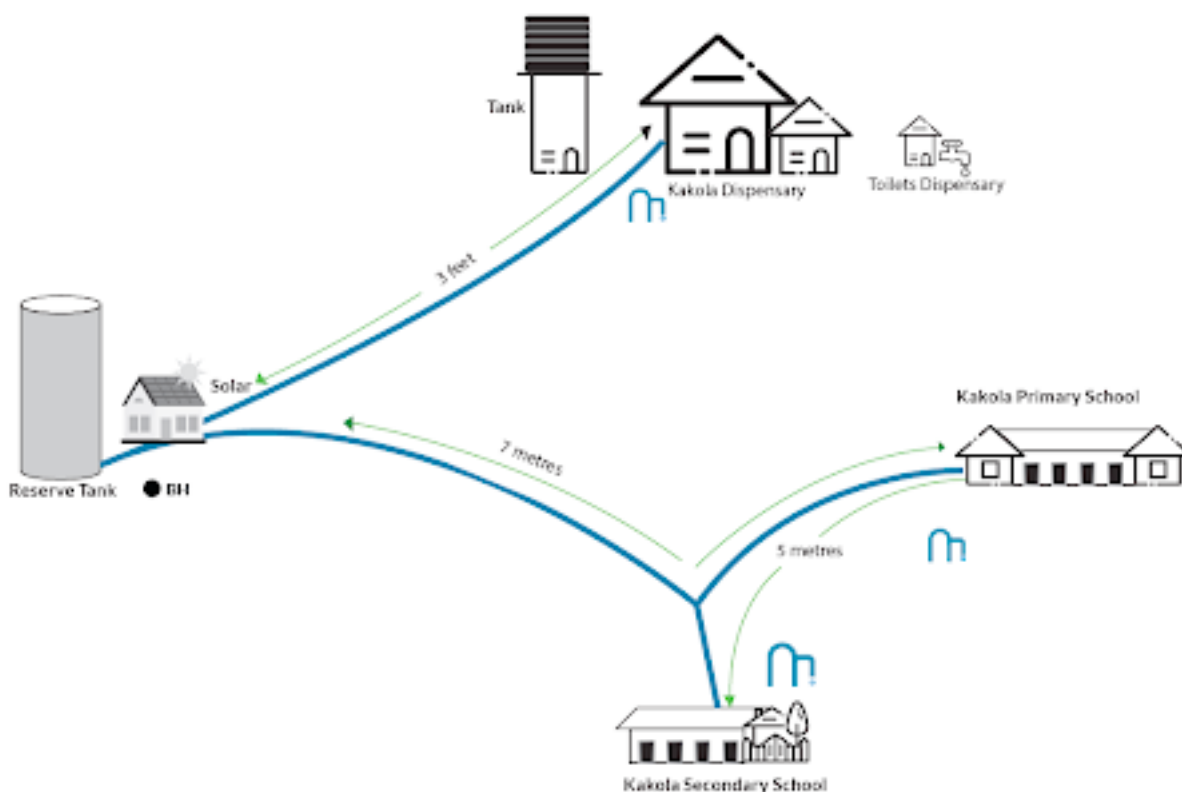


Mainstreaming WASH Through Effective Partnerships



Case Study – Strategic Partnership for WASH for effective and efficient health service delivery in Geita and Nyang’whale Districts



Wash in Health Care Facilities in Kakola village- Geita District ▲

Introduction and Objective

The baseline assessment indicated limited access to water availability at school, health facilities and community levels in Geita and Nyang’whale districts even though Geita Region is bordered by Lake Victoria. Common sources of water for households, facilities and Schools included seasonal boreholes, unprotected wells, and dams. WaterAid in collaboration with AMREF implemented a project to address maternal, newborn and child mortality in Geita and Nyang’whale Districts. This cross-sectoral partnership worked to improve Water, Sanitation and Hygiene (WASH) as a fundamental pillar of public health in 12 healthcare facilities (HCFs) and surrounding communities and schools.



Activities

- Built sustainable 12 WASH infrastructures to ensure consistent water supply to the Healthcare facility, school, and community.
- Installed rainwater harvesting system and solar panels to provide the electricity needed to pump water from the borehole to the healthcare facility, school and community.



Female executives from Canada visiting during official launching of Kakora Solar Water Scheme which supplies more than 3000 people in Kakola village, Kakora Dispensary, and Kakora Primary School with safe drinking water, Nyanghwale District, Tanzania. ▲

Success

- Successfully connected water to the 12 health care facilities and served a total of 600,000 women, children and men



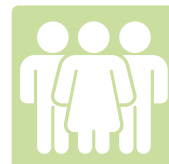
▲ Women carrying water outside the water tank in Nyamalimbe HCF, which also serves the community



▲ Rebecca Masumbuko, 18, collecting water from the tap at the dispensary, Nyamalimbe Dispensary, Geita District, Tanzania.



▲ Benita 15, collecting water from a newly built school water tap, Kakora Primary School, Nyanghwale District, Tanzania



Enabled running water in maternity wards and examination rooms, in addition to flushing toilets in each of the 12 health care facilities.

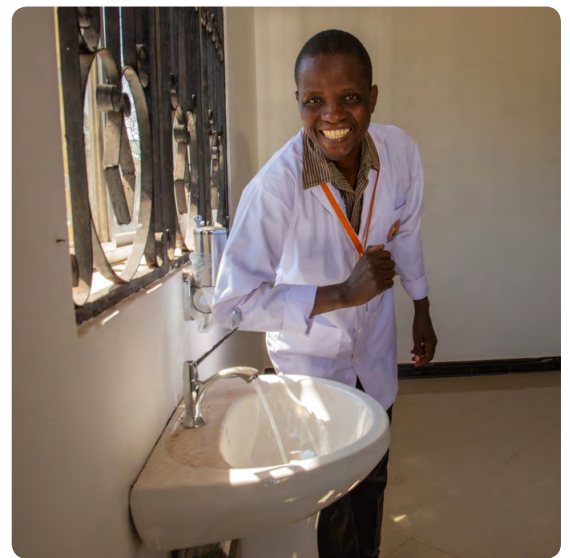
Improved capacity of health workforce to deliver essential MNCH services at community & health facility levels.



“A lot has changed since WaterAid started implementing a water, sanitation and hygiene project in the hospital. We have a big underground rainwater tank. When full, it stores 100,000 litres of water. This water is harvested from several buildings, and a solar pump has been installed to pump the water in a raised water tank that supplies different water taps within the hospital. No one has to bring water from their homes for use while at the hospital.”

“Our morale and motivation at work have greatly improved. I am happy that we have enough water at the health centre. Improved access to water and good hygiene practices in a hospital environment means infection prevention and control. There are no sepsis cases due to improved hygiene!

As a doctor in charge of this hospital, when I give instructions about hygiene improvements they are easily followed. The medical workers are very motivated and very welcoming to patients. This has won lots of confidence and trust of our patients, and more expectant mothers are now coming to deliver their babies here.” Dr. Lubango - Kharumwa Health Centre as the main referral health centre in Nyang’hwale District Council.



▲ Dr. Casmir Lubango, 36, medical officer, in the maternity ward after attending to mothers at Kharumwa Health Centre, Nyang’hwale District, Tanzania.

▲ Dr. Casmir Lubango, 36, medical officer, testing the functionality of the newly installed piped water system in the new maternity ward at Kharumwa Health Centre, Nyang’hwale District, Tanzania



▲ Kwilaba, 17, with her three hours old baby girl. She is happy that the dispensary has water supply all the time

- Access to WASH increased trust in the health services and women felt more comfortable to give birth in Health Care Facilities as opposed to at home.
- The project created a conducive environment, which created demand for better RCH services. The endline evaluation informed an increase in the number of clients (demand) in the healthcare facilities, and this was associated with the quality of WASH, RMNCH, and nutrition services that the project provided (supply) to clients/visitors.
- Busolwa, is one of the sites with the added solar panels. With the newly mechanized borehole, the COWSO has managed to collect over 5 million TZs in their account within a year. Revenue collected has also been able to contribute to the construction of 12 household water connections.

Challenges

- Vandalism of the installed infrastructures. While the fencing was retrieved, the health care facility management and the district strengthened the security and that the facilities ensured budget allocation for minor repairs was essential.

Lesson Learned

- Inclusion of different stakeholders from the proposal stage to inception is very important in enhancing participation, ownership, awareness, and sustainability of the project. The project team cooperated with the whole regional and local administration from higher to lower levels which made it easier to understand the project and further increase the commitment to achieve the project goal.
- Since the water supply is handed over to the community-owned water and sanitation organization, COWSO, institution capacity needs to be strengthened. For sustainability purposes, the water projects should be integrated within the utility to potentially raise revenue for operations and maintenance and contribute to extensions of the project.
- The proper design of rainwater harvesting systems can help to solve water challenges in healthcare facilities throughout the year.

Recommendations

- The districts and facilities in Geita region and beyond need to adopt the model used in this project and implement the same in their areas either using their own sources of funds or looking for a partner to support them.
- The government needs to ensure that adequate funds are allocated and disbursed to cover for the cost related to operations, maintenance, renovation, and expansion. Sustainability and expansion of project activities require the commitment of the government from the national to the local levels and other key partners.
- Health facility governing committee should meet regularly to review their roles and to make a follow up of the facilities to ensure the achievements made in RMNCH, WASH and nutrition are sustained and expanded.
- The community water committee needs to consider use of the collected fund to expand water services to the community. This will increase the number of people who have access to water and increase the collection as well. In the long run the whole community will have access to water.
- The water committee should have forums with village leaders to discuss the issue of water in respective villages to avoid interference and conflict of interest between the organs.



About WaterAid

Since 1983, WaterAid has been working closely with global and local partners to put access to safe water, sanitation and hygiene (WASH) at the center of national development to transform lives of the poorest and most marginalized people by improving their access to WASH in communities across Tanzania. Our work focuses on programmatic work that is innovative and sustainable, with an emphasis on using lessons and experiences on the ground to advocate for key policy issues and influence national level change. To date, WaterAid has directly reached more than 8 million Tanzanians across 11 regions of both the mainland and Zanzibar with access to WASH. We make a bigger impact because we bring people together, actively encouraging collaboration so that many voices can be heard, and ideas can spread. Together, we will change millions of lives for the better – and change normal for everyone, everywhere within a generation.