

WOMEN IN WATER AND SANITATION ASSOCIATION (WIWAS) NAIROBI, KENYA

Authors: Ivy Chumo, Leunita Sumba, Jackline Syonguvi, Martha Keega, Sylvia Murunga, Simon Thuo, Elizabeth Ndungu, Hayley Stewart, Kate Hawkins, Blessing Mberu, and Caroline Kabaria.

INTRODUCTION

Supported by the [ARISE responsive challenge fund](#), the [African Population and Health Research Centre \(APHRC\)](#) worked with [Women in Water and Sanitation Association \(WIWAS\)](#) to address the accountability and responsiveness to sanitation workers, specifically manual pit emptiers (MPEs) as right holders. Achieving Sustainable Development Goal 6 on clean water and sanitation goals relies on a significant increase in sanitation workers with safe, dignified, and healthy work environments. In Nairobi's informal settlements, inadequate infrastructure leads to poor sanitation services and unsafe working conditions for MPEs. These sanitation heroes often face health risks, injuries, and even death due to the physically and emotionally demanding nature of their work (lifting, carrying, pulling, pushing, stigma) and a lack of protective gear, causing direct contact with human waste. Their invisibility within society exacerbates these challenges.

This brief presents activities, key outcomes, lessons and recommendations of clear and practical actions for improving occupational health and safety (OHS) and increasing visibility of MPEs with regard to social accountability in sanitation service provision.

KEY ACTIVITIES

1. Inception activities

To build support and understanding for the project, our team proactively engaged with key decision-makers and management from relevant public institutions. We conducted courtesy calls and organised meetings and a workshop in advance. Stakeholder engagement included county and national government departments, community leaders, sanitation workers (MPEs), women's representatives, and other interested parties. The collaborative approach fostered buy-in, commitment, and a shared vision for the project's success.

2. Participatory needs assessment

The project team conducted a comprehensive assessment to understand the needs and challenges faced by MPEs. This participatory process, where sanitation solutions were co-created alongside the workers themselves, revealed their top priorities: a lack of essential personal protective equipment (PPE), health insurance to protect their well-being, and a designated site for the safe disposal of faecal sludge.

3. Validation workshop on the identified sanitation needs

Following the needs assessment session, a technical meeting was held to validate the prioritised needs. The project team and key actors in the community, including MPEs co-identified key actions to improve sanitation services. The identified actions from the workshop included registration of sanitation workers to the National Health Insurance Fund (NHIF), a process that was initiated during the event alongside the development and implementation of social accountability tools.



KEY RECOMMENDATIONS:

- **Personal protective equipment and tools:** Interested social actors including mandated agencies, non-governmental organisations (NGOs), and philanthropies should collaborate in ensuring that MPEs access PPEs and are well-maintained.
- **Healthcare support:** Facilitate regular health check-ups for manual pit emptiers, including vaccinations, psychosocial support services and access to medical services. This enhances dignity and respect for MPEs.
- **Legal regulations:** Advocate for and enforce clear regulations and standards for manual pit emptying to ensure safety, hygiene, and fair treatment. This would not only protect their well-being but also improve the overall sanitation service delivery system.
- **Collaboration and networking:** Foster collaboration between governments, and the private sector to improve overall sanitation infrastructure.
- **Proactive engagement:** Actively involve all key stakeholders in the sector from the very beginning. This fosters buy-in, commitment, and a shared vision for success.
- **Multi-stakeholder platforms:** Establish platforms for ongoing communication and collaboration among all stakeholders. This ensures a coordinated approach, avoids duplication of efforts, and strengthens the sanitation ecosystem.
- **Continuous capacity development:** Consistently provide MPEs with training and resources in areas like financial literacy, social accountability, safety, advocacy, and resource mobilisation. This equips them to improve their working lives and advocate for change.
- **Mentorship and support:** Offer ongoing technical assistance to MPEs as they implement action plans and secure resources. This demonstrates project commitment and motivates continued engagement and improved service delivery.

contd.



4. Development of social accountability and training tools

In collaboration with MPEs, the project team co-developed social accountability tools. These tools aimed to empower MPEs and the community by promoting participation, transparency, and a sense of civic responsibility. Additionally, the co-creation of participatory monitoring tools ensured effective service delivery by allowing for ongoing evaluation and improvement of sanitation services.

5. Capacity development

MPEs underwent capacity development focused on practical skills to improve their working lives and advocate for change. Topics covered included financial literacy, social accountability, occupational health and safety practices, communication and advocacy strategies, and resource mobilisation. Interactive sessions equipped participants with tools like social accountability scorecards for monitoring service delivery. Participants and facilitators in these practical sessions included the Senior Chief and his assistant, the Chief Executive Officer of Kenya Water and Sanitation Civil Society Network (KEWASNET), the Director of Public Health for Nairobi County, community health volunteers, village elders, community members, the media, the Umoja ni Sisi youth group and MPEs. The resulting action plan outlined specific roles and opportunities for collaboration with other stakeholders, ensuring a coordinated approach to improving sanitation services.



6. Follow up on action plans with manual pit emptiers

Following up on commitments, the project team met with MPEs and interested actors to discuss progress on agreed-upon actions. Additionally, the team provided a donation of soap and PPE to improve working conditions for the sanitation workers. In a sign of their commitment to the project's goals, the MPEs collectively nominated a representative to attend a capacity-building program on sanitation worker management at the Kenya Water Institute (KEWI).

7. Mentorship and advocacy

The project's support extends beyond the initial workshops. The project team and its partners agreed to provide ongoing technical assistance to MPEs as they implement their action plan. This includes helping them prepare advocacy materials, organise meetings with government officials and stakeholders to advocate for change, and identify resources to address the sanitation and health challenges outlined in the plan. Additionally, MPEs are continuously linked with organisations that could equip them with valuable artisanal skills like plumbing and operating decentralised sewage plants, empowering them further in the sanitation sector.

KEY RECOMMENDATIONS CONTD:

- **Value sanitation workers:** Recognise MPEs as essential partners, not just beneficiaries. This can be done through improving their working conditions, healthcare access, and overall well-being.
- **Validation workshops:** Regularly conduct validation workshops to refine solutions, ensure they address identified needs, and gain stakeholder buy-in.
- **Social accountability tools:** Continuously co-design social accountability tools with MPEs and communities. This empowers them to hold service providers accountable and promotes transparency in sanitation service delivery.



KEY OUTCOMES

- Urban marginalised people are better able to come together, identify their priorities on health and well-being, and develop action to achieve these.
- Stronger relationships between community organisations, between urban marginalised people and government/other organisations/ community.
- Increased accountability and responsiveness to meet priorities of urban marginalised people from local government, community-based and development organisations.
- Attitude and value of sanitation work: MPEs had developed a positive attitude towards their work, and described it as a source of livelihood.
- Capacity development and exposure visits: By providing capacity building and exposure to best practices, the project initiatives elevated the visibility of MPEs and promoted higher sanitation work standards.

KEY LESSONS

- **Stakeholder engagement is key in project success:** Proactive engagement with key actors in a sector fosters buy-in, commitment, and a shared vision for project success.
- **Collaborative needs assessment is effective:** Working directly with MPEs to understand their challenges leads to solutions that address their top priorities, such as PPE, health insurance, and safe disposal sites.
- **Validation workshops refine solutions** Validation workshops are a critical step in backing up solutions and ensuring they are on the right track to achieve positive change.
- **Social accountability tools empower communities:** Developing social accountability tools with MPEs empowers them and the community by promoting participation, transparency, and civic responsibility in sanitation service delivery.
- **Capacity development equips MPEs:** Training on financial literacy, social accountability, safety, advocacy, and resource mobilization equips MPEs with the skills needed to improve their working lives and advocate for change. Including diverse community participants strengthens the sanitation ecosystem.
- **Follow-up and support maintain momentum:** Ongoing technical assistance empowers MPEs to implement their action plan, secures resources to address sanitation challenges, and connects them with training on valuable skills for the sanitation sector.
- **Valuing sanitation workers is important:** Incorporating the needs and perspectives of sanitation workers throughout the process enhances the project's overall value and success.
- **Healthcare of sanitation workers is key:** Safeguarding the health of sanitation workers is not just a moral imperative, it is crucial for effective sanitation services. Healthy workers experience fewer absences, can perform their duties more effectively, and are less likely to spread illnesses.

SUGGESTED CITATION:

Ivy Chumo, Leunita Sumba, Jackline Syonguvi, Martha Keega, Sylvia Murunga, Simon Thuo, Elizabeth Ndungu, Hayley Stewart, Kate Hawkins, Blessing Mberu, Caroline Kabaria (2024) An ARISE Responsive Fund Case Study: WIWAS, Nairobi, Kenya; ARISE Consortium.

ABOUT ARISE AND THE RESPONSIVE CHALLENGE FUND

The ARISE Hub – Accountability and Responsiveness in Informal Settlements for Equity – is a research consortium, instituted to enhance accountability and improve the health and wellbeing of marginalised populations living in informal urban settlements in low-and middle-income countries.

The ARISE vision is to catalyse change in approaches to enhancing accountability and improving the health and wellbeing of poor, marginalised people living in informal urban settlements.

ARISE is guided by a process of data collection, building capacity, and supporting people to exercise their right to health. ARISE works closely with the communities themselves; with a particular focus on vulnerable people living in the informal settlements; often overlooked in many projects and initiatives.

ARISE was launched in 2019 and is a five-year project. It is implemented in four countries: Bangladesh, Kenya, India and Sierra Leone.

Through a £1 million Responsive Challenge Fund, ARISE provided small grants to organisations that test innovative approaches to improving health and wellbeing linked to the ARISE Theory of Change.

ABOUT APHRC

The African Population and Health Research Center (APHRC) is a leading pan-African research institution. Headquartered in Nairobi, Kenya, the centre seeks to drive change with evidence led by a growing cadre of research leaders from across Africa.

APHRC has for the last two decades run numerous research projects and generated evidence that has shaped policy and practice across African countries. The center has actively engaged policymakers and other key stakeholders to achieve measurable policy impacts informed by rigorous evidence-based research.

ABOUT WIWAS

Women in Water and Sanitation (WIWAS) is an association dedicated to promoting gender equality and empowering women in the water and sanitation sector. With a vision where women are leading change, WIWAS strives to create lasting impact and improve the quality of life for communities. The association has a mission of empowering women through education, advocacy, and community engagement, and creating a more inclusive and sustainable water management approach.

The UKRI GCRF Accountability for Informal Urban Equity Hub is a multi-country hub with partners in the UK, Sierra Leone, India, Bangladesh and Kenya which we call ARISE. The Hub works with communities in slums and informal settlements to support processes of accountability related to health. It is funded through the UKRI Collective Fund.

We would like to acknowledge the contributions of the following people: Nashon Opiyo (Senior Chief - Korogocho), Janeleah Wanyama, Jemmimah Oyioko, Jacqueline Muthura, Beatrice Langat, Caroline Omollo, Sally Njambi, Tabitha Mwangi, Mutinda Musau (Videography/Photography), John Iregi (Chairperson - Kairos MPEs), Jack Kinyasa (Representative - Umoja ni Sisi CBO), Peter Muthoni (Chairperson - Umoja ni Sisi CBO), Margaret Sunguti (Director - Public Health NCCG), Mr Malesi Shivaji (CEO KEWASNET), Caroline Bii (NHIF), Mario Kainga (Director - Water and Sanitation NCCG), Zafarani Njoroge (Public Health Specialist) and all the organisations that participated in the study.

