

Sustainable Sanitation and Hygiene for All Programme (SSH4A)

Bhutan

Sanitation situation in Bhutan

In Bhutan, access to basic sanitation is high. The challenge is to ensure progress towards access to improved and hygienic sanitation. Incidence of WASH related diseases remains high and the under-five mortality rate is still among one of the highest in South Asia owing to poor hygiene practices, unhygienic latrines and the lack of hand washing facilities. At the same time, whilst investment and political commitment in water is now high, sanitation and hygiene is lagging behind.

SSH4A programme in Bhutan

SNV in Bhutan has been supporting the Ministry of Health to develop their pilot Rural Sanitation and Hygiene Programme since 2008 as part of the longer term vision of developing the national approach and policy. The SSH4A programme contributes to this by developing a district wide approach to increase access to improved sanitation and hygiene. The approach being developed is subsidy free, integrated into the existing government system and based on concepts of participatory demand-led approaches met by supply chain development. It is currently being scaled up to a second district wide approach in 2011.

Programme goal

- Improved health and quality of life for 7051 households (36,000 people) in four districts in rural Bhutan through enhanced access to improved sanitation and hygiene practices.

Partners

Public Health Engineering Division (PHED), Department of Public Health, Ministry of Health; District Administrations and SNV in Bhutan.

Emerging results

- Access to rural sanitation coverage has increased from 86% to 93%.
- Access to improved sanitation has increased from 27% to 86%.
- Number of basic unhygienic toilets has dropped from 47% to 28%.
- Number of pour flush toilets has increased from 20% to 50%.

Key lessons

- Advocacy combined with evidence of effective approaches is needed to raise the priority given to sanitation and hygiene.
- Households prefer knowledge of technology options before investing in sanitation.
- Inclusion of multiple stakeholders including the private sector from the beginning ensure sustained outcomes.
- Existing community support structures need to be better understood to access their potential to be mobilised for pro-poor support.



"Compared to before the cases of diarrhoeal diseases have substantially reduced.....now we see very few cases. I am confident that we will see the impact once the 2011 health bulletin gets published"

Health Assistant, Sub District

"The concept and the approaches learned during the Community Development for Health Workshop has taught us to move away from the traditional expectation of subsidies from the government and instilled in to us our responsibility to contribute for the betterment of ourselves and the community"

Community Leader



For more information on SSH4A Bhutan, contact: Gabrielle Halcrow, ghalcrow@snvworld.org or visit: www.irc.nl



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