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A Community Approach Helps Households Adopt Better Hygiene Practices to Improve Family Health



[Photos: P. Mantey (AED)]

Households are taught to use a narrow neck container to store drinking water, such as this locally made one, with a cover, to reduce contamination during storage.

Since 2006, the USAID Hygiene Improvement Project and the Water and Sanitation Program in Ethiopia have supported the Amhara Regional Health Bureau's efforts to meet the national goal of universal access to sanitation by 2012. This initiative, known as the Learning by Doing Program, has seen significant increases in the number of households that use a latrine regularly and practice other improved hygiene behaviors they've learned from the health extension workers who regularly visit their communities. In some communities, latrine usage before the program was around 19 percent, but now 60 percent or more of households have their own latrine. "The biggest challenge," said Gojem Abere, head of the District Health Office in South Achefer Woreda, "is to change behavior and motivate people." It is also important to persistently follow up with communities to assess their progress, he said.

Health extension workers visit their assigned *kebeles* (neighborhoods) each week and work with the local volunteer health providers to teach and reinforce components of the 16 health packages developed by the Amhara Regional Health Extension program. Twelve include hygiene and sanitation components, including promotion of latrine use, hand washing with soap or ash, and safe storage and treatment of drinking water. Each kebele has 20 to 30 volunteer health promoters who are selected by the community, and they in turn work with as many as 50 to 60 household groups (or *gotts*) to teach or follow up on their progress practicing improved health behaviors through activities such as coffee ceremonies or church groups.

In addition to the construction and use of latrines, more households are storing drinking water in narrow neck containers or jerry cans to keep their water clean, washing their hands at critical times (especially after using a latrine or before eating) with soap or ash, using a tippy tap water saving device, and keeping their animals away from household areas.



Madame Tabote and her family regularly practice the improved hygiene behaviors they learned from their community health worker.

Visitors to the Godema Gott in South Achefer will notice that all the households have latrines, but many do not meet all the standards for safety, privacy, and comfort; at least one household latrine appeared not to be used at all because of its dilapidated condition. However, one household stands out in this community—Madame Tabote's. Her house is well kept—drinking glasses are stored safely to keep them clean, drinking water is properly stored, the latrine has a squat hole cover to keep away flies, ash is used to wash hands, and the animals are kept penned up. She spoke with great pride at the changes she had made in her household as a result of what she learned from the community health worker and her belief these changes are making her family healthier. “The latrine saves us time and gives privacy,” she added.

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