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Aga Khan Health Services  
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# **COMMUNICATION PLAN FOR WASEP**

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## PREFACE

This planning document presents a communication and health education strategy for the Water and Sanitation Extension Programme (WASEP)<sup>1</sup>. The plan proposes activities at three levels: advocacy level, social mobilization level and at the level of programme communication in villages.

Emphasis of this report lies on 'programme communication activities' to be carried out at village level. The planning of these activities is based on an analysis of hygiene behaviour carried out by WSHHSP<sup>2</sup>. In an earlier document<sup>3</sup> it was recommended to prioritize about a dozen target behaviours and to focus implementation activities at village level around these behaviours.

Chapter 1 briefly introduces the planning model used in this report and recapitulates the process of developing the communication strategy emphasizing the multi-disciplinary and integrated approach of WASEP. Chapter 2 presents a situation analysis at the advocacy level and defines objectives, results, target groups and activities. In chapter 3 a similar analysis is presented for the social mobilization level. Chapter 4 is a longer chapter that gives a detailed description of the proposed health and hygiene activities at village level. It presents the target behaviours of the WASEP programme.

The fifth chapter outlines work plans for the activities to be carried out. Details for these activities are worked out as far as possible considering several important unknowns such as budgets and staffing.

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<sup>1</sup>. WASEP will be implemented by the Aga Khan Development Network in the five most Northern Districts of Pakistan; Chitral, Ghizer, Gilgit, Skardu and Ghanche.

<sup>2</sup>. The Water, Sanitation, Hygiene and Health Studies Project has carried out pre-implementation investigations with the aim to develop locally appropriate technologies and participatory implementation strategies. The Project also aims to design areas specific communication and education materials and methods. WSHHSP has commenced in 1993 and is envisaged to evolve into WASEP during 1996.

<sup>3</sup>. Issue paper 6: Hygiene Behaviour in North Pakistan. The Results of a Quantitative and Qualitative Study, and Issue paper 7: A Knowledge, Attitude and Practice Survey: an Intervention Evaluation Tool.



# CHAPTER 1: INTRODUCTION OF THE COMMUNICATION PLAN

## 1.1 COMMUNICATION: AN ELEMENT OF THE INTEGRATED WASEP APPROACH

The assumption at the basis of this communication plan is that many -if not all- water, sanitation and hygiene problems have an behavioural component. Without changes in the behaviour of villagers the activities of WASEP in sanitation, water or hygiene will not be effective. Although the focus of this particular document lies on communication activities it should be seen as one element in an integrated package of technical and non-technical interventions to promote behavioural change of beneficiaries.

For this mix of interventions WASEP uses the term 'integrated approach'; a combination of hard and software approaches used in a coherent manner. From this approach a mutually reinforcing effect is expected which will have a bigger effect on behavioural change than a single instrument (only water supply, or only health education) would have. In figure 1 a theoretical model is presented in order to clarify the effects of different types of interventions on behaviour.

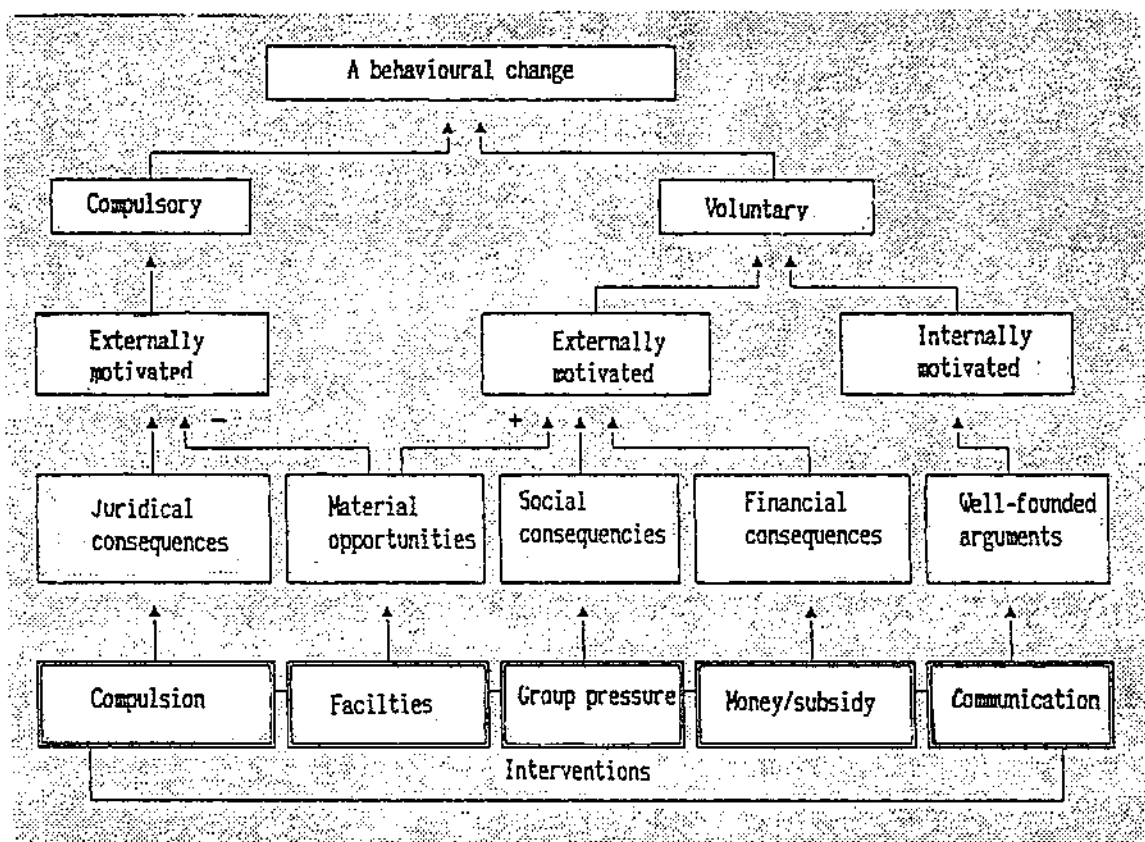


Figure 1

The instruments are 'social regulation', 'money/subsidies', 'technical facilities', 'legal pressure' and 'communication'. As the figure shows the main function of these instruments is to motivate people to make an independent behavioural change.

Examples of each instrument could be:

- Social regulation could be to help villagers agree, develop and enforce rules that prohibits cattle or washing clothes near the water storage tank, or rules for maintenance of piped systems.
- Money may include a subsidy on sanitation, or assistance with a revolving fund for the water committee.
- Facilities will include appropriate technical designs, advice and materials for piped water systems, water treatment plants and family sanitation.
- Legal pressure is neither possible nor a desired instrument in water and sanitation issues and thus this instrument is of little importance.
- Communication will include raising interest and awareness, and provide information on designs and construction techniques.

The exact details of activities of this integrated package will depend on local needs and circumstances. It will include one or more types of technical assistance for improving the water supply or for promoting sanitation. It will also contain provision for training and communication support such as awareness raising and health education.

## 1.2 THREE LEVELS OF COMMUNICATION ACTIVITIES

In this document an outline is given of the communication elements of the intervention mix. The social and technical aspects of the WASEP activities are developed in other planning documents.

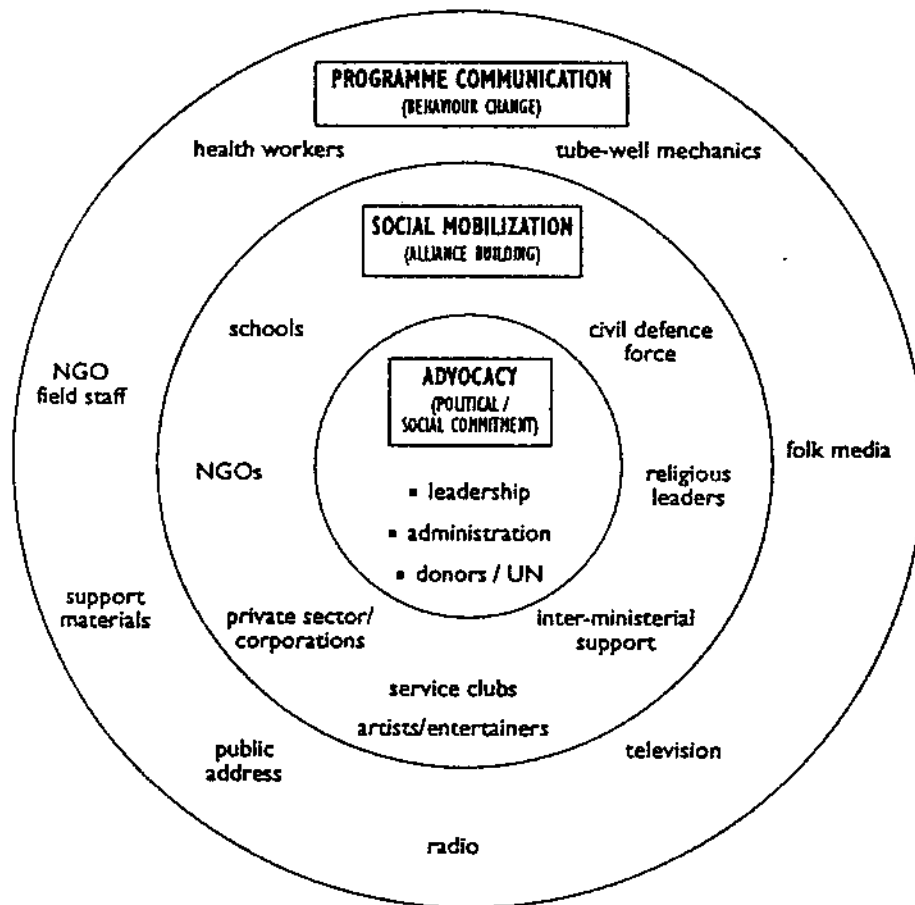
This communication plan for WASEP makes use of a three pronged strategy used and documented by UNICEF (McKee, Boot 1995 and figure 2). This strategy aims to influence communication processes at three levels;

- **Advocacy** consists of the information to be communicated through interpersonal contact and reports with a view to sustain acceptance, commitment and support for programme activities. It is traditionally known as information and public affairs activities.
- **Social mobilization** is the process of alliance building at field level. It aims to unite, inform and train all feasible and practical allies in the programme who can help to raise people's awareness, to promote programme activities, to assist in the delivery of resources and to strengthen community participation.
- **Programme communication** is the process of identifying, segmenting and targeting specific messages and audiences through particular communication channels aiming at behavioural change. These activities come closest to what we could define as hygiene and health education.



Activities and target groups in each of these three fields are distinct. The target group of advocacy level are policy makers at (inter-) national level as well as managers of local partner organizations such as LBRDD and Government administrators, the senior staff of AKDN sister organizations and other NGOs. Activities include meetings, lobbying and documents like progress report and papers.

The target group for social mobilization are the staff of Government Departments (field staff of LBRDD), of NGOs (Social organizers, LHVs, doctors or field engineers) and village level activists such as water committee members, VO/WO managers, CHWs and TBAs. Activities will include workshops, training and manuals. The target group for programme communication are village men, women and children. In figure 2 the three elements of the communication plan are presented schematically.



Source: McKee, 1992.

Figure 2. The model used by McKee

# COMMUNICATION STRATEGY

## ADVOCACY LEVEL (see chapter 2)

## SOCIAL MOBILIZATION LEVEL (see chapter 3)

## PROGRAMME COMMUNICATION LEVEL (see chapter 4)

### Target group:

- Managers AKDN/GoP
- Decision makers
- Representatives
- AKF, Donors

### Aim:

- Awareness
- Commitment
- Coordination
- Positive image

### Activities: (Chapter 2)

- workshops
- personal contacts
- meetings
- lobbying
- progress report
- presentation at congresses, seminars

### Target group:

- GoP department staff
- NGO staff
- Private sector
- Village activists

### Aim:

- Field coordination
- Motivation
- Education
- Acceptation of target behaviours
- Promotion of sanitation, Part. implementation, Operation & maintenance

### Activities: (Chapter 5)

- Workshops
- Training
- Manuals
- Promotion packages
- Calendar
- Audio-visual

### Target group:

- Village men, women, children

### Aim:

- Promotion of w&s facilities
- behavioural change of 12 targets
  - 1...
  - 2...
  - 3...
  - 4...
  - 5..etc

### Activities (Chapter 5)

- Promotion package
- Participatory HE
- Posters
- Banners
- School education

Figure 2

## **CHAPTER 2**

### **ADVOCACY LEVEL: INTER AND INTRA INSTITUTIONAL LIAISON**

#### **2.1 PROBLEM IDENTIFICATION**

The WASEP programme has a strategic aim to coordinate, integrate and complement the activities of different actors in the field of water and sanitation (see Annex 1). Although the WSHHSP is considered as one of the actors in the sector at the moment the Programme will have to make efforts to create a more central role. Before this role of WASEP is accepted by the other parties a number of impediments can be identified vis-à-vis the government, NGOs and other partners. For example;

- No clear roles defined between WASEP and Government institutions, nor clarity on policies with regard to sanitation, rehabilitation of water supplies etc.
- Lack of commitment and motivation of Government and perhaps field staff to cooperate with WASEP
- Insufficient awareness or positive image of the WASEP programme and of water and sanitation issues among partners.

To positively influence these issues the WASEP programme could use and further develop efforts in the field of communication. The aim should be to achieve the following results with communication activities:

1. Agreement on unified policies and responsibilities on various collective issues
2. Increased cooperation at core and field office level
3. Partners (GoP, AKDN, donors) are fully informed about the WASEP and have a positive image of the programme

#### **2.2 COMMUNICATION ACTIVITIES:**

Most of the following activities are already carried out by the WSHHSP. Nonetheless intensification of efforts may be required, particularly with regard to the activities on a unified policy and mutual responsibilities.

- 1.1 Organize discussion on policies and divide responsibilities with regard to sanitation strategy, water supply implementation, and village selection procedures.
- 1.2 Assist in the development of draft plans on these policies
- 1.3 Divide responsibilities
- 1.4 Lobbying and informal discussions with partners
  
- 2.1 Preparation of terms of reference of Project Liaison and Advisory Committee (PLAC), perhaps develop separate PLAC in Chitral.
- 2.2 Organize, report and follow-up of regular meetings of this body.
- 2.3 Extent active role in SAP meetings.
  
- 3.1 Develop and carry out introductory workshop for senior officers of local (and national) government and NGOs.
- 3.2 Punctual production of documents. Continue attractive style of documents with illustrations, drawings and good lay-out.
- 3.3 Carry out dissemination activities in written (Aab, Waterlines, IRC newsletter, Learning for Health) and in presentations (seminars, conferences).



## **CHAPTER 3: SOCIAL MOBILIZATION: THE MOTIVATION AND TRAINING OF PARTNERS**

### **3.1 PROBLEM IDENTIFICATION:**

#### *Involvement and mobilization of field based staff*

The essence of the WASEP approach is based on a partnership principle (See strategic objective in Annex 1). By developing inter-institutional and interdisciplinary relationships among field based staff of AKDN and the Government the Programme aims to deliver a broad spectrum of services and interventions in each community. The WASEP assumes that such mobilization of staff resources is possible but also realizes a number of constraints:

- Field staff is not aware of the (details of) various water and sanitation technologies;
- Field staff is not aware of the implementation details and the inter-institutional character of WASEP;
- Field staff may need to be motivated to make water and sanitation issues a priority in the selected villages;
- Field staff has little or insufficient awareness of hygiene, bacteria and germ theory;
- Field staff of different disciplines need to be motivated to all use the same set of messages in the community (see chapter 4).

#### *Involvement and mobilization of village activists*

A second set of constraints is that under the partnership principle WASEP will seek the active involvement of the village community in the formulation, execution, monitoring, and operation and maintenance of the integrated activities in their village. Experience of AKRSP, WSHHSP and the IRC research group shows that motivated leadership and village activists play a crucial role in the success of programmes. Village activists will need to be identified and motivated to take on roles as community mobilizers, coordinators and educators. Village activists may have the following constraints:

- Activists have little or insufficient awareness of hygiene, bacteria and germ theory;
- Activists may need to be encouraged to accept a role as community motivator;
- Activists will have many other activities and interests particularly during the summer months

### **3.2 OBJECTIVES, TARGET GROUPS AND COMMUNICATION CHANNELS**

The objectives of the activities for social mobilization and promotion are:

Staff of partner organizations is mobilized to play an active role in the implementation activities, and is equipped with sufficient hygiene awareness and knowledge of available technical and educational resources.

Local activists are aware of hygiene issues and motivated to carry out participatory implementation of activities in their villages.

Target group for the first objective are AKRSP WSO and SOs, AKHS LHVs, field directors and doctors, LBRDD field staff, Government teachers, doctors and dispensers.

Target group of the second objective are members of the Water committee, caretaker of the system, plumber, CHWs, TBAs, VO and WO managers or other office bearers, and any other type of village activists such as religious leaders, village elders and elected members.

Communication channels are mainly interpersonal contact during workshops and training. For field based staff and some educated village activists manuals and guidelines can be used. During workshops audio-visual media such as slides or VCR may be used. Demonstration of contamination in water with the help of microscope.

### **3.3 ACTIVITIES AND PLANNING**

In order to achieve the first result (mobilized field staff) the following activities have to be undertaken:

- i) To develop and carry out a workshop for staff at regional programme offices (RPO) and main offices of AKHS, AKES and AKHB and other NGOs (CADP, SWAB) in Chitral, Gilgit and Skardu. Influential other may also be invited;
- ii) Identify employees of partner organizations and get official permission for their participation;
- iii) Continue the preparation of manuals and guidelines to assist field staff, hygiene education materials for LHVs and possibly WSOs
- iv) Repeat training programme in participatory health education

In order to achieve the second results (mobilize village activists) the following activities are prerequisite:

- i) Develop and carry out a one day workshop in or near every selected village for all allies working in that particular community. Besides explaining (or repeating) the integrated approach, this workshop is intended to mobilize support and expertise to plan and carry out the integrated approach in that village.
- ii) Prepare materials on hygiene education for CHWs/TBAs and in some cases water committee members.

In chapter 5 a detailed planning of the workshops and the development of health education materials is presented.

## **CHAPTER 4: VILLAGE LEVEL COMMUNICATIONS: COMMUNICATION PLAN FOR HYGIENE AWARENESS**

### **4.1 PLANNING PHASES OF THE COMMUNICATION ACTIVITIES AT VILLAGE LEVEL**

For the development of the programme communication a planning model with three consecutive phases was followed. The first phase is the longest and most complicated. A large number of studies to sanitation, water usage and hygiene behaviour were carried out and reported. The behavioural aspects were described, and an attempt was made to analyze the underlying causes and socio-cultural context. At the end of the study phase the most important behavioural aspects were selected as target behaviours, a procedure which is commonly used in extension science. The main results of the studies and the selection process are described in Issue paper 6.

In the second phase a plan for communication interventions is developed which defines specific extension aims, the target groups and selection of activities to be carried out. This chapter is devoted to document this planning. The third phase is the most practical and specific as the different extension activities are planned in detail, as far is possible at a certain point in time. This planning is presented in chapter 5.

### **4.2 TARGET BEHAVIOURS, MESSAGES AND COMMUNICATION INTERVENTIONS**

Based on the results of the study phase it is suggested to select about twelve target behaviours as the focus for WASEP. Due to the integrated approach it has been impossible to further limit the number of target behaviours. For each target behaviour a basic message is developed which the Programme will communicate during the implementation.

Proposed basic messages

1. Cover and maintain the tank
2. Protect the area around the tank
3. Close and repair your tap stand
  
4. Tap water is safe, use it for drinking
5. Clean and cover your water storage container
  
6. All family members should use the latrine if you have one
7. If you have no latrine, try to construct a latrine and use it
8. Always cover contents of pit and compost latrines
  
9. Always wash before eating
10. Wash hand after contact with children faeces
11. Rub thoroughly and use plenty of water if possible with soap
12. Wash vegetables thoroughly

During the implementation cycle different activities will be carried out to promote behavioural changes in these fields. On the next pages tables are presented with the aims, target groups and proposed communication activities.

The target behaviours are categorized in four groups: water at communal level, water at domestic level, sanitation and personal hygiene.

#### 4.2.1 ACTIVITIES AIMED AT WATER QUALITY AT COMMUNAL LEVEL

Target behaviour	Extension aim	Target group	Activity	Verifiable indicator	Sources of verification	Assumption
Water supply tanks are not always properly covered and cleaned	Raise awareness of: - water contamination of unprotected water tanks	Water committee Village men	- Training committee - Discussion in (VO/WO)-meetings - Participatory monitoring - WASEP site visits	- The storage tank is covered - The tank is repaired when needed	- monitoring format - observation	- Roof and clean-out pipe provided - Caretaker appointed - Training provided
Animal and human activities take place in water before entering the tank	Create awareness about: - contamination routes - risk of human and animal activities	Water committee Village men Women and children (if they carry out activities near tank)	- „ - „ - „ - „ - Use water contamination cards - Include in school education package	- No human faeces before inlet - No contaminating activities - Microbiological standard of water	- monitoring format - observation	- Provision of barbed wire - Design proper intake chamber - Stimulate agreement inside the village
Tap stands often not closed and maintained	Create awareness: - the need for safe and sufficient water - don't waste water	Village men Women Children	- „ - „ - „ - „ - Include message on calendar or poster - Include in school education package	- 80% of tap stands function properly	- monitoring format - observation	- Stimulate agreement on taps - Organize tap stand groups



#### 4.2.3 ACTIVITIES AIMED AT WATER USE AND QUALITY AT HOUSEHOLD LEVEL

Target behaviour	Extension aim	Target group	Activity	Verifiable indicator	Sources of verification	Assumption
People prefer cold water from unprotected sources even if they have a tap	Raise awareness of: - water contamination of unprotected water  - Tap water is safe	Village men Women Children	- Training committee - Discussion in (VO/WO)-meetings - Banners - Posters - Participatory health education packages - Include in school education activities - Radio drama	- > 50% of the beneficiaries use the tap for drinking  - Microbiological standard of water	- observation - KAP-survey - Water tests	- Protected source - Safe water - Good system - Tap stands nearby homes -
Storage containers are not cleaned frequently and not always covered	Create awareness about: - contamination routes - risk of dirty/uncovered storage vessels	Women	- Discussion in women groups - Include message in folding cards for CHW	- Storage vessels covered - Vessels cleaned regularly - Little Microbiological (re-)contamination inside vessels	- observation - KAP-survey - water tests	

### 4.2.3 ACTIVITIES AIMED AT SANITATION

Target behaviour	Extension aim	Target group	Activity	Verifiable indicator	Sources of verification	Assumption
Owners of pour-flush latrines often do not use	<ul style="list-style-type: none"> <li>- Stimulate all family members to use the latrine</li> </ul>	Families in Gilgit and Chitral with a pour-flush	<ul style="list-style-type: none"> <li>- Discussion in (VO/WO)-meetings</li> <li>- Poster</li> <li>- ?</li> </ul>	<ul style="list-style-type: none"> <li>- 75% of families with pour-flush use their latrine</li> </ul>	<ul style="list-style-type: none"> <li>- observation</li> <li>- KAP-survey</li> </ul>	
People defaecate in open places and do not dispose of faeces safely	<ul style="list-style-type: none"> <li>- Create awareness about contamination routes and risk of human faeces</li> <li>- Promote latrines</li> <li>- Stimulate family members to use and maintain latrine</li> </ul>	<p>Village men</p> <p>Women</p>	<ul style="list-style-type: none"> <li>- Discussion in (VO/WO) meetings</li> <li>- Promotion package</li> <li>- Sanitation manual</li> <li>- Technical leaflets</li> <li>- Family package on pit and compost latrine</li> </ul>	<ul style="list-style-type: none"> <li>- Decrease of human faeces inside village</li> <li>- Increase the number of latrines by 35%</li> <li>- Owners use their latrines</li> </ul>	<ul style="list-style-type: none"> <li>- observation</li> <li>- KAP-survey</li> <li>- Number of people assisted by WASEP</li> </ul>	<ul style="list-style-type: none"> <li>- Technical designs for alternative systems</li> <li>- Technical support</li> <li>- Material support</li> <li>-</li> </ul>
In compost and pit latrines people not always cover content, and/or carry out ablution above the hole	<ul style="list-style-type: none"> <li>- Create awareness about the risk of uncovered and wet faeces</li> <li>- Encourage the use of covering material</li> <li>- Promote the use of separate ablution places</li> </ul>	<p>Men and women who own compost latrines (Gilgit and B'stan)</p> <p>Men and women who own pit latrines (Ghizer and Chitral)</p>	<ul style="list-style-type: none"> <li>- Discussion in (VO/WO) meetings</li> <li>- Technical leaflet</li> <li>- Family package on pit and compost latrine</li> </ul>	<ul style="list-style-type: none"> <li>- Decrease smell and flies in latrines</li> <li>- People using their latrine</li> </ul>	<ul style="list-style-type: none"> <li>- observation</li> <li>- # people who constructed an ablution place</li> </ul>	<ul style="list-style-type: none"> <li>- Material support</li> <li>- Technical design</li> </ul>

#### 4.2.4 ACTIVITIES AIMED AT PERSONAL HYGIENE

Target behaviour	Extension aim	Target group	Activity	Verifiable indicator	Sources of verification	Assumption
People not always wash hands before eating, although offering washbasin to guest is existing practice	<ul style="list-style-type: none"> <li>- Create awareness about the need to rub thoroughly with plenty of water</li> <li>- Stimulate handwashing before eating as common practice</li> </ul>	Men Women Children	<ul style="list-style-type: none"> <li>- Discuss in (VO/WO)-meeting</li> <li>- Include in participatory packages</li> <li>- Include in School education activities</li> </ul>	<ul style="list-style-type: none"> <li>- 80% of the people wash hands before eating</li> <li>- 75% of people are aware of rubbing and using plenty of water</li> </ul>	- Observation	Water is available
Women and girls do not wash hands after coming into contact with young childrens faeces or nappies	<ul style="list-style-type: none"> <li>- Create awareness about contamination routes and the risk of faeces of young children</li> <li>- Stimulate washing hands after contact</li> </ul>	Women Young girls who look after other children	<ul style="list-style-type: none"> <li>- Discuss in WO-meetings</li> <li>- Include in participatory packages</li> <li>- Include in AKHS training curriculum</li> </ul>	<ul style="list-style-type: none"> <li>- 50% of women are aware of the risk of children faeces</li> <li>- Increased # women washing their hands after contact</li> </ul>	<ul style="list-style-type: none"> <li>- observation</li> <li>- KAP-survey</li> </ul>	Water is available
People often wash with hands with a bit of water after defaecation, while soap is not commonly used	<ul style="list-style-type: none"> <li>- Create awareness of need to thoroughly wash hands with plenty of water</li> <li>- Stimulate handwashing after defaecation</li> <li>- Advice soap but allow freedom to do so</li> </ul>	Men Women Children	<ul style="list-style-type: none"> <li>- Discuss in (VO/WO)-meeting</li> <li>- Include in participatory packages</li> <li>- Include in school education activities</li> </ul>	<ul style="list-style-type: none"> <li>- Increased # of people washing hands after defaecation</li> <li>- People aware of the need to rub thoroughly and use plenty of water</li> </ul>	<ul style="list-style-type: none"> <li>- observation</li> <li>- KAP-survey</li> </ul>	
Vegetables are washed before eating but not thoroughly		Women, particularly in areas with compost latrines (Gilgit and Baltistan)	<ul style="list-style-type: none"> <li>- Include in participatory packages</li> </ul>	-		

**START OF THE VILLAGE ACTIVITY**

Communication activities		Other implementation activities
- Regional introduction seminar	P	
- Local planning workshops	R	- Village selection
- Poster	E	
- banners I	P	
- Two-day district workshop	A	- Participatory dialogue I
- Sanitation promotion in VO/WO meeting	R	
- Hygiene education I (sessions in VO/WO meeting)	A	- Dialogue II, technical survey
- communal water promotion package	T	- Baseline survey
- School education activity I	I	
- Hygiene education II (sessions in VO/WO meeting)	O	
- School education activity II	N	- Provision of materials
- Posters II	P	
- banners II	H	
- Regular socio-Technical monitoring	A	
- Regular technical assistance	S	
- Monitoring	T	
- Technical follow-up if required	R	
- End of implementation activities	U	
	C	
	T	
	I	
	O	
	N	
	P	
	H	
	A	
	S	
	E	

Flow chart

## **CHAPTER 5: DEVELOPMENT OF COMMUNICATION ACTIVITIES**

The communication activities that are discussed in this chapter take place on social mobilization and programme communication level. The activities have been briefly discussed in chapter 2 and are not included here. The choice of activities is based on studies and the experience of WSHHSP during 1994 and 1995. A [draft] plan for each activity is presented on a separate page. The preparation of several activities has already commenced while the school education activities will be new to WSHHSP.

The flow chart overleaf presents the general sequence of the activities to be carried out in each village, from the start of the programme at the top until the completion of activities at the bottom of the chart. On the left side of the chart the programme communication activities are presented. On the right side important other village activities are mentioned that are not described in this communication plan.

### **5.1 COMMUNICATION ACTIVITIES AT SOCIAL MOBILIZATION LEVEL**

#### **Training**

Four training activities are suggested:

- Training activity 1: Regional introduction seminar (page 16)
- Training activity 2: Planning workshop (page 17)
- Training activity 3: Village introduction workshops (page 18)
- Training activity 4: Training in Participatory Health Education (page 19)

#### **Graphic materials**

The following graphic materials are recommended:

1. Annual Calendar (page 21)
2. Manual on Pit latrine and low-cost sanitation options (page 22)
3. Manual on Compost latrines and low-cost sanitation improvements (page 22)
4. Sanitation Promotion Package (page 23)
5. Communal Water Protection Package (page 25)
6. Family Sanitation Package (page 26)
7. Story Cards (page 28).

## TRAINING ACTIVITY:

### 1. REGIONAL INTRODUCTION SEMINAR

---

This is intended as a one day seminar in which WASEP will introduce the new implementation programme to the staff of partner organizations. The number of participants may range from 20 to 80 people.

- Aim:**
- To introduce the work methods and activities of WASEP to field staff of partner organizations
  - To make non-medical field staff aware of the germ theory, bacteria, virus and contamination routes;
  - To explain the different 'basic messages' (see chapter 4.2);
  - To introduce field staff to the available health education materials and the participatory approach;
  - To introduce and to explain the advantages and disadvantages of the various sanitation options.
- Target group:** Senior staff of NGOs, AKRSP WSOs and SOs, AKHS LHVs, field directors and coordinators, LBRDD staff
- Method:**
- Classroom teaching/lecture, participatory groups work
  - Microbiological lecture with demonstration of microscope
  - Slide presentation on water and sanitation, possibly VCR
  - Demonstration with latrine models
- Facilitators:** WASEP engineer, microbiologist, sanitation promoter and one social science staff
- Where:**
- 1 workshop in Chitral 1996
  - 1 workshop in Gilgit 1996
  - 1 workshop in Baltistan 1997
- Planning:** Design an outline during 1996 (deadline August)
- Responsible for design:** PAR-team, and WSHHSP Sanitation and Health education staff
- Number of events:** three

## TRAINING ACTIVITY:

### 2. PLANNING WORKSHOP

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This is intended as a workshop with an informal character in which all the local partner staff are invited (4-10 people). For each village that is selected for the WASEP programme this workshop will be organized. In the workshop a plan for cooperation will be discussed and a joined action plan should be the result.

- Aim:**
- To stimulate cooperation of water and sanitation related activities among field staff
  - To develop a joint action plan for the activities in the selected village
  - To (re-)introduce the work methods and activities of WASEP to field staff of partner organizations
  - To refresh the knowledge of non-medical field staff about the germ theory, bacteria, virus and contamination routes and the 'basic messages' of WASEP (see chapter 4.2)
  - To refresh knowledge about the available health education materials, participatory approach and the advantages and disadvantages of the various sanitation options
- Target group:** Locally based AKRSP WSOs and Sos, AKHS LHVs, field directors and coordinators, LBRDD field staff, GoP doctors and dispensers, teachers
- Method:**
- Classroom teaching/lecture, participatory groups work
  - Joined planning exercise
- Facilitators:** Staff of the regional implementation teams, initially assisted by core office staff
- Where:**
- Workshops should be carried out before the start of implementation activities
  - In or near every village where WASEP will carry out integrated activities
- Planning:** Design an outline during 1996 (deadline November)
- Responsible for design:** PAR-team, WSHHSP core office staff and regional implementation teams
- Number of events:** about 100

## TRAINING ACTIVITY

### 3. VILLAGE INTRODUCTION WORKSHOP

---

This workshop is intended for all the people who are involved with the implementation of the WASEP activities in the selected villages. About 15-30 people can attend. The workshop will be held to motivate and educate these activists.

- Aim:**
- To raise awareness on germs and contamination routes
  - To explain the available latrine options
  - To discuss and make plans for community participation
  - To motivate participants to discuss hygiene issues
- Target group:** Water committee members, Community health worker and other village activists
- Method:**
- Same as training-activity 1, but adjusted to the education level
  - Exchange visits to one or two villages of the participating water committee members
- Facilitators:** Regional implementation teams, microbiologist, sanitation promoter and one social science staff
- Where:**
- 2 workshops per year in Chitral
  - 1 workshop per year in Ghizer
  - 1 workshop per year in Gilgit
  - 1 workshop per year in Skardu
  - 1 workshop per year in Ghanche
- When:**
- In spring of each year
  - Workshops will be organized once a year between the years 1996 and 2001
- Planning:** Design of the workshop, preparation of an outline and field test (Deadline November 1996)
- Responsible for planning:**  
PAR-team with assistance of the WSHHSP core office staff and regional implementation teams
- Number of events:** six per year. A total maximum of 30 workshops until 2001



## TRAINING ACTIVITY

### 4. TRAINING IN PARTICIPATORY HEALTH EDUCATION

---

A series of workshops on participatory health education for LHV has been successfully carried out in 1995. It is intended that more training and refresher courses will be organized. In the future also WSO should be included in the training programme

#### Aim of the first workshop:

- To enhance the communication skills needed by the LHV (and WSOs) for participatory learning methods
- To raise awareness of LHVs (and WSOs) about their own role and attitude during health education session.
- To further improve the planning of health education session.
- To introduce and familiarize LHVs (and WSOs) with participatory health education materials

#### Aim of the second workshop:

- To learn to design and develop materials in cooperation with the graphic artist to be used in participatory health education
- To learn how to pre-test and adjust materials.

Target group: Lady Health Visitors and WSO (only for first workshop)

Methods: 

- Classroom teaching
- Participatory group work
- Practical work with male and female groups in the village

Facilitators: Staff of Health Education Support Unit (HESU) and staff of the WSHHSP core office

Where: 

- Workshops carried out in Ghizer in 1995
- Workshops carried out in Gilgit in 1995
- Workshop in Chitral
- Workshop in Gilgit region
- Workshop in Baltistan

Planning: 

- Field experiences are reported
- Manual on Participatory Health Education has been prepared



## GRAPHIC MATERIALS

### 1. ANNUAL CALENDAR

---

- Aim:**
- To raise attention and interest for WASEP activities in circles of Government administration, NGO staff, local leaders, schools and health centers.
  - To increase support to the programme and emphasize the collaborative character of WASEP
  - To raise awareness of the messages of WASEP
- Target group:**
- Decision makers
  - Partners of WASEP
  - Members of the water and sanitation committee and local activists
- Method:**
- Colourful poster with an illustration and calendar. On the bottom it should state that WASEP is a programme that collaborates with AK Health Services, Housing Board, Rural Support Programme, Education Services and Government departments of LBRDD, Education and Health.
  - The calendar should have one basic message consisting of an illustration with text. For example:
    - Illustration: Child drinking with a cup from the tap
    - Text: 'After we got safe water in our village my children had less diarrhoea'
  
    - Illustration: Child coming from a latrine and washing hands
    - Text: 'I am proud of our latrine, the cleanliness and purdah of my household'.
- Planning:**
- Develop and agree on the message
  - Preparation of calendar by artist
  - Print and distribution
  - Gather feed back and decide to continue with preparing calendar poster for the next year.
- Number of copies:** about 500 per year

## GRAPHIC MATERIAL

2. **MANUAL ON PIT LATRINE AND LOW-COST SANITATION OPTIONS**
  3. **MANUAL ON COMPOST LATRINE AND LOW-COST SANITATION IMPROVEMENTS**
- 

Both are intended as small booklets that can be used by field staff as a reference for ideas and suggestion on different sanitation options. The preparation of two manuals is required to cover the two distinct areas of Gilgit and Baltistan where compost latrines are found, and Ghizer/Chitral where compost sanitation is not an option

- Aim:**
- To inform field staff about the various sanitation options
  - To present guidelines for selection of options taking social, economic and physical criteria into account
- Target groups:** Field staff (WASEP sanitation promoters, LHVs, AKRSP Sos, LBRDD staff), village activists and health workers,
- Method:**
- Manuals with drawings and short explanation of the technical details
  - One manual emphasizing low-cost sanitation options such as pit latrine, trench latrine suitable for Ghizer and Chitral.
  - One manual emphasizing low-cost sanitation options such as qem, compost latrine, pit latrine suitable for Gilgit and Baltistan.
- Planning:**
- Finalize design of the manual on pit latrines and simple options
  - Continue the preparation of the manual on compost latrines
- Number of copies:** about 75

## GRAPHIC MATERIALS

### 4. SANITATION PROMOTION PACKAGE

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- Aim:**
- To provide interesting materials to field staff to perform participatory sessions with larger groups (up to 30-40 people)
  - To promote the construction of latrines
  - To raise awareness of the advantages of a latrine

**Intermediate target group:**

Lady health visitors, Social organizers, WASEP staff

- Target group:**
- Women during group meetings
  - Men during group meetings

**Method:**

- The use of coloured posters of 14.5 x 12 inches during meetings. The cards should be used in a participatory manner and help create a discussion on the subject. The package will make use of non-health arguments to promote the latrines.
- The package will have 10 cards showing the following arguments:
  - Smell
  - Privacy for men
  - Privacy for women
  - Easy for old or sick people
  - Comfortable in the winter
  - Comfortable in the rain
  - Comfortable for women and children in the night
  - No risk of stepping into human faeces
  - Clean environment
  - Animals cannot eat human faeces

See figures 3, 4, 5 and 6

- Planning:**
- Cards are developed and printed
  - Prepare and translate a guideline (April 1996)

**Number of copies:** 75



Examples of the Latrine Promotion Package

## GRAPHIC MATERIALS

### 5. COMMUNAL WATER PROTECTION PACKAGE

---

- Aim:**
- To provide interesting materials to field staff to perform participatory sessions with larger groups (up to 30-40 people)
  - To raise awareness of the possible contamination routes and the chance of water contamination
  - To motivate villagers to take action on communal water protection by covering tank, protecting inlet and stimulate the village to agree on regulations to protect the tank and inlet

**Intermediate target group:**

Lady health visitors, Social organizers, WASEP staff

**Target group:**

- Women during groups meetings
- Men during group meetings

**Method:**

- The use of coloured poster cards of 14.5 x 12 inches during meetings. The cards should be used in a participatory manner and help create a discussion on the subject.
- The package will have 8 cards with the following argument:
  - Animals drinking from the tank
  - Animals defaecating near the inlet of the tank
  - Children defaecating near the tank
  - Children playing in or near the tank.
  - Women washing clothes near the tank
  - A man taking a bath
  - etc...

**Planning:**

- Select arguments
- Prepare and pretest package
- Printing
- Preparation of a guideline

**Number of copies:** 100

## GRAPHIC MATERIALS

### 6. FAMILY PACKAGES

---

- Aim:**
- To provide interesting materials to field staff to perform participatory sessions with smaller groups and families up to 15 people)
  - To promote the actual use of latrines by all the family members
  - To explain and motivate the owners about the use and maintenance of the latrine and thus avoid smell and an unhygienic latrine
  - To discuss about the latrine openly and take away feelings of reluctance or shame, and to avoid that latrines are considered as a facility for only men or only women and children.

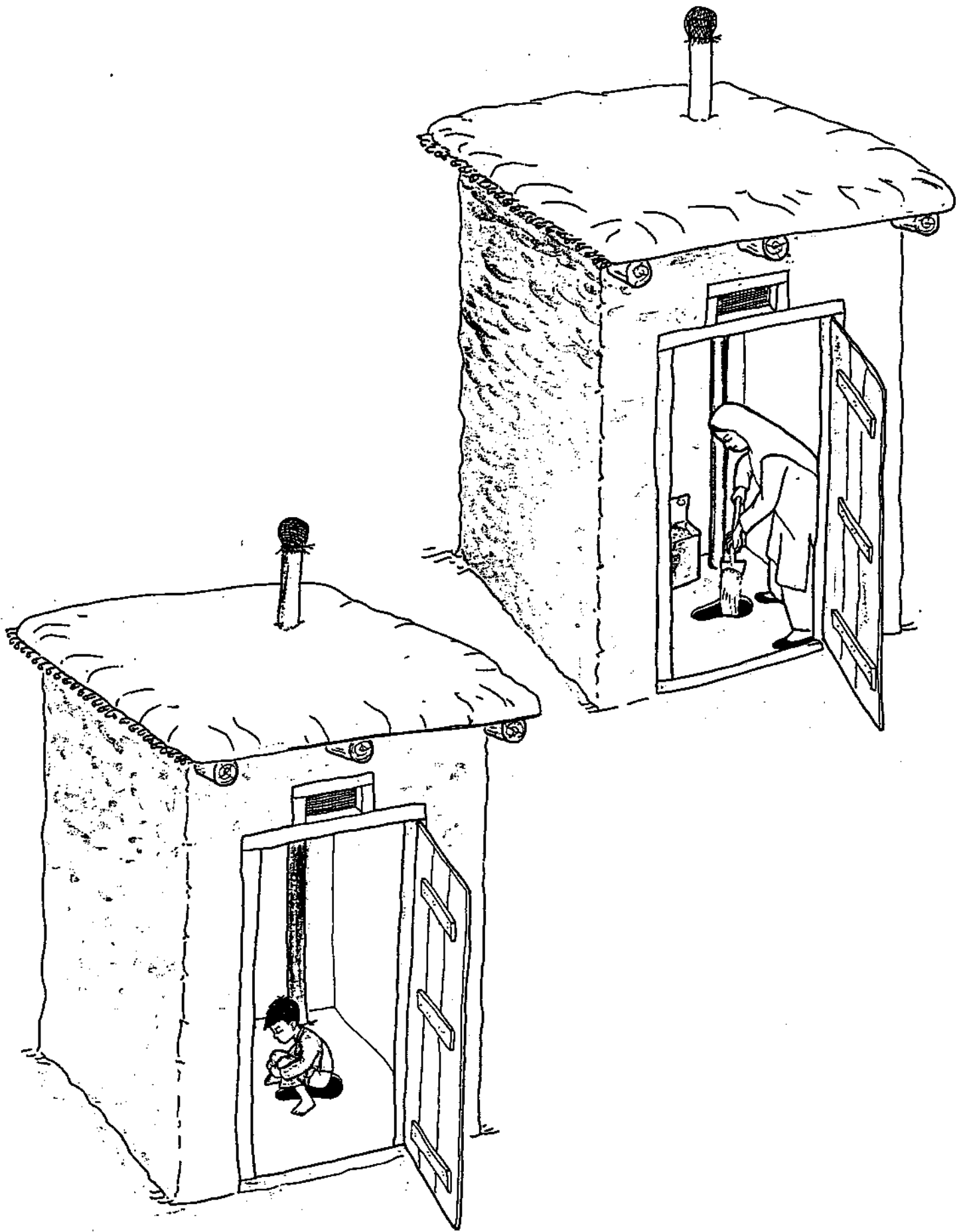
**Intermediate target group:** Lady health visitors, Social organizers, WASEP staff

- Target group:**
- Women during groups meetings
  - Men during group meetings
  - Families

- Method:**
- The use of coloured cards of 8.7 x 11 inch (A4-size) during meetings with smaller groups and sessions with individual families.  
Two sets will be prepared, each accompanied by a guideline:
  - Pit Latrine Family package (16 cards)
  - Compost latrine Family package (under preparation)
  
  - The pit latrine Family package uses the methodology of the three-pile sorting cards. In this method participants are asked to classify 13 cards as good, in between or poor behaviour. Three cards depict boys that illustrate these three qualities. The aim of the exercise is to stimulate beneficiaries to think about the maintenance and proper use of their latrine, and to stimulate discussion.
  - The cards contain 13 behaviours (see illustrations overleaf):
    - Woman sweeping the latrine with a closed lid
    - Woman sweeping the latrine with the use of water from a lota
    - Hole of the latrine is closed
    - Hole not properly covered and the floor stained with faeces
    - Boy sitting sideways above the hole and defaecating against the side of the hole
    - Boy sitting correct above the hole
    - Boy carrying out ablution in a special ablution place
    - Boy carrying out ablution above the hole
    - Door of the latrine closed, but fly-mesh of the ventilation pipe broken
    - Men repairing the fly-mesh
    - Door of the latrine closed
    - Woman adding ash or sand to the latrine content
    - Woman indicating that the latrine smells

- Planning:**
- The 16 pictures are prepared and printed
  - Preparation of a guideline (April 1996)





Examples of the family sanitation package

## GRAPHIC MATERIALS

### 7. STORY CARDS

---

- Aim:**
- To convey locally appropriate messages that were developed and produced by the educators themselves.
  - To explain and motivate villagers to think about water and sanitation problems and to stimulate local solutions.
- Intermediate target group:**
- Lady Health Visitors, Social Organisers
- Target group:**
- 8
- Village women, children and men
- Method:**
- The use of sets of negative and positive story lines that consists of four, five or six cards of 8.7 x 11 inch (A4-size) and a story.  
During the participatory health education trainingsprogramme the trainees have learned how to develop, colour and produce the story cards
  - The methodology is similar to the 'story with a gap'-method such as developed by the UNDP/Worldbank. The method is explained in the training manual on participatory health education.
- Planning:**
- Preparation of the trainings manual and conducting training on participatory health education

## **5.2 PROGRAMME COMMUNICATION LEVEL**

The following materials are suggested.

### **Graphic materials**

1. Do-it-yourself construction guidelines for sanitation (page 30)
2. Small poster on the proper use of the pit-latrine (page 31)
3. Folding cards (page 33)

### **Mass media**

1. Poster (page 35)
2. Banners (page 36)

### **School Education Programme**

School education programme (page 37)

### **Monitoring and Evaluation**

1. Monitoring format for field staff (page 39)
2. Monitoring format / register book for water committees (page 40)
3. Kap Survey Format (page 41)

## GRAPHIC MATERIALS

### 1. DO-IT-YOURSELF CONSTRUCTION GUIDELINES FOR SANITATION

---

- Aim:** - To explain the construction of latrines to villagers
- Target groups:** Village activists, health workers and village men and women
- Method:**
- Leaflet for villagers with simple drawing to explain the step-by-step construction sequence of building a latrine:
  - leaflets will be prepared on:
    - twin-pit compost latrine
    - improved pit latrine
    - simple pit latrine
    - pour flush latrine
- Planning:** Continue design and production of manuals and leaflets.
- Number of copies:** 1000?

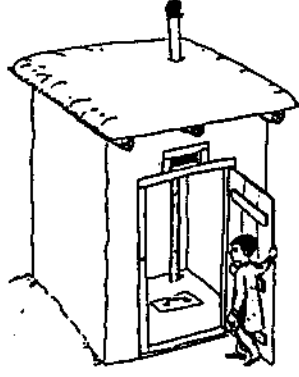
## GRAPHIC MATERIAL

### 2. SMALL POSTER ON THE PROPER USE OF THE PIT LATRINE

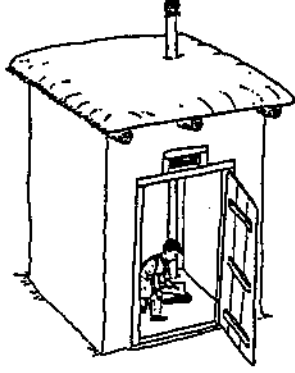
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- Aim:**
- To explain and to remind owners of the pit latrine to use their latrine properly
  - To appreciate the construction of their latrine
  - To enhance the status of a latrine
- Target group:**
- All households who have constructed a pit latrine
- Method:**
- Rectangular poster of 7.5 x 24 inch showing a boy entering the latrine and four messages:
  - Keep latrine clean tidy and the fly mesh intact
  - Close the lid on the hole
  - Close the door after use
  - Wash your hands after defaecation
- Planning:**
- Poster is produced and printed.
  - Organize distribution of the poster.
  - Carry out evaluation of the effect of the poster and its physical condition after a year.
  - Decide upon the preparation of a similar poster on compost latrines
- Number of copies:** 500 prepared in 1995

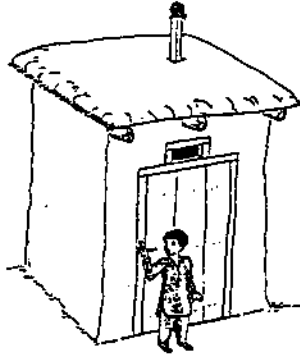
لیٹرین کے استعمال کا طریقہ



انور ہمیشہ پائڈا کرنے کے لئے لیٹرین میں جاتا ہے۔



انور پائڈا کرنے کے بعد لڑائی کے سوراخ کو چھکے سے بند کرتا ہے



انور ہمیشہ لیٹرین سے باہر آنے کے بعد دروازہ بند کرتا ہے۔



انور لیٹرین سے آنے کے بعد اپنے ہاتھ صابن سے دھوتا ہے۔

Poster on the proper use of the pit-latrine

## GRAPHIC MATERIALS

### 3. FOLDING CARDS

---

- Aim:**
- To assist village health workers with graphic materials to make their education sessions in the community more interesting and participatory
  - To make villagers aware of disease transmission routes related to WASEP target behaviours
  - To assist villagers with changing their behaviour and thus to prevent diseases

**Intermediate target group:**

- Health workers, trained birth attendants, lady health visitors, WASEP staff, teachers

**Target group:**

- Village women
- Children
- to a lesser extent men

**Method:**

- Folding cards, a set of 3 or 4 pictures on the front and 4 or 5 pictures on the back of a rectangular and folded card. The size of each picture is 7.5 x 7.5 inch.
- The front cards depicts a story with a problem and a negative ending, the back the same story with a hygiene message and a positive ending.
- Folding cards with positive and problematic story lines can be prepared for many different subjects.

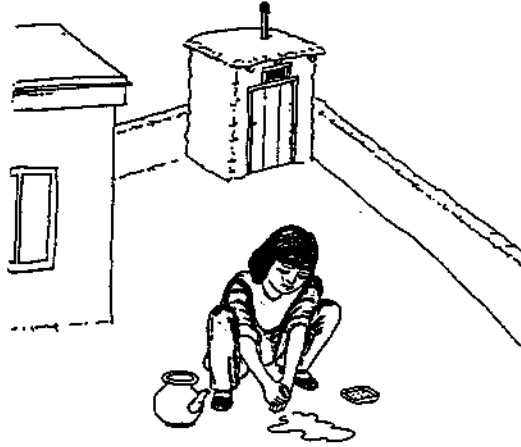
**Presently the following cards have been prepared:**

- Clean your storage vessel folding card (prepared)
- Wash your hands after defaecation folding card (prepared)
  
- Children faeces can cause disease package (drawings ready, develop into package)

# باتو کی کہانی



لیٹرین سے آنے کے بعد ہاتھ دھونا  
ضروری ہے۔



Example of a folding card



## MASS MEDIA

### 1. POSTERS

---

- Aim:**
- To introduce WASEP and generate active atmosphere in the village
  - To raise awareness on the need for safe water and clean environment
  - To create interest and promote sanitation

- Target group:**
- All villagers

- Method:**
- Multi coloured posters with text and illustration on cloth or paper
  - Illustration should be area specific
  - Preferably name of the village should be written on the poster
  - Two sets of posters are prepared with different types of messages, one set is distributed in the selected villages during the preparation phase.

The second set is distributed when construction of the water supply is nearly finished, after 6-8 months.

- The first two posters will contain messages on sanitation promotion, and the other on the contamination of unprotected water.

For example:

'We all should construct latrines for the cleanliness of our village'.

For example:

'Safe water from a tap will help us to protect the health of our families'

- The second two posters will contain messages on the use of sanitation and water.

For example: 'We have latrines and we use them'

For example: 'We have clean water, and we use it'

- Where to put:**
- Posters can be pasted in schools (1 or 2 of each), religious buildings (1 or 2 of each), Communal buildings like dispensary, health centre, hospital (1 or 2 of each) and at one or two public areas like near a shop
  - In the village between 5 or 10 posters of each kind will be pasted. Maximum number of posters is 20 - 40 posters.

- Preparation:**
- Develop and test ideas for posters
  - Carry out test with cloth or paper and calculate cost effectiveness
  - Prepare enough posters for year 1 and 2. Evaluate the effect and the practicality of the poster before printing larger numbers.

- Number of copies:**
- about 10 posters of each type per village x 15 villages per year makes a total of about 600 posters per year.

## MASS MEDIA

### 2. BANNERS

---

- Aim:**
- Introduce WASEP, generate synergy, put water and sanitation on the village agenda, create discussion
  - Raise awareness of the need for safe water and clean environment
  - Generate proudness and sense of community in the village
- Target group:**
- Village men
  - Children
- Method:**
- Cloth banners to be attached above the road in a central place of the village, near shops
  - One banner will carry a text on water, a second banner on sanitation
  - The banner should carry the name of the village and should address the villagers directly

**Suggestions on water:**

'We, the villagers of Wazirpur are working together to make a water supply with clean water from the tap'

'People in Mori Paen are going to drink safe water from their new taps'

**Suggestions on sanitation:**

'In Gishgish we are proud to have a clean village, with few diseases because of our new latrines'

'If we all will use a latrine, our village and our water will be cleaner and we will not have diarrhoea'.

- Preparation:**
- Prepare text for the banners
  - Experiment with different materials and cost-effectiveness

## SCHOOL EDUCATION PROGRAMME

---

- Aim:**
- To inform children about the integrated implementation activities in their village
  - Raise awareness of basic concepts of bacteria and transmission routes
  - Raise awareness about water contamination
  - Motivate children to discuss the issue of clean water and environment in their homes
  - Introduce the various sanitation options
- Target groups:**
- Children of class 7 to 10
- Methods:**
- The sessions will be facilitated by staff of WASEP and if possible field staff of AKHS, AKRSP. The teacher will be involved during the session but he/she will not be trained separately. Such a training will be too labour intensive. Evaluation of the Child-to-child programme in Chitral and discussion with AKHS shows that incorporation of separate hygiene lessons in the school curriculum is not feasible at this stage in time due to other priorities. AKHS and government education department should be requested to allow WASEP to carry out two session in each school in the intervention villages.

Session one, duration about 2 hours (during diagnostic phase):

- Introduce WASEP programme in a lecture
- Lecture on bacteria, depending on the level of the students also microscope demonstration can be included
- Discuss the existing (use poster with water sources) and the new water supply
- Participatory session on the need for sanitation (use promotion cards) and introduce different latrines (use models)
- Distribute coloured posters for the school.

Session two, duration about 2 hours (when water supply system is -nearly- completed):

- Repeat germ theory and the need for clean water and environment
- Discuss the progress in the village and in their homes
- Discuss the need for clean water, sanitation
- Demonstration how to use a latrine (Use key-hole shape model) and why and how to wash hands (Use first plain water and wash basin, secondly also water with soap)
- Distribute coloured poster and soap bars

- Other possible activities that can be incorporated:

- organization of youth groups
- village cleaning sessions
- de-worming of all students
- Contests, theater play

<b>Where:</b>	In every school in the implementation village. One session takes place during the diagnostic phase, a second session when the water supply is (nearly) completed.
<b>Facilitators:</b>	School liaison officer and possibly sanitation promoter, social science staff, LHV, CHW
<b>Planning:-</b>	Design an outline and pretest ideas - Contact AKHS and Government for permission
<b>Responsible</b>	- School liaison officer, other core office staff and HESU

## MONITORING AND EVALUATION

### 1. MONITORING FORMAT FOR FIELD STAFF

---

- Aim:**
- To monitor progress of the water and sanitation activities in the village
  - A means to have discussion with villagers and to note their feed-back
  - To discuss the register book of the water committee.
- Target group:**
- Villages where integrated activities are executed
- Method:**
- A one or two page format which will be kept in a file in the regional WASEP office.
- When:** In year 2 and 3 every six month, later once a year
- Planning:** Design and field test a monitoring form

## MONITORING AND EVALUATION

### 2. MONITORING FORMAT/REGISTER BOOK FOR WATER COMMITTEES

---

- Aim:**
- To gather complaints of women about the piped water supply
  - To register and discuss any type of complaint, feedback and problem in male groups
  - To gather specified data on performance of piped water supply
  - To register contribution payments to the water committee
- Target group:**
- Male and female villagers and members of the water committee
- Method:**
- Booklet in which important notes can be written down such as contribution, attendance, complaints etc.
  - Simple 2 page checklist which the water committee can keep with their records
  - Once every ... weeks the water committee visits the different sites of the scheme and fills the information on the checklist
- When:**
- During every meeting of the WO-meeting or women group and during meetings of the water committee and/or VO meeting

## MONITORING AND EVALUATION

### 3. KAP-SURVEY FORMAT

---

- Aim:**
- To establish baseline figure on hygiene behaviour during the preparation phase in the village
  - To monitor changes in hygiene behaviour after a time interval
- Target:**
- Village men and women
- Method:**
- Use of a questionnaire (see Issue paper 7 on KAP-Survey)
  - Use of sanitation observation formats
- Planning:**
- Agree on questionnaire as it is suggested in the KAP-survey report
  - Include KAP-baseline survey in implementation plan





## ANNEX 1 AIMS AND OBJECTIVES OF WASEP

### Aims of the WASEP programme

The goals and objectives of WASEP as they were formulated in the proposal for AKDN implementation are reproduced below. The elements with a direct implication for the communication strategy have been printed bold.

### Goal of WASEP

The broad objective of WASEP is to enhance the quality of people's lives in Northern Areas and Chitral. In particular the programme will develop local capacities for integrated implementation of drinking water supply and sanitation **in order to reduce the incidence and severity of water and sanitation related diseases.**

### Strategic objectives

To optimize the results and impact of existing water and sanitation facilities and future initiatives, in particular by **seeking to achieve a synergetic effect through the systematic coordination and integration of activities with the local AKDN institutions.**

**To support and supplement the activities of GoP, local NGOs, the private sector and others involved with water, sanitation and hygiene education**

### Specific objectives of WASEP

- To build up the managerial and organizational competence of rural communities for planning, implementing and managing their own improvements schemes for drinking water supply and sanitation.
- **To increase the number of people owning and hygienically using sanitation systems appropriate to their particular situation.**
- **To increase awareness among the beneficiaries about hygiene concepts and to assist them achieve appropriate changes in behaviours.**
- **To enhance the availability, accessibility, reliability and quality of water for drinking purposes** through improvement of existing resources, system rehabilitation, extension and upgrading of schemes and by the treatment of water.
- **To increase the number of people who take and safely use drinking water from improved water sources.**
- **To provide information, training and support services to the GoP, local NGOs, the Private sector and other individuals.**

