

SWIFT

Consortium for Sustainable Water,
Sanitation & Hygiene in Fragile Contexts

SWIFT Story of Sustainable Change

Beatrice Lokwawi, Nadapal, Turkana, Kenya



‘The children are not sick like before’: SWIFT works with the village of Nadapal to improve access to safe, sustainable sanitation

What has changed?

In Nadapal, a village of just over 4,000 people in Kenya’s arid north-western county of Turkana, residents had no access to sanitation, and instead practised open defecation in the bushes, a source of fear and shame among many members of the community, particularly women. Illnesses including diarrhoea, malaria and cholera were common.

‘I used to feel ashamed going to hide in the shrubs, as I might meet someone else at the same place for the same reason,’ says Beatrice Lokwawi, 40, who is married and has four children.

‘At night, if you went far from the homestead, there was always the danger of being bitten by snakes or scorpions. I was always worrying about the children going out and stepping on thorns or being bitten.’

Animals and insects were not the only hazards villagers encountered in the dark. ‘Not everyone goes far, so there were a lot of faeces nearby, and at night, when you can’t see very well, you could step in it,’ Beatrice says. ‘Of course, children could step in it at any time.’

Now, however, many of the households in Nadapal have built their own latrines within easy reach, and have access to safe, sustainable sanitation for the first time. Community members are also practising

improved hygiene behaviours such as hand-washing, boiling water, cleaning cooking utensils, constructing and using drying racks and digging rubbish pits.

How has the change been achieved?

Community-Led Total Sanitation (CLTS) is a process of mobilising communities to completely eliminate open defecation, and is promoted by the Government of Kenya. The CLTS approach involves triggering a community’s disgust at the impact of open defecation and desire for collective change, and supporting residents to build latrines and change their hygiene practices.

Practical Action has been implementing the CLTS approach in Nadapal through the SWIFT programme. Together with representatives of the Ministry of Health, it held a public meeting at which it trained community members in practising improved hygiene behaviours and conducted the CLTS ‘triggering’ exercise, during which flies land on faeces and uncovered food and water.

‘They told us, “This is what happens at home if your water is stored with no cover, if you leave food out, and if your or your children’s faeces are around in the open”,’ explains Beatrice. ‘Then they said, “You are eating your own faeces.” When I heard that I felt sick, because I thought I’d eaten faeces with everything I’d ever eaten



and I realised that this was one of the reasons why my family were often sick. I felt so ashamed.'

Practical Action's sanitation technicians have shown communities how to dig pits for latrines and put up structures around them, and supported households to ensure basic standards are met; for example, pits must be at least three-five metres deep depending on the soil formation, latrines must be sited well away from water points, and the privacy and dignity of users must be ensured.

Why does it matter?

For residents of Nadapal – particularly women - easy access to latrines has meant an end to the shame they used to feel when defecating in the bush, and the fear they suffered when venturing out in the dark to relieve themselves. Villagers also feel their new access to improved sanitation has had a positive impact on their health.

'Now there is no open defecation near my homestead, and the family are no longer suffering so much from diarrhoea,' says Beatrice, who has a latrine which she and the five other members of her family share with two neighbours.

'Having the latrine has also reduced our risk of being bitten by snakes and scorpions. The children are not sick like before, and I think this is due to there being no open defecation nearby, and because I now boil water for them to drink.'



Beatrice Lokwawi

What are the challenges?

The biggest challenge to implementing the CLTS approach in Nadapal has been that some residents expect to receive financial help to build their latrines, and are reluctant to construct them without it. However, the County Government promotes a pure form of the approach which does not include any kind of material support for communities.

How will the challenges be met and what makes this change sustainable?

'Triggering' the community has created a sense of shame and strong desire for change among residents such as Beatrice, who, by lobbying neighbours who have yet to build their own latrines, adds to the social pressure on community members to change their ways for the collective good.



Beatrice Lokwawi's latrine

'I want my village to be 'Open Defecation Free', says Beatrice. She began boiling water for drinking immediately after the CLTS training, and now has a rubbish pit, a rack for drying utensils, and a hand-washing station outside her latrine.

'Now I go round to my neighbours and advise them to build latrines and to stop open defecation,' she explains. 'I try to encourage them to dig a latrine, as it would improve the health of their families and my community.'

"Now there is no open defecation near my homestead, and the family are no longer suffering so much from diarrhoea"

The care invested by Beatrice and other residents of Nadapal in constructing their latrines shows the community's high level of engagement with the process. There is a clear sense of ownership on display, suggesting that families which now have access to sanitation for the first time will ensure the latrines are maintained well into the future.

'I wanted to learn because I wanted to prevent my family from getting sicknesses and diseases,' says Beatrice. 'I was amazed, because everything we learnt was new to me.'

Stories and photos collected by Jane Beesley, freelance humanitarian communications specialist, and edited by Emma Feeny (Oxfam).

The SWIFT Consortium works to provide access to safe water, sanitation and hygiene to people in Kenya and DRC, and builds capacity to ensure services are sustainable. It is funded with UK aid from the British people.

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