

SUDAN's school hygiene clubs and good-hygiene campaigns

The students in the School Hygiene Club in South Kordofan, northern Sudan, are producing drama and songs with key messages on hygiene and sanitation that they will perform for about 600 other pupils and teachers. The School Hygiene Club is composed of 20 students, both boys and girls, ranging from 10 to 16 years of age. They are in charge of looking after the school's water and sanitation facilities, and spreading hygiene messages among their peers. It is one of the 16 School Hygiene Clubs in South Kordofan set up with support from UNICEF to improve hygiene and health for the children and families of South Kordofan.

Cases of life-threatening diarrhoeal disease, including cholera, are on the increase in a region extending from the north of Sudan to southern Darfur. In response, UNICEF is accelerating its water chlorination programme and good-hygiene campaigns to protect millions of people. 'While there are many partners on the ground ready and willing to provide support, it is the leadership of the health authorities in each state that is critical to winning the battle against this killer disease,' says UNICEF Representative in Sudan, Ted Chaiban. 'State authorities and community leaders have an important responsibility to lead the response, mobilizing all concerned to contain outbreaks,' he added.

Source: Edward Carwardine, UNICEF WES Sudan

US\$60 million for public-private partnership for PlayPumps Alliance

A groundbreaking public-private partnership between the US Government, PlayPumps International, the Case Foundation, and other public and private sector partners has been announced. With US\$ 60 million from the U.S. Government, through USAID and the U.S. President's Emergency Plan for AIDS Relief, the alliance will work with 10 sub-Saharan African

countries to bring the benefits of clean drinking water to up to 10 million people by 2010. This will directly support the provision and installation of PlayPump water systems in approximately 650 schools, health centres and HIV-affected areas in the following countries: Ethiopia, Kenya, Lesotho, Malawi, Mozambique, South Africa, Swaziland, Tanzania, Uganda, and Zambia.

Contact: PlayPumps International, South Africa and USA, <mailto:info@playpumps.org>

Monitoring source and domestic water quality

Microbiological water quality monitoring in Niassa province, Northern Mozambique, shows groundwater is not, in general, grossly contaminated though contamination levels are strongly linked to season and to risks observable at the wellhead, especially risks dealing with wellhead hygiene and maintenance. Diarrhoea incidence, in general, is greatest in the rainy season suggesting poor wellhead protection as a potential mechanism for well contamination. Comparison of source water and stored water in the home shows that significant deterioration in source water quality can occur once transport and storage in the home is undertaken but that this deterioration is also related to the quality of the source water. This study shows that a structured approach to water quality monitoring, with targeted observations and an examination of the relationships between risk and water quality, is important to identify the priority interventions to be undertaken.

Source: Cronin, Aidan A., Steve Pedley, Ned Breslin and James Gibson (2006) 'Monitoring source and domestic water quality in parallel with sanitary risk identification in Northern Mozambique to prioritise protection interventions' *J. Water Health* 04 (2006) 333-345

The 21st Century Leadership Challenge

The Director of Building Partnerships for Development in Water and Sanitation (BPD), Ken Caplan, was instrumen-

tal in the process of developing The Partnership Declaration. In September 2006, 130 partnership professionals from around the world joined forces in Cambridge to draft a Declaration targeted at leaders from across the corporate, government and charitable sectors. Titled 'The 21st Leadership Challenge', the Declaration describes seven actions that society's leaders need to take to realize the full potential of strategic alliances between business, government and civil society organizations to tackle the persistent problems of poverty, environmental degradation and weak governance.

Please see the website, register your comments, and send the declaration on to your contacts and colleagues. www.thepartnershipdeclaration.org

Screened sanitation units – the Pakistan earthquake

For water and sanitation interventions during emergencies, sensitivity is required for the particular needs of communities when women live in seclusion (*purdah*). Additional screening around water and sanitation facilities can help to provide additional privacy for women and men living in camp environments in emergency settings.

During the Pakistan earthquake of October 2005, IDP (internally displaced people) camps were constructed where people could shelter during the winter months. Discussions with local team members led to the construction of screened toilet and bathing blocks to separate men's and women's facilities.

General principles behind the screened blocks:

- Women and men should not be able to see each other as they enter the toilet or bathing units.
- When space was limited and men's and women's blocks had to be next to each other, the entrances were positioned at the opposite ends of the blocks to maintain as much separation as possible.
- It was important to construct screened facilities for men as well as for women, as this also gave the men a degree of privacy.

- The hand-washing facilities should be located near to the door so that the users will remember to use them after using the latrines.

Menstruation. In most cultures menstruation is a taboo subject and women do not discuss the issue often, even with other women. Therefore dealing with menstruation needs a significant degree of privacy, which is less available in a camp setting. In Pakistan, the OXFAM-GB programme tried out special menstruation units in addition to bathing units. Through individual and focus group discussions, the team discussed with Pakistani women their needs for washing and drying their menstrual cloths. The women's initial preferences were for 'menstruation units' to be included within the existing screened bathing blocks (in preference to having separate units in a more secluded area on the edge of the camp), so that when they were entering no-one would know that they were going in for that purpose.

Therefore the team included menstruation or 'hygiene units' in some of the women's toilet and bathing units where women could wash and dry their menstrual cloths. The standardized block in Figure 1 has a single hygiene unit, next to the bathing units (which is

a slight adaptation to the ones added in or added on the outside in Pakistan).

Generally the feedback on these blocks was positive. In one camp, however, where the additional units were added on the outside of the standardized toilet and bathroom blocks (as there was not enough space to add them inside, after construction), the women would not use the units even though they had requested them. Both men and women became curious as to what was inside the extended blocks and as their walls were made of tarpaulin they could be easily punctured. This made the women feel insecure. These women reported that instead they washed their cloths in the bathing units and then hung them up to dry with their clothes, but covered them with another item so that they could not be seen. Issues to consider when supporting women and girls with their menstrual needs:

- What do women and girls usually use for dealing with their menstruation – cloths, sanitary pads etc? Make sure the required materials are provided with or alongside hygiene kits (if cloth is provided check with women on preferred colour – in Pakistan this is a dark colour and never white, whereas in

other countries unbleached calico is preferred).

- It is essential that the women and girls are asked what they want in terms of facilities for dealing with menstruation as if the facility is not exactly what they would feel secure to use, then it is unlikely that it will be used.
- If disposable sanitary pads are to be provided then facilities for effective collection and disposal are essential.
- If areas are designed for women to wash and dry their menstrual cloths then other people should not be able to see any blood-coloured water coming from the unit when the cloths are washed, or see the towels being dried. The sides of any units should be high enough that no-one can see inside.

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