch water from unprotected water sources and therefore do not have access to safe water for drinking and for cooking. Taking water for drinking raw from unprotected water sources is dangerous and leads to water related diseases. Photograph 2 below shows some of us drawing water for domestic use. The distance we have travelled to get to this water point is unimaginable. We are very lucky to have found water here. Do you notice how it is contaminated by humans and animals? This is the water that we drink when we go home. Do we have a choice, do we have a voice? I often wonder, anyway I am just a girl, a woman, will anyone ever listen to me? Will You?

The water and sanitation challenge
• Who will hear the cries of Hope? Everyday is the same for her; a desperate attempt against starvation and health. She toggles between school and household duties unlike her two brothers who she does not even mention what they do. Unfortunately, Hope’s case is replicated daily among hundreds of girls in Kenya especially North Eastern Kenya and who eventually drop out of school indefinitely.

• Neither these girls nor their parents can afford to buy sanitary pads. This means they have to miss school for a few days each month because of the stigma and embarrassment associated with the menstrual cycle. The situation is compounded by the fact that they have no latrines and no access to water. These girls are exposed to all kinds’ dangers and violence when they are forced to defecate early morning or at nightfall in secluded places. These girls must also bear the extra burden of having to travel long distances in search of water thereby increasing their vulnerability.

• Universal primary education in Kenya has put strain on schools; water sanitation & health facilities, with the most affected being the school girl. It raised the school population from 5.9 to 7.2 million, with no corresponding expansion of sanitation facilities. The Ministry of Health through National Environmental Sanitation and Hygiene Policy (ESHIP) state that by 2015, every school, community and 90% of households will have access to, and make use of, hygienic, affordable, functional and sustainable toilet and hand washing facilities. This is off target and a lot of resources need to be mobilised if it is going to be achieved.

• Water and sanitation facilities are increasingly recognized as fundamental for promoting appropriate hygiene behaviour and children’s wellbeing. However, many schools experience unsanitary conditions that vary from inappropriate and inadequate sanitary facilities to the outright lack of latrines and safe water for drinking and support to hygiene promotion.
There is a severe shortage of toilets in many public primary schools which is undermining the efforts to provide quality education. While the country seems set to achieve the Universal Primary Education goal of ensuring that all boys and girls complete primary education by the years 2015, the school sanitation and hygiene goal may not be achieved. This goal calls for governments to educate 80% of primary school children about hygiene and equip every school with facilities for sanitation and hand washing by 2015.

Photograph 1. Toilet floors wet with urine in one of the schools

Photograph 2. Young girls drawing water

Photograph 3. Proposed girls urinal

Recommendations

- The sanitary conditions of public schools in Kenya are often appalling, creating serious health hazards. Increasing the number and standard of school latrine facilities would decrease the drop out rates and other negative impacts especially for adolescent girls. Experience has shown that the mere provision of facilities does not make them sustainable or ensure the desired health impact. It is the use of the facilities and change in the related hygiene behaviours among the beneficiaries that provides health benefits.

- Provision of adequate sanitation and hygiene education is found to be especially relevant among the poorest and most disadvantaged children, many of whom are girls. Girls are often the least healthy and most malnourished, and they gain most from improved health. One important and effective way of assisting girls in schools is by construction of urinal for girls. These urinals as seen in photograph 3 above not only provide the much needed privacy but also admit a big number of girls at once as op-
posed to one girl per toilet at a time. Indeed schools are in dire need for basic sanitation installations, sufficient in number, affordable in cost and environmentally safe. The girl’s urinal wouldn’t have come at a better time.

- Lack of affordable sanitary pads in Kenya causes infections among adolescent girls and consequently lowers their primary school attendance and participation. This calls for nationwide gender sensitive campaign for promotion of water and sanitation and underscores the urgent need for Kenya to focus on school sanitation and hygiene issues. In some African countries, reusable pads are used, but this is predicated on availability of water, in Kenya however the girls do not have even clean water to drink.

Conclusion

- In Kenya greatest challenge is to provide access to safe and adequate water and sanitation facilities especially for schools. More than a half of the schoolgirls who drop out of school in upper primary classes do so because they miss school periodically particularly during their menstrual periods. This is due to various factors, among them lack of sanitary pads, lack of separate toilet facilities and easy access to water sources within the schools. As the older generation, we must listen to the voice of Hope; we must not fail to listen to the voices of the young people or to harness their energies in the right direction. Should we fail to, their indifference will not only be betrayal of our children but our own sad loss for which history will never forgive us.

References


Note/s

1 Pauline Mwaniki, School Sanitation and Hygiene for Disease Prevention., NETWAS International; www.netwas.org

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