



## Household Bathrooms for Health

The two-chamber Household Bathroom Program is an initiative under the Social Infrastructure program. The growing support from Kodar and adjacent villages is nothing short of a miracle in an area which for centuries has been without toilets and hand washing facilities. Women and children are the wide-scale beneficiaries of this program.

The severe winter of 2007-2008 made it abundantly clear the impossibility for women to lead a healthy and comfortable life without latrines. The matter was brought into sharp focus when on their visits in April 2008, requested by us, the doctors from UNICEF found most children suffering from scabies as a result of open defecation, unhygienic conditions in their home and surroundings and lack of facilities for washing themselves.

The program was taken up after a great deal of discussion with the community. Since it was important to assess the difficulties that might arise in procurement of material or organizing the households, it was decided to begin with 50 households. Selection of the first 50 was based on the following criteria:

- Those households willing to share the facility with their close relatives e.g. brothers' families.
- Those households willing to provide voluntary labour for excavation, stone masonry and sundry activities.

In view of the large numbers required, it was important to utilize construction techniques, skills and materials for cost effectiveness. Wood and stone posed difficulties in their procurement, but this was resolved through procuring and breaking stones from the nearby stream; for wood a cheaper quality and fast growing wood, keekar, was taken up for its use in traditional dhijji construction, one which required greater effort in cutting and effort to minimize wastage. In spite of rising costs, all efforts have been made to keep the cost of each unit within Rs. 10,000.

The two chambers are constructed with a 3'0" high wall of stone masonry laid in lime/mud mortar; the upper part is constructed of wooden cross bracing (dhijji). For the roofs, the use of g.i. sheets was deliberately disregarded, instead, traditional roof construction from planks from wastage of wood, and mud

topping has been adopted, along with proper securing and bolting down of wooden members for seismic safety. Emphasis has been made on provision of good quality sanitary fixtures, water supply and sewerage system. After carrying out a considerable amount of research, helped by Brig. Yasub Dogar, Mr. Saad Khan, Dr. Afzal and Mr. Sohail Mirza, modified designs of Salubh double-pit arrangement has been made for sewerage disposal. Once one pit fills up it could be used for planting a tree, while the second one is utilized for disposal.

The wash basins have been mostly placed on the external face of the structure to encourage handwashing by the family particularly children. The bathrooms have been provided to the family in the name of the woman of the household to lay emphasis on her importance to the programme.

Construction of the first units was begun in May 2008. By August 70 bathrooms became functional, while another 60 are under construction. The success of the programme can be gauged by the fact that there is a demand for 200 bathrooms from the surrounding villages.

By providing emphasis on the sanitary aspects of the bathrooms, rather than its construction, a message is being conveyed that the traditional construction techniques were perfectly suitable as long as precautions for seismic resistance were taken.

The mountainous terrain and the structures being built in dispersed locations, on different hillocks has logistically been a nightmare. The issues of procurement and distribution of material to reach each and every household in a fair and impartial manner, along with sufficient supervision in order to oversee critical aspects of construction, initially posed a huge challenge. In order for the programme to continue its momentum, local people are being encouraged to participate, from laying out of the bathrooms, to supervision and material distribution .

This is the single-most initiative that will have the greatest impact on the lives of women and children of the area.

