From our water correspondent

Our water correspondent, Hester Kapur, pays a return visit to Burundi. In a clinic she witnesses the effects of food shortages and water-related disease. In a project village, poverty has not prevented the community making remarkable improvements in water, sanitation and hygiene.

At Akanyaru, the border which separates Rwanda from Burundi, I change money with my regular guy, Jean-Baptiste. Twenty faces and 40 hands are pressed against all the windows of the car, shouting, 'He's a thief', 'My rates are better', waving calculators at me, while banging on the windows. The first time, I was intimidated, but now, I am over it. As we drive away, my car is imprinted with an assortment of handprints and greasy forehead marks.

After about 10 km, a policeman stops us at a check point. He doesn't check the car or ask for papers, just asks for an Amstel, the local beer. I smile sweetly, say, 'Next time', and he waves us through. Women dressed in fluorescent robes, the brightest oranges, yellows and reds, line the roads. All they need is some banging techno, and they'd fit right in,

in a dusty warehouse nightclub in Manchester.

We left Kigali for Bujumbura with three hours to spare in case of breakdown. We will travel through the insecure area of Bujumbura Rural and we have to allow for the roads closing due to FNL-related attacks. (FNL is the most extreme Hutu group in Burundi.) On the way however we encounter an overturned petrol tanker.

Every villager within 5 km is here, with all sorts of containers. Biscuit boxes, buckets, bottles, saucepans, one guy is even using his hat to scoop up the free juice. People are slip sliding on the greasy road, others smoke cigarettes, flicking their buts into the spillage. The police try hopelessly to beat back the enthusiastic crowd, who are laughing, and goading them on. It feels like a 1990s anti poll tax march in London, but with an increased jubilant, party atmosphere. With gallons of free petrol flowing down the road, it is like gold fever.

Arriving in Bujumbura, I decide to treat myself to lunch at the swankiest restaurant in town, Botaniquica. I justify it,

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given that I'm going to be eating peanuts, biscuits and tough goat kebabs on the road for the next week.

The restaurant is full of the Burundian gentry. Ladies who lunch, who toy with their latest mobile phone, jangle their gold bracelets, and fiddle with their finely braided hair (a five-hour job, costing around US\$25). Aside from them, there is me and two other stringy white women. They are both working on their laptops with one hand and eating salad with the other. I look at the whites: they are concentrated, drinking soda water. I look at the Burundians, laughing, sipping chilled white wine. I ponder for a second, 'What attracts single, white, skinny women to save Africa?' Then I go back to my hotel room to work on my lap-top, on a blissfully sunny, Sunday afternoon in Bujumbura.

We head out of Bujumbura the next morning, for Gitega and Karuzi where we are visiting two NGO partners that PROTOS supports, ODAG (organization for the development of Gitega archdiocese) and CISV (Comunità Impegno Servizio Volontariato). The first visit is to a Médecins Sans Frontière clinic, which is splitting at the seams with patient patients. Because treatment is free, people come in. The regular clinics, in contrast, are often under-staffed, with little

more medication than aspirins and Valium; in one I saw a 19th-century, rusting birthing chair, complete with leg braces. We collect the monthly health statistics on water-related diseases; no surprises: malaria, worms, diarrhoea and skin diseases are still top of their lists. In the nurse's room, a wafer-thin man sits hunched in his chair. I could join my thumb and forefinger around the top of his arm.

The door flies open and a woman collapses on the floor. Drought, failed crops and no food reserves: famine is eating up these people. As I turn to leave, I see one hundred emaciated faces, sunken eyes, skin sagging off their bones, waiting in line for medication. These people are sick, but what they really need is food.

The first time I saw ODAG's work in January 2006, I put my head in my hands and thought, 'Why me? How am I going to sort out this mess?' Every infrastructure poorly or inappropriately constructed, no hygiene and sanitation programme, no management structure or collection of fees, poor relationships with the community, a despondent, divided team. After a lot of head scratching and floor pacing, and a visit by Dirk from HQ, we helped them to come up with a checklist of how to assess whether their job was done or not. Then, we went

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The Batwa community had transformed the sanitary condition of their village, and they were proud of it.

with them to evaluate their work. It was a tough visit for them: a realization that 85 per cent of their work had to be repaired, and that they needed to put in some effort on the software aspects.

Today they take me to a Batwa community: an extremely poor and marginalized group, traditionally potters and dancers, who live in remote and reputedly dirty conditions. No one is wearing shoes; everyone is wearing ripped and torn clothes, the colour of the brown earth. Yet the village is spotlessly clean. Paths are swept, every household has a drying rack and a shower constructed out of bent twigs and covered in grass. Then we visit latrine hole, after hole, after hole; in fact, in this community of 300 people I am taken to inspect every latrine hole that they have dug. Most averaged a remarkable 9 to 11 m deep and were 80 cm wide.

We have given them so little: an incentive for a community worker trained by ODAG and a set of PHAST (participatory hygiene and sanitation transformation) pictures. ODAG has carried out weekly follow-up visits of encouragement, advice and problem solving.

The community is so happy that they start to dance and sing, and beat up a choking dust storm. Following the party, we continue to visit springs, tanks and pipelines that ODAG have repaired. Many of the springs had to be reopened because the water analysis showed very high faecal contamination. Now the results are within WHO guidelines, with a fenced area around the spring protection, good drainage, improved access, washing basins and even a local washing line made out of sticks.

One year after the initial assessment and the programme has taken a 180-degree turn. The distance that ODAG have travelled mentally and physically in one year is amazing. Good for them. They did it. I give them lots of praise and encouragement and head out, back to Kigali.

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