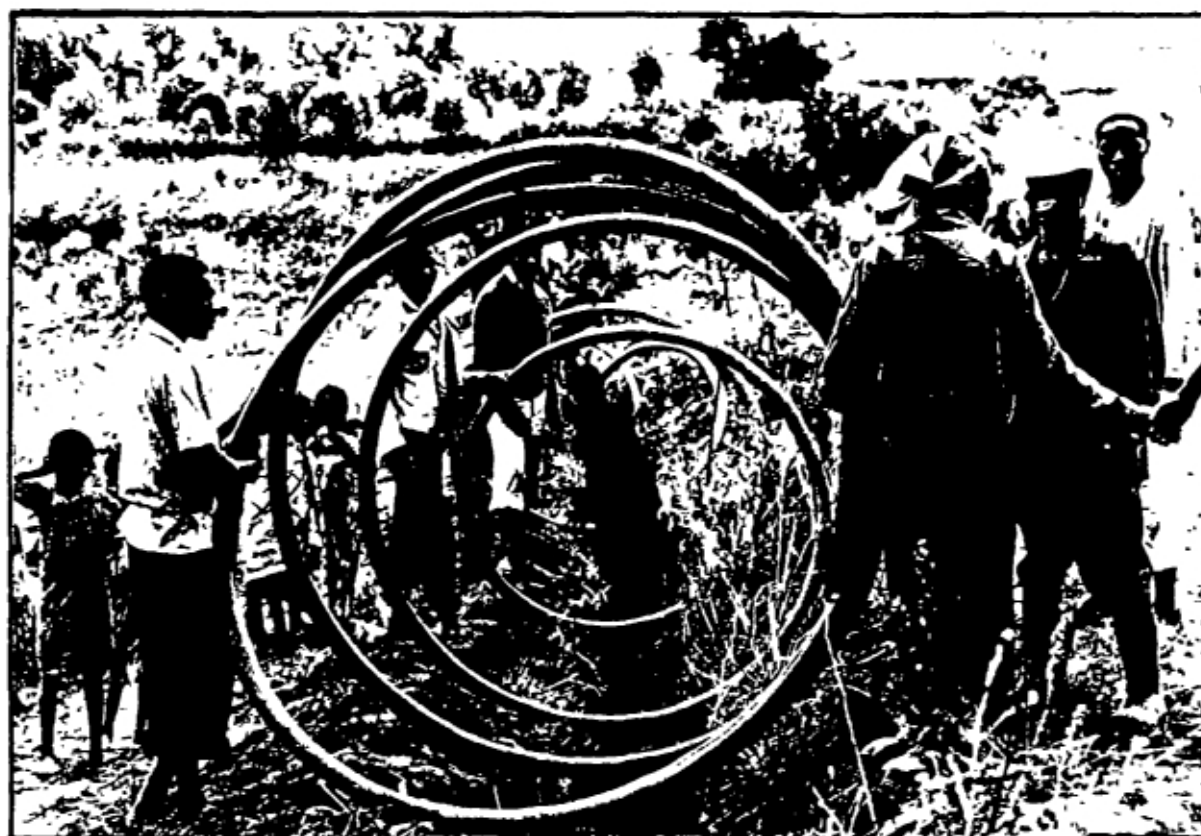


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TAN 055 REVIEW OF THE COMMUNITY PARTICIPATION

AND HEALTH EDUCATION PROJECTS IN RUKWA AND KIGOMA



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## ABBREVIATIONS

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Afya	-	Ministry of Health
CDO	-	Community Development Officer
CDT	-	Community Development Technician
CP	-	Community Participation
CPHEP	-	Community Participation and Health Education Project
DED	-	District Executive Director
DP	-	Domestic Points
DPO	-	District Planning Officer
ELIMU	-	Ministry of Education
HA	-	Health Assistant
HE	-	Health Education
ILO	-	International Labour Officer
Maendelo	-	Ministry of Community, Development, Culture, Youth and Sports
Maji	-	Ministry of Water
Kifipa	-	Local language of Wafipa
MCH	-	Maternal and Child Health Care
MCHA	-	Maternal and Child Health Care Assistant
NCA	-	Norwegian Church Aid
NORAD	-	Norwegian Agency for International Development
O&M	-	Operations and Maintenance
PHC	-	Primary Health Care
PP&P	-	Project Planning and Preparation Department
RCDO	-	Regional Community Development Officer
REO	-	Regional Educational Officer
RHO	-	Regional Health Officer
RMA	-	Regional Medical Assistant
RMO	-	Regional Medical Officer
RPO	-	Regional Planning Officer
RUDEP	-	Rural Development Programme (Rukwa)
RWE	-	Regional Water Engineer
TBA	-	Traditional Birth Attendant
TAN 055	-	
TAN 060	-	
UWT	-	Umoja wa Wanawake wa Tanzania (Union of Tanzanian Women)
VWC	-	Village Water Committee
VHW	-	Village Health Worker







### ACKNOWLEDGEMENT

Throughout the fieldwork in Rukwa, the mission was received in an extremely open and hospitable manner. The resulting discussions were useful to the mission and, we hope, to the project staff in Kigoma and Rukwa. The technical infrastructure provided for us was more than adequate. Last, but not least, our thanks to the Sumbawanga compound generator which was kept running on overtime for the mission, and without which, the printing of this report would not have been possible.

### SUMMARY

The water supply programmes in Rukwa and Kigoma (TAN 055) were initiated following the completion of the Water Master Plan (WMP) in 1980. During the initial years, separate implementation units headed by expatriate staff were responsible for a major part of the implementation work. From 1985 onwards, these implementation units have been integrated into the organisations of the regional water engineers (RWE) in the two regions. In 1985, a community participation and health education (CPHE) team was set up in RWE's office under an agreement between the Norwegian Church Aid (NCA) and NORAD. In Kigoma a CPHE team under the project planning and preparation section was set up September 1986, mainly with Tanzanian staff on secondment from different ministries.

The present report presents a review of the activities of the CPHE team in Rukwa since 1985, and recommendations for the organisation of future activities in the two regions. Appendix 1, Terms of Reference for the Mission, refers.

In general it is the opinion of the mission, that the trend towards integration of project activities in the existing administrative structure in Tanzania is a healthy one. The mission has also taken notice of the current Tanzanian decentralisation policy which will eventually represent a shift of responsibility for implementation of development projects from regional to district level. It was also noted that a decision has been made to integrate the Water Supply Programme (TAN 055) into the Rural Development Programme (RUDEP, TAN 060), after January, 1989.

In Kigoma, the mission assumes that a period of consolidation for the newly established CPHE-unit, will be necessary, allowing time for methods and procedures to be developed and tested, and modes of cooperation and integration to be thought out. It is the opinion of the mission that this period should not exceed 2 years, after which the responsibility for CP and HE should be transferred to Maendeleo and Afya, respectively, with Maendeleo



retaining the coordination of the work, while the necessary support in terms of finances, material and expatriate personnel is accommodated within the project budget.

In Rukwa, the mission was impressed by the work already done by the CPHE project, the quality of the staff, both Tanzanian and expatriate, and their dedication to the work. The mission was reassured of the importance of the work done by the CPHE team by all parties involved, in preparing the ground for implementation, taking over, operation and maintenance of water supplies and sanitary facilities.

In the future, the CPHE project should be gradually integrated into the relevant local departments along with the gradual shift of responsibility for day-to-day activities from regional to district level. This process should take place in two stages:

1. During 1987-88 modes of integration and decentralisation should be thought out and developed by the CPHE team. Links to other departments than Maji should be established, there should be an increased utilization of the organisation and resources of other ministries. Support should be given to relevant activities within other departments, for instance the village health worker programme. There should be a strengthening of district CPHE teams, in order for them to take over most of the day-to-day activities.

From 1989 onwards, an integration of the CPHE project should be completed by the establishment of a CP coordination unit within Maendeleo at regional level. The unit will be responsible for the coordination, development of materials, training and provision of resources. Both CP and HE activities should be organised and implemented at district level, through Maendeleo, and Afya, respectively, with the necessary support from the region.

The necessary support to Maendeleo and Afya should be provided for within TAN 060, RUDEP, after TAN 055 has been integrated into RUDEP in 1989 as foreseen. It will thereby be possible to extend CP and HE services to other departments in the region in need for such services in connection with development projects.

Towards this end, the mission has proposed that NCA should prepare a plan of operation for future activities from 1989 onwards. The document should be presented to the Tanzanian Authorities and NORAD by the end of 1987 as a basis for further negotiations.



## CHAPTER 1.

### GENERAL ASSUMPTIONS AND OBSERVATIONS MADE BY THE MISSION

1. Development programmes should as far as possible be integrated within the existing administrative structures, and be based upon the utilisation of existing resources and capacities in the relevant departments.
2. Community participation and health education involve activities of entirely different nature. Although it may often be convenient to combine these activities in connection with the implementation of different development projects, it should be noted that in Tanzania, mobilization for community participation in development projects and health education, are the responsibilities of different ministries.
3. As an ad hoc solution to an administrative problem, it might be useful to establish a combined CPHE unit. It is, however, not necessarily the most appropriate solution in the long run, in particular because external assistance will eventually be phased out and the activities will have to be incorporated within and supported by, the existing official organisations.
4. When a development project is decentralized from regional to district level, it will probably not be feasible to promote CP and HE by means of a region-based CPHE-unit, but rather rely on existing structures and resources at district, division, ward and village level, where these services fall under different departments. At some stage this will necessitate a dialogue with the Ministry of Local Government.
5. The current decentralization policy introduced by the Tanzanian Government will have far reaching consequences for the design of individual development projects. In the case of the water supply projects in Kigoma and Rukwa regions, at present all implementation is initiated at regional level. In the future, however, assuming that the strengthening of local government gains momentum, the present organisational solutions will have to be revised. The first step towards this end has already been taken by the recruitment of an expatriate assistant water engineer to most of the districts





in the two regions. The decentralization perspective has been important in the present review of CP and HE activities.

6. Full-time secondment of officers from other ministries/agencies may leave undesirable gaps in the parent ministry, thus hampering the integration of that ministry in CP and HE work, as well as severing the link between the seconded person and the parent ministry if the secondment lasts for a long time. This defeats the desired integration of agencies and the division of labour and functions between them.
7. Development of water supplies and sanitary facilities in local communities should be guided by the needs as perceived by the people themselves, and their ability and willingness to participate in, and contribute to, the development. Since this is of fundamental importance, the identification, design and implementation should be supervised also by that part of the implementing agency which is responsible for community participation and health education in cooperation with those responsible for the technical implementation. On no account should such supervision be left solely to the technical personnel.
8. Water and sanitation projects affect women's activities much more directly than those of men under the prevailing gender related division of labour. Active involvement of women at various levels is a prerequisite for the success of such projects. Involvement of women should start right at the coordination and planning stage and continue throughout the remaining stages.
9. Water supply, sanitation facilities and health education are complementary activities in order to achieve the stated goals of water programmes, and should be undertaken simultaneously.



KIGOMA  
CHAPTER 2.

THE ESTABLISHMENT OF A CPHE-UNIT IN KIGOMA

2.1 FINDINGS

The mission, having only two days to spend in Kigoma, was faced with the fact that a CPHE unit had recently been formed, as a sub-section under PP&P within the RWEs department, and had barely begun to function, without its full projected complement of staff. The present unit consists of the following staff:

- 1 CDO seconded from Maendeleo (working part-time)
- 1 Community Health Officer seconded from Afya
- 1 Assistant Water Engineer seconded from Maji
- 1 Locally employed expatriate with experience in mass communication.

Local personnel assigned to specific tasks on short-term contracts might be recruited as appropriate, (e.g. for material production).

Of the two Tanzanian staff already working within the CPHE unit, one was available only on a part-time basis. There was no woman within the unit. It was not clear when either of these two situations would be rectified. The Unit had, however, put considerable thought into the planning of the scope of their future activities, and were thus able to hold active discussions with the mission.

Maendeleo is responsible for community development, involving many fields. It thus has an obligation to assist other ministries in the execution of projects involving village participation. Their proposed structure is such that it is natural to draw them into construction of sanitary facilities (CDTs at district level, and building brigades at village level), the mobilization of labour for construction of water schemes, nutrition and child care, and additional training for Maji technical staff at all levels.



## 2.2 CONCLUSIONS AND RECOMMENDATIONS

Based on the brief visit and the assumptions and observations mentioned above, the review mission has reached the following conclusions and recommendations:

### Conclusions:

1. The CPHE unit which is now established within Maji at regional level, should be seen as an ad hoc task force for strengthening community participation and health education in the water and sanitation programme in Kigoma.
2. The main task for the CPHE Unit in the initial phase should be to:
  - familiarize itself with activities and administrative set-ups in other, similar water programmes in Tanzania.
  - undertake research into the special needs and problems of women, their experience (if any) with water projects and their expectations, in villages affected by the programme.
  - investigate resources for CP and HE materials and procedures within other existing agencies in Kigoma (Maendeleo, Afya, Elimu and UWT).
  - prepare procedures and material for use in CP activities connected with construction, rehabilitation, operation and maintenance of water supply schemes, as well as with health education activities.
  - test and modify procedures and material where necessary.
  - close contact should be established with the CPHE unit in Rukwa. A study tour to Sumbawanga to enable the Kigoma unit to participate in the regular activities of the CPHE - Rukwa should be arranged. Regular exchange of information and experience should be secured through meetings every 6 months.
3. In a more long-term perspective, a planning, research, service and coordination unit for CP and HE should be located within Maendeleo.
4. Considering the activity level expected in 1988, it is, in the opinion of the review mission, necessary to strengthen the overall guidance of the project, e.g. through the establishment of an interministerial regional steering committee. One of the priority tasks for such a committee should be to ensure that community participation is included from the very start of the new projects along the lines indicated above. Another important function will be to ensure cooperation and



support to the projects from other ministries at different levels.

Recommendations:

1. The CPHE unit should be strengthened through the inclusion of a woman with some experience in community participation and mobilisation, paid by Maji/NORAD, to ensure that women's interests are considered during the initiation of the projects.<sup>1</sup>
2. In the initial phase, the CPHE Unit is a sub-section within the PP&P section in the RWE. The job description for the head of the section will have to be updated to reflect the new responsibility, namely to ensure that community participation and health education is planned for and included as an integral part of all new development schemes.
3. Assuming an increase in the activities of the water and sanitation programme in Kigoma over the next two years, the CPHE unit should remain located within the RWEs office for at least the first year, but for no longer than 2 years.
4. After the establishment of a regional steering committee, the regional CPHE-unit should be transferred to Maendeleo with necessary support in terms of finances, material and expatriate personnel allocated from the project budget.
5. A dialogue should be initiated with Maendeleo at regional and central levels to determine what Technical Assistance will be necessary for the CPHE unit. This shall be included in the water programme personnel and equipment dispositions for the period after 1987.
6. Afya should be given the major responsibility for the preparation of HE materials and, as the VHW programme expands beyond the 24 villages which will have trained VHWs by the end of this year, the supervision of HE should be done through the VHWs.

<sup>1</sup> In appendix 4 are included some further suggestions for consideration of women's issues into the water programme including immediate cooperation with UWT.





### THE PRESENT STATUS OF THE CPHE PROJECT IN RUKWA

The mission spent 9 days in Rukwa, and had discussions with the CPHE team, Regional authorities, District authorities in Sumbawanga and Nkansi districts, UWT and RUDEP. The mission participated in a women's meeting and a village workshop organized by the CPHE in Myula village, and inspected water supplies and sanitary facilities under construction.<sup>2</sup>

The importance of the CPHEP was impressed upon the mission by all parties involved. The mission was impressed by the competence of the staff, both Tanzanian and expatriate, and the progress of the project and its achievements during the short period since it became operational in May, 1985.

<sup>2</sup> See appendix 5 and 6 for details of the women's meeting and the village workshop.



CHAPTER 3.  
COMMUNITY PARTICIPATION

3.1 FINDINGS

With the aim of involving the users in the implementation of the water programme, the CPHE unit uses a ten-step model of communication with the villagers. When a decision has been taken at regional and district levels to supply the village with water, meetings are held with the planning and technical departments within Maji, with the village leadership and resource persons in the village and a separate meeting with village women. Training of scheme attendants, DP attendants, pump caretakers and the members of the VWC, is the responsibility of the O&M section, and is being done in cooperation with the CPHE staff, synchronized with the progress of the technical implementation. The last step is the handing-over of the scheme to the village. So far 12 schemes have been formally handed over.

Topics that are discussed include location of the water points, paid/unpaid labour inputs into construction (ILO schemes use paid casual labour), payment of attendants/caretakers, maintenance and repairs.

The role of the villagers in siting and construction varies with the type of scheme, and when the CPHE team start work in a village which is having its scheme rehabilitated rather than a new scheme, the approach is modified. Problems have arisen in schemes where the villagers have put in time and labour and schemes have not been completed or are not functional.

Despite some problems it is our impression that the CP has been well integrated into the Maji work at regional level, and that obvious siting mistakes etc. have been avoided since the CPHE went into action.

District teams for the CP as well as the HE work have been established in Nkansi and Mpanda. The experience so far has been mixed. Problems with old schemes, logistics and part-time personnel at district level have had to be solved on an ad hoc basis. The DPO in Nkansi district was in some doubt about the role of his officers in the CPHE work. The DPO was quite interested in the work of the CPHE when it was



briefly explained to him, and seemed to see the possibilities for using this approach for other projects. The district Afya and Maendeleo staff felt that they were only utilized as observers, but this may be because the programme in Nkansi district is in the training phase.

As implementation moves into more distant villages the district teams will need logistical and other support to be able to function.

The CPHE has addressed itself to gender differences. This has been done by holding a separate women's meeting as one of the steps of communication, and by insisting that at least 50% of the VWC must be women. There is also an attempt to involve women as scheme attendants and DP attendants.

One venue that needs to be explored to a greater degree is sustained contact with the UWT at levels other than the village. The mission found the UWT eager to cooperate with CPHE activities.

The use of Kifipa during meetings appears to facilitate women's participation as they tend to be less familiar with Kiswahili than men. CPHE should also consider at least one other women's meeting before the handing over so as to obtain women's views on the completed scheme and issues arising out of use/misuse of DPs.

The mission noticed with some surprise that workshops were started with a common prayer. When asked, the villagers confirmed that this was not common practice in village meetings.

### 3.2 RECOMMENDATIONS

1. A plan for systematic strengthening of and support to district teams should be worked out, including the possible posting of one expatriate member of the CPHE team to a district for an extended period.
2. Kifipa should be used systematically in meetings with women.
3. There should be a greater attempt to inform the DEDs about the CPHE work in their area and its usefulness in the implementation of the water projects.
4. Prayer should not be included in village meetings and workshops unless specifically requested by the villagers.



## CHAPTER 4.

### THE HEALTH EDUCATION PROGRAMME

#### 4.1 FINDINGS

HE has often been found to function as an activity either in isolation or integrated into a PHC approach, organised and implemented by a Ministry of Health but not integrated into water programmes.

The aim of the CPHE has been to create a comprehensive and relevant HE programme which increases the felt need for clean water and improved sanitation facilities. It also aims to increase water consumption, avoiding re-pollution and assist the operation and maintenance of water and sanitation installations.

The HE programme touches each village over a period of approximately 6 months and consists of village workshops, and supervisory visits to the members of the VWC. Each topic in the programme (listed in appendix 7) is introduced either in a village workshop involving leading and active citizens (ten-cell leaders, TBAs, traditional healers and the members of the VWC), or in a meeting with the VWC members only. Each topic is then taken up again in a follow-up meeting with the members of the VWC. Audio-visual aids are used and distributed to the members of the VWC, which is also given a hand operated cassette player and cassettes. A report from a village workshop is included in appendix 6.

The CPHE team members from RWE plan and coordinate the programme. The implementation of the workshops are done by the CPHE team members and the Maendeleo and Afya staff at district or ward level. The follow-up of the HE programme will be done by the ward level staff who will be given bicycles by the CPHEP.

When the CPHEP moves into a new district, they form a "district team", i.e. ask for the cooperation of one member





from Maendeleo and Afya, as well as one member of the DWE's staff. These, and the staff at ward level, are trained in the communication techniques used by the CPHEP.

The CPHE team has been called upon to assist in villages where the response to the sanitation programme carried out by the RWE has been low, and has apparently had some success in the village visited by the mission (Myula).

Particular attention is paid to ensure the involvement of women into the programme. The training workshops concentrate on the women from the VWC to be coordinators of the follow-up training. Women participants at the preliminary training workshops were also expected to disseminate information regarding health and sanitation to their fellow women within their 10-cell units.

While the active involvement of women is commendable, it also poses a danger that the HE programme could become a "women's project". Heavy emphasis on women alone may lessen the cooperation of men in building and repairing latrines and other amenities (bath area, stand for drying dishes etc.)

According to the current division of labour at household level, these tasks are supposed to be performed by men. By making women solely responsible for conveying health education to other women, the previous role of men in building the necessary facilities could be neglected, leading to possible extra work for women.

#### 4.2 CONCLUSIONS AND RECOMMENDATIONS

##### Conclusions:

1. The method and content of workshops is well thought out and planned. There is a fair attempt to incorporate elements of local culture such as ngomas, plays and story-telling.
2. The flip-charts were well done and appropriate, and were enjoyed by the villagers, as were the handouts based on the flip-charts.
3. The CPHE has created an awareness within Maji at regional level that HE is a complex but necessary part of a primary water supply programme.
4. The implementation of the HE programme already attempts to ensure the participation of the staff from Maendeleo and Afya at district and ward level.



5. The language used in the health education programme is Kiswahili. From our observations at the workshop in Myula village, it appeared that the response was more lively when the participants were allowed to use Kifipa.

Recommendations:

1. More emphasis should be put on active involvement of the district and ward level personnel in the planning as well as the implementation of the workshops.
2. Kifipa should be used to a larger extent, particularly in separate women meetings.
3. More attention should be given to the gender issues referred to above.



## CHAPTER 5

### THE RELATIONSHIP BETWEEN WATER PROGRAMME AND VHW PROGRAMME

#### 5.1 GENERAL REMARKS

The training of Village Health Workers (VHW) is an important part of the national Tanzanian Primary Health Care (PHC) programme. In phase I, of the PHC programme, which started in 1983, 5 regions trained trainers of VHWs, and then began to select and train VHWs. Phase II which started in 1985 extended this to ten new regions, including both Kigoma and Rukwa.

Money has been provided from Afya at central level to train trainers, and finally, in mid-86, for training of the first VHWs in Kigoma and Rukwa. Afya at regional level in both regions do not know whether more funds will be forthcoming, or when. In both regions 48 people have been selected, one woman and one man from each of the first 24 pilot villages.

#### 5.2 CPHE AND PRIMARY HEALTH CARE (PHC) IN RUKWA

Points of contact with Afya at regional level:

The CPHE team in Rukwa have as one of their members a full time seconded health officer from Afya. In addition to this they have initiated discussions with Afya through the RMO and the RHO, regarding their points of contact and possible fields of cooperation. On the basis of these discussions they have come to the conclusion that out of the following 8 essential elements of PHC:

- 1) Health Education
- 2) Food supply and nutrition
- 3) Water and sanitation
- 4) MCH care
- 5) Immunisation
- 6) Prevention of endemic diseases
- 7) Treatment of common diseases
- 8) Provision of essential drugs;

only the last area is not touched upon in their HE work in the villages. They have therefore agreed that the CPHE unit and Afya at regional level should make half-yearly plans for concrete cooperation, to avoid duplicating efforts and to ensure that the resources of the CPHE unit can be used to aid Afya wherever appropriate.



### 5.3 CPHEP AND VILLAGE HEALTH WORKERS (VHW)

The main concern for the CPHEP has been to clarify the future utilisation of, and possible contributions to, the VHWS, as specified in the unit's original mandate/terms of reference.

In Rukwa Afya has planned the first phase as follows: Two VHWS selected by the village are given training 2-3 days every week at a nearby training centre for 6 months. Most of the training is practical, and done by the trainers who have been trained at district level. These can be RMA's, MCHA's or HA's, varying from district to district. The region has not had sufficient funds to train trainers at ward level, and in order to minimize the problems of how to reach villages directly on a regular basis from district headquarters, they have selected the first batch of VHW's from villages close to district headquarters.

The former CPHE coordinator took part in the course which trained trainers of VHWS, but the CPHE/Afya common planning has not been initiated, and the question of whether villages in the water programme could be included was not taken up.

It has now been agreed, however, that this should be taken into account in the next batch of VHWS to be trained. Unfortunately there is, for the present, no budget allocation within Afya to cover more training after the first batch which is due to start in October/November this year.

The training costs will be in the region of 8 - 10.000 TAS per VHW, i.e. up to 20.000 TAS per village depending on the geographical location.

The number of villages likely to be covered by the water programme in Rukwa in 1987 and 1988 is not too great for Afya to be able to cope with the training of VHWS in those villages, provided they get the necessary funds.

Criteria for selecting VHWS and members of VWCs:

The Rukwa water programme demands that each village select three men and three women as the village water committee. The women have to be active and able to speak up, but not involved in other committees; respected and preferably married. The general criteria for the selection of the VHWS is that they should be mature, permanently resident in the village, married and literate in Kiswahili. Apart from the literacy requirement the criteria coincide closely enough for the CPHE and the Afya to have agreed that where VHWS have been chosen one or both could become members of the VWC, and that they can attempt, when explaining to the village how to select their water committee, to get candidates who can later become VHWS.





#### 5.4 CONCLUSIONS AND RECOMMENDATIONS

The mission has reached the following conclusions and recommendations regarding the relationship between the water programme and the VHW programme in Rukwa region:

##### Conclusions:

1. Ensuring that there are training VHWs in all villages affected by the water programme is an important and necessary part of achieving the stated aim of the programme - to improve the health of the villagers.
2. The training of VHWs is just starting in Rukwa, and Afya are eager to cooperate with the CPHEP in the training of VHWs.
3. The situations are relatively similar in Rukwa and Kigoma, and there is a possibility of entering into concrete negotiations with Afya, Kigoma about VHW training there.

##### Recommendations:

1. Funds should be set aside in the budget of the water programme to cover VHW training in all affected villages in Rukwa.
2. Contact should be made by NORAD with Afya at central level to ascertain the planned allocations for further VHW training in Rukwa and Kigoma regions. If none have been allocated, NORAD should pay for the training. If insufficient funds have been allocated, NORAD should cover the additional funds.
3. The CPHEP and the Afya in Rukwa should work out budgets and work plans for the training of VHWs to start in July '87, in villages affected by the water programme. In addition to new/planned schemes, rehabilitated and already finished schemes should be included, not exceeding 25 villages for each course.
4. Afya in Kigoma should be asked if the same development is possible in Kigoma, with the aim of providing funds for VHW training in 1987/88.



## CHAPTER 6.

### RESEARCH ACTIVITIES WITHIN THE CPHE PROGRAMME

#### 6.1 FINDINGS

The agreement between NCA and NORAD specifies a responsibility for the CPHEP to develop methods of communication and mobilisation, and tools for monitoring and evaluation.

In general, the mission was impressed with what had been already achieved by the CPHE team in this area.

The following ongoing activities were reported:

- Baseline household survey in 8 villages/200 households, non-random samples.
- Health survey of children under 5 years in 5 villages.
- Division of labour survey in 3 villages.
- Time-use survey undertaken by grade 6 school-children in one village during one week.
- Residence survey on seasonal absence in 6 villages.
- Population survey - registration of migrations from/to villages.
- Study of a traditional healer in one village.

In addition, the following studies are being planned:

- The baseline household survey extended to 18-25 villages comprising 400-500 households. (Random sample).
- Follow-up on baseline household survey 1 and maybe 5 years after the introduction of improved water supply.
- Case studies of patients of traditional healers.
- Descriptive study of the implementation history in one village.

None of the data collected from the on-going and completed surveys had been processed and analyzed so far.

The purpose of undertaking an extensive baseline survey was explained by the team leader to be to measure the impact of the programme, if any, on health and the work load of women



and children. Unfortunately, no questions related the distance to the water supply were included in the questionnaire used.

The mission emphasized the view that to undertake extensive surveys based upon large, representative samples of households, does not justify the amount of resources needed, and stressed that these resources could probably be better utilized elsewhere.

The CPHE team was not aware of the NORAD-financed baseline study undertaken in Rukwa by IRA in connection with the WMP (1979), at the time when the present baseline study was designed.

It was also noted that the establishment of a monitoring and evaluation system for RUDEP projects is foreseen in the future, which might involve inputs not only from IRA, but also from the CPHEP.

## 6.2 CONCLUSIONS AND RECOMMENDATIONS

### Conclusions:

1. A baseline survey and subsequent follow-up surveys based upon large, representative samples for the purpose of measuring programme impact is not feasible.
2. If such a survey should be done, it should be on a limited scale, for the purpose of developing tools and methods for more in-depth, pragmatic studies/ monitoring and evaluation procedures, designed to improve the performance of the projects.
3. The existing data from the first 200 households should be processed and analyzed before the decision is made on whether or not another survey should be undertaken.
4. If the CPHEP decides to undertake more household surveys, they should, if possible:
  - be based upon the questionnaire designed by IRA
  - be undertaken in a limited sample of villages already covered by the IRA survey, with and without improved water supplies
  - use the data from the IRA survey as the baseline
5. The CPHEP will continue to be the active part vis-a-vis the water supply programme in initiating studies, disseminating information and making use of the findings.



Recommendations:

1. The first priority for research activities within the CPHEP should be to develop and introduce effective means to improve project performance.
2. The data from the baseline household survey should be processed and analyzed before further plans for such studies are made.
3. Contacts should be established with IRA in order to identify the needs for information of the CPHEP, and agree on a division of responsibilities between the CPHEP and IRA in a follow-up of the existing baseline study.
4. Contacts should be established with RUDEP in order to:
  - coordinate research needs and efforts
  - discuss how the Tanzanian capacity to monitor and evaluate development efforts in Rukwa should be strengthened.





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## CHAPTER 7.

### ORGANISATION OF THE CPHEP IN RUKWA

#### 7.1 GENERAL BACKGROUND

In the latest project document for the Water Supply Programme, (TAN 055), dated May 1986, it is stressed that:

- Under the present programme agreement, emphasis will be on strengthening MAJI at district level.
- TAN 055 should be integrated as a sub-project under RUDEP, January 1., 1989, is proposed as the earliest date for such an integration.

As of today, the decentralization of the programme, in line with the new Government policy, has been initiated by assigning Norwegian assistant water engineers to the three districts in Rukwa, and starting the recruitment of one expatriate engineer responsible for operation and maintenance. A second O&M engineer may be recruited during 1987.

The Rural Development Programme, RUDEP, is expected to expand into various technical sectors, i.e. irrigation, agricultural centres, rural roads, etc. A number of basic principles related to the organisation of RUDEP (TAN 060) is laid down in the latest project document, December 1984:

- The programme should be integrated into the local administrative structure in Rukwa.
- It should be based upon CP in planning and implementation of development projects.
- The RPO will be the coordinating agency, responsible for the planning of activities, while implementation will be done by the relevant departments at regional and district level.
- Initiatives for activities will be generated at all levels within the local government structure, and at regional level.

A consequence of these developments is that in future there will be a need for:

- Extending CP services into other sectors than water supply and sanitation.



- Decentralization of CP and HE activities in order to be able to follow up activities initiated by RUDEP in the different districts of Rukwa.

It is not practical to have a CPHE unit at regional level under the RWE delivering services to all other departments at regional and district level. Development should be guided by a process where needs, people's willingness and ability to participate and contribute are identified. This calls for organisational changes whereby technical services from the different ministries are delivered as inputs to a programme guided by a CP coordination unit rather than vice versa.

In the agreement between NORAD and NCA regarding the CPHE project in Rukwa, 1985, it is mentioned in paragraph 3.1:

In the implementation local governmental structures and local voluntary organisations will be used and cooperated with as much as possible. The aim should be that the governmental line agencies, local structures and organisations will take over, continue and further elaborate the work started by CPHE project. This aim should be kept in mind when recruiting and training staff.

## 7.2 ORGANISATIONAL CHANGES

The establishment of CP and HE as permanent features in the planning and implementation of development projects in Rukwa is seen as a process in three stages:

### Stage 1: (1984-86)

- establishment of a CPHE unit in RWE's office
- development of approaches to secure community participation in rural water supply
- establishment of HE as part of the water and sanitation project
- establishment of district CPHE teams.

### Stage 2: (1987-88)

- Systematic establishment of links of cooperation with other departments (Maendeleo, Afya, Elimu) including identification of existing activities and resources in these departments
- increased dialogue and cooperation with RUDEP
- increased utilization of the organization and resources of other departments in CP & HE activities (e.g. VHW, construction technicians) at all levels within the local government



- support to relevant activities within other departments instead of building up own capacity
- strengthening of the District teams to enable them to undertake most of the day-to-day activities.

Stage 3: (1989-)

- transfer of CP & HE activities to the relevant departments at regional and district level
- establishment of a CP coordination unit within Maendeleo, responsible for the cooperation between Maendeleo and other departments requiring assistance in community mobilization
- CP and HE activities to be generally organized and implemented from district level, with coordination and some specialized functions (e.g. production of teaching materials) and coordination of training remaining at regional level
- The CP coordination unit will be utilized by the RPO as communication support in the identification, mobilization and follow-up of local development activities.

### 7.3 CONCLUSIONS AND RECOMMENDATIONS

Conclusions:

1. In the period 1986-88 the water programme needs the CPHE project to continue its work along the present lines; refining the methods, material and procedures used in the HE and mobilization work.
2. In the same period there should be a continued gradual shift towards decentralisation of CP and HE activities, through systematic training of personell and support to district administrations.
3. After the integration of the water supply programme under the RUDEP umbrella, the CPHE project, in its new organisational set-up, can serve a broader spectre of projects initiated within the RUDEP context.
4. The NCA superstructure and supervision gives cohesion and continuity to the CPHE project.
5. This is essential for ensuring transfer of knowledge and experience from the CPHE unit within RWE to a CP coordination unit within Maendeleo.



Recommendations:

1. The CPHE project will develop a Plan of Operations for the integration of its activities into existing government departments at various administrative levels from 1989 onwards.

The plan should include the following:

- organisation
  - activities
  - material inputs and personell requirements at various levels
  - budget for the period 1989-91
2. The Plan of Operation should be presented to Tanzanian authorities and NORAD by January 1., 1988.
  3. NORAD shall extend the existing contract with NCA for a period 1986-88, and discuss with the NCA and Maendeleo the possibility of continuing the NCA involvement in the projected CP coordination unit from 1989 onwards.





## CHAPTER 8

### PERSONNEL

#### 8.1 FINDINGS

The CPHE project has three categories of personnel:

- expatriates (3)
- seconded Tanzanians (3)
- directly employed Tanzanians (4).

Following the proposed change in the project towards systematic utilization and building up of local institutional capacity during 1987-88, the role of the expatriates will change. They will gradually become less directly involved in the day-to-day CP and HE work and more involved in coordination, cooperation with other departments and training.

To strengthen the capacity at district level, it may be necessary to have one of the expatriates posted to a district for a longer period (1-2 months) helping to strengthen the work of the district team and the ward personnel.

As part of the preparations for the integration of CP & HE activities from 1989, discussions should be started with Maendeleo and Afya about needs for expatriate staff beyond this time, to enable these department to take over CPHE's activities.

Local seconded and directly employed personnel have been given considerable on-the-job training, and some have been sent abroad for further training. This has been done on the basis of needs and performance as perceived by the CPHE team, not according to qualifications, rules and practices followed in the Tanzanian administration. Furthermore, the directly employed personnel have not been selected with a view to becoming permanent employees of the line departments, and do not therefore, fill the necessary requirements for employment at appropriate levels.

The whole CPHE team has, however, practiced rotation of tasks in that they all have some insight into all parts of the project process, and thus represent an important insight for future CP and HE activities within the line departments and the CP coordination unit.



## 8.2 RECOMMENDATIONS

1. Care should be taken to avoid estrangement of seconded personnel from their parent ministries, and to avoid their transfer to other assignments/regions in the crucial transitional period 1987 - 1990.
2. Plan for future personnel support to Maendeleo, and if necessary, Afya, should be made and included in the plan of operation referred to above.
3. A plan for formal educational upgrading of directly employed staff should be made by the CPHE project coordinator in cooperation with Afya, Maendeleo, and Maji.
4. A plan for the integration of locally employed staff should be prepared and agreed upon with Afya, Maendeleo and Maji.



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**TAN 055 - WATER SUPPLY AND SANITATION PROGRAMME. RUKWA AND KIGOMA  
REGIONS. TANZANIA.**

REVIEW OF COMMUNITY PARTICIPATION AND HEALTH EDUCATION PROJECT IN  
RUKWA REGION.

TERMS OF REFERENCE.

1. BACKGROUND.

Norwegian assistance to the water sector in Rukwa and Kigoma Regions started in 1979. A consultancy firm was assigned the work of preparing a water master plan for the two regions. This exercise was finally concluded in 1983, and Norway entered into an agreement with Tanzania on assistance for implementation of the water master plan. The agreement covers the period 1983 - 87 as a first phase.

The main objective of the assistance is to achieve an impact on the rural water supplies and sanitation facilities in terms of improved health and living conditions for the rural population in the two regions, and in particular to reduce the burden on women and children.

The success of the Programme will depend on the active participation of the local population at all levels in the Programme, and mobilization efforts are therefore required.

In pursuance of these objectives, a Community Participation and Health Education (CPHE) Project for Rukwa region was initiated early 1985. A non-governmental organization, Norwegian Church Aid (NCA) was contracted to organize the Project, initially for a period of 2 years. The project team reports to the Regional Water Engineer.

As the agreement with the NCA terminates in December 1986, it has



been decided to review this component of the water and sanitation programme to help determine the direction and level of continued operation. It is also important to <sup>62</sup>access realistically the possibilities for full integration of this Project activity in the local structures.

## 2. THE FRAMEWORK OF THE REVIEW.

The main objective of the Mission should be to present recommendations for Project activities and manpower input beyond December 1986.

In cooperation with the local authorities and the NCA, the Mission should

- discuss the present agreement between NORAD and NCA,
- describe the present status of the Project and its early effects,
- review and comment on the Project components, and
- make recommendations on;
  - a) future activities and methods,
  - b) organizational matters, in particular integration with relevant local authorities and activities,
  - c) expatriate personell,
  - d) local personell, and
  - e) budget.

In particular, the Mission should discuss the status of the National Village Health Worker programme in the Rukwa Region, seek details of planned or existing donor support, and determine what effect this has on the NCA activities.

The Mission should also discuss the potentiality for use of existing Adult Education and Literacy/Post-Literacy facilities in the Rukwa Region.

Lastly, the Mission should discuss the possibility of initiating a small scale CPHE project for Kigoma Region, involving local authorities (MAJI, AFYA, MAENDELEO a.o.) and local personell. A basis for this discussion should be a report of 8 February 1986





prepared by NCA, Rukwa.

### 3. MISSION.

The Mission will comprise of the following:

- Knut Samset
- Mona Gleditsch
- Ophelia Mascarenhas
- Jon Lomøy (Head of the Mission)

The Manager of the CPHE and the NORAD Coordinator in Rukwa should participate in all meetings and field visits.

### 4. THE SCHEDULE OF THE MISSION.

The Mission will spend 2 weeks in Rukwa and Kigoma, followed by one week in DSM for report writing. A summary of findings and recommendations should be presented to the Regional authorities concerned prior to the Mission's departure from Rukwa.



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Appendix 2

ITINERARY

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Mon 22/9	Informal discussions, review team, SIDA, Rukwa Group.
Tue 23/9	Arrival Kigoma by air. Meeting RWE, PP&P, O&M sections. Meeting CPHE team
Wed 24/9	Field visit Mkongoro intake, Kiganza and Mwandiga. Meeting Mwandiga village leadership. Meeting RHO.
Thu 25/9	Meeting UWT & UMATI. Meeting RCDO. Departure for Sumbawanga by air.
Fri 26/9	Meetings RWE, RMO, RHO, RCDO, RDD, REO, CCM, UWT.
Sat 27/9	Meeting CPHE team.
Sun 28/9	Report writing.
Mon 29/9	Field visit Mamanyere District Headquarters. Meeting DWE, Assistant DWE, DPO, district CPHE team (DMA, CDA). Field visit to Myula village. Meeting with women. Inspection of water supplies and sanitation project.
Tue 30/9	Field visit to Myula village. Workshop in Myula. Meeting with RPO, RUDEP coordination.
Wed 1/10	Meeting with DED, Sumbawanga Rural. Meeting CPHE staff, PP&P section. Meeting with Regional Resident Tutor, Adult Ed.
Thu 2/10	Meeting CPHE coordinator. Meeting Construction Section, Maji. Report writing.
Fri 3/10	Report writing. Discussions with CPHE team



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Sat 4/10            Presentation of findings.  
Final meeting CPHE coordinator, RWE, RPO,  
RCDO, RUDEP coordinator, NORAD coordinator.  
Departure for Dar by road.

Sun 5/10            Travel

Mon 6/10            Report writing.

Tue 7/10            Meetings WMPU.  
DANIDA steering unit.

Wed 8/10            Report writing/Final meeting review team.



## Appendix 3

## LIST OF PEOPLE MET

Kigoma:

A. Rugashumba	RWE
K. Solnørdal	PP&P/Maji
P.A.Kjenner	O&M/Maji
H.Høve	NORAD coordinator
P.A.S. Mshote	CPHE team coordinator/Maendeleo
M.R.Mabula	CPHE/Afya
P.Lunden	CPHE team
	RHO
Mama Kimei	RCDO
R.Zamba	UWT Regional Secretary
Moshi Kassim	UWT District Chairman
Mama Dudo	UMATI
Other members of UWT	

Rukwa:

SUMBAWANGA	
T.N.Machume	RDD
Sangiwa	RPO
B.M. Magimba	RWE
Kazimbasi	RMO (acting)
Maro	RHO
S.M.Idabu	RCDO
C.P.Mfunganeza	REO
Milinga	CCM/Regional Party Secretary
Nyona	UWT/Sumbawanga Urban
H.E.Hem	CPHE coordinator
S.Akre	CPHE team
L.Ditlefsen	CPHE team
F.Vallery	CPHE team/Maendeleo
R.K.Mnyenyelwa	CPHE/Afya
M.Zumba	CPHE team/CCM
A.Kafumbaku	CPHE team
G.Sigarete	CPHE team
K.Nkana	CPHE team
A.Mosha	CPHE team
M.Mwananyawa	Sanitation project staff
R.Kasikila	Sanitation project staff
K.Sichellima	Sanitation project staff





NAMANYERE

Kabuka

DWE

Gard Roland  
E.K.Mwaijande  
Kibona  
M.Siame

Assistant DWE  
DPO  
DMA/CPHE team  
CDA/CPHE team

R.M.S. Kyando  
A.M.Jerve  
V.Nilsgard  
Tore Liengen  
E.N.Maige

DED, Sumbawanga Rural  
RUDEP coordinator  
PP&P/Maji  
Construction/Maji  
Regional Resident Tutor/Ad.ed.

Ingvar Anderson  
Mike Liebst  
Benedict Kapinza  
Irene Benz  
Lars Dahl  
D.Shirima

SIDA  
DANIDA Steering Unit  
Village Participation Coordinator  
Village Participation Coordinator  
Village Participation Coordinator  
WMPCU, Maji.



## APPENDIX 4

### MAKING THE WATER/SANITATION PROGRAMME IN KIGOMA MORE RELEVANT FOR WOMEN

The mission had a long and interesting discussion with the UWT in Kigoma, and was asked by the head of the PP&P section to make concrete suggestions on the basis on this.

The UWT represents an important source of information, and a channel for contact with women. There is a need for more information about women's felt needs relating to water, and their experiences in the villages that have been/are being supplied with water under the new schemes.

The UWT could be contracted to do a survey for the project about this. Project resources could be spent on enabling the UWT to do a series of seminars/meetings in the villages which have received water, where they talk about their experiences, frustrations and wishes.

To transform this into a survey, the UWT may need short-term consultancy input to systematize the information. The result should then be fed into the PP&P and into the O&M sections within Maji.

When the PP&P section work out the plans for new water schemes, they should take note of active UWT members (if any) in these villages.

Staff from the PP&P, as well from the O&M sections of Maji should, in cooperation with the CPHE unit, ask to be invited to a regional UWT meeting and discuss the water supply programme with them. The mission found that the UWT has insufficient information about the programme.

The ongoing discussions within the programme on improved headworks, particularly spillways and soak-pits should involve women, not specialists but village women. This can be done through UWT as well as through Maendeleo. It is our impression that women in the villages are concerned about the messy state of many domestic points (DP) surroundings and are open to suggestions for improvements.

DP's can be more than a place for fetching water. People in the villages can construct washing-slabs nearby, simple bathing-sheds, clothelines, fencing etc. with appropriate instructions from the project.

Ways to stimulate this include:

- working out and distributing designs for such facilities
- distributing cement either in connection with construction work or with HE or O&M follow-up activities,



for the villages which have requested this for the building of specified slabs.

There are two important channels for this - UWT and Maendeleo

Within Maendeleo the Community Development Technicians (CDTs) are an important resource. By transferring such knowledge (as well as for shallow wells and latrines) to them, it will stimulate the building of such facilities.

The UWT can also spread designs, and thus create an awareness among the women that such amenities are within their reach, leading to vocalised demands to village authorities, building brigades, or other groups involved in community efforts.

The CPHE unit should consider the possibility of creating a small fund/rotating fund within UWT to be used for water-related building activities. This could add to the water project's usefulness for women in villages.



## APPENDIX 5

### REPORT OF A MEETING WITH THE WOMEN IN MYULA VILLAGE TO DISCUSS THE VILLAGE WATER PROJECTS

1. The purpose of the meeting was to talk to a group of women from a village which already had a water scheme. Myula not only had a water scheme, but it had recently been handed over to the village following the election of a Village Water Committee (VWC) and the signing of a Handing Over Agreement.
2. The meeting with the women began at 4.30 p.m., two hours after the time scheduled for it because of the logistic problems. By this time, of course, the women had already gone to the pombe shops, and had to be recalled from there. Their visit to the pombe shops, to some extent, made the discussions too lively at times. It thus raises questions about scheduling meetings too close to the pombe drinking time.
3. The turn out was surprisingly large. The meeting room was so full that others had to stand outside the windows to listen in. It was obvious that the water project was very much appreciated by the women. Among those present were the UWT chairperson, one of the village TBA's, and two of the three members of the VWC.
4. The Meeting started with a discussion as to how the village women had first heard about the possibility of getting a village water supply. The procedure appears to as follows: Prof. Kauzeni, from the University of Dar es Salaam had visited with the village leaders. The only women representatives during the meeting had been the UWT Chairperson and Secretary. The village leaders then informed the villagers during one of the meetings of the Village Assembly. It was obvious that the procedure preceded the setting up of the CPHE unit and its 10-step programme for community participation.
5. The women said that the Myula Water Scheme involved a borehole and pumps so that communal labour was only needed to build the headworks for the pumps. Even so, both women and men had participated: the women had fetched the sand, while the men had carried the stones.
6. The participants were asked about their views on the water project. On the positive side, most of the women appreciated the fact that both the distance and time inputs into fetching water had been greatly reduced. In the past it had taken them 2 to 3 hours per trip to fetch water. The proximity of the outlets also meant that they used more water, as was evidenced by the frequent visits to the outlets.
7. The women, however, also had some complaints. It was reported that some of the water pumps were not working. It was later discovered that four out of the ten pumps had never worked right from the outset.





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Another complaint concerned the quality of the water. It appeared that if the water was collected too early in the morning it turned milky within the utensils. Vegetables cooked in such water also tasted strange.

8. The women were asked if they had discussed these matters with the CPHE team or their VWC. It was apparent that they had not. In the case of the former, it was possible that the reason was the fact that the CPHE activities had just been started and had concentrated on the Health Education aspects. It was more surprising that the VWC members were unaware of the water quality problem. It appeared that neither the women nor the VWC members had yet fully comprehended the process of utilising the CPHE for informing the authorities concerned about their problems.

9 There were also some signs that some of the village women did not have enough confidence in the members of the VWC. This aspect came out clearly during the discussion of the problems pertaining to the use of the pump and the cleanliness of the area around the pump.

It appeared that some adults and young children were misusing the pump and the surrounding area. In some cases messy cooking pots and plates were cleaned around the pump area and the place left filthy with food remains. Clothes were also washed much too close to the pumps. The women felt that the ensuing standing water was unhealthy. When they tried to tell the offending users to desist from such habits, they were abused and ridiculed.

A suggestion that the matter should have been taken up with the VWC members was treated with disdain. Some felt that the VWC members were too timid to handle such matters. A couple of women implied that the selection process was faulty - the female members were selected because they were "wasomi" (educated) rather than for the qualities of leadership and authority.

10. Such observations cannot be the basis for any generalisations about women's participation in water projects in Rukwa Region. However, some brief generalisations need to be mentioned, namely:-

- (i) the women in Myula demonstrated a considerable understanding of the complex problems of water use from communal water supply systems;
- (ii) they also demonstrated an awareness of the socio-political context of village elections;
- (iii) on the part of the Mission, we learnt that village women could be very vocal about matters that affected them given an appropriate venue to voice them.

11. The Mission member participating in the meeting also suggested to the VWC members to take advantage of the village



leadership to help them in their work. They were equally vocal. They said that they had just been elected as VWC members and therefore could not be blamed for not dealing with some of the issues raised. Nevertheless, they agreed that they needed the morale support of the existing village leadership such as the UWT Chairperson, the ten-cell leaders, the primary school teachers and ultimately the Village Chairman and Secretary.

The meeting ended at 6.30 p.m. amidst requests for future such meetings from the village women.



## APPENDIX 6

WORKSHOP ON CLEAN ENVIRONMENT AND SANITATION HELD IN MUYULA 29TH  
SEPTEMBER 1986

1. The Workshop was opened by the Village Chairman, who briefly explained that the purpose of the Workshop was two-fold:

- (i) to inform the participants on issues related to environment and sanitation;
- (ii) to train the participants to carry the information to the other members of the village.

He therefore urged the participants to cooperate by paying great attention to the issues discussed so that they could educate those that had selected them as their representatives.

The Village Chairman also briefly touched on the attendance. The original target had been to get 68 participants with representatives from the leaders, specialists and the average villagers. In all there were 45 participants with representatives from the following categories: ten-cell leaders, UWT leaders, teachers, traditional healers, traditional birth attendants, elders, village government leaders, and representatives of women and men from each cell. The Workshop was then handed over to the CPHE Team.

2. The CPHE Team leader for the Workshop started by proposing a prayer to start off. It is not clear why the Workshop had to start with a prayer since it was not customary to do so. The usual practice is some form of support for the Party and its teachings.

3. After the prayer, the team leader, Anna Katumbaku, explained that the main purpose of the Workshop was to teach environmental health. She said that as a start, they should perhaps define environmental health/sanitation. The only volunteers were men.

She then went on to explain the procedure of the Workshop, the first stage of which was to divide the participants into groups and discuss four questions:

- ... Why should a person have a latrine?
- ... Why should it be cleaned?
- ... Why do some villagers not build latrines?
- ... Why is the water in the utensils in the house often dirty?

4. The participants were divided into 6 groups. Each group was led by one of the members of the VWC. Since there were only four, 2 group leaders were selected at random.

5. In Group F, the group leader posed the questions one by one and solicited answers on a voluntary basis. Several answers were



discussed as to adequacy, appropriateness and accuracy. At first the only volunteers were men. However, after the women (sitting as a group on one side of the room) were addressed specifically and encouraged to use Kifipa, the local dialect, if necessary, the discussion became less one-sided (that is male only).

6. By 10.30 a.m. the groups had re-assembled into the Common Meeting Room where the entire assembly was asked the same four questions by one of the CPHE team. The answers revealed that the participants were well aware of the usefulness of a latrine, the need to keep it clean and the value of protecting the household water supply from dust, flies and domestic animals. Once again, the women only joined in after specific encouragement to do so and use Kifipa if necessary. On the whole the women's participation was very encouraging considering the fact that they were considerably out-numbered by the men in the Workshop.

7. At 11 a.m. the participants, led by the Sanitation Technician, an employee of the water and sanitation project working with the CPHE Team, went to examine two examples of village latrines, a poorly constructed and inadequately maintained traditional latrine and a double-chambered VIP.

8. By 11.30 a.m. the participants returned to the meeting room. At this stage they were shown a series of charts which began with the dangers of defecating in the bush and ended in a gradual progression of the snake-bitten bush defecator building a double-chambered VIP; a bath place with shelter and soak pit; a rubbish dumping place; and a stand for drying dishes. A series of other charts showed the woman of the household keeping the sanitary facilities and the environment clean. The last picture was that of healthy child, implying that a clean environment and sanitary facility resulted in healthy children. The charts were a great success.

9. By 12.30 p.m. the participants were again broken into groups, this time by communication media. Three types were proposed: song, story and drama.

10. The Mission observers were impressed by the vigour and enthusiasm with which the groups participated in the preparation of the songs, stories and drama. Altogether there was an air of festivity and much laughter and fun. The Mission members were once again struck by the fact that as soon as the CPHE member had left, the group resorted to using Kifipa.

They were also struck by the ingenuity of the plot and the quality of performance, even though the final drama appeared to be more a castigation of traditional healers than exactly the value of clean environment and sanitation facilities.

11. At 2.30 the groups returned to the Common Meeting Room where there was a presentation of the stories, songs and the drama. The songs and stories were recorded for use in other villages.





12. At 2.30 one of the CPHE members invited the participants to evaluate the Workshop. The issues raised concerned the following aspects: the lack of promised slide show; the lack of the promised transport to fetch the firewood already collected by the villagers in order to fire the bricks required to build the VIP latrines; the fact that the programme had stipulated a lunch break which did not materialise and thus made the continuous sessions a little too lengthy. The Workshop ended at 3.30 p.m. after which the participants were invited to the delayed lunch.

13. Some of the members of the CPHE Team remained in the village to talk to the VWC, leave handbills and present a cassette-player, but the two Mission members returned to Sumbawanga, quite impressed with the technique for communicating health education to the villagers.



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## Clean home workshop in

8<sup>30</sup> Opening

Prayer

9<sup>30</sup> Introduction of visiting team and participants.

Purpose of the workshop

Introduction of workshop programme

- ask for objections to the programme.

10<sup>00</sup> Divide in discussion-groups.

The VWC members should be group leaders.

One in each group from CP#E or Sanitation as supervisor / referent.

The group members shall not take minutes during discussion.

Discussion topics :

1. Kwa nini mtu awe na choo ?

2. Kwa nini kinatakiwa kusafishwa ?

3. Kwa nini watu wengine hawajali kujenga choo?

4. Mara nyingi maji kuchafuka wakati yako ndani ya nyumba. Kwa nini ?

11<sup>00</sup> Plenary session.

- summarizing of group - discussion.

- each group leader refers from his group.

1<sup>30</sup> Demonstration of double-vault latrine, improveable pit latrine and if possible a condemnable latrine, bath-shelter,

water-pit, stand for handwashing and rack



12<sup>30</sup> Session about clean home by using  
the Water and Sanitation Flip-chart.  
-remember the two-ways communication.

13<sup>00</sup> Divide in Media-groups:

1. Song
2. Story
3. Drama
4. Picture
5. Cassette/interview

Work in mediagroups 1 1/2 hour altogether.

The VWC should also here be group leaders.

CPHE/Sanitation are advisors, to look after that  
the group is arranging themselves and be sure  
they understand their task.

Let the participants make the programme, but look  
after that they put the message correctly.

13<sup>30</sup> Lunch

14<sup>30</sup> Mediagroups - continue

15<sup>30</sup> Performance from Media-groups.

'6<sup>30</sup> Evaluation.

Thanks and closing of workshop.

Meeting with VWC ~~W~~ about follow-up after the  
workshop.

Make appointment with VWC for health-  
education visit.

Leave handbills and cassetteplayer/cassette with  
VWC.



HEALTH EDUCATION PROGRAMMEPARAMAWA/MTENGA/MASHETE/MWAI

1. Workshop - Clean environment
2. VWCW follow-up - clean environment  
Give cassette player, cassette and handbills
3. VWCW - New topic: Hygienic latrines  
Give handbills and cassette
4. VWCW - Follow-up: Hygienic latrines  
Give more handbills
5. VWCW - New topic: Keep your water source clean, storage of water, use more water  
Give handbills and cassette
6. VWCW - Follow-up: Keep your water source clean, storage of water, use more water  
Give more handbills
7. VWCW - New topic: Handwashing, bathing of children  
Give cassette and handbills
8. VWCW - Follow-up: Handwashing, bathing of children  
Give more handbills
9. Womens Workshop - Child care  
Give handbills
10. VWCW - Follow-up child care  
Give cassette and more handbills
11. VWCW - New topic - Diarrhoea treatment  
give cassette and handbills  
Demonstration of oral rehydration solution
12. VWCW - Follow-up: Diarrhoea treatment  
Give more handbills
13. VWCW - New topic: Nutrition  
Give cassette and handbills
14. VWCW - Follow-up: Nutrition  
Give more handbills





10-STEPS FOR VILLAGE PARTICIPATION III  
WATER SCHEMES - RUKWA REGION

STEP 1: PREPARATORY MEETING WITHIN MAJI

- Participants
- Staff from P.P&P (responsible for meeting)
  - Staff from Construction and O & M (concerning the implementers)
  - RWE/Coordinator
  - DWE
- Purpose
- To coordinate CPHE tasks with the tasks of technical departments
  - To brief CPHE staff about the scheme: plans, timeschedules, costs, village inputs expected etc.
- Documentation
- Technical description of the water scheme (P.P&P)
  - Minutes from discussion (CPHE)

STEP 2: VISIT TO THE SCHEME VILLAGE(S)

- Participants
- CPHE team
- Purpose
- To inform village leaders about the scheme
  - To fix dates for meeting with the village leaders, Village Council, all balozis, CCM, Vijana, UWT, teachers, health staff, Maendeleo staff and traditional healers and traditional birth attendants. (NB! a date that is suitable for the village).
  - To fix time for women meeting
  - Fill in Form 2 (Village Information)
  - Get names of Maendeleo and Afya staff concerned with village.
- Documentation
- Fill Form 2 and brief report (CPHE)

STEP 3: MEETINGS IN THE VILLAGE (Spend 1-2 days in each village)

A: Meeting with the VC, all balozis etc.

- Participants
- All members of Village Council
  - All balozis
  - All UWT leaders and other leaders of women groups
  - All leaders of party organisations (CCM, Vijana)



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- All govt. employees in the village (teachers, health staff etc.)
- Traditional healers and traditional birth attendants
- CPHE team
- Technical supervisors (Constr. & O&M)
- Site foreman (Construction)

Purpose

- Inform the village about all aspects of the scheme; including health education campaign.
- Present plans and tentative workschedule
- Present for the villagers what inputs are expected from them and what will Maji do
- Encourage the village leaders to arrange a mass meeting to inform as many villagers as possible about the scheme.
- Leave behind a proposal for agreement for construction and O & M for WS to be signed between the village and Maji about the scheme construction, operation and maintenance (Form 3)
- Fix a date for next meeting with the village council for possible signing of the agreement. (Leave at least 10-14 days for the village to evaluate and make their advice).

Documentation

- Minutes to be taken
- Names and positions of all participants

B: Meeting with Women of the VillageParticipants

- UWT leaders
- Leaders of all women groups
- At least 2 women from each ten cell unit
- CPHE team
- Technical Supervisors
- Site foreman
- Traditional Birth Attendants
- Government staff



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- Purpose
- To inform the women about the scheme
  - To encourage the women to be active in the decisionmaking about DP location, appointment of scheme/ tap attendants etc.
  - To inform about health education campaign to be launched later
  - To elect 5 women to represent them at step 4, and inform the meeting about future VWC.

Documentation - Brief report

STEP 4: DISCUSSION ABOUT THE SCHEME WITH THE VILLAGERS AND SIGNING OF AGREEMENT (1 DAY)

- Participants
- All members of Village Council
  - All balozis
  - Leaders of party organisations (UWT, Vijana)
  - All government employees
  - DWE
  - CPHE team
  - Technical Supervisors
  - Site foreman
  - Women representatives (5)

- Purpose
- To learn how the villagers consider the project, their objections to plans etc.
  - To compromise if there are important disagreements to the plans etc.
  - To sign the agreement (Form 3) if the villagers accept the proposal.
  - To encourage the villagers to select a Village Water Committee (the village assembly should select the committee). (Leave behind the terms of reference for VWC - Form 4)

- Documentation
- Minutes of discussion
  - Agreement signed
  - Fix a date for meeting with VWC after appr. 14 days.



**STEP 5: MEETING WITH VILLAGE WATER COMMITTEE ABOUT THEIR TASKS AND LOCATION OF DPS (1 DAY)**

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- Participants
- All members of VWC
  - Village Chairman and Secretary
  - CPHE team
  - Technical Supervisor
  - Site Foreman
- Purpose
- To get to know the VWC and inform them about their tasks
  - To discuss about the task and character of a scheme attendant/caretaker
  - To encourage the VWC to arrange for selection of scheme attendants and negotiate the posho with them before an agreement is signed (Form 5).
  - To locate DPS in village, mark them in terrain and on map

**STEP 6: TECHNICAL IMPLEMENTATION**

- Participants
- Technical staff
  - Village Water Committee
  - Villagers etc.

Meetings and discussions done as needed. If problems arise or particular topics are to be discussed CPHE team can be called on.

**STEP 7: PREPARATION FOR TRAINING OF VWC, SCHEME ATTENDANTS AND DP ATTENDANTS IN OPERATION AND MAINTENANCE TASKS (WITHIN NAJI)**

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- Participants
- Operation & Maintenance staff
  - Construction Supervisor
  - CPHE team (responsible to call for meeting)
- Purpose
- To make a timeschedule for the training for O&M and the handing over procedures.
- Documentation
- Brief minutes





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STEP 8: MEETING WITH VWC TO DISCUSS ABOUT TRAINING FOR O&M AND SELECTION OF DP ATTENDANTS ( 1 DAY)

- Participants
- Construction Supervisor
  - O & M staff
  - CPHE team (responsible)
  - Village council member
  - Village Water Committee
- Purpose
- To plan a seminar for training of VWC members, caretakers and DP attendants on O & M
  - To urge the VWC to select DP attendants after discussing the criteria and task. Give out Form 8A or 8B
- Documentation
- Brief report

STEP 9: VILLAGE SEMINAR ON O&M (4 DAYS)

- Participants
- O&M staff (responsible)
  - CPHE team
  - Village Water Committee
  - Scheme Attendants
  - DP Attendants
  - Members of Village Council
- Purpose
- Train the villagers in operations and maintenance tasks
  - Propose an establishment of village by-laws for the use of the scheme. Cfr. Form 9.
- Documentation
- Brief report

STEP 10: FORMAL HANDING OVER OF THE WATER SCHEME

- Participants
- Village Council
  - Village Water Committee
  - DWE
  - Representative from DED
  - Representative from CCM
  - O&M staff
  - Construction staff
  - CPHE team



Purpose

- Reiterate the responsibilities of the village and of Maji
- Reiterate system of O&M
- Read the "Handing over certificate for Water Scheme" - Form 10
- Discuss the certificate
- Sign the certificate

Documentation

- Brief report
- Signed certificate

