ISSUE BRIEF

Adherence to COVID-19 SOPs amidst Water Scarcity: Experiences from Kyaka II Refugee Settlement in Uganda

by Dunstan Ddamulira Paul & Gloria Seruwagi

1. Background

Uganda is home to about 1,434,708 refugees originating from Countries such as; South Sudan, Somalia, Congo, Ethiopia and Eritrea among others. Kyaka II settlement hosts approximately 124,498 refugees mainly from Congo and Rwanda. Among the essential requirements to fight COVID-19, is the access to WASH Services.

WASH is the short form of "**Wa**ter, **S**anitation and **H**ygiene". It relates to improved access to clean and safe water, improved sanitation facilities and maintenance of a basic level of hygiene. The three are highly interconnected and interdependent such that the attainment of the benefits of having access to clean and safe water can only be fully realised when there is also access to improved sanitation and good hygiene practices. COVID-19 can be categorised as a water washed (Stenström A.T, 2014) disease mainly because the lack of clean water for washing hands impedes efforts to curtail the spread of the CORONA Virus.

The <u>REFLECT¹</u> <u>Study</u> implemented by a consortium comprising; Makerere University, Gulu University, Agency for Cooperation in Research

and Development (ACORD-U), Lutheran World Federation (LWF) and Ministry of Health, collected data on WASH as part of its assessment of the knowledge, adherence, and lived experiences of refugees in 3 refugee locations of Kisenyi, Kyaka II and Adjumani. In line with WASH, the study particularly assessed adherence to handwashing by refugee and host communities.

2. The WASH Situation in Kyaka II Refugee Settlement

The SPHERE² standards which were developed and adopted before the COVID-19 pandemic, stipulate a water service level of at least 20 liters per person per day (I/p/d) for refugees in all settlements in Uganda.



Some refugees access water through public tap stands.

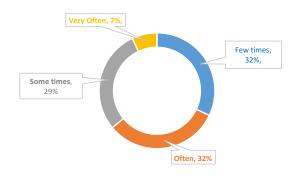
¹ REFLECT (Sept, 2020), A study to assess knowledge, adherence and the lived experiences of refugees in COVID-19.

² The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response, fourth edition, Geneva, Switzerland, 2018.



In Kyaka II settlement, the WASH situation fluctuates with season and access to safe and clean water is not meeting the required standards which undermines the fight against COVID-19.

Access to safe water in Kyaaka II settlement has remained as low as 10.9 l/p/d³ which is half the recommended standards and only 56% of the population has access to a sanitation facility. Access to water is mainly through boreholes (52%), piped system (46.9%), water trucking (0.4%) and open dug wells. Recently a big system that pumps water from a valley tank, treats it and distributes to some of the refugees was repaired to supplement existing sources. The water sources are also susceptible to breakdowns and other functionality challenges which increases the risk of not adhering to the COVID-19 requirement of regular handwashing.



How often do you wash hands with soap - Kyaka

UNHCR (2020). Performance Snapshot, Uganda Refugee
Response Plan (RRP) 2020-2021 - Quarter 2, January - June 2020,
Rwamwanja Refugee Settlement, Mbarara Sub-Office.

In Kyaka II settlement, the REFLECT Study revealed that 31.64% of the respondents oftenly washed their hands with soap and only 7.06% very often did so, while 31.64% reported that they wash their hands with soap a few times. This is an indication of unsatisfactory low levels of adherence to SOPs in the settlement.

3. Implication for Stakeholders

In light of the study findings it is recommended that stakeholders responding to the COVID-19 pandemic endeavour to undertake the following.

Enhance efforts to sensitize refugee communities about the importance of WASH towards the fight against the pandemic in order to increase their adherence to the requirement of regularly washing hands with soap.



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Increase the amount of safe water provided to the refugee and urban poor communities so as to increase sustainable access to water which is essential for handwashing and general observance of good hygiene. This can be made possible by putting in place more water systems and redefining the standard amount of water recommended per person per day to cater for extra water that is required for adherence to more frequent washing of hands and improving hygiene. More research should be undertaken to determine the appropriate increase in water demand during emergencies and pandemic like COVID-19 in order to ascertain the relevant consumption rate design standard to be used by water supply practitioners. Promote the use of more user friendly and safe hand washing facilities especially for rural areas. This could include popularizing pedal operated hand washing stations and improved tippy taps among others.



4. About the Authors

Dunstan Ddamulira Paul is a WASH expert who has developed a multi-dimensional niche in programming of Development and Humanitarian projects while combining practical work, research, and advocacy. He is currently working as Director of Programmes for ACORD Uganda. Dunstan's background is in areas of Institutional Management and Leadership, Water Resources Management, Civil and WASH Engineering. He is a Co-Investigator on the REFLECT Study.

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