

## Community Development Committees promote WASH

### The Strengthening Community Health and HIV Response in Nigeria (SCHH) project

#### A Production of the Community Health and HIV (CHH) Team | February, 2016

Now in its second phase, one goal of Christian Aid's SCHH project is to empower communities to demand quality health services from government and take ownership of their health in a more independent and sustainable way. To achieve this, Christian Aid and its state level partners have encouraged the establishment or relaunch of Community Development Committees (CDCs). CDCs are trained and mentored by Christian Aid partners to promote the health of community members, using a rights-based approach to request quality services.

#### WASH for Igbon community

This approach to health education and promotion has worked effectively in Igbon<sup>1</sup>, a remote community in Logo Local Government Area, Benue state. In a community mainly populated by farmers and *branda* (retailers of farm produce), the CDC doubles as the water, sanitation and hygiene (WASH) committee, appealing to local government around health needs and promoting WASH principles to improve community health.



Members of Igbon CDC double-up as the WASH committee.

Credit: Christian Aid/Nneoma Anieto

Igbon CDC chair Ayongo Bonny M said the community was previously beset by health issues: people drank and used water from a small stream without purification and constantly fell ill; open defecation was prevalent, making the community almost uninhabitable during rainy seasons when waste washed into open spaces.

Christian Aid partner Anglican Diocesan Development Service (ADDS) has greatly improved the situation. ADDS held a community-led total sanitation (CLTS) demonstration where waste and water management and environmental sanitation practices were reviewed. A map of the community was drawn in the sand and areas where community members defecated, disposed of waste and got their water were marked with ashes. This showed the activities often happened in the same areas.

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<sup>1</sup> Igbon is a typical deprived and marginalised community about 100km from the local government headquarters. It has a bad access road, no electricity, piped water or health centre.

ADDS provided information on the harmful effects of dirty environments and polluted water, motivating the community to improve sanitation and stop open defecation to protect their water and wellbeing. The CDC/WASH committee was trained in advocacy to lead the change process and encourage the community to keep their environment clean to reduce sickness, and provide information on the purification of water for drinking and personal hygiene. They asked members of the community to dig latrines and put an end to open defecation.

Ayongo said many community members now use these WASH practices, and many have dug latrines for their family and neighbours to use. Community leaders have made laws against open defecation. Those flouting the laws have latrines dug for them, which they have to pay for.

Committee members say fewer people have fallen sick since these initiatives began. Community members now filter their drinking water, take regular baths and wash their hands with ash and water after defecating.

These successes have been hard won, according to Ayongo, who said people initially resisted and even accused them of receiving gifts and incentives to compel community members to comply.

### Ash and water for hand washing outside a toilet in Igbon.

Credit: Christian Aid/Nneoma Anieto



But the community now acknowledges the WASH principles have been beneficial. Farmer Jennifer Inya said a private latrine for her family has improved her life. She has placed ash and water outside the latrine door to remind people to wash their hands.

### Sanitation and latrines for Olakpoga community

In Olakpoga<sup>2</sup>, in Otukpo LGA, Benue state, the CDC and community leaders have introduced a bi-monthly sanitation exercise for community members and mandatory latrines for every household.

Godwin Ondoma, from Christian Aid partner Ohonyeta Caregivers (OCAG), said before SCHH the community was 'dirty' and people defecated in the open 'because they had no toilets'. OCAG conducted a CLTS exercise to encourage the community to think about hygiene and the environment. The exercises included faeces being placed in water and community members asked if they would drink it, and faeces being placed close to food and after flies had perched on both, community members asked if they would eat the food. These tests starkly demonstrated the hazards of unclean environments and open defecation. A CDC was formed in Olakpoga and trained by OCAG on WASH and advocacy.

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<sup>2</sup> The local government of the marginalised community of Olakpoga is said to be the oldest in Benue state and very developed, but the community itself is still underdeveloped.

Olakpoga's CDC has since supported a community clean-up and households have been required to dig latrines by a set deadline. People who don't participate are fined, with the money raised used to address other community needs.



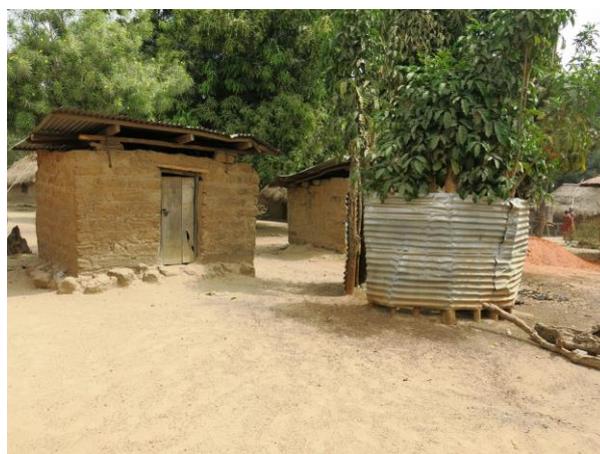
**Olakpoga CDC convinced community leaders to hold a bi-monthly sanitation exercise.**

Credit: Christian Aid/Nneoma Anieto

Like in Igbon, people in Olakpoga resisted change at first. CDC secretary Aduna Godwin said they were accused of receiving payment to enforce sanitation and the building of latrines. But through power analysis, the committee identified the community head Chief Edache Cletus as the most influential person and convinced him of the benefits of a sanitation drive and latrines.

**A toilet (left) and bathroom (right) in Olakpoga.**

Credit: Christian Aid/Nneoma Anieto



Chief Edache said SCHH had been positive for the community. 'This thing is good for us, we welcome it,' he said.

### **WASH for survival**

In the past, members of Nagane<sup>3</sup> defecated in bushes near an old dam, the community's only source of water. When it rained, the dam would flood with human waste and the community could only use the water at great risk to their health. Cases of typhoid and diarrhoea were high in the community.

To encourage the community to improve sanitation and hygiene, Christian Aid partner the Centre for Gospel Health and Development (CeGHAD) carried out similar exercises to those held in Olakpoga, and Igbon, leading to the establishment of a WASH committee made up of the CDC members. After training from CeGHAD on WASH and advocacy, the committee started a campaign to end open

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<sup>3</sup> Nagane is a marginalised community in Langtang South LGA, Plateau state, about 185km from the state capital Jos.

defecation. They enlisted the help of the *galadima* (community leader) who made a law banning open defecation and introduced a fine for those breaking it.



**Nagane CDC worked with their WASH committee to protect their sole source of water from human waste.**

Credit: Christian Aid/Nneoma Anieto

Because the proposed change was alien for the community, they resisted at first. The committee elected monitors to guard the bushes and ensure no one went in to defecate. The monitors often received verbal abuse, until another law was passed imposing a fine for such behaviour.

Most houses in Nagane now have toilets, while more are being built. Those without use toilets near their homes, and many now cannot imagine life without them. CDC member Binching Rimkong said: 'I cannot imagine getting up early in the morning to go [to the toilet] outside again.'

Although the dam's water is still far from potable, it is free of human waste. The community has also learnt to treat the water before drinking it, with many people now adding alum to it.

**The dam is the sole source of water in Nagane.**

Credit: Christian Aid/Nneoma Anieto



There has been a reduction in typhoid, and people now use money once spent on healthcare for other needs. Money received from fines has been used to construct a reservoir to hold rain water, an alternative source of water for the community, and beds have been bought for the health centre.



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