



SUMMARY OF KAP SURVEY

(Knowledge - Attitudes – Practice)

run by Triangle from January to March 2007

- This KAP report draws up the “as-is” situation of domestic and personal hygiene in Saharawi Camps at the beginning of 2007 and presents a series of priority and secondary recommendations to improve the daily environment of the population and help prevent hygiene-related infectious and parasitic diseases (ophthalmic, cutaneous, diarrhoeal et gynaecological illnesses).

- The following areas were covered: **diseases, vectors, water in homes, food hygiene, excreta, sanitary environment** (household garbage, upkeep of habitat, livestock and domestic animals, sewage), **personal hygiene** (body, feminine hygiene, Triangle’s hygiene kits, clothing) and **awareness programmes**.

- The survey was performed on request of the European Commission’s Humanitarian Department (ECHO) aiming to improve its strategy for the Camps and increase the impact of hygiene and prevention-related actions.

- Objectives:

- Identify priority actions that meet the environmental, social, sanitary, economic and political context, respect Saharawi culture and traditions, and respond to the needs expressed by the population and Saharawi authorities;
- Provide a reference document for actors working in the area to help them justify, define, implement and/or consolidate programmes in the area of hygiene.

- The approved approach is the "KAP" method: recognised by funders and by the international community, this method aims to identify the knowledge *K*, the attitudes *A*, and the Practices *P* of a population with regards to a specific theme.

Within the framework of this particular survey, the aim was to:

- identify current personal and domestic hygiene-related practices of the Saharawi refugee population,
- understand their behaviour,
- clarify which situation the families want,
- and establish the needs and means required to achieve such situation.

Should one focus upon an increase of knowledge, of material means, or a combination of both? And what knowledge, which material means ? It is to such questions that the survey hopes to answer.

- Information was gathered by Triangle between January 4 and March 22 2007 in the wilayas of Al Ayoun, Aoussert, Dakhla, Smara and 27 février :

- **732 homes** (e.g. 1,9% of Saharawi homes on the basis of 38,000 homes) were visited (the meetings were based on a questionnaire containing 80 open questions) ;
- **18 discussion groups** were organised (men, women, children, carers of disabled or elderly people; young disabled people) ;
- **Exchanges** took place with **45 resource-persons** (health specialists, ministerial people, education and information specialists, etc)
- And **7 international solidarity organisations** working in the Camps. In addition, documentary research and field observations helped us build on the information gathered.



- According to the survey, the **families met are conscious of the link between disease and hygiene** and have **good knowledge of the practices** required to limit negative impact. However, **putting such knowledge into practice depends on the financial and material means of each family along with the technical capacities of current management systems** (namely water and garbage).

- At the moment, the **quantity of water delivered fails to cover** the multiple needs of the population: consumption, entire personal hygiene, animal watering, irrigation, etc: Only 2% to 5% of households in 27 février, Aoussert and Al Ayoun declare they have not suffered from water cuts; 10% in Dakhla and 29% in Smara. In addition, in this context of water shortage, it is sad to observe water wastage owing to broken piping or negligence inside peoples' homes (disjointed pipes).

The water distributed is intended for human consumption. However, in 54% of the households (30% in Dakhla), **the poor state (rusty or with broken lids) of family tanks makes it difficult – and possibly impossible- to maintain an adequate quality of water.** Therefore, the families are obliged to drink contaminated water or use well water for their personal hygiene needs.

- With regards to management of human excreta (chief source of fly proliferation and potable water contamination), although 92% to 96% of homes in Aoussert, Smara and 27 février possess latrines, **respectively 24% and 60% of homes in Al Ayoun and Dakhla remain without latrines.** Cost is the main reason presented, followed by proximity of the surface water table in the wilaya of Dakhla (despite the fact that in 2006, the Authorities authorised the construction of latrines). The models that are present are mainly water-seal latrines with evacuation to a simple cesspit. Despite the presence of siphons, 42% and 39% of families complain about odours and insects because use of cleaning products and water is so limited.

- With regards to garbage, while only 48% of the households state their dissatisfaction with the **current garbage management**, the Authorities are unanimous about the **system's unsuitability.** Indeed, observations and participation in garbage collection revealed that extra efforts and means are required to make this method effective against vectors of disease (flies, rats and cockroaches in particular) and to maintain a clean environment. The current external and internal garbage campaigns mobilise **voluntary human resources and rudimentary material means** (not sufficient, faulty transport, limited and sometimes no handling or individual protection equipment).

The impact of such activities is almost insignificant facing the increase of garbage production: the Camps are now surrounded by a "lake" of garbage.

The arid desert climate is an advantage here: fermentable matter and animal corpses dry faster, which reduces the risk of harmful insect proliferation. Cleaning/clearing the environment is everybody's responsibility but for how long will the community continue to be motivated? The population seems to be tiring of the effort and the new generation no longer wants to be involved without a financial contribution and a minimum guarantee in terms of work conditions. By launching a pilot project, the international humanitarian organisation, MPDL, is completely in tune with the perspective of garbage collection systems that are both economically and technically sustainable.

- Regarding the livestock issue, the Veterinarian Department's activities have raised the population's awareness about the dangers of living close to livestock. However, after the February 2006 floods and the expansion of the wilayas, families have settled close to current or old cattle enclosures, presenting a real sanitary risk.

- In terms of personal hygiene, the survey shows that on average, **40% of families depend 100% on the 300 g of soap and 250 ml of shampoo distributed every two months by Triangle; 76% of women depend 100% on the sanitary towels contained in the kit:** when the products have run out, the families return to their former practices (water only, pieces of cloth). Health specialists confirm that the supply of hygiene products has **contributed to reducing hygiene-related diseases; however the contents are insufficient** if they are to meet the entire household's needs: for 85% of families, soap has run out within less than two weeks; for 90%, shampoo has run out within less than two weeks and for 40% of the women, the supply of sanitary towels barely covers 3 days' requirements.

Diapers for adults and children is another issue (costly; irregular arrival of adult diapers). Distribution of such products would be a hygienic response to diarrhoea or incontinence cases. It is important to note



that limited supplies of washing powder/soap mean that the pieces of cloth used by many households cannot be washed completely clean.

- **73% of households** declare they have **already participated in, or followed, information and hygiene-awareness programmes**, via the media, public meetings in the daïras or posters. They almost unanimously express their desire to renew such experiences, preferably via conferences/presentations (54%) followed by media (26%). Among the people who declared they had never followed awareness programmes, 97% declared they would like to (78% via conferences/presentation; 47% via the media).

- The survey highlighted another fact that is beyond the “hygiene in households” framework but appears important: for children, **school** represents a “second home” and **should therefore be exemplary** in terms of **hygiene**. Today however, many schools do not have functional latrines and their garbage management is sporadic.

- However, it is important to note that **the current state of personal and domestic hygiene in the Camps is far from catastrophic** thanks to the shared and/or individual **efforts of the Saharawi authorities, local professionals, population, international solidarity organisations and funding agencies**.

Within the definition and the implementation of specific programmes, numerous actions show the implication and mobilisation of “hygiene actors”: participation of the Saharawi authorities and medical staff in the clean-up campaigns and television or radio shows; immediate corrective measures and communication after the cholera epidemic at the end of the 90s; implementation of local prevention departments; health and prevention information presented during the daïras’ public meetings; implementation, by care-workers and teachers, of playful activities to teach young children about hygiene; voluntary participation of women in the garbage collection, etc.

- Thus, the survey concludes on the necessity to **consolidate the present means and continue programmes** while trying to avoid the population’s lassitude.

- **The following areas of action** are considered **priorities**:

- **Re-size the hygiene kits to cover the needs of the most vulnerable people** (women and teenage girls, families with young children and/or elderly or disabled members, men living alone),
- **Reduce the sanitary risks** for people taking part in garbage collection and **creation of collection systems that are technically and economically sustainable** in all Camps,
- **Adjust the amount of latrines**: family latrines and school latrines
- **Optimise distribution of water** in the Camps
- **Reinforce the local prevention departments and the synergies** between Prevention and Hygiene actors.
- **Develop awareness programmes about specific themes with specific groups** (for example, by informing young people about typical aspects that have already been integrated by the adults, or conveying to women and adolescent girls ways to prevent gynaecological disease and “false beliefs” related to sanitary towels).

- **The following areas of action** are considered **secondary**:

- **Supply secondary personal and domestic hygiene products**
- **Continue current information and awareness programmes**
- **Develop income-generating activities** by implementing a soap manufacturing workshop
- **Move livestock away from the refugees’ homes**

- Within these recommendations, everyone has a role to play whether it be at individual, administrative, or NGO level. It is by working together that we may solve the “personal and domestic hygiene deficit” in the Camps, consolidate the current means and improve the Saharawi refugees daily environment.

