**STRATEGIA NETHERLANDS**

**SCHOOL OF PUBLIC HEALTH**

**COURSE: POSTGRADUATE DIPLOMA IN WATER SANITATION & HYGINE**

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**UNIT : WASH ASIGNMENT 1**

1. Suppose you work with a community radio station, describe what your radio station would do to address water, sanitation and hygiene issues with regard to your i) audience, and ii) WASH messages?

**Introduction**

Lack of knowledge of safe hygiene practices coupled with inaccessibility of safe sustainable water supply and sanitation services are major contributing factors of frequent diarrheal disease outbreaks that causes high death rate not only among under five, but also adults in developing countries. By disseminating safe hygiene practice messages through mass media, a large target group would be reached, thus contributing very significantly in life saving by reducing prevalence of water related diseases among the most vulnerable populations living in deplorable condition in developing countries.

1. Audience: Since in most developing countries many people are not willing to openly discuss sanitation issues due to cultural restrictions, as a radio presenter I will develop a programme that is not only gender sensitive but also culturally acceptable, in bid to develop sustainable, compelling and memorable radio programmes that engage listeners in good hygiene practice to disseminate good hygiene behaviors to many targeted populations. I will also include discussions of major setbacks of good hygiene practices among the targeted groups such as lack of sanitation facilities, lack of detergents and their local substitutes for proper hand wash at critical times, lack of safe protected water sources and cultural issues. The programme will also be highly participatory sessions through phone calls from targeted groups to understand the current situation and what hygiene risks they face and how to improve on them.
2. Hygiene promotion messages: The radio programme will focus more on dissemination of good hygiene practices with special focus on the five major hygiene domains, namely:

-Safe excreter disposal practices; These message should campaign against open defecation but promote safe excater disposal practices, namely the use of latrines and proper cleaning and maintenance of latrines in place.

-Handwashing with soap at critical times namely; before cooking or handling food, after cleaning baby’s bottom after defecating, before eating or feeding children

Special focus should also be paid to procedures of proper handwashing that should strictly follow the sequence below:

1. Wash both the hands with soap/ash/detergent
2. Rub the front and back of your hands and in between the figures at least three times.
3. Dry the hands properly with a clean cloth

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-Household drinking water treatment methods, safe handling and storages: Major cause of diarrheal diseases at household levels is contamination of drinking water weather at source or at household levels through poor handling and improper storages. If water is collected from unsafe source, there should be some household treatment that includes the use of bio-sand filters for high turbid water that should be followed with heating to 100 Celsius then cooling and dosage of aquatab and storage in a narrow necked contained with a tight lid.

-Food hygiene: Another major cause of diarrheal diseases at household levels in developing countries is unsafe handling of food. After preparation of food, it should be kept in a well cleaned container with a tight lead to avoid getting contaminated with dust, pollens and germs carried by flies. If food is cold, it should be properly boiled to kill disease causing microorganisms that may have accessed it before consumption.

Personal hygiene that includes regular bathing,

cutting of figure nails that can hubber germs and facilitate feacal oral routes transmission of diseases causing microorganisms, brushing of teeth regularly and keeping hair clean and well comped.

1. In your own words, what is your understanding of public health and what are its key elements?

Public health is a discipline of science that involves protection and improvement of the health of people and the community through promoting healthy lifestyle, conducting researches on diseases and injury prevention and detection, prevention and response to infectious diseases.

Key elements of public health are factors that promotes a well-coordinated and public health interventions among targeted populations. Such factors are discussed below;

1. Closely monitoring health status: It is advisable to closely provide surveillance on health status of a population regularly to be able to know when it is at risk of diseases for proper mitigation measures to be taken. If a population is at risk, it requires a timely response to avoid the prevalence or the outbreak of the diseases posing the risk.
2. Capacity build targeted population through informing, educating and empowering them in regards to health related issues. Communities if well capacity built, prepares them to address minor public health issues at the grass root levels such as timely reporting of disease outbreak risks, thus reducing chances of disease prevalence among the population at risk.
3. Correctly and timely diagnosis and further investigations of diseases: If accurate diagnosis is done at the correct time, chances are, many lives can be saved. If the available health facilities conducts proper testing and are able to define the root cause of the diseases, may patients would be saved by putting them on the right medication. This has been a major blow in many developing countries, where patients are put on totally irrelevant medication and thus not able to recover and probably are lost to the diseases that could have been treated.
4. Engagement of competent and highly skilled health workers: Provision of competent health workers is key for any health facility, since diagnosis of cases will be done accurately and treatment will be offered based on the diagnosis, thus not putting the lives of patients in danger.
5. Proper enforcement of health laws and regulations: By ensuring that health laws and regulations are properly enforced and followed to the later, populations health risks reduces very significantly.
6. Provision of health care services: Ensure that population have access to health care services whenever there is need for timely response. In developing countries, the major setback in the field of public health is inadequate heath facilities. Patients have to travel very long distances to find health facility, as a result a lot of live are lost on the way. The issue should be addressed by having health facilities well distributed in the regions, especially villages and slam set ups, since they are more vulnerable.
7. Develop health policies and plans: By developing proper health policies and implementation plans, the risk of population in relation to health threatening issues get addressed. The health policies put in place should be strictly followed and the government in charge should enforce the same, to promote adoption in to the system.
8. Conduct more researches on health related issues as new cases are reported so that they are addressed before a huge damage is realized health wise.
9. Regularly evaluate effectiveness of existing health response strategies for more insight.
10. Mobilize community partnership for rapid and quick response on health related issues.
11. Public health is about partnership between the different players. Explain how the role of international non-profit/NGO in terms of
12. Recruitment: Both International non-profit organization and NGOs plays a very important role in strengthening public health systems globally in different countries. Most NGOs that implements WASH programmes have a sub-sector called hygiene promotion, which involves hygiene promotion and sensitization of targeted communities to practice safe hygiene practices. Most NGOs that implements WASH have therefore been engaging hygiene promotion specialists or advisers, who plays a critical role of technical support to the programs, under the specialists we have hygiene promotion coordinators, officers and community based hygiene promoters. Some non-governmental organization also work in the health sector. Such NGOs engages health workers such as doctors, nurse psychiatrists and health workers with technical background in different disciplines.
13. Training: Many INGOs have programmes that offers trainings for selected public health village promoters at the village levels. The selection of benefiting villages is done in close collaboration with government line ministry and technical assessments findings. Basically villages with poor public heath practices are selected and few individuals who are able to influence the rest are selected and extensively trained in
14. Funding: Most NGOs with interest in line with public health issues in developing coiuntries plays a critical role of raising funds from donors by submitting proposals, in line with technical assessment findings to capture the actual need on targeted areas to secure funding from donors. The funds are then used to improve public health through setting up health facilities and having them properly equipped with medical supplies both machinery and medical supplies, as well as engagement of qualified personnel.
15. Monitoring for public health projects contribute to the success or failure of those projects in the developing countries: By closely monitoring public health projects, public health actors are able to identify challenges that may hinder the project from achieving the project’s set objectives at initial stage and come up with a mitigating measure to address the challenge to ensure that the set objectives are always achieved. Therefore proper monitoring systems for public health projects is always very important at all stages of project implementation. Most organizations have different methods for their monitoring systems, for NGOs there are monitoring plans that must be submitted with the proposals prior to funding of projects, some actors employs physical monitoring and digital monitoring platforms.
16. In your capacity as the environmental health officer you have been tasked to lead the assessment of a disaster situation. Come up with two key questions under each of the following five headings in your assessment list , namely
17. General overview of the situation :

* What are the geographical areas affected by the shock/crisis? What are the prospects for gaining access to assess the situation or provide assistance, if needed?
* What are the underlying causes of the shock or crisis? Are there any special (security, political, cultural or other) factors influencing the situation?
* Approximate numbers of people affected. If there is displacement, how many people have been displaced? Where have they moved to?
* Are there any signs of limitation of movement for the population, such as roadblocks, or signs of not being able to answer the questions freely? (If yes, explain)
* Are there reported outbreak or increasing incidence of WASH related diseases.(over the last one month)

1. Water supply:  Is provision of water by public utilities, commercial organizations, community endeavors or by individuals, usually via a system of pumps and pipes. Irrigation is covered separately.

* What water sources are available in this village?
* Does the population (or displaced population) have access to these sources? ………….If no, why not and where do they get their water?
* In a day, what is the estimated volume of water a household (6 persons) can get from the water sources in litters?
* What is the distance to the water sources from the households (in meter ) |\_\_\_\_|
* Is it safe for people to drink the water from these water points/sources? 0=No … 1= Yes …… If no, why not?
* Has water quality testing been conducted for the water source and recommendations shared with beneficiaries/ WMC within the past 2 months? 0=No 1= Yes |\_\_|
* Do people treat their drinking water? 0=No 1= Yes |\_\_|
* If yes, then how, 0=No 1= Yes
  + Boiling |\_\_| b. Water tablets |\_\_| c. Chlorination |\_\_| d. Filtering |\_\_| e. other if any(specify) |\_\_\_\_\_\_\_|
* Do people face threats and/or acts of violence while collecting water? 0=No 1= Yes |\_\_|
* If yes, indicate which groups:  men  women  girls  boys.
* Is there an existing water management committee in charge of managing the water source? 0=No 1= Yes |\_\_|
* If yes, have they been trained in the past 3 months? 0=No 1= Yes |\_\_|

1. Solid-waste disposal : Refers to the supervised handling of waste material from generation at the source through the recovery processes to disposal

* Is accumulated solid waste a problem?
* How do people dispose of their waste? What type and quantity of solid waste is produced?
* Can solid waste be disposed of on-site, or does it need to be collected and disposed of off-site?
* Where menstrual pads are disposed, and is their disposal discreet and effective?

1. Excreta disposal: Is undoubtedly one of the key elements of any emergency sanitation programme. Containment and safe **disposal** of human **excreta** is the primary barrier to transmission of **excreta**-related disease

* What is the current defecation practice? If it is open defecation, is there a designated area? Is the area secure?
* What are current beliefs and practices—including gender-specific practices—concerning excreta disposal?
* Are there any existing facilities? If so, are they used, are they sufficient and are they operating successfully? Can they be extended or adapted? Are they safe and accessible to all?
* Is the current defecation practice a threat to water supplies (surface water or groundwater) or living areas and to the environment in general?
* Do people wash their hands after defecation and before food preparation and eating? Are soaps or other cleansing materials available?
* What local materials are available for constructing toilets?

1. Vector-borne diseases for purposes of assessing local conditions, health needs and identifying local resources in the disaster situation that you are addressing.

* What are the vector-borne disease risks and how serious are they?
* Are there traditional beliefs and practices (e.g. the belief that malaria is caused by dirty water) that relate to vectors and vector-borne disease? Are any of these beliefs or practices either useful or harmful?

NB: All questions carry 10 marks each