

TASK FORCE (Restricted)

DISCUSSION PROPOSAL

for

A CRITICAL SUPPORT PROJECT

THE SOCIAL ASPECTS

of the

UNICEF - ASSISTED

RURAL WATER SUPPLY PROGRAMME

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A CRITICAL SUPPORT PROJECTTHE SOCIAL ASPECTS OF THE UNICEF ASSISTED
RURAL DRINKING WATER SUPPLY PROJECTINTRODUCTION

This is a support project designed as an operational (servicing) experiment, intended as an integral component of the Rural Water Supply Programme. It aims to develop and demonstrate the methodology, organizational skills, and support materials (directly related to the Burmese context) which are essential for the enhancement of the role and the effectiveness of the activities of village water committees. The project will contribute the efforts needed to ensure the community participatory inputs which are crucial for the achievement of the originally stated health and development objectives of the Rural Water Supply Project.

JUSTIFICATION

The Rural Water Supply Project being assisted by UNICEF and the Australian Government, and other UNICEF-assisted projects for improving Rural Health, all have as their ultimate objective the improvement of the health of the villagers, particularly the reduction of the incidence of gastro-intestinal diseases, and elimination of trachoma and leprosy and other water-related diseases which are especially prevalent in the Dry Zone where the present Rural Water Supply Project is concentrated.

But after a review of these projects at the end of 15 months, it is found that a systematic, coordinated, effective programme to achieve the above health objectives and to obtain the social benefits envisaged in the original

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drafts of these UNICEF projects has not yet been mounted, due to the lack of budgetary allocations for these social aspects and also, more importantly, due to difficulties in implementation of intersectoral convergence with specific responsibility and manpower to support the activities required for a successful human outcome commensurate with the scale of technical inputs.

It is therefore proposed to start a servicing experiment (under local conditions) to determine the best way of taking into account the various constraints (such as inadequate manpower in the Health Education area, lack of expertise in the Rural Water area regarding social aspects) and also to gain some advantages from the local situation (such as availability of unemployed graduates and the presence of the Village People's Councils who can become effective activators for development of the village communities which are going to receive tubewells and other health inputs under the UNICEF Country Programme) to achieve these social aspects.

Without proper implementation for achieving these social aspects, the stated targets of the large UNICEF- assisted projects will be seen not to have been obtained when the evaluation of these projects is carried out. Hence this experiment is seen as being vital to the future success of the whole Country Programme, and will provide a methodology and a critical investment for future development programmes. Given the potential impact and presented as a percentage of the total financial inputs budgetted for the Rural Water Supply Project, the requirement of this proposal is very small, (less than 3% of the Rural Water Supply Programme alone.)

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OBJECTIVES

Major objectives of the Rural Water Supply Project are "to improve health and nutritional status" of the villages, and "to evaluate the socio-economic impact" of the programmes.

The present sub-project is a support project of the Rural Water Supply Programme directed towards the social aspects of the programme to ensure that technical and community involvement goes hand in hand and avoids the failures experienced elsewhere when the technical aspects have predominated.

The major objectives of the support project is to define, enhance and ensure the effectiveness of village water committees which are the existing structure's organization through which the essential community participatory activities can be mobilized, deployed, supported and monitored. The responsibilities of the water committees will be redefined, and include village level planning, sanitation, nutrition and health support in relation to water supply facilities. These activities will go well beyond their present maintenance tasks.

The objectives of this support project include the establishment of trained teams:

- 1) To motivate and assist the village committee to mobilize their resources to develop a water system based on the tubewell water source and to operate the system on a self-financed basis.
- 2) To encourage the communities to use the water from the system throughout the year, and avoid the use of contaminated water, so as to up-grade the the health of the village.

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Method of Implementation

Training and support for Village Water Committees

Experience elsewhere (and in Burma during the recent Project Support Communication Workshops) indicates compellingly that the establishment of effective institutions (such as village water committees and the People's Village Councils) requires more than a promotional boost and a short training course. It needs in addition an on-going series of action-oriented problem solving on-the-spot encounters and exchanges which must continue until the initial enthusiasms are encompassed by a methodology, and processes, which are successfully adopted (and adapted) to local conditions, and have demonstrably become the community's own self-generating activity. This important practical concept leads to the conclusion that especially prepared personnel are needed to provide this important community support function. It is therefore proposed that "social development teams" be created. The Social Development Teams will be the main instrument for realising the objectives. The project will recruit and develop a cadre of village level workers (mainly drawn from the unemployed young people) and train and supervise them in on-going work with the village committees as the drilling and technical work is planned and proceeds. The teams will be trained in organizational and social skills and learn to specifically assist Village Councils in establishing (or strengthening) existing Village Water Committees. There will be an on-going series of on-the-spot problem solving, and planning, training and supervisory sessions.

* This requires a suitable Burmese name rather than "Social Development Team" * See Annex I for a suggested list of "Functions of Water Committees"

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jointly participated in by the village water committee and the Social Development Team up to the point where the committees without further assistance can creatively and continuously fulfil their role in raising the health status of their community. (In this particular case through effective involvement in the provision of the new or improved water supply; sanitation; establishment of better health habits; and the technical and social on-going maintenance of this development effort.) The Village Water Committee will be expected to clearly define their own role and responsibilities, in information gathering; plan the village end of the improved water supply system and the associated sanitation and health inputs; and actually carry through the implementation and maintenance, on a day-to-day basis, of a village-oriented plan. The external inputs, such as the new tubewell, will be conceived as a development catalyst, for it can be confidently expected that a successful community outcome related to water and health will spur and spawn other successful development activities and lay the foundation for community-based intersectoral collaboration in the future.

As the methodology and approach recommended here are not yet a complete and thoroughly BURMANISED Package (although the underlying principles are tried and trusted), and the logistics of fielding the teams will have to be determined by actual experience, it will be sound practice to build up the personnel, the procedures, the content, the organization and the skills in manageable and cumulative stages.

The preparatory stage of the project will involve the recruitment of an overall supervisor and two deputy field supervisors for each of the three Dry Zone divisions. These 9 persons (3 Supervisors + 6 Deputy Field Supervisors) will be trained and supervised technically by the Health Education

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Bureau (HEB), the Environmental Sanitation Division (ESD), the Rural Water Supply Division (RWSD) and the UN Adviser. The core of this training will take place under actual present field conditions associated with the present drilling programme, and for this purpose the trainees and trainers will be organized into the first village social development teams.

These "prototype" teams, made up of the eventual supervisory staff, will join with a number of existing or embryonic village committees and will be responsible for thoroughly exploring the nature of the committee's tasks and the manner in which the teams as external agents can effectively service the villages.

From this initial service activity, these prototype teams, along with RWSD, HEB, ESD and the adviser, will collectively examine and extract the field experience and systematically put together and gradually improve upon the content, communication support materials, "How to guides", and skills which will constitute the basis for the initial training and assignment details of the teams to be recruited, appointed, and fielded in the main implementation stages of the project.

The supervisors will have directly experienced and conceptualised in detail the village level work themselves and produced the "How to..... guides" material, and will therefore be well-placed to train and supervise the later teams.

They will also, from experience, work out detailed work and reporting schedules for the teams and village committees and plan the educational and administrative aspects of the supervisory process.

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The teams themselves will be recruited and appointed in stages so as to **provide for** a gradual and solid build-up which will allow for problems to be ironed out and ensure increasingly effective introduction, training and service as experience grows.

The teams will be of 3 persons, 10 teams to each of the 3 Divisions, and closely associated with the Drilling Teams under the Authority of the Rural Water Supply Division.

The suggestion is that the team members to be recruited should where possible be graduates (from Mandalay and Rangoon Universities), but their homes will have to be within the Dry Zone Divisions of Magwe, Sagaing and Mandalay, preference will be given to persons from the villages, or those who have lived over a good period of time in the villages. Essentially they must be willing to undertake living in the villages on a somewhat itinerant basis.

Other preferences have been suggested, recruits should be:

- a) Unmarried or those without family responsibilities (because their work for two years will involve moving from village to village);
- b) Graduates who are seen to be strongly socially committed and have an aptitude for working with people and a keen interest in social service.
- c) Graduates who can demonstrate (at interview) a maturity, a persuasive ability, and a readiness to learn how to provide an effective service.
- d) Arts graduates with some appreciation of technology;
- e) Lady graduates should be recruited for the teams where there is no good reason for excluding them

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TRAINING

The training and on-going technical supervision will be the responsibility of the HEB with the assistance of ESD (Environmental Sanitation Division) and RWSD and a UNICEF adviser (joined later by the recruited and trained Supervisors).

The UNICEF Adviser will assist in the preparation of curricula, teaching materials, and the details of the programme.

It is suggested that the process of preparation, recruitment, training and service be planned along the following lines.

- Organization of the HEB/ESD/RWSD/UN Advisor cadre
- Recruitment of potential supervisors (3 x 3) 9
- Appointment and Orientation of Supervisors
(with the assistance of members of existing and successful water committees)
- A training in the approach, procedures and production of training, service content, and support materials.
- Field service as "prototype" teams
- Examination and Analysis of Field Experience
- Training continued based on the field experience
- Repeated Field Service.
- Repeated Examination and Analysis
- Evaluation and Preparation for induction, orientation and training of Social Development Teams (I)
- Recruitment of Social Development Team Members (I)
(3 members x 3 team x 3 Divisions) 27
- Appointment and Orientation of SDTs (I)
(with the assistance of the Supervisors, and village water committee members)
- A training in the approach, procedures and reporting and learning materials required of trainees.
- Field Service, joined by and supervised by the Supervisors
- Examination and Analysis of Field Experience
- Training continued based on the Field Experience

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- Repeated Field Service
- Repeated Examination and Analysis
- Field Service
- On going supervised field service
- Occasional feed back refresher training periods
- Recruitment of Social Development Team Members (II)

(3 x 3 x 3) 27

As for SDT's I ~~except~~ that some SDT I's will assist in the orientation of SDT II's

Eventually SDT (I's) will be divided up and reformed with SDT (II's) in order to be able to provide experienced Team members in the absorption process of new team members.

- Recruitment of Social Development Team Members III

(3 x 4 x 3) 36

then: As for SDT's II

- Evaluation and Working up of total project report
- Recommendations for future Action.

Training can therefore be seen as multifaceted

- Training of the Supervisors
- Training of Social Development Teams
- Training of Village Water Committee members.

Part of the training of village committee members and the Social Development Teams will be undertaken jointly.

Subsequently the Social Development Teams will continue with on-going problem-solving training of committee members on-the-spot in the villages.

The Social Development Team's work will be closely supervised not just in the administrative sense but in the on-the-spot training sense.

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The Teams will spend regular periods in the villages interspersed with feed-back sessions when specific learning assignments will have been completed, examined, and reworked for improvement of the whole process.

DURATION

Two and one half years (to the end of the present Third Year Plan).
First six months (January-June 1980), preparatory stage, 2 years full scale implementation (June 1980-82).

MANPOWER

HEB Staff	Man months	6 + 72
ESD Staff		?
RWSD Staff		?
Supervisors (9 x 28 months)		252
Team members (27 x 24 months)		= 648
(27 x 20 months)		= 540
(36 x 16 months)		= 576
	Total	1764
UNICEF Adviser (1 x 30 months)		30
Consultations (1 x 4 months)		4

SOME EXPERIMENTAL PRODUCTS

A number of "spin-off" advantages can be expected from this project.

1. Creating simple instruments for village self-surveys of water conditions, health hazards, etc. etc.
2. To demonstrate the feasibility and effectiveness of a village information gathering and sharing system which will provide on-going long-term inputs to township/divisional/national planning.

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3. To establish the timing and arrangements to be made in the village for health support, and health education. This could include collaborating with the Village People's Councils in the effective selection and monitoring of the work of Community Health Workers, (Where the PHP is being implemented) AMDs etc. and full responsibility for seeing that their collaboration with the Health Service personnel actually takes place, especially in tackling the water-borne related diseases and associated public health work.
4. In the course of working out and establishing such collaborative grass-root planning and implementation processes to develop and make explicit an indigenous methodology, content, support materials, and the skills required, which can be promoted, transferred, and utilized throughout the country as the People's Health Plan proceeds.
5. To demonstrate the effectiveness, and necessity of the processes and rewards of intersectoral and community participation in development efforts.

For example ... assigning teams to a percentage of the villages for which there now exists information from the Base Line Data Survey will provide a comparison to show the effectiveness or otherwise of these teams. (Those not provided with 'social aspect' teams but receiving hardware only [tubewells pumps] will act as a control group)
6. By having different compositions of teams (2 women, 1 man, all men, all women) comparative effectiveness can be assessed.

JOB DESCRIPTIONS

(Details to be worked out.)

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FINANCIAL ARRANGEMENTS

The 9 Supervisory Staff and 90 team members should be recruited as Daily Paid Workers.

They will be paid an adequate daily allowance for every day they actually spend in the villages (25 Ks.). On days that they are receiving training in the towns or during any non-working intervals, they should be paid a retaining per diem (10 Ks.)

SUPPORT

Transportation is essential. RWSD would provide the transportation facilities to deploy the Social Development Teams as required.

Kits for living in the villages (mats, nets, etc.) and possibly uniforms should be provided.

Adequate office supplies and materials for duplicating and printing must be supplied.

The PSC material must be budgetted for generously.

Special attention must be given to such matters as cement and fuel supply for the tubewell villages in the Dry Zone.

ADMINISTRATIVE AUSPICES

Agricultural Mechanization Division (AMD)
Relation to HMB, LSD, etc. (To be worked out)

TIME TABLE / WORKPLAN / MILESTONES:

(Details to be worked out.)

PROPOSED BUDGET

- a) Assistance
 - b) Local
 - c) Cash flow by month year
- (Details to be worked out)

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The following Annexes were prepared many months ago, before the present Task Force activity was initiated. It is of interest as one overview of the long-term possibilities of Social Development Teams. Currently of course the villages have already been selected, but it might be that in time the SDTs will play a part in improving upon the selection procedures and will assist Village Councils in supplying the information upon which the Township Councils, the RWSD and the Health Department can base their own planning.