

# WATER, SANITATION AND HYGIENE ON THE CHARS

CLP IMPACT AND SUSTAINABILITY SERIES



**Chars Livelihoods Programme**

Reducing Extreme Poverty on the Riverine Islands of North West Bangladesh





# **WATER, SANITATION** AND HYGIENE

The CLP's Contribution



## What is Water, Sanitation and Hygiene (WASH) like on the Chars?

Access to water and sanitation is a fundamental human right and essential to life, health and dignity. On the chars of north west Bangladesh, there is very little access to water from a protected source or a sanitary latrine. Char dwellers are often not clear on the link between hand washing and improved health, therefore their hygiene practices can contribute to illnesses.

Households, before receiving CLP support, often gather their water for cooking and drinking from tube wells which are not installed properly e.g. water points are not surrounded by a concrete platform which reduces contaminated water from entering the tube well.

Open defecation is a common practice on the chars, particularly by children, and when latrines are used, they are often unsanitary and poorly maintained.

Char dwellers often do not regard hygiene practices as a priority as they do not understand the links of hand washing to improved health.

Households with better WASH are likely to have:

- fewer incidences of diarrhoeal disease
- fewer diseases including skin infections, scabies, hepatitis, etc.
- fewer days when they are sick and unable to work
- improved nutrition, and
- improved food security, as WASH improves the nutritional impact of food consumed.



## How Does CLP Measure Impact on WASH?

CLP's Innovation, Monitoring, Learning and Communications Division (IMLC) is largely responsible for M&E and research which includes assessing progress towards high level results. These results areas have been grouped into themes that include livelihoods, food security, nutrition, women's empowerment, graduation and water, sanitation and hygiene.

The Programme aims to provide 78,000 extreme poor households with an integrated package of support lasting 18 months. Because not all of these households can be supported at the same time, six groups (called cohorts) therefore receive the package through annual cohorts averaging 13,000 core participant households (CPHHs).

IMLC collects the baseline status of households prior to them receiving CLP's support. This normally takes place during October each year. At the same time, data is collected from a sample of households from previous cohorts which allows the programme to show impact and whether outcomes/ impacts have been sustainable over time. The baseline status of each new cohort acts as the control group for all previous cohorts.

The data IMLC collects from the panel sample of households during the annual surveys is then analysed to understand each of three parts of WASH:

1. access to an improved water source; a CLP standard tube well
2. access to sanitation; a CLP standard sanitary latrine
3. improved hygiene practices; hand washing at critical times



## CLP's WASH Interventions

### Access to Water

By the end of the Programme in 2016, CLP aims to provide 105,000 households with access to an improved water source, benefiting 408,450 people.

Char households are provided with tube wells to access improved water. Currently CLP offers subsidies of approximately Tk. 8,000 (around £67) to households to install new tube wells.

CLP aims to ensure that every five people in a village have access to a tube well that meets CLP standards. In addition, CLP ensures each core participant can easily reach a CLP-standard tube well– which CLP defines as “within a ten-minute round-trip walk.”

In each case, one household is invited to receive the tube well and contributes Tk 1,000 (about £8) to the overall cost and in return owns the tube well. Ownership means that the household must maintain the pump in working order as well as allow all surrounding households access to the new tube well for free.

When tube wells already on the chars meet certain criteria, CLP upgrades them by installing a concrete platform. This prevents groundwater contamination through the base of the well.









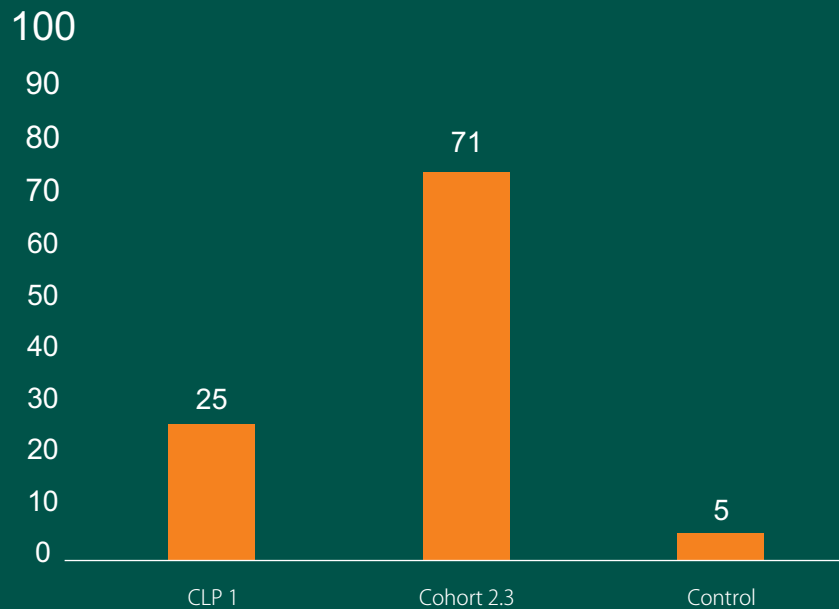






More households have access to an improved water source after receiving CLP support.

## % OF HHS WITH ACCESS TO CLP STANDARD TUBE WELL



Source: 2014 Survey

CLP's improved water policy came into effect in July 2013, which saw all core participants entitled to a new, or upgraded tube well. Prior to this, CLP didn't prioritise core participant households but rather sought to improve water access with a community-wide approach. As a result, the percentage of CLP 1 participants with improved water source is lower than later cohorts.

The sustainability of CLP's impact was tested by studying our earliest participants (CLP 1). It was found that this group of households had similar levels of access to a tube well up to CLP standards in 2013 as they did in 2011 showing that CLP's impact is sustaining.





## Access to Sanitation

Having adequate sanitation facilities is a major step towards raising community health standards. CLP provides a subsidy to all households in the programme's working villages to construct sanitary latrines.

By the end of the Programme in 2016, CLP aims to provide 150,000 households access to a sanitary latrine, benefiting 583,500 people.

CLP has a significant impact on the proportion of households with access to a sanitary latrine, with over 87% of core participant households in CLP's most recent cohort having access to a sanitary latrine up to CLP standards, compared to just 6% of the control group.

The sustainability of CLP's impact was tested by studying our earliest participants. It was found that this group of households had similar levels of access to a sanitary latrine in 2013 as they did in 2011 showing that CLP's impact is sustaining.





## Improved Hygiene Practices

Awareness campaigns are carried out using the Community Led Total Sanitation (CLTS) approach. This aims to trigger pride in good sanitation behaviours and generate public disapproval of open defecation.

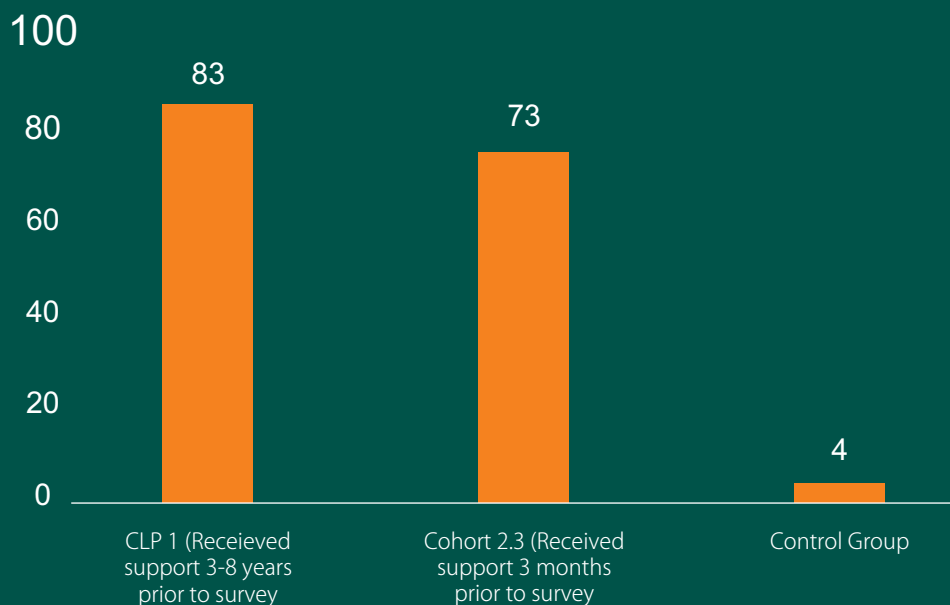
As a part of the programme's social development activities, health and hygiene awareness-raising campaigns are carried out targeting CLP's core participants.

The Social Development Unit uses a number of communication tools to promote positive hygienic practices such as hand washing with soap, using sanitary latrines, wearing sandals, and collecting, storing and using water safely.

Messages are designed to be simple and clear, with flip charts and group discussions to get char households talking and learning about good hygiene behaviour.



## % OF WOMEN HAND WASHING AT CRITICAL TIMES



Source: 2013 Survey

The programme also takes advantage of opportunities to raise awareness at the community level during local fairs (community melas), where messages are communicated through posters, folk songs and popular theatre.

### More Women Hand Washing at Critical Times

Results show that the percentage of women hand washing at critical times increases significantly after CLP support. This can be accounted for as changes in habit and behaviour often require time to take effect.







## HOW ACCESS TO IMPROVED WATER **CHANGED** **SHAHIDA'S LIFE**

Shahida proudly points out her two healthy bulls. "With the money I made from selling the cow that CLP gave me, I bought two more," she says, smiling. All around, there are the tell-tale signs of prosperity and CLP's assistance; a chicken coop in the corner, banana plants and pit crops growing around the homestead, even the very ground that she's standing on is a CLP-raised plinth, keeping her and her family above the highest known flood-level in the area.



But pride of place is given to the water pump. Just to the right of her house, it is within easy reach of everyone in the household, as well as other members of the community. The concrete platform is freshly washed, guarding the 40-foot-deep tube well from contamination that could otherwise seep back down to the groundwater.

"I used to have to get water from far away," says Shahida, "unless I wanted to use river water." She shakes her head; she knows that river water is not a good option. She knew it even back then,





but didn't always have a choice. "Every day I would have to go four, five, maybe six times to get water. It would take me between two and four hours every day depending on how much water I needed. It was hard, very tiring. And sometimes I fell because of the weight of the water. I would injure myself and then also have to go back to collect more water because I had spilled what I was carrying."

Then came the CLP and their infrastructure team. A tube well was constructed for her, tested to check that the naturally-occurring level of arsenic was low, and capped with concrete to keep the water contamination-free. "Now I have extra hours every day," she says, smiling happily. "I do extra cleaning of my house, I help my children with their studies, and sometimes I do some sewing to make extra money." This is not the only benefit. The concrete platform has been built to channel waste water away from the house. But ingeniously, it directs it straight into the household vegetable garden next door. Vegetables, salad plants, fruit trees and herbs flourish, the simple channels of the irrigation system distributing the leftover water evenly across the crops.







"The family does not get sick so often now," says Shahida. "Before, we would get dysentery many times every year. Now, I have not been sick for a long time." This is great news, not just because it means the family suffers less from illness. When people have dysentery or other infections, their bodies may not always get the maximum nutrition from the food they eat. Having better water therefore helps with food security as well as with health.

"Now my plan is to focus on my children's education. I want them to be successful" says Shahida. It turns out that the CLP has provided much more than a source of water, they have helped Shahida and her family create a vision for the future that would have seemed unachievable a few short months ago.



The Chars Livelihoods Programme works with extreme-poor households living on island chars in north west Bangladesh. The Programme aims to improve the livelihoods, incomes and food security of at least one million extremely poor and vulnerable women, children and men living on chars. CLP provides a package of interventions with the aim of improving social and economic assets, reducing environmental and economic risks, and increasing access to markets and services. CLP is jointly funded by UKaid through the Department for International Development and the Australian Government through the Department of Foreign Affairs and Trade. CLP is sponsored by the Rural Development and Co-operatives Division of the Government of Bangladesh's Ministry of Local Government, Rural Development and Co-operatives, and implemented through Maxwell Stamp Plc.

For further information on the CLP's impact on WASH, please visit the Publication page of our website. The most relevant documents are:

Barret, A., Alam, Z., and Hannan, M. (2014) The Impact and Sustainability of CLP's WASH Interventions. Chars Livelihoods Programme.

Cordier, L., Kenward, and S., Islam, R. (2012) A Study to Assess the Outcomes of the CLP on Food Security. Chars Livelihoods Programme.

Cordier, L. (2012) Review of the CLP's Approach to Monitoring Food Security. Chars Livelihoods Programme.

Cordier, L. Kenward, S., and Zahangir, A (2013) A Study to Assess the Outcomes of the CLP on Water, Sanitation and Hygiene. Chars Livelihoods Programme.

This brief is part of the CLP's Impact and Sustainability Series, which outline the CLP's impact and sustainability across the programmes five key thematic areas. Forthcoming briefs in this series will address Women's Empowerment, Livelihoods, and Food Security.



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## Chars Livelihoods Programme

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