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**BACK TO OFFICE REPORT,
UNICEF, NAMIBIA**

**Field Visit to
Uukwaluudhi IABP
7-12 October, 1990**

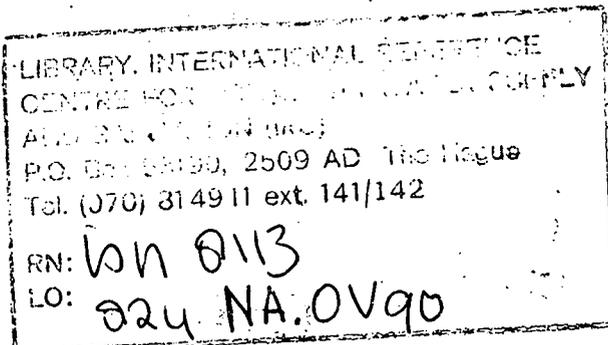
**Philip Evans,
Consultant**

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Annex 1: Findings of Poster Pre-Testing Exercise



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1.0 BACKGROUND

- 1.1 The visit was a follow-up to an earlier consultancy mission, undertaken 7-29 August, 1990, to review sanitation and hygiene education needs for the UNICEF/CCN Integrated Area Based Project (IABP) at Uukwaluudhi, Western Ovambo.
- 1.2 The primary purpose of the mission was to pre-test a draft poster set with members of the IABP Health Sub-committee, and develop local language texts for the posters. In addition, a general review of project progress was undertaken, with particular reference to the community mobilization programme and plans for the development of the sanitation component.

2.0 PRE-TEST OF DRAFT POSTER SET

- 2.1 The draft poster set consists of six posters, concerned with well protection, improved latrines, rubbish disposal, water storage and associated practices, and personal and domestic hygiene. These were developed as prototypes for use in the Uukwaluudhi IABP, with a view to wider distribution in future and the development of further posters and other materials.
- 2.2 The posters were reviewed on Monday, 8 October, by members of the project team, and draft local language texts developed. The original texts were in English.
- 2.3 On Tuesday, 9 October, the posters were reviewed in detail by members of the IABP Health Sub-committee, and numerous modifications and improvements were proposed and agreed. The Health Sub-committee membership is drawn from community members from all 10 divisions in Uukwaluudhi. This group was considered an appropriate reference group for the pre-test of the materials as they are broadly representative of the local community, with the one proviso that they are all literate in the local language. This group will also play a leading role in the distribution of the posters, and it is hoped will also use them as learning tools for community education work in their respective divisions. It was stressed to the group at the beginning of the pre-testing session that they should be uninhibited in their review of the posters, and see themselves as authors of the materials as well as reviewers. 1

- 2.4 The pre-testing session was attended by 12 members of the Health Sub-committee (nine women and three men), the project Community Mobilizer, Project Coordinator, and two Community Health Worker nurse-trainers as observers, in addition to the consultant. The session was led by the consultant and the Community Mobilizer. After a general introduction and explanation of the objectives of the session, each poster was reviewed in turn. The English-language versions were displayed, with the pictures discussed first. Only one or two members of the sub-committee have any knowledge of English, and most were thus unable to get any clues from the text in the first part of the review. The pictures were discussed in detail, after which the draft local language texts were presented and discussed. Many changes were proposed for both the illustrations and the text in a lively and productive session.
- 2.5 The group was generally very impressed with the prototypes. They were concerned, however, that the illustrations should reflect as accurately as possible the situation in the Uukwaluudhi area. This would ensure that people would identify with them, and understand that the messages they contained were clearly relevant to conditions in the area.
- 2.6 The results of the pre-test, giving a summary of the proposed modifications to the illustrations, and local language versions of the texts, are attached as an annex to this report.
- 2.7 At the conclusion of the pre-test, the Health Sub-committee members undertook to develop a distribution key for the posters, and begin to plan community-based learning sessions at which they could be used, at their next meeting.
- 2.8 Towards the end of the mission, the prototypes were shown to Ms Toos van Helvoort, Coordinator of the Roman Catholic Church of Namibia's Community Based Health Care (CBHC) programme, and to members of the DAPP project team working in the Ombalantu area. Ms van Helvoort expressed a great deal of interest in the posters and indicated her willingness to use them in the CBHC's Community Health Worker programmes at Ombalantu, Tsandi, and Oshikuku. She also indicated that she would be willing to take them to Kavango region early in the new year and test them there and develop local language texts in that area. It is strongly recommended that this offer of assistance be taken up and that copies of the posters be provided to the CBHC programme.
- 2.9 The DAPP workers also expressed an interest in using the posters to support their own programmes and it is also recommended that sets be made available to them. In addition, DAPP is expecting a group of health and education volunteers

in the near future from the USA, and expressed an interest in collaborating with the IABP in developing a demonstration latrine construction programme. The possibility of such collaboration should be followed up as a matter of urgency.

3.0 COMMUNITY MOBILIZATION PROGRAMME

3.1 A draft schedule for the launching of the community mobilization component of the IABP has been prepared by the project Community Mobilizer, Mrs Helvi Aupindi. The schedule proposes a series of community meetings in all 10 divisions, at which the aims and objectives of the project will be explained and discussed. The schedule was reviewed with the project team and it was agreed that attempts should also be made to encourage the establishment of community committees in the divisions to reflect the Interim District Development Committee (IDDC) structure which is operating at a central level in Tsandi. This approach should help to strengthen the mandate of IDDC members, and provide structures through which projects can be implemented at divisional level.

3.2 The major constraint to the full-scale launching of the mobilization programme at present is the shortage of project transport. The single project vehicle is currently fully committed to supporting the water technology demonstration programme, which is currently underway and must meet a series of tight deadlines if all the demonstration units are to be in place before the onset of the rains. This demonstration project must have top priority in the coming weeks. A second project vehicle is due to arrive very soon, and steps should be taken to get this vehicle (and a driver) to station as quickly as possible.

4.0 COMMUNITY HEALTH WORKERS PROJECT

4.1 A training course for volunteer Community Health Workers (CHWs) began on Monday, 8 October, in Okashidi division. The course is being led by two community health nurses from Ukwaluudhi Hospital, following their completion of a training course held by the Catholic Church's CHBC programme. The course was attended on Wednesday, 10 October, by the consultant, and the Project Coordinator.

4.2 Although in its very early stages, the course appeared to be going very well. Twenty volunteers have been recruited, 18 of whom were in attendance during the team's visit. The nurse-trainers displayed a high degree of competence and good communication skills, and lively discussions were a marked feature of the course. During the session attended by the team, the basic elements of primary health care were discussed

and useful insights gained into community views on a set of health issues. Attitudes towards basic health messages in relation to hygiene, nutrition, health care of pregnant women, and the containment of contagious diseases were generally quite positive.

- 4.3 The more contentious issues appeared to be child spacing and immunization. The promotion of the use of birth control methods was seen as a major problem, with many of the volunteers uneasy about contraception as a child spacing method. Children are seen as highly desirable, with attempts to limit their numbers being culturally unacceptable. Women were concerned that limiting the number of children they produced may have a detrimental effect on their marriages.
- 4.4 Attitudes towards immunization were mixed. Though seen as valuable in protecting children from disease, this view was mixed with some uncertainty and suspicion of the full intentions of the immunization programme. Women were somewhat suspicious of adult immunization, some believing it to be an underhand way of injecting them with contraceptive medicines. Men were also puzzled as to why mothers were asked to come for injections whereas men were not. This view reinforced the suspicions about the contraceptive role of adult immunization. This view is clearly one which should be further investigated and the potential impact on the national immunization programme as a whole assessed.
- 4.5 The first major obstacle which the nurse-trainers will have to overcome is to convince the volunteers themselves of the value of the approaches they are advocating. The generally positive atmosphere and enthusiasm of the volunteers bodes well, but the task is unlikely to be easy.
- 4.6 In general terms, the CHW programme in Uukwaluudhi has the potential to be a great asset to the IABP and provides an excellent opportunity for the development of a strong working relationship between the project team and local health workers. Every effort should be made to consolidate this working relationship and it is recommended that the Community Mobilizer collaborate closely with the nurse-trainers and the Matron at Uukwaluudhi Hospital in the development of the mobilization programme. The prototype project posters should also be made available to the nurse-trainers for use in the course, and the CHWs for distribution and community education.

5.0 WATER TECHNOLOGY DEMONSTRATION PROJECT

- 5.1 Intensive work has begun on the IABP's water technology demonstration project, and the project's water adviser and driver have a tight schedule to complete in order to have all

the demonstrations in place before the start of the rainy season. The response from the community has been generally positive, though there is some variance from division to division. The project is being slightly hampered at present due to some confusion over financial procedures which is causing some problems in the procurement of materials, and the pressure on the project vehicle.

5.2 During the mission, a community meeting was held at Okashidi to discuss a well-sinking project which is underway there. The meeting was held on Thursday, 11 October, and was attended by the consultant, Project Coordinator, Community Mobilizer, Water Adviser, and a representative from CCN who has undertaken to assist with well-sinking operations. A site has been identified for the well, and excavation begun. The well-sinkers were briefed on how to complete the excavation work, and assured of assistance from the IABP in the lining and completion of the well. The meeting was led by the Community Mobilizer, who focussed on the need for greater community support to the well sinkers. There was a generally positive atmosphere and, by the end of the meeting, the community seemed to be prepared to accept the necessity for substantial self-help efforts.

5.3 Community willingness to participate in the well-sinking operation is largely based on the hope that the provision of an extra water supply in the division will enable them to obtain support from MOH for the establishment of a clinic or health post. No firm agreement has yet been reached with MOH, though the idea has been discussed in principle. At the very least, it is recommended that the project ensure that some kind of health-related facility be constructed alongside the new well. This could consist of a meeting and store room which could be used by the CHWs, and perhaps also by the community nurses as a base for a mobile clinic service providing basic MCH, immunization, and preventive health services. These proposals will require further detailed discussion with the hospital matron and the regional medical director. Failure to develop any kind of facility at the well site may have severely detrimental effects on project credibility.

5.4 In general, it seems that the potential for community inputs to self-help projects is reasonably high, particularly in respect of clinics and schools. It will considerably help project planning and mobilization if detailed discussions can now be held with MOH and the Dept. of Education over these issues, with a view to obtaining commitments from government departments to match community efforts.

6.0 SANITATION COMPONENT

- 6.1 The sanitation demonstration project has not yet begun, and is unlikely to get off the ground until the first phase of the water demonstration project is complete. Two VIP latrines have been ordered from the Rural Development Centre at Ondangwa but these have not yet been collected due to uncertainty as to who should pay for these (UNICEF or CCN).
- 6.2 As noted above, there is good potential for cooperation with DAPP on the development of the latrine demonstration project. This should be urgently followed up, with a view to obtaining the services of some of the DAPP volunteers to assist in the construction of demonstration units and the training of community members in latrine construction techniques.
- 6.3 A local workshop in Tsandi has expressed an interest in attempting to replicate the zinc-sheet version of the VIP and the potential thus exists for local private sector production of latrine units. A brick making project has also begun, and demonstration units could be made in future using locally-produced bricks.
- 6.4 It is recommended that detailed discussions be held with DAPP with a view to securing definite agreement over the availability of volunteers to assist the latrine project. Cost estimates should also be made of the implications of the demonstration project and steps taken to ensure that funds will be readily available when the time comes. In the meantime, top priority should be given to the completion of the water technology demonstration units to ensure that these are completed in time, before attention is turned to implementing the latrine demonstration project.

7.0 GENERAL OBSERVATIONS

- 7.1 General progress appears to be quite good, with the start of the water project and brick-making project providing evidence to the community of the project's serious intent. Certain problems are evident, however, which will need attention in the immediate future.
- 7.2 The vehicle problem has already been noted, and is likely to be solved in the very near future. Uncertainties among the project team about financial procedures will also require clarification. The easier local availability of funds for the purchase of building materials appears to be necessary to ensure that the demonstration projects can keep to schedule.
- 7.3 In general terms, there is room for some improvement in general project planning and the development of strategies. It

is recommended that further support be given to the project coordinator in the development of an overall project workplan and the general documentation of project activities. This work should be linked to the development of closer working relationships with government departments, including the establishment of joint plans and mutual commitments, and with other projects working in the region. At this point, a slightly stronger focussing of immediate objectives may assist in clarifying to the community precisely what can be expected from the project itself, and what is expected in self-help terms from the community. This process will also allow the project team to focus on a limited, but clear set of objectives while experience and confidence is built up for a more improvisational and flexible response in the future development and expansion of the project.

ANNEX 1.

**FINDINGS OF POSTER
PRE-TESTING EXERCISE**

**HYGIENE POSTERS
COMMENTS FROM PRE-TEST**

Poster #1: "Protect your well..."

Whole well should be shown, down to ground level, sides to be smooth rather than bricked.

Handle to be removed, and lifting mechanism to be shown as a pully & rope.

Well opening to be made smaller, and shown with cover.

Sillouhette of woman with pot to be kept.

Ovambo-style household to be shown in the far distance, but not to be viewed through the lifting gear. Background to be far less detailed.

Moon to be removed.

Poster #2: "Build an improved latrine..."

Toilet to be redrawn in accordance with photo.

Background to be simplified.

Latrine to be located outside of house compound, but within farm fence.

Poster #3: "Protect your water..."

Tap & well recognized with no problem.

Storage containers to be replaced with clay pot with basket cover (see photo).

Dog & bucket fine, but should show pot with cover knocked off, and "X" to be more boldly marked in red.

Woman should be shown drinking from calabash (see photo), with clay pot in background.

Poster #4: "4 steps to better health..."

Pictures recognised well, but four steps seen as a narrative, change of order required therefore, as follows:

- #1 Drink clean water
- #2 Use toilet
- #3 Wash hands
- #4 Bury rubbish

Woman should be seen drinking from calabash, as in poster # 3

Background to toilet should be changed to show local-style housing (use same picture as on latrine poster ?).

In hand washing picture, window in background should be removed, and soap shown alongside bowl.

Rubbish disposal picture not understood at all. Picture should show a woman emptying rubbish from a basket (see photo) into a pit. Man can be shown standing alongside with spade. Rubbish should consist of cans, broken bottle, paper bags, etc.

Poster #5: "Dirty hands..."

Hand-washing picture: remove window & towel (some people thought the woman was doing laundry). Same illustration, with full head, to be used as in poster #4.

Cooking pot to be changed to local style, placed on three stones (see photo).

Boy eating at table should be replaced with small group sitting on logs eating with hands from same basket and clay pot.

Baby feeding picture to be shown as breast feeding.

Cleaning baby picture to be more explicitly drawn (perhaps change angle of view ?).

Take out flush toilet, and show toilet illustration used in other posters.

Animal picture to be replaced with one showing boy with donkey & cart, with arm round donkey's neck.

Poster #6: "Rubbish..."

Picture very poorly understood, though rat and flies were liked.

Replace with two pictures:

- #1 showing bad practice, with woman emptying cans, broken bottles, etc. by fence. "X" alongside bad picture.
- #2 showing rubbish disposal picture from poster #4. "Tick" alongside good picture.

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KEEP CLEAN! KEEP HEALTHY!



Protect your well

- for health
- for safety

"Protect your well.."

KALA WA YELA

OPU U KALE U NA UUKOLELE

Gamena edhiya lyoye

- * Molw' uukolele
- * Molw' egameno

KEEP CLEAN! KEEP HEALTHY!



Build an improved latrine

- NO SMELL
- NO FLIES
- BETTER HEALTH FOR YOUR FAMILY

IF YOU WOULD LIKE TO BUILD
A LATRINE, CONTACT.....



SPONSORED BY ILO/IFP

"Build an improved latrine..."

KALA WA YELA

OPO U KALE U NA UUKOLELE

TUNGA OKANDJUGO OKAWANAWA

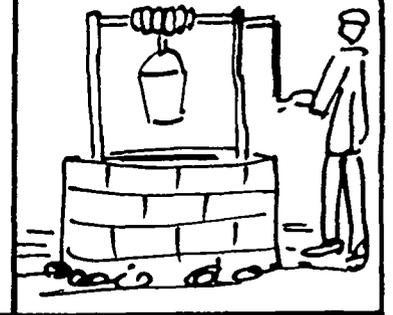
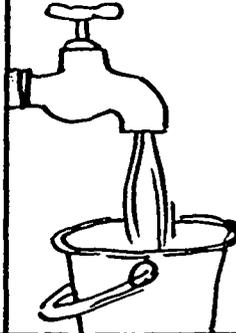
- * Itaka nika
- * Ita ka gongala eendhi
- * Ke na sha nuukolele waanegumbo
lyoye

KEEP CLEAN!

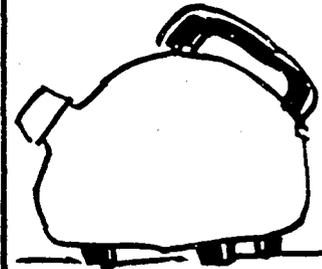
KEEP HEALTHY!

PROTECT YOUR WATER

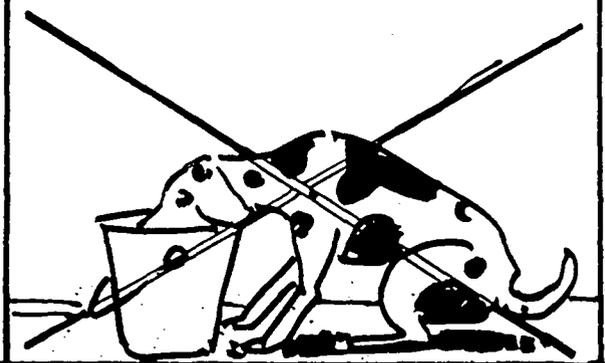
Collect
clean water



Keep waterpots
covered and
clean



Keep animals
away



Drink from a
clean cup.



FOR MORE INFORMATION
CONTACT.....

SPONSORED BY:



"Protect your water.."

KALA WA YELA

OPU U KALE U NA UUKOLELE

GAMENA OMEYA GOYE

- * Teka omeya ga yela
- * Iikwatelwa yomeya nayi kale ya yela
yo na yi kale ya siikilwa
- * Omeya gokunwa inaga nuwa kiinamwenyo
- * Nwina mekopi nenge mompamba ya yela

KEEP CLEAN! KEEP HEALTHY!

4 STEPS TO BETTER HEALTH

1

Keep hands clean
Bathe everyday



2

Use a latrine



3 Drink clean
water



4 Bury rubbish



FOR MORE INFORMATION
CONTACT

"4 steps to better health..."

KALA WA YELA

OPO U KALE U NA UUKOLELE

Oonkatu ne dho ku ku kaleka u na
uukolele

1. * Omake goye naga kale ga yela
* Yoga olutu lwoye esiku kehe
2. * Longitha okandjugo
3. * Nwa omeya ga yela
4. * Fumbika iiyagaya

KEEP CLEAN! KEEP HEALTHY!

**DIRTY HANDS
SPREAD DISEASE**

**KEEP HANDS
CLEAN WITH
SOAP AND WATER**



ALWAYS WASH YOUR HANDS

BEFORE

AFTER

**COOKING
FOOD**



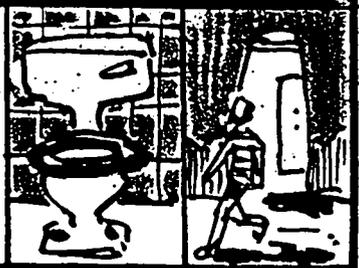
**CLEANING
BABY**



EATING



**GOING TO
TOILET
(LATRINE)**



**FEEDING
BABY**



**PLAYING
AND
WORKING
WITH
ANIMALS**



MAKE IT A HABIT

"Dirty hands..."

KALA WA YELA

OPO U KALE U NA UUKOLELE

Omake ga luudha otaga taandelitha
eembuto dhuuvu

- Yoga omake goye nomeya nothewa

- Yoga alushe omake goye

* MANGA INO TAMEKA

1. Okuteleka

2. Okulya

3. Okupalutha okanona

* KONIMA

1. Yo ko opaleka
okanona

2. Yo ku za
kokandjugo

3. Yokudhana
nenge wa
l o n g a
nininamwenyo

SHIKA NASHI KALE ONGOMUKALO NDJIGILILE !

KEEP CLEAN! KEEP HEALTHY!



RUBBISH ATTRACT RATS
AND FLIES, AND SPREADS
DISEASE. — BURY IT!

FOR MORE INFORMATION
CONTACT

SPONSORED BY:  UNICEF

"Rubbish..."

KALA WA YELA

OPU U KALE U NA UUKOLELE

Iiyagaya otayi eta eembuku neendhi
notayi taandelitha wo eembuto dhuuvu

NA YI FUMBIKWE !