

# Communities' involvement for better access to potable water in households in communities of the Lake Chad Basin and of slums areas of Douala

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## Introduction

Access to potable water remains a challenge in Sahelian areas and urban slums of cities in Africa. This project was conducted to respond to households' needs regarding access to potable water in areas with most limited access to water in Cameroon.

## Methods

Four health districts were targeted including two in the Lake Chad Basin (LCB) and two in Douala, the biggest city of Cameroon known to have limited access to water and high population burden to waterborne diseases.	From findings of households' baseline survey, a program was developed involving: (i) selecting community health volunteers (CV) and training them on water treatment by chlorination and solar disinfection (SODIS), (ii) assigning CV to visit and train households weekly for	a year on these water treatment methods, and assisting them in choosing their adapted water treatment method and monitoring their skills in the chosen method. Data were collected weekly to assess households' coverage in terms of water treatment methods.
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## Results

Of 10790 households reached in the baseline survey, 5170 (47.9%) and 5620 (52.1%) households were located in Douala and LCB respectively. In Douala, 292 (5.6%) and 191 (3.7%) households declared to always and sometimes treat their drinking water respectively with 1 (0.02%) household treating by SODIS and 142 (2.7%) by chlorination. In LCB, 188 (3.4%) and 692 (12.3%) households declared to always and sometimes treat their drinking water respectively with 8 (0.1%) treating by SODIS and 431 (7.7%) by chlorination. The intervention involved 120 communities with their CV that conducted 55934 households' visits in a year including 33135 (59.2%) in Douala and 22199 (39.7%) in the LCB. In Douala, water treatment was reported from 10006 (30.2%) visits including 856 (2.6%) by SODIS and 4796 (14.5%) by chlorination. In LCB, water treatment was reported from 11548 (52.0%) visits including 5109 (23.0%) by SODIS and 3102 (14.0%) by chlorination.

## Conclusion

This project presents an efficient intervention that can be used to empower communities in improving their access to potable water. Reported adherence to proposed water treatment methods was different in Douala and LCB suggesting that the efficiency of health interventions proposed to communities may vary according to contexts.