

SUCCESSFUL PROVISION OF WATER AND SANITATION SERVICES TO INTERNALLY DISPLACED FAMILIES: Plan International's Experience in Brisas del Poblado neighborhood, Quibdó (Colombia)

Nicolás Rodríguez¹ and Raúl Rodríguez, Plan International, Colombia

¹Contact: Nicolas.Rodriguez@plan-international.org

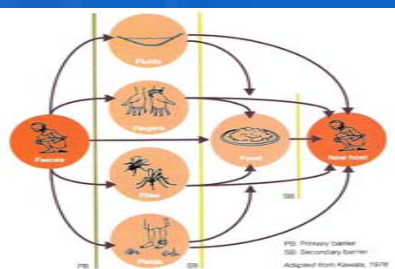
BACKGROUND

- Internally displaced populations in Colombia usually settle down in marginal areas located in the outskirts of towns and cities, where they encounter sanitation and public utilities problems
- At the end of 2004, Plan International, a child-centered, international humanitarian organization, carried out an integral attention program for displaced children in the "Brisas del Poblado"
- Nearly half of the neighborhood's 176 households housed internally displaced families. Of them,
 - 100% supplied themselves with rainwater
 - 54% drank non-treated water
 - 60% left their excrements at the ring road of streams
 - 24% left their excrements on open fields



PROGRAM FOCUS

The program was focused on the addressing neighborhood and household causes of disease.



METHODS

PHASE I

- The project started in March 2006 with the construction of reference units (pilot models) in 4 households, in which all the technologies were installed.
- They served as models to the community of the interventions' feasibility and relevance.



PHASE II

- Scaled up the intervention in the remaining 172 households.
- Organized by working groups with technical support for construction.
- Negotiation with each family and construction according to their particular conditions.
- Technical, social, environmental and health training processes.
- Application of IMCI strategy.
- Evaluation of program done through graduate dissertation at Technological University of the Chocó

PROGRAM INTERVENTIONS AND TECHNOLOGIES

PREVENTIVE INTERVENTION	TECHNOLOGIES
Correct disposition of excrements	Dry ecological toilet (separating bowl, chamber pot and deposit tanks for excrements and urine)
Water supply	Rainwater collection and storage (cover, pipe and tank)
Treatment for drinking water and food preparation	Ceramic candle filter
Correct food preparation	Sink and counter for food preparation
Food protection	Cupboard protected with nets to avoid mosquito infestations and dustbin with lid
Personal care, washing of hands and of clothes	Bathroom and wash house
Environmental protection	Grease and infiltration trapdoors; garbage collection and disposal
Adoption of correct hygiene habits	Organisation and training process with communities and families

RESULTS

- Prevalence of diarrhea among under-five children decreased from 41% to 11%.
- All households have access to:
 - rainwater collection and storage
 - treatment for drinking water and food preparation
 - adequate conditions for food preparation and protection
- In the project's final evaluation, families practiced:
 - adequate storage and manipulation of drinking water
 - adequate storage and preparation of food
 - hand-washing after going to the bathroom
- Per family costs were affordable, especially by obtaining significant cost-sharing (in cash, work and materials) from the participating families, community groups and local authorities.

COST PER FAMILY (\$US)

TECHNOLOGIES	COMMUNITY	PLAN	TOTAL
Rainwater collection and storage (cover, structure wood, pipes and tank)	41	406	447
Ceramic candle filter	0	30	30
Sink and counter for food preparation	4	43	47
Cupboard protected with nets to avoid mosquito infestations and dustbin with lid	7	57	64
Bathroom and wash house (structure wood and accessories)	27	266	293
Grease and infiltration trapdoors; garbage collection and disposal	3	30	33
Organisation and training process with communities and families	24	120	144
TOTALS	106	952	1,058

CONCLUSIONS

- The dramatic impact on the reduction of acute diarrheal diseases was due to the intervention's integrated approach.
- This is a viable alternative for the restitution of rights associated with conditions of habitability for internally displaced populations.