Relying on local socio-cultural values to have good hygiene practices permanently adopted

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The right to a healthy environment is enshrined in Article 35 of Niger’s constitution, in line with the United Nations’ recognition of access to water and sanitation as a universal human right since 2010. In rural Niger, despite the State’s efforts and many actors’ projects to improve people’s behaviour, good hygiene practices remain rare. The open-defecation rate is 86% and the rate of access to improved sanitation facilities only 5% in rural areas (UNICEF and WHO, 2015). Catholic Relief Services (CRS) PASAM-TAI project spreads good hygiene practices through messages integrating socio-cultural values, beliefs, and economic determinants that are important to target populations. The project communication strategy uses entertaining, interactive communication channels tailored to the target groups, which has brought good results at scale in the construction of household latrines, their hygienic use, handwashing with soap and water, and safe drinking water storage.

Introduction
With an 86% open defecation rate in 2015, Niger is among the top 10 countries in the world where it is most practiced. Further, Niger is one of the 15 countries in the world where 70% of deaths annually of children under 5 are due to diarrhoea (WaterAid, 2012). Basic hygiene such as the proper storage of food, body cleanliness, and washing hands with soap and water are not major concerns in most households. Several educational communication tools, both interpersonal and for groups, are used without seeing widespread adoption of these practices. Based on this assessment, Catholic Relief Services (CRS) with its programme to support household food security (PASAM-TAI) has built its strategy on communicating hygiene messages with the socio-cultural values of the target populations. Culture is an intangible asset that is sustainable in society.

Beyond the behaviour change made possible through the tools which came from social research, the socio-cultural values of rural communities serve as leverage to motivate the adoption of hygiene practices and also ensure the sustainability of the new, improved behaviour.

Socio-cultural norms as drivers for hygiene behaviour change
Although the adoption of good hygiene behaviours remains a concern for public health and development, results in this area have always been below expectations. Hygiene is trailing in performance among the various development sectors in Niger. Poor sanitation conditions cause losses of 75 billion CFA (USD 136 million) each year in Niger (WSP, 2012), which would be enough to make the necessary equipment available to households to maintain good hygiene. ‘Hygiene’ does not translate directly to any word in the local languages of Niger, and with its definition usually referring to the notions of food and personal cleanliness, hygiene is increasingly seen as a matter of prestige rather than a barrier to disease.

The need to invest in sanitation in order to better ensure the health of their families is not a spending priority for heads of households. A formative study (WSP, 2014) noted that 27.3% of rural households in Niger have never used latrines in their lives, and that the main obstacles for households to access latrines are cost and certain beliefs and fears.
It is therefore an uphill battle to create demand for sanitation among these rural populations, fought best using communication that draws on the socio-cultural values and societal environment covered by the programme. In this sense, the choice was made to use storytelling, puppetry, theatre, film projections, and radio as communication channels and to work with cultural artists such as storytellers, puppeteers, and actors who know the local context intimately.

The communication tools and general approach

The PASAM-TAI project used Community Led Total Sanitation (CLTS), which is an approach that engages rural communities into a collective decision and planning process to end open defecation and adopt safe, affordable sanitation practices to achieve full coverage of household latrines. In Niger, CRS implements CLTS in close collaboration with decentralized government and local authorities and participates in the national learning platform on sanitation led by the government. CRS’ approach includes providing technical assistance to households on self-construction of sound latrines and developing sanitation marketing activities that engage masons and other entrepreneurs to enhance their local supply of sanitation products and services. In addition to CLTS activities, PASAM-TAI chose to include an ambitious aspect of hygiene promotion, with a group communication strategy using entertaining and interactive styles that reference socio-cultural norms, beliefs, and elements of daily household life as determinants of behaviour change. Four main communication channels drawing on these themes are used:

- Performances (storytelling, puppetry, theatre)
- Listening clubs (group discussions on a topic)
- Films (projections in the village)
- Radio (skits and short programmes)

These channels are also means of entertainment, and thus better convey messages and maximize impact through a positive and enjoyable experience. Multiplying the communication channels also reaches the different age groups more effectively. For example, children are targeted through storytelling and puppetry, which allow them to participate actively and in large numbers. The radio and listening clubs are mainly for adults, while film screenings bring families together and encourage debates.

Hygiene messages are conveyed through the following themes:

- Dignity: Hygiene instills respect in others. Respected people in the social environment like the imam, village chief, and merchants have their own latrine. Therefore, constructing a household latrine contributes to being affiliated with respected people and feeling proud.
- Religion: Islam requires good hygiene before facing God in prayer. Ablutions (wudu) and full body washing ablutions (ghusl) are at once a means of worshiping God while also purifying the body. Islam recommends cleanliness of body and clothes.
- Good manners: parents who give a good education to their children teach them hygiene practices.
- Social integration: practicing good hygiene is a way to conform with other people and enrich one’s circle of friends, and to be able to host guests in good, comfortable conditions.
- Economic determinants: the economic benefits derived from the practice of good hygiene, such as reducing healthcare costs and better overall health which will allow one to be more productive, make the initial investment worthwhile.

Holding a puppet show

Puppets are used specifically to communicate with children, with doll-like puppets controlled by actors who speak from behind a screen. The puppet shows are performed by local artists who form a troupe to tour the villages once they have memorized their scripts and practiced their roles several times a day for three to four days.

The troupe is brought to the villages with the guidance of a facilitator. Before each puppet show, loudspeakers are used to gather the villagers with popular songs from the area. Then the host introduces the theme that will be addressed with a short explanation and demands the children’s attention. The show lasts about 10 minutes, immediately followed by an open discussion with the children about what they have understood, good practices and bad. At the end, the children are invited to ask questions to other children. The child posing the most pertinent question and the one that answers it are applauded for several seconds as a reward. They are invited to champion the good practices and encourage other children to adopt them.
Hosting a movie screening
A local organisation partnering with CRS on PASAM-TAI called Roving Digital Cinema (Cinéma Numérique Ambulant, CNA) sends their crew to the village in the morning to prepare everything for that evening’s movie screening. By the afternoon, an open area for projection is cleared, with a 4x3 metre screen set up, and the sound system plays music to inform the population that an event is taking place in their
community. At dusk, families come to watch the movie clips on hygiene practices and their links with socio-cultural values. A typical session proceeds as follows:

1. Activity for children while the audience arrives and gets settled (approximately 15 minutes)
2. Projecting a farcical short film that triggers the crowd’s laughter and captures their attention (approximately 10 minutes)
3. Projecting short street interviews on hygiene shot earlier that day by the crew with participation of villagers to collect their knowledge and opinions on importance of hygiene (approximately 15 minutes).
4. A first debate session is facilitated by a host with a wireless video camera and microphone who moves among the audience, getting comments on the street interviews and opinions from a variety of individuals representative people from the village (girls, boys, women, men, and the elderly). This aspect contributes enormously to full participation, with the craze that is created by being on the screen or seeing someone you know on the screen, often for the first time. This first debate will help clarify certain points on hygiene practices and to correct errors that may have been expressed by interviewees during the street interviews (approximately 20 minutes)
5. Screening of the film on key hygiene practices which was produced by PASAM-TAI (approximately 15 minutes)
6. Second debate to reinforce messages and the links between hygiene practices and local values. The debates may be accompanied by games, such as a quiz with prizes like soap, toothpaste, t-shirts, etc. (approximately 40 minutes)
7. The final movie projected is an entertaining African film conveying a positive cross-cutting theme such as on child protection and education, gender roles, etc. (30 to 40 minutes)

Conducting a listening club session
A listening club is a group of people who meet once a week to discuss a hygiene, health, or nutrition topic in their community. It is reminiscent of council meetings held under a large tree in which major decisions for the village would be taken. The club is given a radio and a memory card on which 12 themed skits are recorded, along with their discussion guide. Each week the group meets to listen to one theme and then engage in discussion under the guidance of a village facilitator who leads the session. Once the facilitator has exhausted all topics with the listening club, he should continue to another group and then another, until the maximum number of people in the village have participated.

Broadcasting radio skits
The radio jingles and skits on hygiene are broadcast through community radio stations in the project zone. The same skits that the listening clubs received on memory cards are given to community radio stations for wide distribution. The project plans a calendar with the radio stations to broadcast the skits, and they aim to reach a maximum number of people with the same themes as the listening clubs.

The table below describes the different communication channels used by the program, and for each, the key socio-cultural values and associated hygiene messages that are conveyed.

| Table 1. Channels of communication, values and hygiene topics |
|---------------------------------|--------------------------------------------------|------------------------------------------|
| **Communication Channels**      | **Examples of local values that may be referenced** | **Hygiene topics to reinforce**          |
| Storytelling                    | Eating well                                     | Hygienic food practices                 |
|                                 | Growing up, being responsible                   |                                         |
|                                 | Following parents' example                       |                                         |
|                                 | Self-esteem, being resourceful                   |                                         |
|                                 | Using locally grown products                     |                                         |
|                                 | (moringa, Sahel apples, etc.)                    |                                         |
| Puppetry                        | Disgust in dirty things and bad odours           | Using latrines                          |
|                                 | Growing well                                     |                                         |
|                                 | Following good examples                          | Washing hands with soap and water       |
|                                 | Self-pride                                       |                                         |
|                                 | Smelling good                                    |                                         |
|                                 | Humour                                           |                                         |
Beyond these channels, the Government of Niger water and sanitation and community development technical service agents provide additional demonstrations and educational sessions. The messages above are reinforced with hand washing and water treatment demonstrations, and technical assistance building safe and hygienic latrines is conducted by the government agents. They have a strong impact because people are more attentive to announcements made by a government agent than an NGO’s field agent.

Results and lessons learnt
One important change that has succeeded is the abandonment of open defecation, which has lowered to 69.5% (PASAM, 2015) in the intervention area, populated by 571,972 people, compared to 86% outside the intervention area. The Open Defecation Free (ODF) certification rate in CLTS by PASAM-TAI was 29% of villages triggered in 2013, 39.5% of those triggered in 2014, and 49.5% of those in 2015, while it typically does not exceed 27% in Niger. Other results after two years of program implementation include 18.5% of households using an improved sanitation facility, compared to 5.5% at the baseline, and 26.9% of households have hand washing stations and use soap and water, compared to 15.1% at baseline. The percentage of households using an improved or appropriately treated drinking water source has increased from 3.3% to a notable 58.8%.

Film and the performing arts are very mobilizing communication channels, and by using entertainment they create excitement resulting in powerful mobilization for changing community behaviour. Methods specifically for children such as puppetry and storytelling help generate interest and rapid adoption of good hygiene behaviours. Those who have had a positive, enjoyable experience are more open to receive and assimilate messages, so by using these entertaining communication channels and coupling them with demonstrations, the project reinforces the adoption of hand washing, latrine use, and other important hygienic practices. Finally, monitoring by the GON technical services in communities is a significant contribution to the behaviour change process.

Conclusion
Improved hygiene practices bring about a dignified life for households, but they also go beyond this to impact their nutrition, health, children's education, etc. Through diversified communication channels that take into account the socio-cultural realities of the community, it is possible to achieve lasting change at scale. In areas where this approach was taken in the PASAM-TAI project in Niger, open defecation practices were reduced by 16.5% compared to the national average, and other hygiene practices are exceptional in these villages. During a visit to the project’s villages, the prefect of the Mayahi department...
was inspired and asserted that, "these rural villages have a lot to teach urban centres about good hygiene practices."

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References


Notes
1. PASAM-TAI (programme to support household food security in Niger) is funded by USAID/Food for Peace from 2012 to 2017 and covers more than 600 rural villages in the Maradi and Zinder regions of Niger in West Africa. This program area is located in the south-east of Niger, near the border with Nigeria. WASH interventions represent an important component of the programme’s strategic objective that aims to reduce malnutrition.

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