

South Asian people's perspective on sanitation

- 1 This study attempts to capture South Asian people's perceptions of sanitation and hygiene, based on a series of interviews and discussions with a cross section of poor and marginalised social groups in Bangladesh, India, Nepal, Pakistan and Sri Lanka.
- 2 More than half the population do not use improved facilities. In fact, 44% of people practise open defecation in South Asia; with 70% of those without improved sanitation facilities living in rural areas. Governments have been active with policies and programmes, but people's voices indicate that it is not enough.
- 3 People across countries have a similar understanding of sanitation and hygiene, though a degree of variation exists according to circumstances. For most people 'cleanliness' is the primary indicator and 'dignity' is close behind. Toilets – individual or community, preferably the former – are a must and a 'right' to sanitation means that the government is duty bound to 'give' facilities to them.
- 4 By and large communities also understand that using hygienic latrines, safe drinking water and improved hygiene practice are important components of sanitation that keep them healthy. They understand that keeping their surroundings free from waste water and human waste is also critical.
- 5 In spite of this understanding there is a wide gap between knowledge and practice, the most glaring indicator being that 44% of the population continue to defecate in the open.
- 6 There are also other discrepancies: while washing hands before a meal is practiced by most households, irrespective of income or education levels, poor and socially marginalised communities often do not use soap because they are neither aware of the benefits nor have the means to do so. Toilets, even when constructed, are used only when households understand and accept their importance. Menstrual hygiene is understood as a matter of convenience and to some extent as a factor of health, but is not widely practised because of a lack of resources.
- 7 Provision and access to sanitation and hygiene infrastructure and facilities varies from community to community. Communities perceive that the availability and maintenance of facilities are largely dependent on their own ability to manage for themselves and on support from state or non state agencies. It is also a factor of the communities' own interest and need.
- 8 Projects and interventions have followed different trajectories leading to different results. Communities have perceived success and failure of interventions in relation to local circumstances and their own needs. However, most communities identify functional toilets and effective systems of disposal of garbage and liquid waste as key indicators of success, as are maintenance and sustainability of facilities and services.
- 9 Success or failure of interventions is perceived to be influenced by community involvement, democratic community leadership, state support, responsiveness to community needs and political interest and support. It is also seen as being influenced by the design of facilities and operation and maintenance arrangements. A significant number of communities perceive that the effectiveness of projects could be improved with the involvement of NGOs.

What emerges from the collective voice of communities in South Asia?

- Communities want a clean and healthy environment for themselves and their families. They want dignity, privacy and freedom from a life of shame and embarrassment of defecating in the open.
- Communities want functional toilets, waste water disposal systems, and adequate and regular arrangement for disposal of waste.
- Most communities value the contribution of hygiene education and believe that it should go hand in hand with the provision of hardware and facilities.
- Many communities are willing and able to make financial contributions, but some want support as they are too poor to fend for themselves.
- Most communities believe that government, NGOs and themselves have to work together.
- Communities perceive that more projects have failed because of a lack of involvement and commitment by both communities and agencies, and consequent lapses in technology, planning, implementation, supervision, support and above all accountability.
- Communities are convinced that projects cannot succeed and sustain unless government and NGOs help them to establish an effective operation and maintenance system.
- Communities want government, NGOs and donors to be more proactive in responding to the needs and conditions of the geo-physical conditions in which they live. Hence they want more flexible and location specific designs.
- Communities are sceptical about incentives and award schemes to assist coverage. They are convinced that change in sanitation behaviour cannot occur till they themselves are convinced about the need.
- Above all, communities are concerned and wary of projects and interventions that do not deliver because of poor quality of construction, lack of supervision and follow up and vested interests.



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