

Involving communities

Water supply in Eastern and Southern Africa

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Agencies and national governments are increasingly involving local communities when developing water and sanitation systems. Despite this, the functionality of systems in East and Southern Africa remain weak.

Experts believe that community involvement is necessary for the development of water and sanitation systems. But increasing the involvement of local communities has not had a significant impact on the success of these systems. Most systems do not supply water on a large scale and their functionality are weak.



The issue of sanitation has received far less attention from policy makers than has water supply access. In most cases, the development and management of sanitation facilities takes place at the household level, whereas a water supply facility is often a communal concern.



This article, based on SNV's experiences in Ethiopia, Kenya and Tanzania, describes ways to improve management of both water and sanitation facilities. We make a case for an integrated approach to water and sanitation that can improve health conditions in communities.

Community participation: water supply

A 2008 water point mapping study undertaken by SNV in ten rural districts of Tanzania reveals that 43% of 6109 existing water points are no longer operational. Only two thirds of people in the ten districts have access to safe drinking water. However, the number drops to one third when functionality of the pumps is taken into account (see the table). Table: Water point status in ten districts

District	District Population (2002 census)	Total WPs	Functional WPs		Non Functional WPs		Water Coverage	
			Registered	Functional				
Mvomero	253,484	549	318	58%	231	42%	54%	31%
Maswa	306,478	540	367	68%	173	32%	44%	30%
Longido	74,074	229	147	64%	82	36%	77%	50%
Muleba	386,324	502	176	35%	326	65%	32%	11%
Morogoro	105,369	161	27	17%	134	83%	38%	6%
Bukoba	241,921	568	316	56%	252	44%	59%	33%
Karatu	178,434	631	517	82%	114	18%	88%	72%
Magu	416,113	1087	482	44%	605	58%	65%	29%
Missenyi	153,209	533	221	41%	312	59%	87%	38%
Mwanga	115,620	1,309	918	70%	391	30%	100%	85%
Total	2,231,026	6,109	3,489	57%	2,620	43%	68%	33%

Source: Water point mapping report 2008, SNV-Tanzania

The study concludes that access is limited by such factors as poor location of the water source, inappropriate technology, substandard quality and uncertainty about the ownership of the water source. Most community members were not consulted during the preparation phase of water supply development, yet the facilities were built and subsequently handed over to the communities to operate and maintain. In cases where consultations did take place, only community leaders were involved. Those most affected by the lack of a functional water supply system, notably women, were not included. In spite of decades of experience in developing systems for water and sanitation, genuine community involvement during all stages of water supply development leaves much to be desired. What communities need ? including technology, level of service, access to spare parts ? are all too often ignored.

Community involvement in sanitation

Communities also make sanitation a lower priority than water supply access. Water supply is considered a communal concern, whereas sanitation and hygiene are seen as having much more to do with an individual's behaviour. Throughout East and Southern Africa, sanitation programmes have focused on latrine coverage at the household level, which is only part of the solution.

Sanitation programmes should focus more on community involvement, and they should go hand in hand with water supply programmes. Communities lose the benefits of safe drinking water if they do not also have proper sanitation.

This is the rationale underlying the Community-Led Total Sanitation (CLTS) approach, which is currently gaining popularity in a number of African countries. CLTS seeks to 'shock, shame and encourage' action to create a clean and hygienic environment. Hand washing with soap or ash and other hygiene-related behaviours are encouraged. During the community planning and assessment process of CLTS, other aspects of hygiene behaviour change are identified. The focus shifts from mere toilet construction for individual households to the creation of open defecation free (ODF) villages. Over time, ODF villages move up along the sanitation ladder, improving the structure and design of their toilets. The outcomes of three CLTS initiatives that took place in 2008 are described in the boxes.

Another promising approach is to start WaSH programmes in schools. These consist of establishing water supply, toilets and hand washing facilities where there is a serious lack. For example in ten schools in Mwanza, Tanzania, 8,453 pupils share 57 latrines. This amounts to approximately 1 latrine for 150 pupils, whereas the Tanzanian standard is 1 latrine for 20 girls and 1 for 25 boys. One advantage of WaSH programmes focusing on schools is that they directly reaches out to large numbers of children. Hygiene promotion and awareness creation as part of the broader education curriculum can positively influence the behaviour of children. These children can become change agents spreading sanitation and hygiene messages in their communities.

Conclusion

During the International Drinking Water Supply and Sanitation Decade (1981-1990) governments were encouraged to 'increase the attention devoted to health education and community participation and to the need for close operational linkages between health and water supply agencies'. Nearly 20 years later genuine community participation is still lacking, and the links between water supply programmes and sanitation programmes are often weak. On a positive note, we see that in ESA countries integrated approaches with serious community involvement are gaining ground. However, the pace of adopting these approaches is too slow to achieve the Millennium Development Goals (MDGs) by 2015. With the current trend it is estimated that estimated by 2015 in sub-Saharan Africa 234 million people will lack water and 317 million will still lack sanitation.

Further Reading

- EUWI. (2006) [Getting Africa on Track to Meet the MDGs on Water and Sanitation](#). AMCOW, ADF, EUWI, WSP and UNDP.
- GTZ. (2008) Water Supply and Sanitation Reforms in Kenya, Tanzania, Uganda and Zambia.
- Land, T. and Hauck, V. (2003) [Building Coherence between Sector Reforms and Decentralization. Paper no. 49](#). European Centre for Development Policy Management.
- Rogers, P. and Hall, A.W. (2003) Effective Water Governance. [TEC background paper no. 7](#). Global Water Partnership.