

Heeals Survey

Report

On



Safe Drinking Water and Sanitation

Bhowapur & Kaushambi

Ghaziabad, Uttar Pradesh, India

24th & 25th March 2012



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HEEALS (Health Education Environment And Livelihood Society)

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Inspiration and overall guidance for Door to Door Survey on Safe Drinking Water and Sanitation was provided by Gaurav Kashyap. (Managing Director).

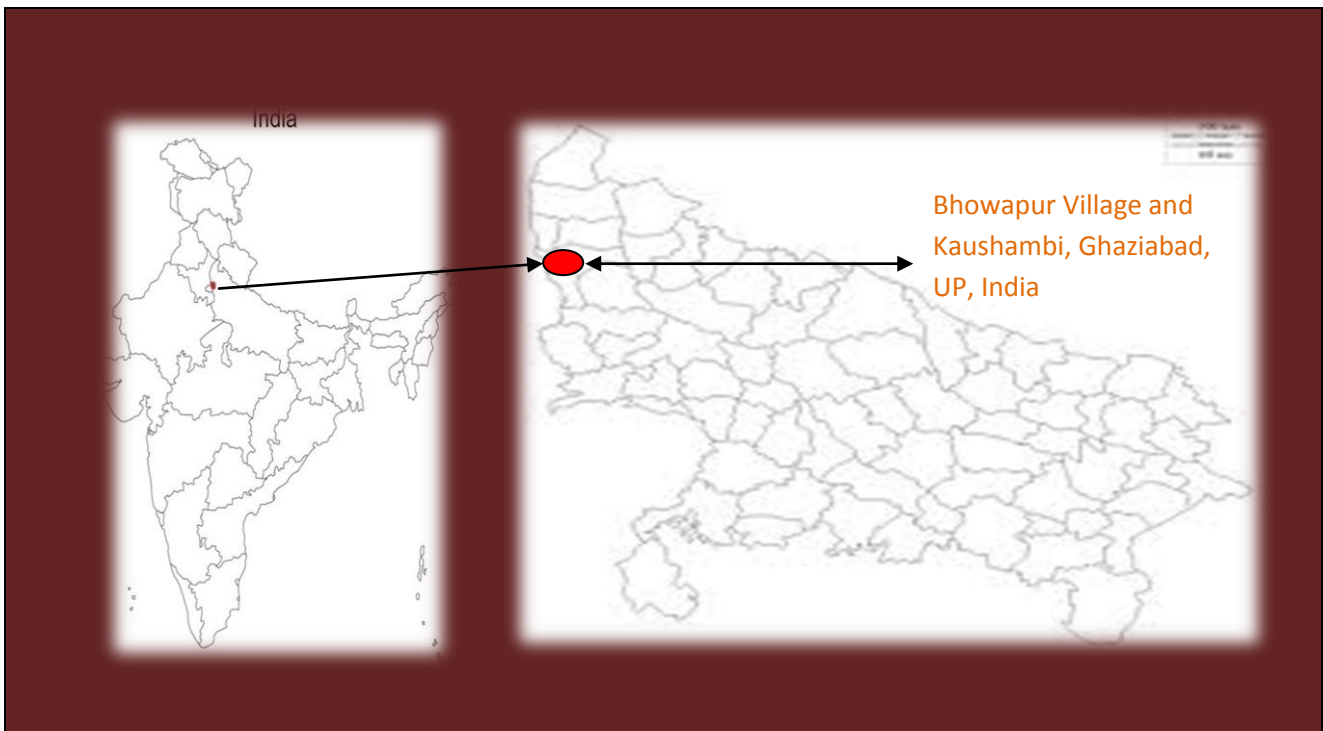
Survey Questionnaire can be availed via e-mail , contact at communications@heeals.org.

1. Introduction

1.1 Overview of the project

People living in urban slums falling to diseases by problems arising out from all the quarters of life , whether it be unhygienic food infested with flies, insects and unsafe drinking water draining out days & nights from clock of their life. Open drains filled with filth and dirt all around choking the drainage system and lives of people with diseases.

One such place lying in the by lanes of upscale commercial area Kaushambi, Ghaziabad known as Bhowapur Village remain unheard for many years.



Most of the people living here are migrated from different parts of the country and lives as tenants. They became sandwiched between walls of 6 by 8 ft dimension with poor sanitation and water.

HEALS working in health, environment and education for the downtrodden, under privileged, marginalized and unaware section of people in society with motto of "It's Our Fundamental Right To Have Safe Drinking Water and Sanitation", conducted a door to door Clean Water and Sanitation Survey in Bhowapur Village and comes out with heart wrenching facts .About 95 % of tenant living in the so called "Chawls" are drinking salty water directly from source without boiling or passing it through any filtration process, making the lives of children and pregnant women prone to water borne diseases .With open drains filled with dirt & filth and no place for the drains to go, over

flowing drain sometimes comes into the houses of people .During rainy season situation becomes bad to worse, water enter into the rooms and houses, and mix it with drinking water source and place where they wash their utensils , letting the bacteria and viruses entering into there food chain. Everywhere there is a lack of proper drainage system.

1.2 Objectives of the Survey

Heeals conducted a baseline survey on Safe Drinking Water and Sanitation. The primary purpose of the survey was to gather and make available information from target populations to be used in project design and implementation, to help define strategies, policies and appropriate health messages for the targeted communities of the area. To help designing workshop, training modules and working plan for the sanitation and water awareness team in the region.

An increase in the knowledge and change in practices of drinking water, household practices of water filtration processes, sanitation practices in home and community are anticipated by the end of the project as result of campaign interventions. The second purpose of the activity “Survey” is to take out the maximum information from the community to know about the different practices prevalent in the community, to know about the living conditions, health condition, sanitation and water condition of the targeted area.

2. Methodology

2.1 Survey Instrument

The survey instrument consisted of the questionnaire consisting of 25 close ended questions. There were different section in the questionnaire which were targeted according to the different issues prevalent in the area ; water use and availability, latrine use and availability , hand washing and hygiene , education and sanitation relation .

All the questions are too provided with options and few ones are there with Yes or No options.

Questionnaire was defined in the manner that it would not take more than 5 to 8 minutes of the enumerator. Questionnaire was made in English language but interpreted in Hindi language by the enumerators.

2.2 Sample Selection

A Random sample survey was done in the Bhowapur and Kaushambi slum areas.

The population sample of the area was randomly chosen according to the economic strata of the area, living condition, area condition, problem infested area.

A cluster of Twelve Enumerators strategically chosen for the targeted area.

Enumerators consisted of six boys and six girls' .The enumerators were appointed in a team of two, each team has one boy and girl.

Each team consists boy & girl because it help us in understanding the exact answers from both male & female villagers, keeping in mind their comfort level while answering the questions about sanitation and safe water .

2.3 Survey Procedure

Survey was conducted on 24th & 25th March 2012, in Bhowapur, Kaushambi. Ghaziabad Uttar Pradesh .Process and questionnaire was defined in a manner to reach to maximum number of population in a two day event. The team was divided in 6 teams. Each team consisting of two members' one boy and girl keeping in mind their comfort level while answering the questions about sanitation and safe water. One supervisor was there to monitor the entire process and activity, to help the team facing with any issue, problems during the survey. Supervisor called upon all the team in a centre place in the centre of the bhowapur village in the market and allocated each team a different street, each team was allocated with 30 houses to cover in a day, which leads to covering of 180 houses in a day by all six team. Each team have to target only families and not individuals, so that we can capture the insight of each family which consists of 4 to five members in there household.

Each team possessed with questionnaire, ballpens, clipboard, hand wash pamphlet, community & house cleanliness poster and camera to cover the event. We provided special volunteers Identification Cards so that they can easily prove there identity and make it people friendly survey. Survey started at 10 AM in the morning and went up to 4 hours.

Each team went and covered 30 houses in a day and conversed with the general public in the local dialect. Team also pasted the cleanliness posters in the houses of the area resident's, in the lanes, roads and local shops such as pan wallah, grocery store, cross road etc, also distribute hand wash poster to local people.

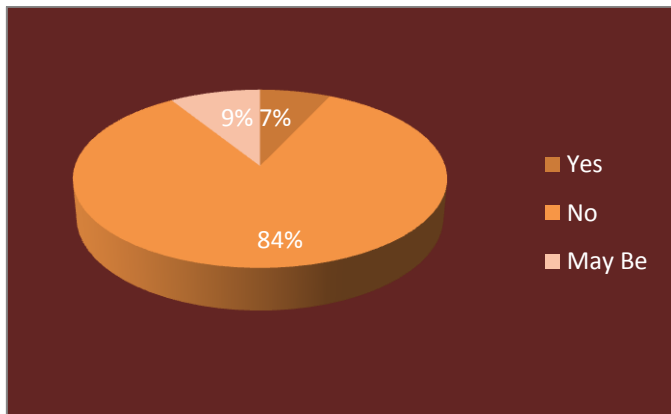
3. Survey Findings

Survey was conducted according to the prescribed questions in the questionnaire.

Survey Findings:

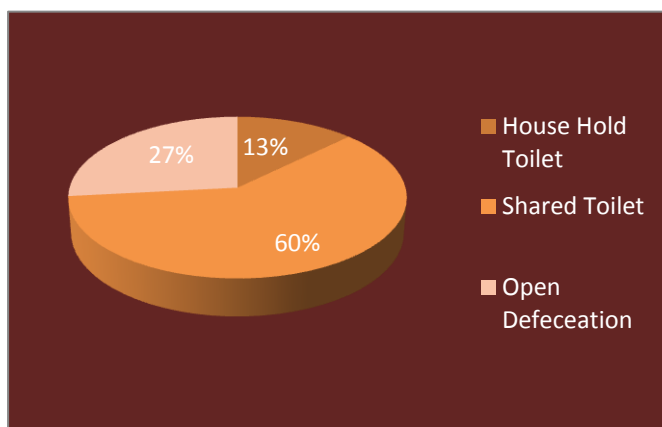
- **Toilet Condition**
- **Drinking Water**
- **Sanitation Condition**

Q 1. Do you know about any government schemes on safe drinking water and sanitation?



“ 84% of people still don't know about any Govt. schemes running in the area.9% of people say may be running .Only 7% of people said that they know about the Govt schemes running in the area”

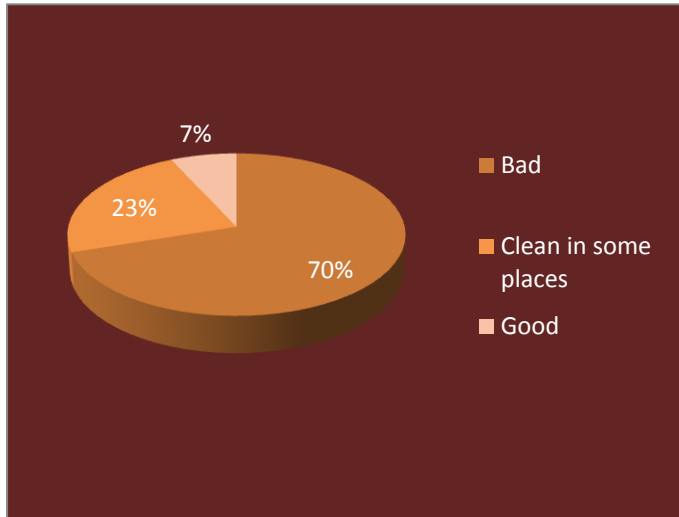
Q 2. Where do you normally defecate?



About 60 % people uses shared toilets and still 27 % of the population go outside for defecation ,which clearly marks a big question mark on the cleanliness.

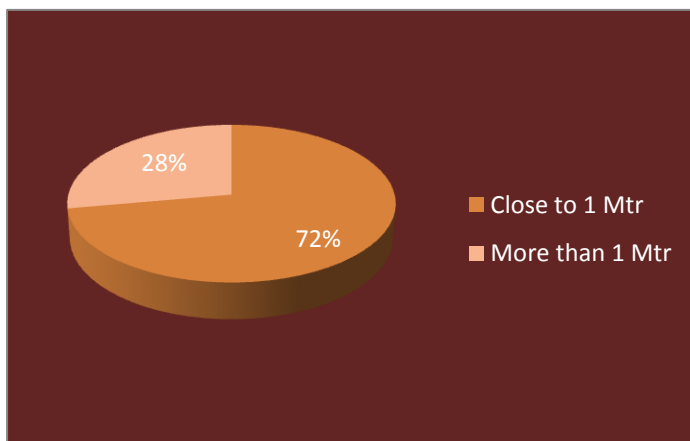


Q 3. What is the cleanliness condition of your village?



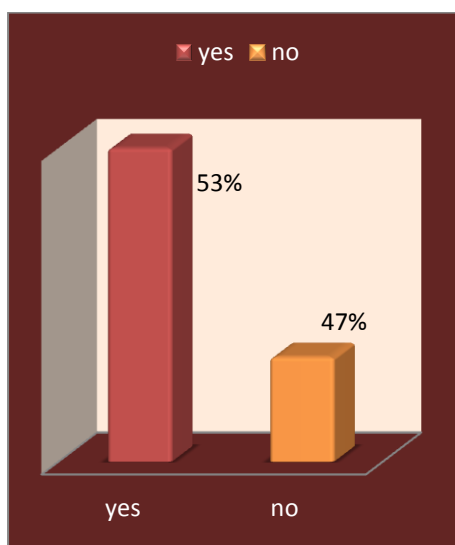
“70 % people told us that there area is in extremely bad condition and only 23 % see cleanliness in some places with 7 % of the surveyed population does not find anything bad about cleanliness”

Q4. What is the distance of the toilet from the drinking water storage?



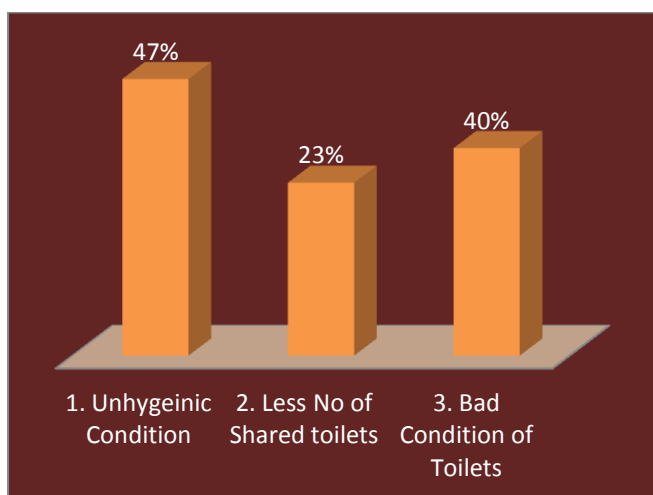
“72 % people told us that the distance of drinking water storage is close to 1 mtr from their toilets, 28 % says they make a proper distance”

Q5. In addition to using toilets does your family also defecates in the open?

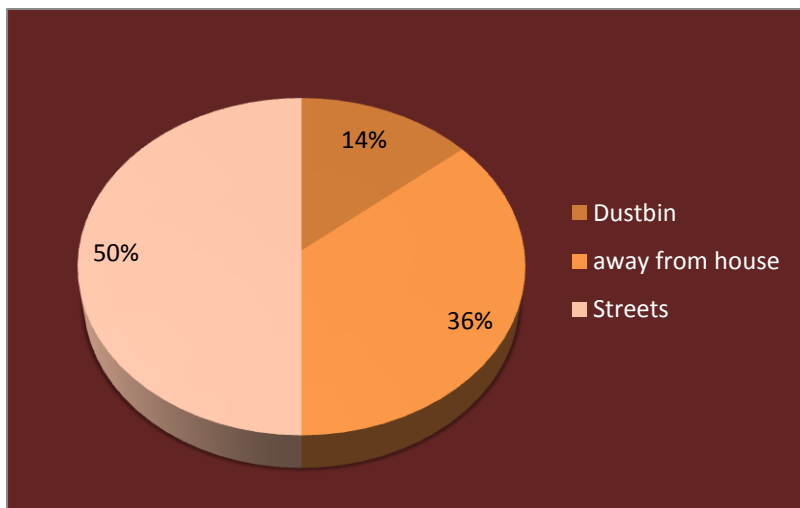


“ In urban slum areas even today close to 50 % people go out to defecate and biggest reason they gave for this is the unhygienic condition of the toilets and the bad condition in which toilets are running. These factors encourages people to go out and defecate”

If Yes then what are the reasons?

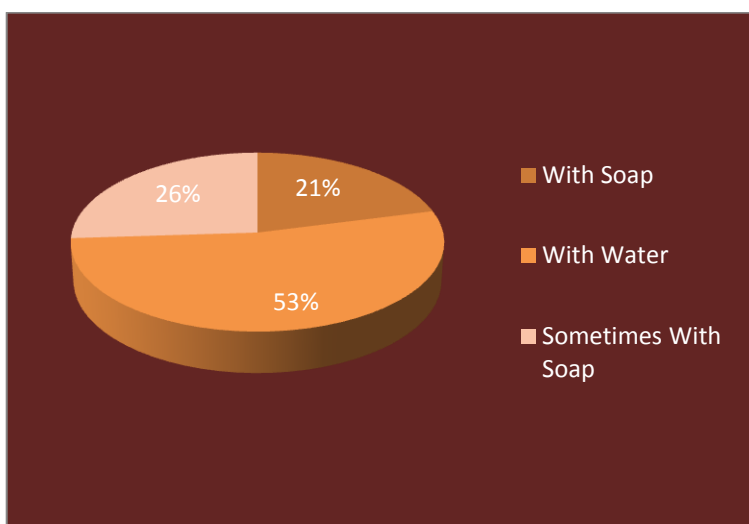


Q6. Where do you dispose off your garbage?



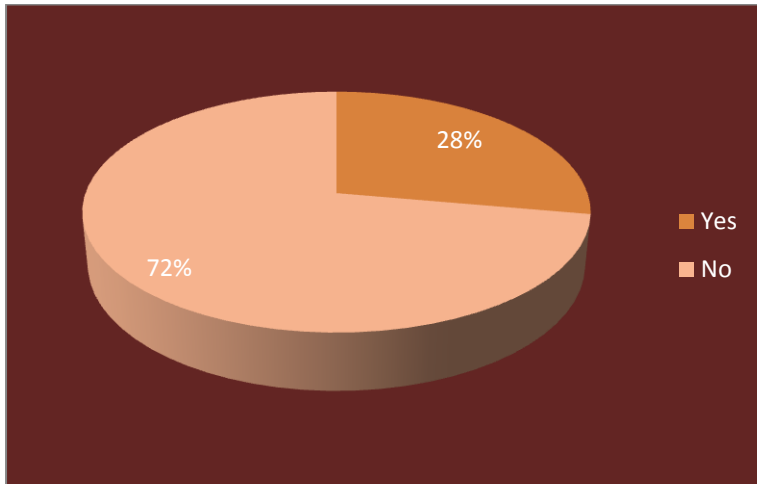
“ Half of the population throw the garbage on the streets and do not know the proper procedure for disposal of garbage , and 36 % people go out to throw the garbage in open areas outside homes , lack of knowledge and awareness playing the foul game here”

Q7. How do you clean your hands?



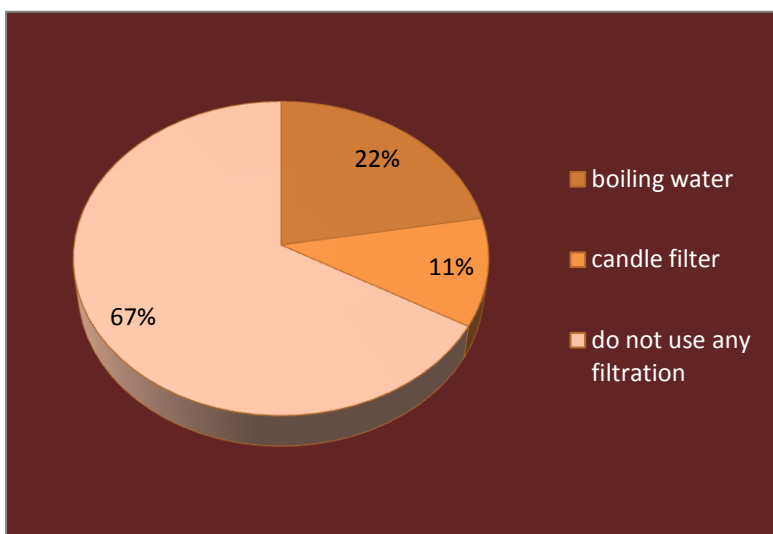
“ More than half of the population surveyed do not know the right way to wash their hands and wash only with water , only 21% of the population surveyed were using soaps to wash their hands and 26% sometimes washes their hands with soap “

Q8. Do you wash your hands with soap before and after a meal?



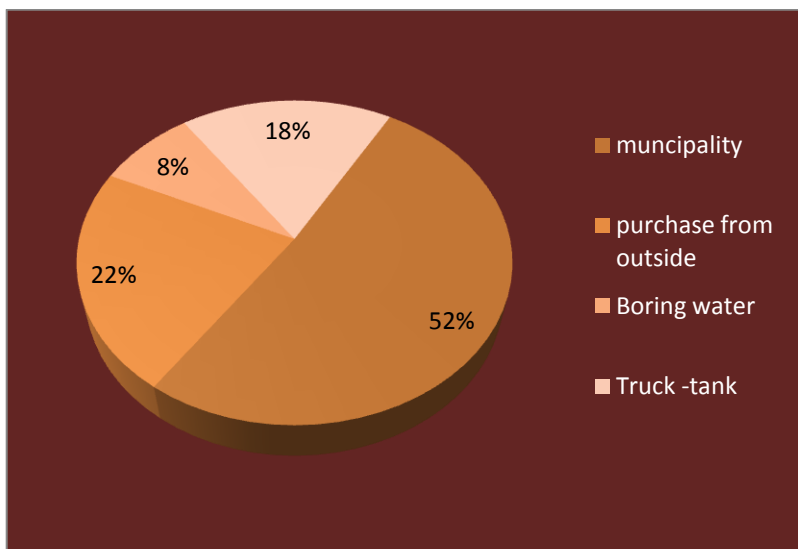
“Sad to know that 72% people do not wash their hands with soap before and after meals which leads to many diseases affecting their lives. A major lack of awareness regarding good health practices creating lots of problems in their daily life “

Q9. What kind of water filtration process you use for drinking water?



“ 67% of surveyed population drink water directly from the source without passing it through any filtration process, they are not even using boiled water only 22% are doing so, whereas 11% are using candle filters .”

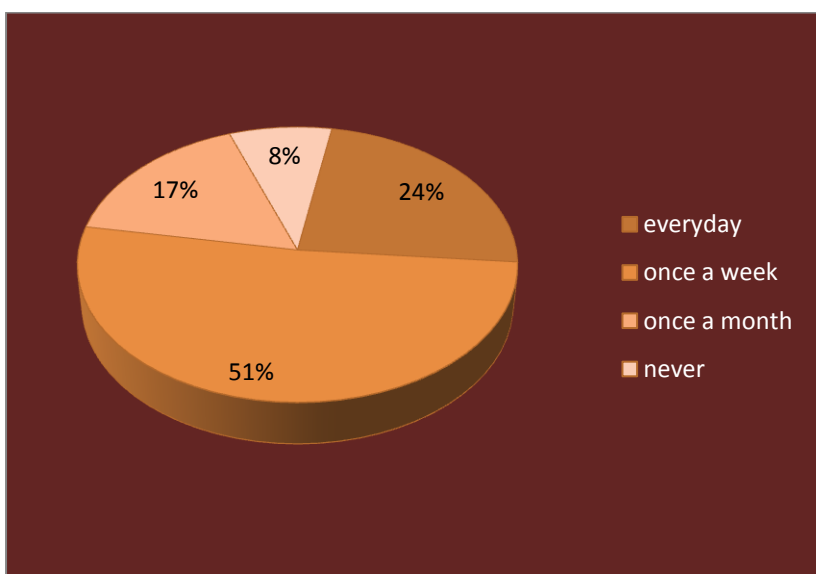
Q10. What is your source of drinking water?



“22 % people buying water from outside in the slum area , although 52 % people are not purchasing the water but they are directly drinking from the source, lack of knowledge and awareness regarding the various water filter processes is leading to water borne diseases”

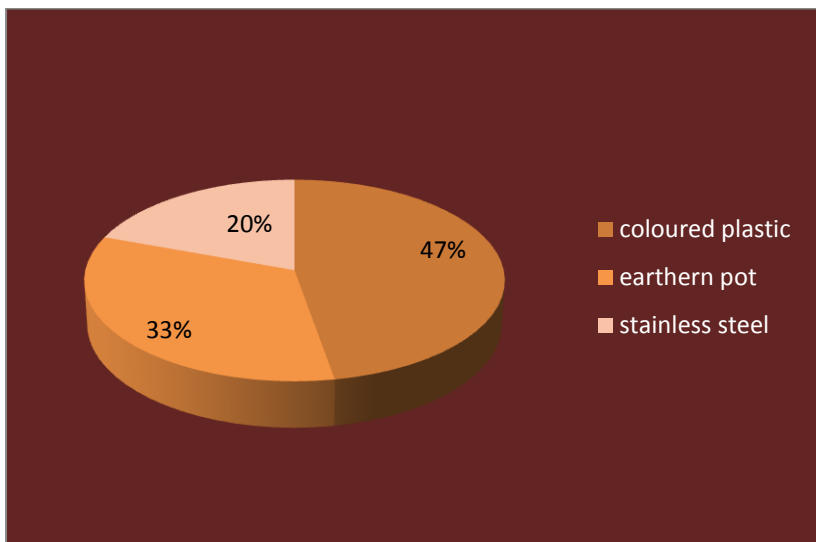


Q11. How often do you clean your drinking water storage utensil?



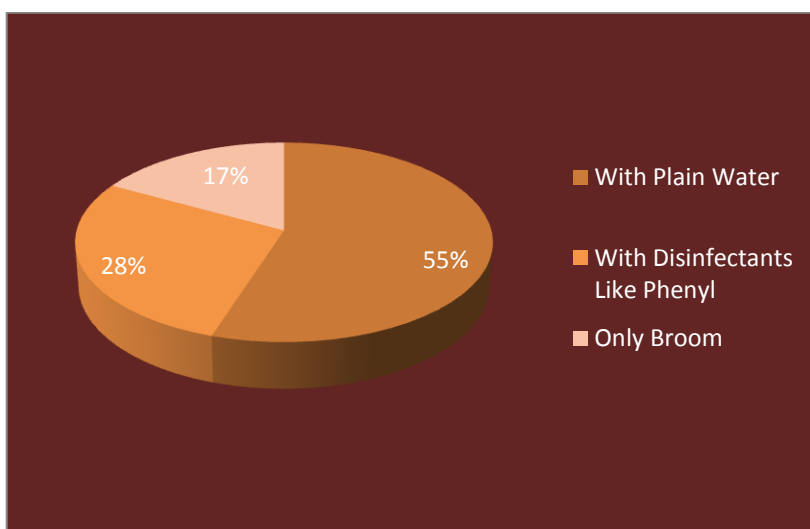
A startling revelation came after surveying the area, more than half of the families clean there drinking water storage utensils once in a month and only 24 % are cleaning it every day , whereas 8 % do not know when they had cleaned there utensils

Q12. What is the make of your drinking water storage utensil?



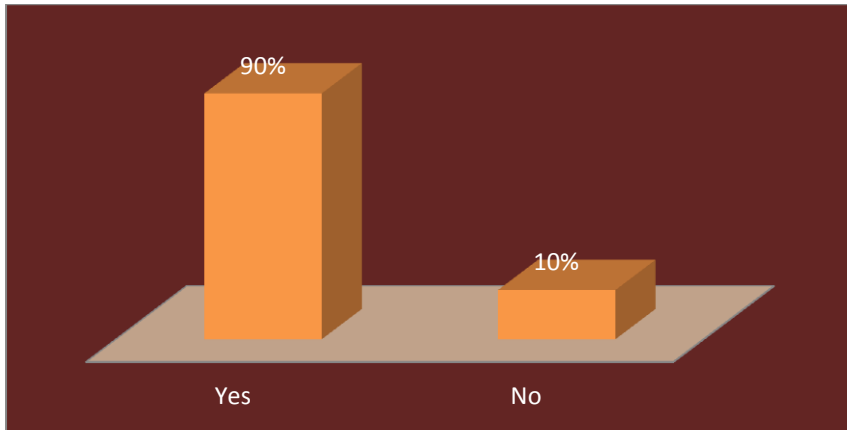
Found out that about 47 % people do not know that using coloured plastic container for drinking water causes chemicals to enter in there water leading to major health problems , in spite of cheap earthen pots available in the market only 33 % are using the same

Q13. How do you clean your House flooring?



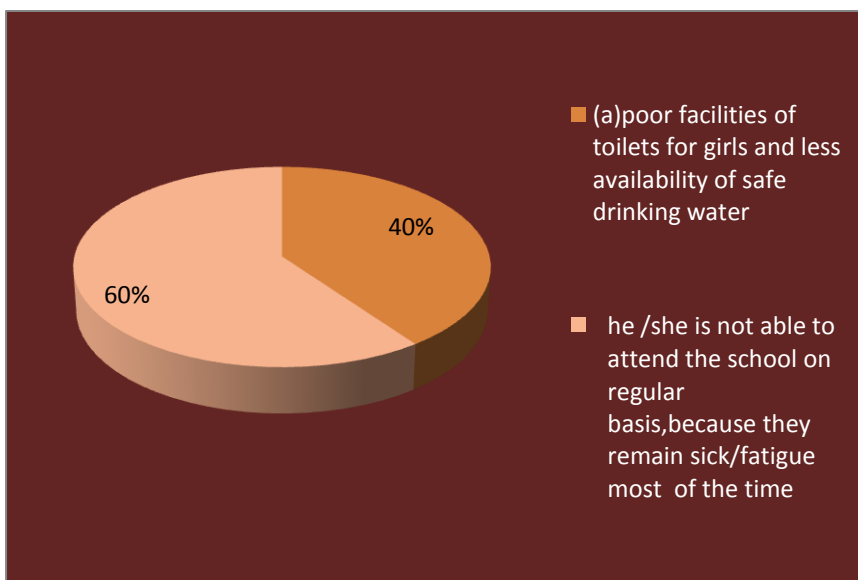
“About 55 % people do not use any disinfectant like phenyl etc., causing germs and bacteria to enter directly into the food chain, unclean floor can make children and members of family infected by diseases”

Q14. Does your children education is affected by the issues, like unsafe drinking water and unhygienic sanitation facilities?



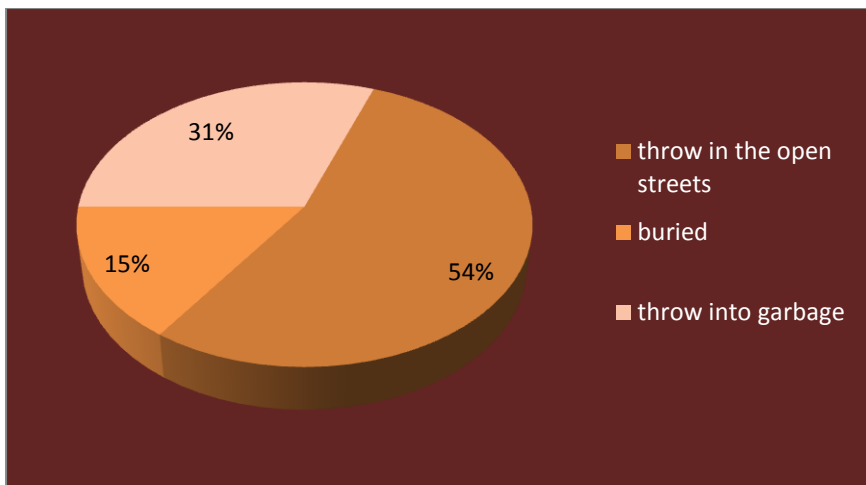
“90 % people has said that there children education is affecting by the unhygienic facilities and unsafe drinking water, they are not going to schools because of this and related problems, they become ill and some times got late to school and go far off places to get drinking water and for nature’s call”

If yes: - Reason



“As mentioned above 40 % do not go to school just because they remain sick and ill due to unhealthy practices, , 60 % of the children mostly girls told us that they do not go to school because of bad toilet facilities in school , un hygienic and bad condition of toilets led them to go to far off places for nature’s call”

Q15 What was done to dispose the Stool of children?



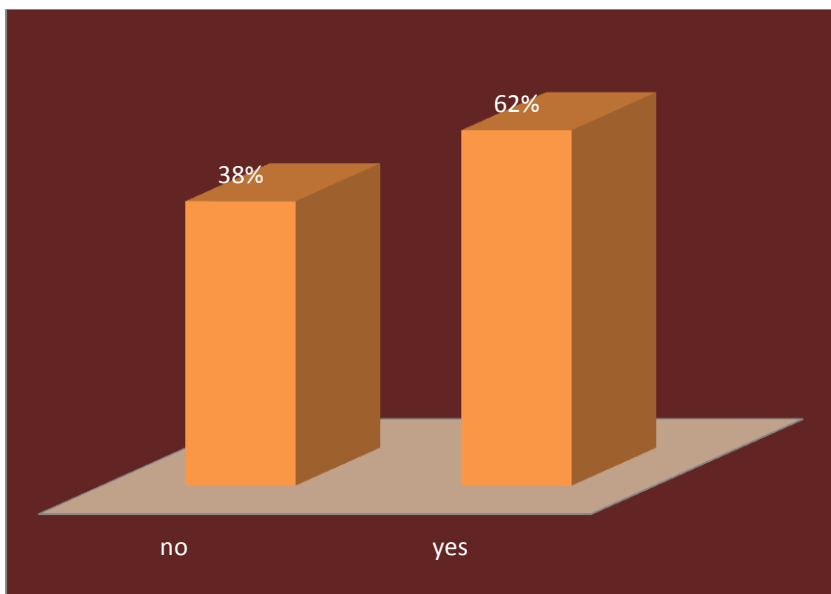
About 54% of population throw the stool of children and infants on the streets which causes their unhygienic condition and helps in growing germs and bacteria, 15% of people buried the stools which can mix up with the ground water and local taps resulting in growing germs in drinking water, only 31% of population uses correct way of disposing the stool by throwing into the garbage .

Q16. Do you use same water storage utensil for:-

Bathing /Toilet

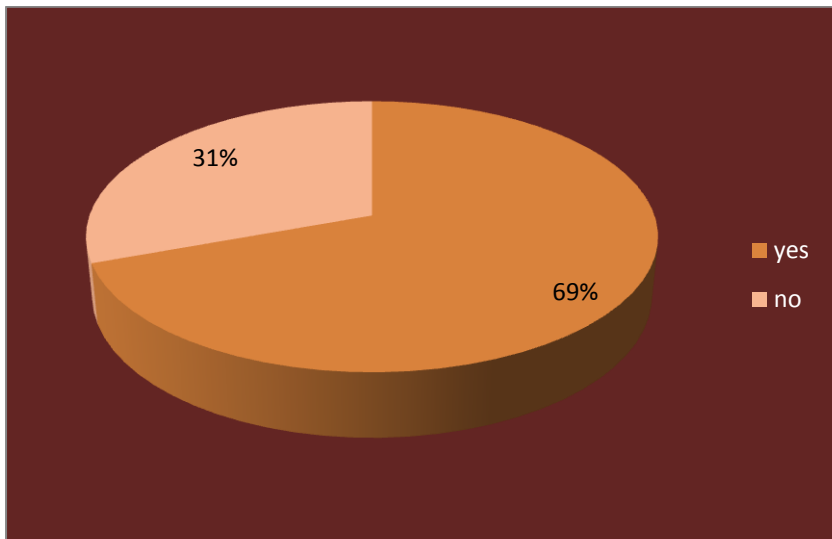
Laundry/Washing

Cooking/Drinking



More than half of the population, about 62% uses the same water storage utensil for drinking ,bathing , toilet , washing and cooking paving the safe way for the germs to enter the human body which can leads to many hazardous diseases ,and only 38% of people said that they uses different storage utensil for different purposes .

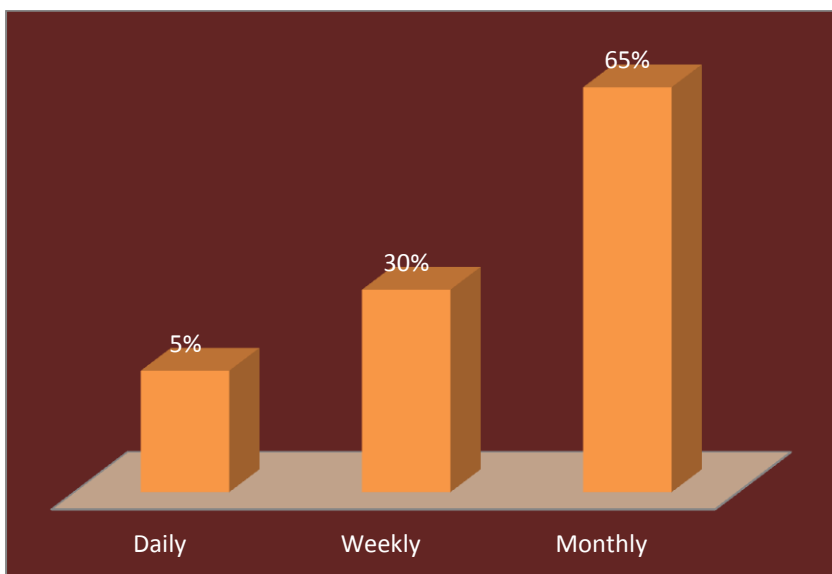
Q17. Are there any dustbins in your nearby streets or home?



About 69% of people told that there are no dustbins or garbage disposal bins in their homes or nearby streets.

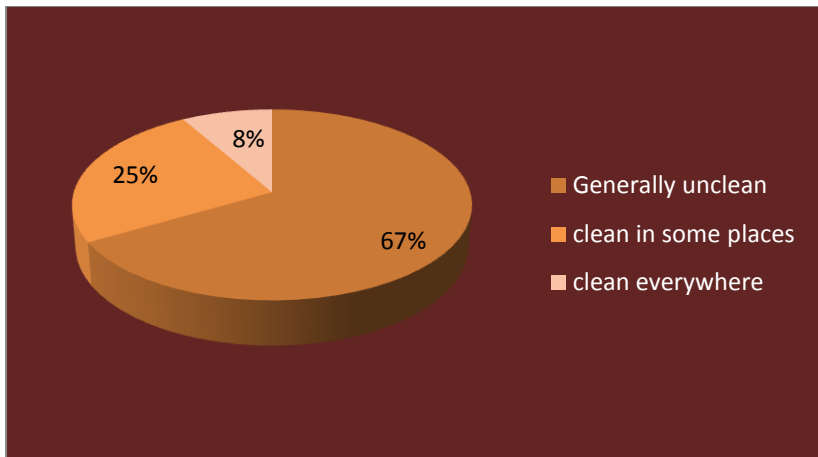
Only 31% have got their own dustbins to throw the garbage.

Q18. How often your Garbage collection van visits?



According to 65% of population in the village the garbage collection van comes once in a Month , about 30% told that there garbage is picked in a week and only 5% people agrees that the garbage van comes daily to collect the waste .

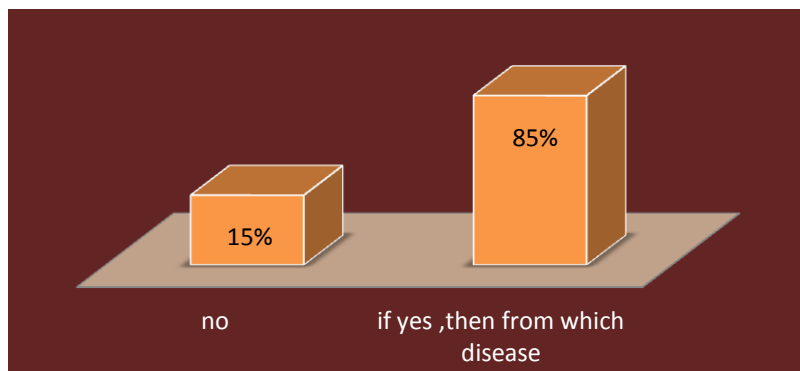
Q19. What is the overall condition of water & sanitation in your locality?



More than half , about 67% of population agrees that Water and sanitation condition is generally unclean . 25% of people said that their locality is clean in some places.

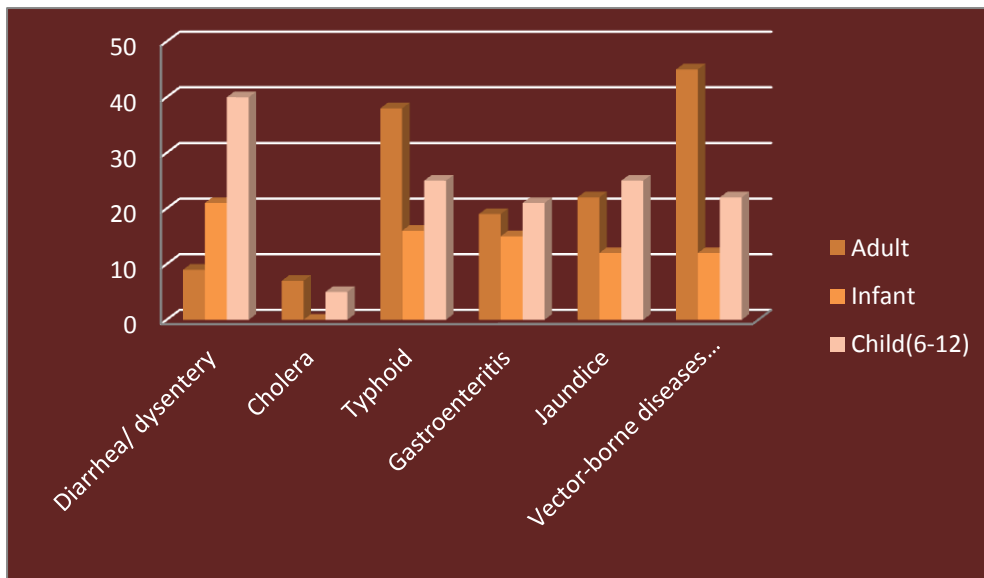
Merely 8% of the population deem that their locality is clean everywhere.

Q20. In the last one year, has anybody in your house affected by water borne disease?



In a very appalling result about 85% of population agrees that at least one person whether its a child , infant or an adult from every home is a victim of the diseases caused by pitiable sanitation condition and unsafe drinking water and still increasing at a very alarming rate which needs to be taken care of immediately .

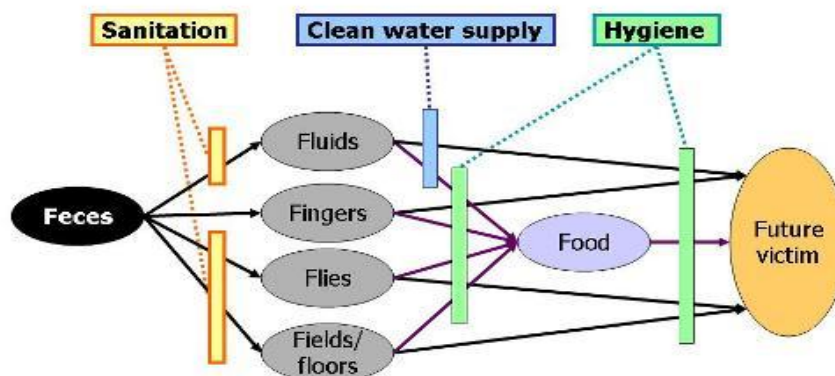
Lone 15% of people suppose that no one in their family is fall ill due to unsafe drinking water and poor sanitation conditions.



From the above outcome we can conclude that due to poor sanitation conditions in the area the percentage of illness among child and infants is higher as they can come easily under the clutches of diseases because of their low immunity control, with malaria, dengue and chikungunia increasing, measures should be taken immediately to stop its spread.

Due to Unsafe Drinking Water, people are easily falling in the hands of diseases from the past one year as we can see it in the graph. Adults and children are falling sick mostly due to vector born disease like malaria, dengue, chikungunia etc.

Routes of fecal disease transmission and protective barriers



With the help of "F" Diagram we can say that "Sanitation, Clean Water Supply and Proper Hygiene" are the three protective barriers by which we can help in stopping the Spread of Diseases and thereby protecting the future victim.

4. Recommendations

1. Improving the Quality of Safe Drinking Water and its access by the following approaches where Possible:

- (a). To provide knowledge and equipments with water filter techniques.
- (b). Protect and upgrade all the open water sources
- (c). To provide safe water Storage utensils for the families who cannot afford.

2. Educate the villagers on the methods of water treatment to make it safe for drinking.

(a) In areas where there are insufficient protected water sources (or in the event of pump break-downs), the treatment of drinking water should be taught. Either boiling or filtering and treating with chlorine bleach should be an integral part of the safe water training program.

(b) Additionally, the regular cleaning of water storage containers and the promotion of use of lid to minimize opportunities to contaminate drinking water should be part of a safe drinking water program.

3. Promote proper sanitation through the following approaches where possible:

(a). Provide materials for the construction of sanitary facilities which most households cannot afford.

(b). Conduct Participatory Health and Hygiene Education workshops in all Communities to achieve following

- Educate and articulate on the importance of sanitary facilities.
- Educate and promote safe drinking water practices .
- Educate and promote the proper techniques for washing hands.
- Eradicate Manual Scavenging practices.

(c). Organize workshops, training programs and awareness stage shows , dramas to create awareness regarding healthy sanitation practices, ways to improve the community and house cleanliness.

(d). Using IEC and ICT driven tools to promote clean water supplies , ways to obtain clean water practices , healthy sanitation practices, ways to keep clean the community and home, ways to obtain healthy lifestyle, ways to protect the life from malaria and other water borne diseases.

4. Community awareness on hygiene through the following:

(a). Prepare and distribute hygiene awareness teaching material (e.g., manuals, training aids, and strategies of intervention).

(b). Recruit and train peer health educators for the sustainability of the Program.

(c). Develop a training program that targets children (school going age) and run workshops to impart water and sanitation knowledge and Practice.

(d). Develop and distribute material with messages that promote hygiene(Such as pamphlets, t-shirts, posters, local drama etc).

(e). Educate caregivers and food handlers on the importance of hand Washing

(f). Educate on proper storage technique of water in the household

(g).If potable water and sanitation activities are executed in an area, they should be fully integrated so that the people understand the links between unprotected water sources, disease like diarrhoea , and importance of hand-washing.

We Need Your Support!



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