

Advocacy case studies

IMPROVING PUBLIC HEALTH IN PAKISTAN

COUNTRY:	Pakistan
THEMES:	Health; water, sanitation and hygiene
ADVOCACY APPROACHES:	Demonstrating good practice; educating community members

The district of Sanghar is one of the most disadvantaged in the province of Sindh in Pakistan, due to a lack of resources and capacity in the district government. One of the repercussions of this was a lack of investment in water, sanitation and hygiene (WASH) facilities in the area, which in turn led to limited knowledge and understanding of public health issues among local communities. A combination of open defecation, a lack of formal drainage systems, and poor hygiene practices meant that diarrhoea and vector-borne diseases were common amongst children. Moreover, community members, often women and girls, were forced to travel long distances to collect water for drinking and domestic use.

Tearfund partner Pak Mission Society (PMS) decided to help, and organised a seven-month pilot project to provide WASH facilities and training, with the aim of reducing water-borne diseases by five per cent in 15 disadvantaged rural communities. In each village, they built a shallow hand pump, a washing area and two ventilated improved pit latrines, reaching more than 2,000 people in all. They also ran two health and hygiene sessions and two 'community-led total sanitation' sessions in each village, providing information and training to help people adopt better hygiene and sanitation practices.

These sessions were well received and had a significant impact on bringing about changes in practice in these communities. Many households decided to build latrines like those installed by PMS, at their own expense. Across the villages involved in the project, a third of households on average constructed their own latrines as a result of the programme, based on the model they had been shown. This demonstrated that local communities can be taught to do this, with no outside financial assistance required. Nine of the 15 villages were also declared open-defecation-free.

The district's public health and social welfare departments were impressed with all that PMS had achieved in improving public health in these communities. They agreed to provide latrine and WASH facilities for those communities that were declared open-defecation-free, and organised the provision of materials to construct latrines for 95 households in four of these villages.