

STORIES FROM THE FIELD: CENTRAL PROVINCE, KENYA

A WASHplus small doable action workshop leads to the development of an innovative commode design for bedridden or elderly clients.

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WASH Training Spurs Local Solution

James Yatich, a public health officer in Kenya’s Central Province, has been supporting frontline community health workers involved in home-based care for people living with HIV. He realized that bedridden clients who could not use the toilet on their own posed a major challenge. “When I told them that they had to use the toilet to prevent diarrhea, they asked me, ‘how?’”

In June 2012 Mr. Yatich finally found a solution after attending a WASH-HIV integration training workshop organized for government public health officers under the USAID-funded WASHplus project implemented by FHI 360. During the training, participants learned about the small doable action approach and supportive technologies to improve water, sanitation, and hygiene practices.



Small doable actions are incremental, feasible steps to improve health and hygiene. Using knowledge acquired from the training, Mr. Yatich returned home and started working on designing a simple aid to help bedridden patients and the elderly “go to the toilet” in a dignified way. The result is a homemade commode that can be crafted from locally available materials and ensure proper disposal of fecal waste.

“I sketched a design and asked a carpenter to make one piece for demonstration,” says Mr. Yatich. “We used mainly leftover pieces of wood and furniture, and the cost came to just 200 shillings [about US \$2.50]. But the cost can be negligible if the materials are available in homesteads.”

The improvised seat is placed where the patients can easily reach it and lined with disposable plastic bags that are readily available. It can be used by bedridden clients and the elderly, especially those who are overweight and cannot easily be supported by others.

“We don’t see very many bedridden patients, but even one such patient can pose a big challenge to the family and needs assistance,” says Mr. Yatich. He feels the technology gives patients independence and dignity as they do not need a caregiver to hold them on the toilet seat. It also allows the caregiver to do other chores rather than take the patient to the toilet—which can be frequent for patients with diarrhea.

Asked why he had not thought of the solution earlier, Mr. Yatich says: “It could not have been developed earlier because we were not able to conceptualize the relationship between hygiene and HIV until we went for the training.” He is now looking to work with local stakeholders to train community health workers to make the toilet seats.

Central Provincial Public Health Officer Samuel Muthengi says the region has high latrine coverage at 97 percent, but usage is a challenge for bedridden patients and the elderly. If such a simple technology is replicated, it can help improve disposal of fecal waste.

For additional photos see: <http://www.pinterest.com/washplusinfo/kenya-simple-commodes-for-hiv-aids-patients-and-ot/>

