



Training session for project staff hygiene and water sanitation.

## Hygiene Education through Multimedia Tools

### Lessons Learned

This brief provides the lessons learned from the hygiene education project through multimedia tools, as supported by IICD in Burkina Faso. It is intended for all the actors in the education and sanitation area as well as for institutions implementing a similar project that would like to benefit from this experience.

Lessons have been learned and collected by the project through the Monitoring & Evaluation activities with the help of IICD and its Monitoring & Evaluation partner at the national level. The Monitoring & Evaluation system includes questionnaires completed anonymously by the end users of the project (on an annual basis) and an analysis of the data from these questionnaires. This report contains information on the users profiles, their use of the project services and their satisfaction with the services provided as well as the perceived impact by the users. In addition, focus group meetings are organised, facilitated by the project personnel and the end users. The purpose of the focus groups is to reflect on the data and discuss the successes, the challenges and the next steps for (improving) the project.

A number of other lessons have been also learned during the project implementation and the most important ones are captured in this report.

#### Context

In Africa, one hundred children die every hour of diarrhea, according to an analysis of the hygiene and sanitation situation in 32 African countries (CMAE, ADB, World Bank, WSP, 2008).

Behaviour factors are often underestimated in meeting the Millenium Development Goals (MDG) for water supply and sanitation. Regular use of latrines, for example, can reduce the risks of diarrhea by 40%. Hand washing with soap after defecation reduces the risks by 50%. According to



this analysis, in most countries, the main challenge is poor hygiene practices. For example, in African countries, less than 20% of the people wash their hands with soap.

In Burkina Faso, the population is faced regularly with sanitary and hygiene crises due to a number of factors. Access to water and sanitation services is also a pressing problem particularly in the Sahel and the Northern region.

Poor water quality, lack of sanitation and hygiene are a cause of diseases, accounting for more than 50% of medical consultations in Burkina Faso, and affect the most vulnerable parts of the population, notably children and women (Politique Nationale d'Hygiène Publique, 2008). Improvements in water quality and sanitation would help to greatly reduce the morbidity rate from waterborne diseases and lack of hygiene,

A situational analysis of Bokin, department of the Passoré province, carried out at the end of 2002 by the organisation Sahel Solidarité, with the participation of the target populations, has provided a number of factors affecting information and communication on safe water, sanitation and health:

- Difficulty in accessing information about hygiene and health
  - Lack of means to lobby at local and national government level about water quality
  - Lack of information on the market at the local, regional, national and international level about sanitation and hygiene
  - Insufficient information on the networks and channels that promote hygiene and sanitation
  - Inadequacy between water quality and sanitation and household preferences
  - Lack of marketing strategies for available products for promoting drinking water and hygiene
- Change opportunities have been identified in rural areas with the help of the target population:
- Access to information on hygiene through communication channels that meet the community needs
  - Outreach of appropriate technologies for water hygiene and sanitation
  - Information on funding opportunities for activities through appropriate funding mechanisms (village funds, credit unions, farmers' and commercial banks, micro-finance for women)
  - Capacity building and skills enhancement for farmers to facilitate negotiation on hygiene and sanitation
  - Awareness and training of farmers on the use of drinking water and good hygiene practices.

Based on this analysis, Sahel Solidarité has developed in 2005 an innovative approach to educate and raise awareness among the communities of Bokin on the subject of hygiene by introducing ICT (information and communication

### Burkina Faso Profile

Surface Area (sq. km):	274 thousand
Population total:	14.8 million
Life expectancy:	52 years
Literacy rate:	33%
Source:	World Development Indicators database, 2007

### Access to communication technologies per 1000 people

Mobile subscribers:	71
Internet Users:	6
Personal computers:	2
Source:	World Bank - ICT at a Glance, 2006

### Project Information:

Number of final users:	20.000
Target groups:	Project team personnel of Sahel Solidarité and Bokin population



Each village's "hygienists" take photos to use in multimedia presentations to help change behavior on hygiene and sanitation.

Villagers attending a multimedia presentation to raise awareness on the use and maintenance of latrines.. →

technologies), and particularly multimedia tools.

Sahel Solidarité is a non-governmental organization (NGO) supporting farmers' organisations and specific groups like women to develop sustainable development practices. Created in 1973 when a severe draught and famine affected the Sahel countries, its main purpose was to help the populations affected by the draught. The organisation is active in the province of Passoré and particularly in the department of Bokin. Bokin is located at approximately 110 km north of Ouagadougou. It has a population of 50.000 inhabitants disseminated in 40 villages. The population is mostly made up of women and children. About 49% of the population is under 15.

### Objectives of the project

Since 2005, Sahel Solidarité works with Water Aid in the field of hygiene and sanitation promotion to change behaviours. The project with IICD enhances these awareness activities by incorporating multimedia tools in the methodology. The target group is divided into two groups: the members of the project team of Sahel Solidarité in Ouagadougou and Bokin and the population of Bokin, including hygienists,

teachers and students who participate in the awareness sessions. Hygienists are volunteers who live in the villages in the intervention area.

The development objectives are as follows:

#### Capacity building and awareness about ICT

- Capacity building of managers and field officers of Sahel Solidarité on computer and internet use, multimedia tools and updating of the website
- Capacity building of hygienists, students and teachers to be able to use computer and multimedia tools
- Enhancing communications between the Sahel Solidarité headquarters in Ouagadougou and the Bokin branch through internet

#### Hygiene and sanitation awareness through ICT

- Capitalise on Sahel Solidarité experiences in promoting hygiene and water sanitation with computer tools.
- Hygiene awareness among the population in the project area (twenty villages) through computer tools (digital pictures, video projections, PowerPoint)
- Implementation of an exchange framework (panel) to assess the activities



This document is based on two evaluations from 2007 and 2008. For the 2007 evaluation, seven focus group meetings have been organised with the different target groups. For the 2008 evaluation, the project used the methodology from IICD Monitoring & Evaluation, where questionnaires are completed followed by a focus group meeting during which the survey results are discussed. The surveys took place in June and July 2008. Two hundred and thirty questionnaires have been completed and registered by the following target groups: students (15), civil servants (10), hygienists (20), populations (177), and the project team (8).

Among the reasons given for taking part in the project, two global objectives are reflected:

One category of answers refers to improved knowledge of ICT: “increase knowledge of ICT; using ICT to change the behaviour of more people in the villages”, “be able to make presentations with ICT tools”.

A second category of answers refer to more information on sanitary issues, for example “improve my knowledge of hygiene”, “get information on health”, “get new knowledge to better protect myself”, “get knowledge on use and maintenance of latrines”.

## Results of the project

### Training of personnel

The IICD program manager assisted Sahel Solidarité with the project formulation. After the project had been approved, the project manager and the facilitators received training on ICT issues, through IICD and its capacity building partners, ZCP and Yam Pukri. The training involved basic computer skills, maintenance and multimedia.

### Training of the population

Facilitators of Sahel Solidarité taught two hygienists in 20 villages (a man and a woman in each village) to take pictures and make presentations using multimedia tools. In addition, 245 people received training on basic computer skills. This training involved teachers, students, civil servants and farmers. Following information sessions with the population, those interested registered for the training.

### Awareness in villages and schools

Awareness is provided by hygienists in the village, supervised by Sahel Solidarité extension officers. Trained in picture taking and animation techniques, hygienists take pictures of good and bad hygiene practices in the villages. These pictures are developed and edited in PowerPoint by the extension officers and presented to the people. Animation sessions take place in the evening, to make sure the projections can be seen clearly. Through a participative method that promotes discussion, the project team and the village hygienists raise awareness among the population about good hygiene and sanitation practices.

A total of 84 animations took place between March 2006 and December 2008.

In the schools, health clubs composed of students were implemented and trained. Their main mission was to raise hygiene and sanitation awareness in the school. The project worked in eight primary schools with an average of 300 students each.

## Project impact

Impact has been assessed in relation to the target public. Two categories of impact were identified:

1. impact on capacity building (for hygienists, teachers; people using ICT tools for education and sanitary animation purposes)
2. impact on hygiene behaviours (for the beneficiaries: farmers, students etc.)

### Capacity building

“I do multimedia editing in each village on hand washing, maintenance of latrines in schools and management of water points in the village”.

### Facilitator capacity

Facilitators received training to facilitate skills transfer to the communities. They provided training on basic computer skills to civil servants, teachers and students. In villages, facilitators trained also hygienists in picture taking. The training has helped them to improve the quality of animations by incorporating pictures, doing video editing and editing PowerPoint presentations. In addition, they improved the quality of their activity reports sent by email to Ouagadougou. The facilitators now use the ICT tools with such ease that they are ready to coach many more people.

Facilitators developed multimedia products including CD videos of sketches on hand washing and use and maintenance of latrines for the students and videos of interviews on the management of water points in the village. The CDs produced allow the duplication of the same information in schools and villages. They also allow other actors outside the project area to emulate the project’s approach.

### Hygienist capacity

While interviews have shown a few itches due to the unavailability of facilitators and the lack of cameras, hygienists are nevertheless quite satisfied with the training they received. They take pictures of good and bad water hygiene and sanitation practices in villages. The interviews revealed that with the cameras used by hygienists, it is easier to get messages across during animations by showing concrete examples.

### Capacity of school health clubs

Computer training for student members of school health clubs resulted in the use of images taken in the community



Computer room for use by project staff in Bokin.

for health education. There are other impacts as well, including the production and edition of a school health club journal on hygiene promotion and the setup of a tracking system for waterborne diseases in the schools. The journal is intended for teachers and the Students Parents Association and for the local health services. It contains information on the sanitary situation in the school and allows hygienists to inform on the scope of a possible disease in the community.

#### **Institutional capacity of Sahel Solidarité**

Interviews with the core users revealed positive impacts – not only at the project level, but also within the organisation. The solid experience in ICT of the Sahel Solidarité team has improved the quality of reports and the retention and documentation system and facilitated communication through the use of email. Through training on basic maintenance, the team knows how to install and repair computers.

The team has seen a reduction of expenses at Sahel Solidarité through a reduction of travel by officers and of the cost of document reproduction. Thanks to its vibrant website, Sahel Solidarité activities are more visible at the international level.

Through the creation of tools to follow-up on activities, the work is better organised and more transparent, for example through field trip forms, material inventory forms, training evaluation forms etc.

Perhaps most important is the fact that ICT tools have engaged agents to work harder. As a member of the

organisation indicated: “Agents work sometimes twelve hours without interruption and without getting bored”.

#### **Hygiene and sanitation awareness**

“I learned that we have to wash our hands with soap after defecation”

#### **More participation during sessions**

With the introduction of ICT tools, hygienists and members of the population say that there is greater participation during the sessions. Old and young, everybody is represented. Generally, women participate more actively to the discussions than men, as they are more familiar with the subject discussed.

As far as participation to the discussions is concerned, hygienists are generally very satisfied. With the use of cards, few people were reached. The capacity to see the pictures on the screen allows a better view of images and a stronger engagement on the part of people. Before, the drawings on the cards did not give a realistic picture of the situation which resulted in poor participation of the group. As a facilitator indicated: “With the old method, fifteen people were educated, but with the ICT tools, we reach the whole village.”

Additional impact: villages not covered by the project were approached during the evaluation. The interviews conducted revealed that these villages would like to be included. According to the facilitators, people from these neighbouring villages come sometimes to see the

projections and participate in the discussions. This is a clear indication that people are interested in the dissemination of messages with the use of multimedia tools.

### **Hygiene behaviour**

With regard to the changes recorded in the villages covered by the project and those not covered, interviews with hygienists revealed that the visual support seems to have a stronger impact on people. According to hygienists, hygiene and sanitation awareness seems higher with the use of multimedia tools. "We noted that people are more willing to stop their bad practices". They note a rapid change of behaviour in water hygiene and sanitation behaviours.

Findings from interviews conducted in the villages covered by the project showed that in the vicinity of sanitary and water facilities, hygiene is satisfactory. There are brooms around the latrines. According to users, on average, the latrines are cleaned at least twice a week. In the yards, contrary to the non-covered villages, hygienists have noted that women ensure that their children do not defecate in the middle of the yard. Answers to the questionnaires illustrate the changes in behaviour and knowledge: "I know now the different diseases and the good and bad practices", "I learned that children stools are as dangerous as those of adults", "I clean my latrines; I keep my latrines clean after I leave." Data below indicate a strong impact in the majority of questions on behaviour.

### **Winner of the competition on promotion of hygiene in schools**

In schools covered by the project, the maintenance of latrines has improved. According to the teachers, this is to be attributed to sketch and video projections conducted by the animation team. School clubs seem to be more aware of hygiene and sanitation issues. The school of Sarma, one of the eight schools covered by the project, won the competition for promotion of hygiene in schools in the Northern region in 2008.

## **What are the challenges?**

### **Electricity and connectivity**

Electricity in Bokin is a serious challenge. Bokin is not connected yet to the national grid. The project team has taken different steps, including buying solar panels to feed the computers and using power units for the multimedia presentations during animations in the villages. The facilitators use solar energy 80% of the time during the day for reports and video editing and in the evening, training cannot last more than two hours. The very slow internet speed is a source of problems. Sending emails and accessing internet are complicated by the lack of energy and connectivity.

### **Demand greater than capacity**

It seems that the project is the victim of its own success in that a number of respondents wish an extension of the activities. They recommend more training, more equipment and more animations. People want to know more about hygiene and about related issues like frequent diseases: malaria, meningitis. Some respondents suggest the inclusion of themes related to agriculture and trade in the animations. Others suggest an increase in the frequency of animations, for example "having at least two animations every month", and "organise animations in different neighbourhoods in the bigger villages to reach everybody".

Concerning training, respondents mention challenges like "lack of personnel to train people in computer skills on a permanent basis", and "the number of students trained in each targeted school is under 5%". It should be noted that the project had never intended to train the whole population.

As for the equipment, the demand exceeds the scope of the project, for example: "Make available 1 PC in each service for continuous training, for example prefecture, gendarmerie, police, town hall, inspection".

### **Institutional and financial sustainability**

The project supports another project with WaterAid that works in the area of water and sanitation. If that project were to stop, it would have an impact on the conduct of this project. The project could consider intervening in other sectors like agriculture. Alternative financial resources have been developed, including the creation of a telecentre or cybercafé where the community has access to paid ICT services (data entry, internet, scanner, printing).

The expertise acquired for this project could be made available to other actors in the sector. The development of multimedia products could also generate revenues to pursue the activities.

## **Lessons learned**

### **The multimedia tools help to change behaviour in the villages**

In the North, multimedia tools are already largely used to facilitate learning. The innovative methodology of Sahel Solidarité shows that these tools can also contribute to a change of behaviour in communities that have never seen a computer or even a television, by increasing visualisation, understanding, interaction and participation. The methodology could contribute to save many lives in view of the urgency to reduce risks of fatal diseases like diarrhoea.

### **A solid preparation in order to gain the trust of officers, authorities and population**

For the preparation of the project implementation, a number of meetings have been organised between members of the project team in order to get the same understanding of the project contents. Because of the innovative approach of this

project, at first, all the officers did not have the same understanding of the relationship between ICTs and the promotion of water hygiene and sanitation. Before launching the project, a meeting has been organised for the political, technical and administrative authorities of the province of Passoré to raise awareness about the project. Besides this meeting, populations of the department of Bokin have been informed about the project and its advantages for the community. By reducing ignorance and thus resistance, this thorough preparation contributed to the success of the project.

#### **Learning from mistakes without embarrassing the actors**

We learn from our mistakes. It is this important logic that motivated hygienists to show not only good hygiene practices, but also the bad ones that are common in the villages. To avoid embarrassing the actors, hygienists always discuss the practice with the persons and ask them if they can take a picture and show it to the community during the animation. The hygienists live in the village and are trusted by the community. Thanks to this trust and cautious approach, the presentation of poor practices helps the community to learn from the mistakes without making fun of the actor.

#### **Next steps and future plans**

The team of Sahel Solidarité has decided to maximise the connectivity in order to facilitate the project activities and to allow rural people to access the internet. It expects also to play a role in facilitating access to second hand computers for the population.

The organisation will continue to build capacity among the officers and would like to meet the demand of neighbouring villages by extending the project to areas that it does not reach yet.

Through the internet and multimedia products, the project wants to give more visibility, at the national and international level, to lessons learned from the project and in this way promote exchanges with other actors in the same sector.

At the national level, Sahel Solidarité continues to share its experiences with the Cadre de Concertation des ONG actives dans le domaine de l'eau et de l'assainissement (NGO Framework for Concerted Action in water supply and sanitation), in which it is a active member. The organisation has already started to work on its international visibility by sharing its experiences through the water and sanitation platform of AKVO ([www.akvo.org](http://www.akvo.org)).



With the introduction of ICT tools, hygienists and villagers say that there is greater participation during the sessions.



Hygienists are trained to photograph good and bad hygiene practices, which are used in PowerPoint presentations to educate the public.

### Contact information

**Mr. Paulin Ouédraogo**

Project coordinator, Sahel Solidarité

Tel. : +226-50353545

saso@fasonet.bf

**Mr. François Laureys**

Program manager, Burkina Faso, IICD

flaureys@iicd.org

### Links

**Sahel Solidarité:** [www.sahelsolidarite.bf](http://www.sahelsolidarite.bf)

**IICD:** [www.iicd.org/projects/burkina-sahel-solidarite/](http://www.iicd.org/projects/burkina-sahel-solidarite/)

**Project video:** [www.sahelsolidarite.bf/ticbokin](http://www.sahelsolidarite.bf/ticbokin)

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**International Institute for Communication and Development**

Visitor's address: Raamweg 5 | 2596 HL The Hague | The Netherlands

P.O. Box 11586 | 2502 AN The Hague | The Netherlands

Phone: +31 (0)70 311 7311 | Fax: +31 (0)70 311 7322 | E-mail: [information@iicd.org](mailto:information@iicd.org) | [www.iicd.org](http://www.iicd.org)

Text: Miep Lenoir, Paulin Ouédraogo

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