



**African Population and
Health Research Center**

Management of Shared Sanitation in Kenya and Ghana

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LIRA WEBINAR
19 Nov 2020

Outline

- Rationale and objectives of the study
- Partners and stakeholders involved
- Outputs and outcomes
- Lessons learned
- The future of the project

Rationale and objectives of the study

- Inadequate sanitation is the norm in low-income communities in most developing countries (including Kenya and Ghana).
- Inadequate sanitation results in poor outcomes (including health)

Project aim: To identify strategies for proper management of shared sanitation facilities in informal settlements

Specific Objectives

1. Characterise the existing shared sanitation facilities
2. Identify barriers and opportunities for management of shared sanitation facilities
3. Co-design and test strategies that promote sustainable use of shared sanitation facilities.

Partners and stakeholders involved

Category	Specific Partner
Research Organization	African Population and Health Research Center
Academic Partners	Kwame Nkrumah University of Science and Technology (Ghana) University of Energy and Natural Resources (Ghana) Kenyatta University (Kenya)
Governmental	County Government of Kisumu Kumasi Metropolitan Assembly Oforikrom Municipal Assembly CHVs/EHAs
Community	Community members CHVs/EHAs Community leaders
Non-Governmental	Practical Action Water and Sanitation for the Urban Poor/ Clean Team Ghana Ltd Kisumu Water and Sanitation Company
Private Sector	Local Media stations

Outputs

- In depth understanding of shared sanitation in low income settlements
- Scientific outputs (4.)
- Knowledge translation products
- Media articles and features (2)

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Open Access Article

Understanding the Barriers and Opportunities for Effective Management of Shared Sanitation in Low-Income Settlements—The Case of Kumasi, Ghana

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RESEARCH ARTICLE Open Access

Barriers and opportunities for cleanliness of shared sanitation facilities in low-income settlements in Kenya

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Abstract

Background: The sharing of sanitation facilities is a common practice in low-income areas in sub-Saharan Africa. However, shared sanitation is currently categorized as a limited sanitation service, and may therefore not count towards meeting the global goals. These shared facilities are often the only option available for most residents in low-income settlements, and improving their cleanliness and overall management is key to reducing open defecation and risk of disease. This study sought to investigate barriers and opportunities for improved cleanliness of shared sanitation facilities in low-income settlements of Kisumu city, Kenya.

Methods: Thirty-nine in-depth interviews and 11 focus group discussions were held with residents – mainly tenants and landlords – of a low-income settlement in Kisumu. Analysis followed a thematic approach to define the

The RESSA Project

Ghana Kenya

Policy Brief 1

November 2018

Improving sanitation management and quality: An overview of the 'Research on Shared Sanitation in Africa' (RESSA).

Introduction

African countries are faced with an increasing urban population growth which has led to the lack of affordable and/or better low-income settlements (LIS). Sanitation services in these settlements are often either lacking or inadequate. Settlement conditions such as poor urban planning and increasing land area resulted in the need for the public provision of individual household sanitation facilities. Sharing of sanitation facilities among households in low-income settlements is a common practice in these settlements. Through sharing, many residents who do not have their own shared sanitation facilities to individual settlements are included (1) (2).

Use of unclean shared sanitation facilities has far-reaching consequences that expose users to health risks such as sanitation-related diseases (diarrhoea, gastroenteritis, bacteraemia, etc.) which can easily spread from one person to another especially in a congested environment. Residents may also be exposed to unclean shared facilities and may resort to alternative such as open defecation and bring refuse, which are unhygienic practices. Sanitation facilities are unclean, as they are unable to relieve themselves in the open especially in informal settlements. Facilities do not imply that women lack facilities for managing their menstrual hygiene needs, which may contribute to psychosocial stress (3).

Shared sanitation may be the only option available in most low-income settlements. The Joint Learning Programme (JLP) identifies shared sanitation as a "limited" type of sanitation service to meet sanitation service that are

Key Highlights:

- Sharing of sanitation facilities is common in most low-income areas of Africa
- Shared sanitation facilities are considered as "limited services" and are part of the higher category of "adequately managed sanitation services" in the revised Joint Learning Programme (JLP) sanitation classification
- The RESSA study aims to identify improved management strategies for high quality shared sanitation that can be adopted in African countries.

A Learning Brief

Sharing of sanitation facilities in Low Income settlements: What, Why, and How?

Introduction

The RESSA on Shared Sanitation in Africa study is being implemented in Kenya and Ghana, and its main aim is to develop effective management strategies for high quality shared sanitation facilities in the low-income settlements of Kisumu in Kenya and Kumasi in Ghana. The objectives of the study include characterizing sanitation facilities, identifying barriers and opportunities for effective management of shared sanitation facilities, and co-developing management strategies. This learning brief provides a wrap-up of findings on sharing of sanitation facilities in the two countries.

The study is being conducted in Nyamanda 'A' settlement in Kisumu, Kenya, and Agape and Oshileben settlements in Kumasi, Ghana. The research facilities involved sampling respondents who shared sanitation facilities with less or more households. A total of 488 respondents were sampled in Kisumu and 827 respondents in Kumasi. For each of these respondents, their sanitation facilities were inspected to assess quality and cleanliness of the shared facilities. Taped observations assessed and noted the cleanliness of the shared facilities. Toilet were classified as being 'very dirty' if there was fecal matter, body fluids such as urine, insects and other waste material in the toilet inside. Dirty toilet were those with some fecal matter, urine, insects and/or other waste material. Toilets were rated as being 'very clean' if they did not have any fecal matter or urine, insects and waste material in the toilet cabin, and 'clean' if there was no fecal matter or urine but some little waste on the toilet floor.

Summary

- The Research on Shared Sanitation in Africa study is limited only to low-income settlements in Kisumu, Kenya and Kumasi (Ghana). The aim of the study is to co-develop management strategies for high quality shared sanitation facilities. This brief gives a snapshot of findings from the study.
- Sanitation facilities in both countries are shared/interconnected. Respondents in Kenya are mainly satisfied by tenants, and compounds in Ghana have a resident landlord.
- Pit latrines are common in Kenya, and water closets are common in Ghana.
- There are more users per toilet in Kenya than in Ghana.
- Toilets in Ghana are regularly cleaned than in Kenya, possibly due to the presence of the landlord, fewer users, or regular cleaning.
- Users in both countries acknowledged that the shared toilets were convenient and easy accessible, reduce open defecation, and save time. The main dissatisfaction was lack of operation/cleaning.

Additionally, in-depth interviews and focus group discussions were held with landlords and tenants in the low settlements to understand barriers and opportunities for the effective management of shared sanitation facilities.

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RESSA Learning Brief | 2020

Outcomes

- Increased networks, partnership, and work relationships (national and international level)
- Involvement in related research
- Scientific outputs
- Greater community involvement in sanitation
- Increased awareness (e.g. Covid period)
- Participation in and contribution to guidelines and decision making fora

Research Paper

When is shared sanitation acceptable in low-income urban settlements? A user perspective on shared sanitation quality in Kumasi, Kisumu and Dhaka

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ABSTRACT

Shared sanitation facilities (SSFs) have contributed considerably to sanitation access in many low-income settlements. While many SSFs are of unacceptable quality, others have been found to be a hygienically safe and a socially and economically viable sanitation option. Within its framework, the WHO/UNICEF Joint Monitoring Programme (JMP), evaluating progress on the Sustainable Development Goals, considers shared sanitation as 'limited sanitation'. Overall, there is uncertainty about the criteria to distinguish between unacceptable and acceptable quality of SSF. In our study, we used a user-centred qualitative approach in low-income urban settlements in Kumasi (Ghana), Kisumu (Kenya) and Dhaka (Bangladesh) and conducted 17 focus group discussions to evaluate how SSF users define the

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SIDE EVENTS

10:30 a.m.–12:00 p.m.

An Agenda Setting Workshop for “Limited” (Shared) Sanitation: User Experiences, Measurement, and Improvement Approaches

Convened by Harvard Kennedy School of Government, Water and Sanitation for the Urban Poor, Sanitation and Hygiene Applied Research for Equity
Redbud

This session builds on the call of the June 2017 article: “Limited services? The role of shared sanitation in the 2030 Agenda for Sustainable Development,” which made two arguments: 1) that harm could be caused to poor citizens living in urban slums if shared sanitation were excluded from SDG-compliant ‘basic’ services, and 2) that investments in high-quality shared toilets should be prioritized when it is the only viable option. Much research has been conducted on the health impacts, user experiences, measurement, and effective interventions to improve quality of shared sanitation. Given the rapid growth of the peri-urban population, expected to more than double to about 2 billion residents between now and 2035, the time is right to reflect on the evidence produced in recent years and come to consensus on a prioritized research agenda going forward.

This session will lead to the creation of a research agenda for establishing the role of shared sanitation in bringing safely managed sanitation to all. The sessions will employ a “quick fire” format whereby several early career researchers will be allowed 1 slide and 5 minutes to summarize their recent research on shared sanitation and what it means for the future research agenda followed by group discussion on key themes.



Lessons learned

- How to do, and the importance of stakeholder involvement (from beginning of the study)
- Sanitation challenges affect everyone, yet less spoken about
- How to, and the value/importance of involving different disciplines
- Small initiatives lead to greater initiatives and action
- Building consensus takes time
- Importance of reflection, learning and unlearning (We all learn from each other)

Looking ahead

Research:

- Advancement of the study, by including other angles and disciplines
- Finalisation of research outputs (at least two more manuscripts)

Policy and practice

- Continued collaboration with local administration in current and future projects

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THANK YOU