



## TRAC SURVEY FOR MONITORING AND EVALUATING THE USE OF AQUATABS FOR WATER TREATMENT AT THE POINT OF USE IN THE BOUCLE DU MOUHOUN, CENTRE AND SUD-OUEST REGIONS IN BURKINA FASO

## **EXECUTIVE SUMMARY**

In Burkina Faso, 41.6% of households fetch water from boreholes, 23.2% in ordinary wells, 15% in standpipes, 7% of traditional wells and 2% in surface waters (INSD 2007). Diarrheal diseases due to unsafe drinking water and poor sanitation and hygiene are the leading causes of health-related consultations in the country, especially among children under five years of age in the rural and peri-urban areas. To address this issue, the Government of Burkina Faso developed in 2006, the National Water Supply and Sanitation Program (PN-AEPA in French) aimed at increasing access to drinking water and sanitation, in line with Goal 7 of the Millennium Development Goals. Support was also provided by the United States Agency for International Development (USAID) through the implementation of the West Africa Water Supply, Sanitation, and Hygiene Program (USAID WA-WASH).

The primary goal of the USAID WA-WASH Program is to increase sustainable access to safe water and sanitation, and improve hygiene in West Africa. To this end, the Program entered into a partnership agreement with PROMACO, a national association involved in social marketing. As part of this partnership a study was conducted in 2011 on the feasibility and acceptability of three household water treatment products, namely: Pur, Waterguard, and Aquatabs. The results of the study showed that Aquatabs is the preferred water treatment tablet of households. The findings of the feasibility study led to the selection of 132 villages in three regions (Boucle du Mouhoun, Centre and Sud-Ouest) for the implementation of the PoU (Point of Use) activity. The villages were selected based on the findings of a comparative analysis of sources of supply, access rate, and use of drinking water. Following the selection process, the PoU activity was officially launched by the Program on April 08, 2013 in Tanghin Dassouri.

The main objective of the TraC (Tracking Results Continuously) study is to assess the level of use and good practices while exploring ways to promote sustainable access and better use of Aquatabs by households to ultimately reduce child mortality and morbidity due to diarrheal diseases in Burkina Faso.

In June 2015, a TraC study was conducted to assess the PoU activities in the 132 intervention villages with the objective of providing quantified information on the correct use and consistent treatment of water with Aquatabs. The study targeted women in charge of children under five years old in order to measure indicators such as: (1) the level of use of Aquatabs; (2) the knowledge about the correct use of Aquatabs; and (3) the behavior determinants to inform project implementation. The TraC study uses a segmentation analysis to divide the target groups in two homogeneous groups: those accustomed to using Aquatabs and those who are not. It was conducted on a sample of 1,522 women between 15 to 49 years old. The data were collected in 55 villages including 31 in the Boucle of Mouhoun, 8 in the Centre, and 16 in the Sud-Ouest region. The main topics covered by the survey included: the socio-demographic characteristics of the respondents, the hygiene-related risks and behaviors in households, the determinants of water treatment product use in households, and exposure to project activities. Data analysis was performed using SPSS.

The data analysis showed that the main determining factors between those who regularly use Aquatabs and those who do not, are: (1) the perception of the availability of the products at home for drinking water treatment as communities with good perception of the availability of drinking water disinfectants are more likely to use them; (2) the appeal of the brand because people who recognize the «Aquatabs» product are more likely than others to use it; (3) knowledge since individuals who have a good knowledge on water disinfection and water-borne diseases are more willing to use it to purify water; (4) the knowledge of Aquatabs use as people with good knowledge of Aquatabs use procedures are more likely to





disinfect their drinking water; (5) attitudes: people who are willing to take steps to prevent diarrhea in their household are in better position to use Aquatabs; (6) matrimonial status as women in union seem unwilling to use Aquatabs to purify their drinking water at home; (7) age because women of 30 years old or more are more interested in using Aquatabs to purify their water.

The analysis of the study data shows that 31.86% of households in the project intervention area report regular use of Aquatabs, including 19.4% in the Boucle Mouhoun, 45.0% in the Centre, and 31.2% in the Sud-Ouest. The other findings are also encouraging. In fact, 23.3% of respondents were exposed to radio spots; 55.78% of respondents in the intervention area know that they should disinfect drinking water, kitchen utensils and fruits to avoid cholera; 67.2% of respondents in the intervention area know that shops and stalls are places to get Aquatabs; 80.9% of them report taking steps to avoid diarrhea in their households. It should be noted that respondents' perception that the use of Aquatabs is reassuring and protecting household from problems is rated 3.23 on a scale of [1-4] and the intention of respondents to use Aquatabs is estimated at 3.35 on a scale of [1-4].

The results of this study show that after two (2) years of Aquatabs promotion as an in-home drinking water disinfectant, populations in the project intervention areas are integrating this new concept in their habits. These encouraging results of the project could be scaled-up and the project would achieve better results if future actions focus on the issues of availability of the product and its good presentation. Also animation sessions should continue on the aspects of knowledge and reflexes that everyone should have with regard to household hygiene issues.

This is an executive summary of an October 2015 report. The full report is available (in English) upon request via our website. For more details about our program activities and other reports please visit <u>http://wawash.fiu.edu/</u>.

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