



**MIDLANDS STATE UNIVERSITY**

**FACULTY OF SOCIAL SCIENCES**

**DEPARTMENT OF POLITICS AND PUBLIC MANAGEMENT**

**Sustainable Development Goals and the impact of Water Sanitation  
and Hygiene (W.A.S.H) programmes in rural Zimbabwe: Case of  
Runde District Zimbabwe**

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**DISSERTATION SUBMITTED TO THE FACULTY OF SOCIAL  
SCIENCES IN PARTIAL FULFILMENT OF THE  
REQUIREMENTS OF THE BACHELOR OF SCIENCE IN  
POLITICS AND PUBLIC MANAGEMENT AT MIDLANDS  
STATE UNIVERSITY**

**JUNE 2018**

**RELEASE FORM**

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**DISSERTATION TITLE: SDGs and the impact of W.A.S.H programmes in rural Zimbabwe: Case of Runde District, Zvishavane**

**DEGREE PROGRAMME: HPPM -Bachelor of Science in Politics and Public Management Honours Degree**

**YEAR GRANTED: 2018**

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## DECLARATION

I the undersigned do hereby proclaim that this dissertation is a product of my own work and the research findings and investigations have not been offered anywhere else to serve any purpose. Other related sources of information that the researcher has made use of has been fully acknowledged by means of referencing.

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Case of Runde District, Zvishavane***

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## **DEDICATION**

I dedicate my work to my loving mother and my family for their unwavering support through my time of study.

## **ACKNOWLEDGEMENTS**

Special mention goes to my supervisor Mr. Chikerema for the assistance provided during the course of this study. I also extend my gratitude to the relevant stakeholders and individuals involved for their time spent and timely cooperation for helping me do this research.

I would like to take this opportunity again to thank my mother and my family for their moral and financial support received from them.

Above all, I express gratitude to God Almighty who granted me the wisdom and grace throughout the entire research.

## ACRONYMS

<b>AMCOW</b>	<b>-African Ministers Council on Water</b>
<b>EMA</b>	<b>-Enviromental Management Act</b>
<b>GNP</b>	<b>-Gross National Product</b>
<b>GOZ</b>	<b>-Government Of Zimbabwe</b>
<b>ICESCR</b>	<b>-International Covenant on Economic, Social and Cultural Rights</b>
<b>IRWSSP</b>	<b>-Rural Water Supply And Sanitation Programme</b>
<b>IWRM</b>	<b>-Intergrated Water Resources Management</b>
<b>J.M.P</b>	<b>- Joint Monitoring Programme</b>
<b>MDGs</b>	<b>- Millennium Development Goals</b>
<b>NAC</b>	<b>-National Action Committee</b>
<b>NGOs</b>	<b>- Non Governmental Organizations</b>
<b>PSIP</b>	<b>-Public Sector Investment Program</b>
<b>SDGs</b>	<b>- Sustainable Development Goals</b>
<b>UN</b>	<b>- United Nations</b>
<b>UNDP</b>	<b>-United Nations Development Programme</b>
<b>UNICEF</b>	<b>- United Nations Children’s Fund</b>
<b>UNOCHA</b>	<b>-United Nations Office For The Coordination of Humanitarian Affairs</b>
<b>UNSTAT</b>	<b>- United Nations Statistics Division</b>
<b>WASH</b>	<b>-Water, Sanitation and Hygiene</b>
<b>WHO</b>	<b>-World Health Organization</b>
<b>ZIMASSET</b>	<b>-Zimbabwe Agenda For Sustainable Socio-economic Transformation</b>

## **ABSTRACT**

The purpose of the study was to analyze the impacts of W.A.S.H projects in Runde Rural District. The gradual decline of W.A.S.H services from the 1990s due to the economic downfall affected both urban and rural communities. This created wide disparities between the rural and urban communities in terms of access to clean water and good sanitation with the rural areas being the most affected. As a result the livelihoods, health and well being of the rural people decreased significantly as the residents were exposed to a number of water related diseases due to poor sanitation and a lack of access of water to practice hygiene practices. The knock on effect of a lack of reliable W.A.S.H infrastructure and services consequently represses the ability of the country to achieve the Sustainable Agenda 2030 set goals. The findings of the research can therefore be utilized in finding ways to improve and enhance W.A.S.H programmes and the W.A.S.H sector in providing efficient and effective service delivery to the population. The study employed qualitative methods of gathering data as the researcher was focused on the perceptions of the participants towards the programme. In dealing with the objectives of the research, the study used a case study as a research design. A sample of 45 respondents consisting mainly of villagers was chosen to participate in the study. Convenience and purposive sampling techniques were used to select the participants during data collection. The research established that W.A.S.H has an immense impact on the state of health of people. It also identified the role of W.A.S.H. in promoting economic development. Moreover, the promotion of gender equality in the rural area hinges on reliable W.A.S.H. service provision. To address these challenges, there is a need to improve the quality and accessibility of water to residents. There is a need to adopt behavior change policies that help to promote the culture of sanitation and hygiene practices for the optimum use, and benefit from W.A.S.H infrastructure. The study concludes by giving recommendations based on research findings.



## Table of Contents

RELEASE FORM .....	ii
DECLARATION .....	iii
APPROVAL FORM.....	iv
DEDICATION .....	v
ACKNOWLEDGEMENTS .....	vi
ACRONYMS .....	vii
ABSTRACT.....	viii
<b>1 CHAPTER ONE- INTRODUCTION .....</b>	<b>1</b>
1.1 INTRODUCTION .....	1
1.2 BACKGROUND OF STUDY .....	1
1.3 PROBLEM STATEMENT .....	3
1.4 RESEARCH OBJECTIVES .....	4
1.5 RESEARCH QUESTIONS.....	4
1.6 SIGNIFICANCE OF STUDY .....	4
1.7 LIMITATIONS OF THE STUDY.....	5
1.8 DELIMITATIONS OF THE STUDY .....	5
1.9 CONCLUSION .....	5
<b>2 CHAPTER TWO-LITERATURE REVIEW .....</b>	<b>6</b>
2.1 INTRODUCTION .....	6
2.2 OVERVIEW OF SUSTAINABLE DEVELOPMENT GOALS .....	6
2.2.1 ZIMBABWE AND MILLENIUM DEVELOPMENT GOALS.....	7
2.2.2 ZIMBABWE AND SUSTAINABLE DEVELOPMENT GOALS .....	8
2.3 AN OVERVIEW OF WATER SANITATION AND HYGIENE.....	8
2.3.1 OTHER CASES EMPLOYING WATER SANITATION AND HYGIENE PROGRAMMES.....	<b>Error! Bookmark not defined.</b>
2.3.1 i MASVINGO.....	<b>Error! Bookmark not defined.</b>
2.3.1 ii ZAMBIA .....	<b>Error! Bookmark not defined.</b>
2.4 HISTORY AND DEVELOPMENT OF WASH SECTOR IN ZIMBABWE.....	9
2.4.1 RURAL WATER SUPPLY AND SANITATION DEVELOPMENTS IN ZIMBABWE 10	
2.5 SUSTAINABLE DEVELOPMENT GOALS AND WATER.....	11
2.5.1 WATER AND HEALTH.....	12
2.5.2 WATER AND GENDER.....	13
2.6 POLICY FRAMEWORK FOR WATER AND SANITATION IN ZIMBABWE.....	15
2.7 THEORETICAL FRAMEWORK: HUMAN DEVELOPMENT APPROACH.....	16
2.7.1 CAPABILITY APPROACH.....	17
2.8 CONCLUSION .....	18
<b>3 CHAPTER 3 –RESEARCH METHODOLOGY.....</b>	<b>19</b>
3.1 INTRODUCTION .....	19
3.2 RESEARCH DESIGN.....	19
3.3 QUALITATIVE.....	20
3.4 TARGET POPULATION .....	21
3.4.1 SAMPLING.....	21
3.4.2 SAMPLING METHOD.....	21
3.5 SAMPLING TECHNIQUES .....	22
3.6 DATA COLLECTION .....	23
3.6.1 QUESTIONNAIRES.....	23
3.6.2 INTERVIEWS.....	24
3.6.3 SECONDARY DATA.....	25

3.7	CONCLUSION .....	25
<b>4</b>	<b>CHAPTER FOUR- DATA PRESENTATION, ANALYSIS AND DISCUSSION .....</b>	<b>26</b>
4.1	INTRODUCTION .....	26
4.2	RESPONSE RATE.....	26
4.3	W.A.S.H AND RURAL LIVELIHOODS .....	28
4.3.1	W.A.S.H AND RURAL HEALTH.....	29
4.3.2	W.A.S.H AND GENDER EQUALITY.....	31
4.3.3	W.A.S.H. AND RURAL DEVELOPMENT.....	33
4.3.4	RESPONDENTS ATTITUDES TOWARDS SIGNIFICANCE OF W.A.S.H. PROGRAMMES.....	34
4.3.5	W.A.S.H. AND WATER QUALITY .....	35
4.3.6	W.A.S.H AND SUSTAINABLE DEVELOPMENT GOALS .....	35
4.7	CONCLUSION .....	36
	<b>CHAPTERFIVE-SUMMARY, CONCLUSIONS AND RECOMMENDATIONS .....</b>	<b>38</b>
5.1	INTRODUCTION .....	38
5.2	SUMMARY.....	38
5.3	CONCLUSIONS.....	39
5.4	RECOMMENDATIONS.....	41
	REFERENCE LIST .....	43
	Appendices.....	47
	EVIDENCE OF RESEARCH.....	53

### List of Tables

Table 1	Questionairre response rate.....	25
Table 2:	Interview response rate.....	26
Table 3:	Total response rate.....	26



# **1 CHAPTER ONE: INTRODUCTION**

## **1.1 INTRODUCTION**

The chapter gives a vivid description of the study at hand. The chapter takes into account documents which are both primary and secondary that are to be studied in the research. It also looks at scholarly views that are in line with the topic to be studied. The chapter will also consider the background of the study, problem statement, objectives of the research, research questions to be considered, the significance of the study, the limitations to the study and the delimitations of the study that will be considered during the research.

## **1.2 BACKGROUND OF STUDY**

September 2000 marked when the United Nations General Assembly adopted the Millennium Declaration. The Millennium Declaration consisted of Millennium Development Goals. These goals were set to establish a worldwide partnership and agreement of countries and development partners committed to upholding eight voluntary development goals which were to be achieved by the year 2015. The Millennium Development Goals were established to address socio-economic issues affecting most countries in the world; as a result, eight goals were drafted to be achieved universally by 2015. These goals were as following :

1. to put an end to extreme poverty and hunger
2. to succeed in providing global primary education
3. to promote gender equality and empower women
4. to lessen child mortality
5. to improve on maternal health.
6. to tackle HIV/AIDS and other diseases
7. ensure that there is environmental sustainability and to
8. create a global agreement aimed at homogenous universal development.

As a result, this saw the unprecedented mobilization of resources related to Millennium Development Goals which saw activities across a wide spectrum of global and national initiatives as well as with the development community. The Millennium Development Goals focused on three areas covering the social, economic and political aspects of society. These were human capital, human rights and infrastructure. The intention of addressing these

aspects were to increase the standards of living. The human capital objectives consisted of health care, education and nutrition, infrastructure objectives included, the access to safe, clean and reliable drinking water, sustainable practices, energy, information communication technology, increased farm outputs, environment and transportation. The human rights objectives looked at empowering women, ensuring equal access to public services and increasing security of property rights. It was of the belief that these goals were to increase an individual's human capabilities and result in a productive life.

On the 25<sup>th</sup> of September in 2015, the United Nations General Assembly came together to adopt the new development agenda to guide international development. This arose after the completion of the Millennium Development Goals which were arguably unsuccessful in meeting set targets and indicators. As a result, the assembly convened to draft a new agenda to improve on where the Millennium Development Goals had left off. The new agenda: Transforming Our World: The 2030 agenda for Sustainable Development was then adopted. The agenda was built upon the outcome document of the United Nations Conference on Sustainable Development of June 2012 held in Rio de Janeiro in Brazil and led to the establishment of the Open Working Group on Sustainable Development Goals, this was a group of Member States tasked with preparing a proposal on the Sustainable Development Goals. The Open Working Group proposal was welcomed by the United Nations General Assembly in September 2014 and became the main guideline for integrating Sustainable Development Goals into the post-2015 development agenda. Furthermore, intergovernmental negotiation processes resulted in the final document for the sixty-ninth United Nations General Assembly in 2014, which also included the outcomes of major global meetings such as the Sendai Framework for Disaster Risk Reduction 2015–2030 and the Addis Ababa Action Agenda, as well as inputs such as the synthesis report of the Secretary-General on the post-2015 agenda.

Zimbabwe has committed itself fully to implementing all Sustainable Development Goals, focusing mostly on SDGs, 2, 3, 4, 5, 6, 7, 8, 9, 13 and 17. The main premise is that these goals will enable the country to attain greater development outcomes taking into consideration the imperatives on the ground. Sustainable

development is a core constitutional imperative and an overall strategic objective for the nation. Zimbabwe's Constitution guarantees civil, social, economic, political and cultural rights for all citizens in the country. These rights are articulated and provided for in the Bill of Rights, which seek to address human development. Moreover, Chapter twelve of the constitution sets initiatives on oversight bodies, which include the National Peace and Reconciliation Commission, the Anti-corruption Commission of Zimbabwe, the Zimbabwe Human Rights Commission, the Gender Commission and the Universal Periodic Review of Human Rights. These institutions have created a strong foundation for building an inclusive and peaceful society for sustainable development in the country.

Taking into account the country's commitment to achieving the Sustainable Development Goals saw Zimbabwe volunteer to undertake a national review of Sustainable Development Goals in 2017 along with seven other African countries who sought to show their commitment to achieving Sustainable Development Goals. These Voluntary National Reviews (VNRs) sought to facilitate sharing of experiences, which entailed the successes, challenges, opportunities and lessons learnt from the programmes implemented, with an eye to accelerate the implementation of the 2030 Agenda. The process of Voluntary National Reviews in Zimbabwe involved extensive consultation with civil society organisations, government ministries, private sector, development agencies and unions for a unified national movement on meeting the targets of the 2030 agenda.

### **1.3 PROBLEM STATEMENT**

The lack of access to clean water and poor sanitation affects lives of people. Human rights are violated and the standards of living of people are reduced without clean water and good sanitation. The collapse of the Zimbabwean economy in the 1990s led to the decline of most W.A.S.H infrastructures and service delivery nationwide, affecting both urban and rural settlers. Presently, there still exists wide disparities and inequalities to access clean water and good sanitation between urban and rural communities, despite efforts taken to rectify

the sector, with rural areas still being most affected. As a result of this, standards of living of rural people have declined. With the health of women and children heavily affected and development of the rural community stagnated due to this phenomenon. The need to address this challenge is of great importance to the country in order to tackle aspects pertaining to achieve development on a national scale and to meet the Sustainable Development Goals the country endorsed.

#### **1.4 RESEARCH OBJECTIVES**

1. To assess the impacts of W.A.S.H programmes in Runde.
2. To assess the impact of W.A.S.H programmes on child and women health in Runde.
3. To assess the impact of W.A.S.H programmes in addressing gender equality.
4. To offer recommendations to improve the programmes.

#### **1.5 RESEARCH QUESTIONS.**

1. What are the attitudes of the beneficiaries towards the project?
2. What is the nexus between W.A.S.H and child and women health?
3. What is the nexus between W.A.S.H and gender equality?
4. How effective are W.A.S.H programmes in developing the rural community?

#### **1.6 SIGNIFICANCE OF STUDY**

The inability to completely address the problem of access to clean water and good sanitation and hygiene in the country has hampered the hope of attaining the target set for Sustainable Development Goals the country endorsed as well as improving other sectors such as health, education and economic development. The improvement of these variables can help realize the development of rural communities and increase standards of living. It is therefore important to note the challenges the rural people are still facing in regard to this area and point out how it is impacting lives there in order to draw out reliable findings and conclusions to help in redressing these challenges in a bid to improve rural lives

and achieving the Sustainable Development Goals. The assignment hopes to enlighten all relevant government ministries and development partners, private sectors, unions and relevant stakeholders involved in W.A.S.H programmes towards social transformation and in drafting effective regulatory frameworks, policies and legal frameworks that are clear, concise, progressive and sustainable so as to meet the targets of 2030 Sustainable Development Agenda.

### **1.7 LIMITATIONS OF THE STUDY**

The researcher had problems accessing relevant documents from local authorities due to authorisation and cumbersome bureaucratic protocols. Moreover, the lack of adequate prior research and limited time to cover the study affected the efficiency of the research.

### **1.8 DELIMITATIONS OF THE STUDY**

This study will confine itself to surveying a sample size of individuals in Runde District as well as interview local members of the W.A.S.H. district sub committee.

### **1.9 CONCLUSION**

The following chapter took into consideration the background of the study, which gave a brief account of the origins of the study. Also the chapter looked at the problem statement at hand. The objectives and questions of the research were also too considered in the chapter. Lastly, the significance of the study along with the limitation and delimitations of the study were taken into account.



## **2 CHAPTER TWO: LITERATURE REVIEW**

### **2.1 INTRODUCTION**

This chapter analyzed literature on Sustainable Development Goals and the impact of W.A.S.H programmes on rural community. Literature on the rural communities is limited, as studies have focused more on urban settlements. However, the researcher did gather enough information to compile the chapter. The literature review was conducted according to thematic areas as discussed in this chapter. The sources for this literature review mainly centered on scholarly journals, research reports, government publications Acts of Parliament and World Bank and UN publications reports as guided by the research objectives and research questions.

Over and above the pool of existing knowledge relevant to the study, the review also looked at the policy and institutional frameworks guiding the provision of water, sanitation and hygiene in the country. Such documents included the Constitution of Zimbabwe, the Water Act Chapter 20:24 ,the Public Health Act Chapter 15:09, the Environmental Management Act Chapter 20:27.

### **2.2 OVERVIEW OF SUSTAINABLE DEVELOPMENT GOALS**

On 25 September 2015,193 countries of the United Nations general assembly adopted the 2030 development agenda. UNGA (2015). These are a set of 17 interrelated goals, which cover a broad range of social and economic issues. These range from poverty, hunger, health, education, climatechange, gender, equality,water,sanitation,enviroment and social justice. UN (2015) The Sustainable Development Goals were built on a participatory basis, building on the success of the Millennium Development Goals that were responsible for major advances in promoting human development between 2000 to 2015.UNDP (2014) The Sustainable Development Goals and their targets challenge all countries to be innovative in order to establish inclusive, efficient and transparent means of achieving the set goals. Fabiancic (2016) these goals call

for action by all countries both developing and developed to promote prosperity whilst protecting the planet. They recognize that ending poverty must go hand in hand with strategies that build economic growth. UN (2017) Firstly, the Sustainable Development Goals are framed to address poverty alleviation in all countries. Secondly, the Sustainable Development Goals place sustainability at the heart of the development agenda, recognizing the need to address the complex links between development and the environment Meyerhof (2014) Therefore, the Sustainable Development Goals are key in the next decade to come as they provide a framework for development for developing countries. In particular it is line with the four clusters of the countries economic blueprint of ZIMASSET, which seeks to improve the political and socioeconomic livelihoods of the people of Zimbabwe.

### **2.2.1 ZIMBABWE AND MILLENIUM DEVELOPMENT GOALS**

In Zimbabwe, the Millennium Development Goals are firmly incorporated in the Government's successive national development blue print with the current one being, the 2013-2018 Zimbabwe Agenda for Sustainable Socio-Economic Transformation (Zim ASSET), and the 2012-2015 Zimbabwe UN Development Assistance Framework (ZUNDAF). Zimbabwe has been making progress on key areas of development such as attaining universal primary education, halting and reversing the spread of HIV and AIDS, and attaining gender parity in primary school enrolment. However, the country is facing challenges on goals such as achieving the targets on reducing maternal and child mortality rates, the participation of women in decision-making positions, as well as eradicating extreme poverty and hunger.

Zimbabwe continues to show commitment to adhere to international norms and standards. The country has acceded to a wide range of international and regional conventions and created a legal and policy framework to translate these commitments into policy. Accordingly, the 2013 Constitution and the general legislative framework of the country have been largely aligned with international human rights standards.

### **2.2.2 ZIMBABWE AND SUSTAINABLE DEVELOPMENT GOALS**

Zimbabwe has committed itself fully to Agenda 2030. The current economic blueprint ZIMASSET of 2013-2018 was aligned to the universal sustainable development. Sustainable development is a core constitutional imperative and an overall strategic objective for the country. Zimbabwe's Constitution guarantees political, civil, economic, social and cultural rights for all citizens. These rights are clearly articulated and provided for in the Bill of Rights. Moreover, Chapter 12 states initiatives on oversight bodies, including the National Peace and Reconciliation Commission, Anti-corruption Commission, Zimbabwe Human Rights Commission, Gender Commission and the Universal Periodic Review of Human Rights, have created a strong foundation for building an inclusive and peaceful society for sustainable development.

Reflecting its commitment to achieving the Sustainable Development Goals (SDGs), Zimbabwe volunteered to undertake a national review of SDGs in 2017, along with 44 other countries, including seven African countries. The voluntary national reviews (VNRs) seek to facilitate sharing of experiences, including successes, challenges, opportunities and lessons learnt, with a view to accelerating the implementation of the 2030 Agenda

### **2.3 AN OVERVIEW OF WATER SANITATION AND HYGIENE**

W.A.S.H is an acronym standing for Water Sanitation and Hygiene. Universal, affordable and sustainable access to W.A.S.H is a key public health issue within international development and is the focus of sustainable development goal six. Several international development agencies assert that attention to W.A.S.H can also improve the health, life expectancy, student learning, gender equality and other important issues of international development. Access to W.A.S.H includes safe water adequate sanitation and hygiene education. This can reduce illness and death, and also reduce poverty and improve socio-economic development. Kooy, M and Harris D (2012) Lack of sanitation contributes to about 700,000 child deaths every year due to diarrhea. Chronic diarrhea can have long-term negative effects on children, in terms of both physical and cognitive development. In addition, lack of WASH facilities can prevent students

from attending school, impose an unusual burden on women and reduce work productivity. UNICEF (2015). Addressing these deficiencies together can achieve a strong positive impact on public health.

#### **2.4 HISTORY AND DEVELOPMENT OF WASH SECTOR IN ZIMBABWE**

Zimbabwe gained independence in 1980, during this period about 10 percent of the population, predominantly in urban areas had access to improved water supplies (Zim report (2009)). In 1982, Zimbabwe adopted the declaration of the International Decade for Drinking Water and Sanitation, which was set out to provide every household with protected water with the source located at a maximum of 500 metres; however, this had limited success (Moe and Gangarosa 2009). Robinson (2002) Subsequently this led to the adoption of the National Master Plan for Rural Water Supply and Sanitation and the Integrated Rural Water Supply and Sanitation Programme in 1985. The mandate of this program was to provide the entire country with safe drinking water by 2005 (GOZ (2005)). During the period of 1980 to 2000 Zimbabwe recorded one of the highest rates of growth of water supply and sanitation among all developing countries. These dramatic effects stemmed from government leadership in sector with support from the donor community, NGOs and local stakeholders. During this time, rural water and sanitation programs were funded by bilateral aid programs and NGOs under the coordination and direction of the National Action Committee (NAC) that had been created by the government. Urban programs were supported by the international donor community led by the World Bank, and were co-funded through the public sector investment program (PSIP) of the government.

The new millennium marked a paradigm shift in the provision of services related with water and sanitation (Zim report (2007)). The country fell well into arrears in its debt service obligations to the donor community, resulting in the closure of most international assistance programs that were key for the development of the WASH sector. (GOZ (2010)) In the ensuing decade, there was a rapid decline in the quality of water services, along with the number of people with access to

improved water.(ibid) There was virtually no new investment in service delivery from the past decade.This resulted in the deterioration of the existing infrastructure. This collapse of water revenues which began in the 1990s led to a decline in all water supply and sanitation infrastructure and services ( drinking water from 79% in 1999 to 77% in 2015 and sanitation from 40% in 1999 to 37% in 2015) This had a significant impact on the quality and reliability of W.A.S.H services in the country and led to the 2008-2009 cholera outbreaks which resulted in 98 592 cases and 4 282 deaths. [UNOCHA 2009] The cholera epidemic resulted in substantial international response with the provision of humanitarian assistance( Makoni et al 2004) Since the outbreak,the core focus of the donor and NGO communities was on emergency support to contain the disease and its possible recurrence.A Water,Sanitation and Hygiene (WASH) cluster of donors were created in 2008 to coordinate the international response.UNICEF was a major figure and played a leading role in coordinating these activities.(butcher 1990) An emergency rehabilitation program was drawn up in 2008,the focus of which was supplying chemicals to local authorities in urban centers,drilling boreholes,and cholera educational programs.Rapid assessments were undertaken in urban and rural centers and this laid the basis for a planned program of support for the affected areas.

#### **2.4.1 RURAL WATER SUPPLY AND SANITATION DEVELOPMENTS IN ZIMBABWE**

After attaining independence in 1980,the new government of Zimbabwe saw the need for the development and uplifting of the neglected rural communities by giving them access to safe and improved sanitation.It embarked on the IRWSSP.This program was coordinated by the National Action Committee (NAC) which was made up of all key government agencies.NAC is duplicated at both provincial and district levels to ensure continuity in the coordination of the programme.( Makasi 1998) Its specific objectives were to:

- Provide an organized inventory of available resources within the sector
- Provide an organized inventory of existing water supply and sanitation facilities and ongoing schemes

- Assess water demand for domestic,village,gardening and livestock consumption
- Formulate schemes and strageies that will best serve the needs of the people in the rural areas,which are in accordance with realistic social,technical and economic goals,yet preserving the flexibility required to intergrate the diverse functions and approaches of the various institutions operating within the sector
- Formulate training proposals and organisations of structures that will ensure the necessary manpower is available for implementation and future operations and maintaneance

The NMPWSS makes specific recommendations on inter Ministerial cooperation and planning and provides specific guidelines for the implementation of National Water Supply and Sanitation Programs (MWRD, 1983).

The turn of 2000 saw the country face great economic challenges, which adversely affected the water supply and sanitation sector of the country. Access to basic water and sanitation dropped rapidly and affected both urban and rural areas with the population in the rural area those mostly affected. Despite a concerted effort by the donor and NGO communities there has not being significant progress to tackle the disparities of access of clean water and sanitation between the urban and rural areas and this presents a telling challenge which is in dire need of redress in order to avoid another calamitous cholera outbreak like that of 2008.

## **2.5 SUSTAINABLE DEVELOPMENT GOALS AND WATER**

The United Nations General Assembly in 2015 adopted the 2030 transforming our world agenda premised on 17 Sustainable Development Goals that seeks to address economic and social development issues in both developed and developing countries (UN 2015) According to UNDP (2015) sustainable development goals are a universal call to end poverty and protect the planet and ensure that all people enjoy peace and prosperity (UNICEF 2015) states that they are a set of goals which build upon the Millennium Development Goals and converge with the post 2015 development agenda.(Gurbo 2016) purports that, Sustainable Development Goals are important because they promote a long term

approach to addressing global challenges that are not typical just for some countries but are faced by most and require joint actions. Sustainable Development Goal 6 seeks to ensure availability and sustainable management of water and sanitation for all. Water is vital for other Sustainable Development Goals to be achieved as well. (UN 2006) stated that improvements in access to safe drinking water, adequate sanitation and hygiene have an impact on wider development issues. According to Callow (2005) poverty assessment researches reveal that improvement in water services is a core element in most strategies designed to alleviate poverty. Sustainable Development Goals attempt to rectify and build upon the flaws of the Millennium Development Goals which focused on addressing contemporary issues affecting both developing and developed nations, and it can be noted that these are either directly or indirectly linked to water. Poverty, hunger, maternal death, child mortality, education, income, malaria and other diseases as well as environmental sustainability are all dependent on water quantity and quality in a population (UN, 2003) Henceforth, the notable increase of the coverage of water supply in Africa is key to achieve Sustainable Development Goals.

### **2.5.1 WATER AND HEALTH**

Water is essential for life. Without water humans can survive only for days. Water comprises of 75% body weight in infants to 55% in elderly and is essential for cellular homeostasis and life (WHO 2013) Water represents a critical nutrient whose absence can be lethal to humans in days. Water's importance for prevention of nutrition related noncommunicable diseases is of great importance for human beings. Water is important for sustenance of human life, what is more important is the quality of the water as it is vital to avoid diseases. There is a vast range of direct and indirect benefits which water and sanitation facilities are likely to provide (Okun 1988)

Unsafe water and poor sanitation have been primary casual factors in the vast majority borne diseases especially diarrheal ones. It is estimated that every year at least 1.6 million children die globally because of unsafe water and the lack of basic sanitation. ( UNICEF/WHO 2006)

Diarrheal disease is one of the leading killers of children in the world. It is estimated that there are more than 875 million cases of diarrhea and 4.6 million deaths annually in Africa, Asia, and Latin America (Snyderand & Merson, 2012). The disease agents are transmitted via the fecal-oral route and do not require an intermediate host This cycle involves defecation of pathogens-bacterial, viral or parasitic-which are then ingested by consuming pathogen- laden food or water or by oral contact with dirty hands or other contaminated objects.

Investigations of the costs and health benefits associated with improvements to drinking water supply in low income countries have concentrated almost exclusively on how these improvements affect the incidence of acute infectious diarrhea Roberts (2007) This focus is not shocking given that diarrheal disease is the second most contributor to the disease burden in developing countries and poor quality drinking water is an important risk factor for contracting diarrhea. Colford (2005) Most of the excess disease burden in developing countries fall on young children 17% of all deaths in children under 5 years are attributed to water related diseases Scott (2007) Therefore the impact water has on health and other developmental issues in society is invaluable. Water is a key component to ensure good wellbeing and health for people in society.

### **2.5.2 WATER AND GENDER**

Gender is a concept that refers to socially constructed roles, behavior, activities and attributes that a particular society considers appropriate and ascribes to men and women (WHO 2009) The importance of incorporating a gender based perspective in WASH programmes is vital based on the fact that women and girls are the primary users of water in their households and are guardians of household hygiene. (Ellis 2007) Amadiume (1987) defines gender as the range of characteristics pertaining to, and differencing between masculinity and feminity. These characteristics may include biological sex; sex based social structures or gender identity. The impact water has on women is more than is has on men. This is based on the fact that women and girls are most often the primary users, providers and managers of water in their households and are guardians of household hygiene. If a water system fails women are often held



responsible to travel long distances to fetch water (UNDP) 2006 According to the World Bank (2006) the water and sanitation can contribute to redressing inequality and can impact positively on the social, political and economic position of women. Well targeted services can improve the security and health of women and their families free them to engage in economic, social and political activities, thus tackling “time poverty”-the situation where women’s time is consumed by routine and non productive tasks perpetuating their absence from decision making and seeking other profitable pursuits.

According to (UNDP 2014) In developing countries, access to clean water for drinking and sanitation is closely linked to children’s education. Illness due to contaminated water are one of the major causes of absenteeism in schools, they are responsible in loss for 443 million school days each year. When they are not forced to miss their classes many children experience a decrease in their learning potential, which in turn leads to stunted development, lower concentration and poor academic performance. (UNICEF 2014) states that the burden of collecting water, which takes several hours a day, is an additional factor that negatively impacts children’s education. Young girls, who are often delegated this chore, must travel long distances to reach water access points. These girls inevitably miss school. In addition, due to their specific hygiene needs, the lack of sanitation facilities in schools affects girls’ classroom attendance. Without toilets to protect their health, safety and dignity, young girls often stop attending school when puberty arrives or are forced to miss classes due to their menstrual periods. Of 104 million children absent from school, 65 million are girls.

Improving access to clean drinking water and sanitation enables children—particularly girls—to fully benefit from their rights to an education. According to a study conducted in Tanzania, by reducing the time it takes to collect water by a mere 15 minutes, communities can help increase girls’ classroom attendance by 12%. This is a concrete solution to help combat poverty, particularly because young, educated women are less likely to get married against their will, die because of a complicated birth, or have a very large family that is difficult to support. Furthermore, the probability that these young women give birth to

healthy babies is much higher. They are also more likely to send their children to schools. Finally, women who were able to attend school earn higher salaries, are more productive, and actively participate in a community's social, economic and political spheres. The numbers speak for themselves: a 10% increase in literacy rates among women increases the life expectancy at birth by 10% and national economic growth by 0.3%. Access to clean water and education, therefore, introduces women to more opportunities, which have a positive impact on their families and communities. (Ibid)

## **2.6 POLICY FRAMEWORK FOR WATER AND SANITATION IN ZIMBABWE**

Zimbabwe is a signatory to a number of International and Regional Conventions and protocols on WASH. Article 8 (1) of the Vienna Declaration on the Right to Sustainable Development seeks for access to resources such as water and sanitation as key to bringing sustainable development within a country. More so, under the International Covenant on Economic, Social and Cultural Rights (ICESCR) General Comment No. 15 (2002), Zimbabwe committed itself to making the provision to entitle everyone in Zimbabwe to sufficient, safe, physically accessible and affordable water for personal and domestic uses (National Water Policy, 2012). Zimbabwe also a signatory to the United Nations Sustainable Development Goals who's Goal 6 is to ensure availability and sustainable management and sanitation and hygiene for all by 2030. However, the challenge in Zimbabwe is sanitation is not considered as a distinct right as is the case with water. Some of the arguments for not having sanitation as a standalone right are that it has not been included in the broad definition of adequate standard of living.

In regards of the continent, Zimbabwe was part of the delegation to the Africa Union Summit of 2008 where commitments to accelerate the achievement of water and sanitation MDG goals in Africa were pronounced. This summit was followed by the Second Africa Conference on Sanitation and Hygiene AfriSan 2008 which resolved to put sanitation and hygiene at the top of Africa's development agenda. Again, Zimbabwe is a signatory to the African Ministers

Council on Water (AMCOW), which set out universal access to safe water and improved sanitation and hygiene by 2010 as one of its three targets. The African Charter on Human and People`s Rights recognizes the right to food as a human right and further acknowledges the right to safe water as a pre-requisite to the realization of the right to food.

Taking into consideration, Zimbabwe does not have one document that provides a framework for the provision of water, sanitation and hygiene. At national level, the Constitution of Zimbabwe (Amendment No. 20) Act 2013 provides for inter alia rights of youth, women, elderly, communities participation, the devolution of powers and responsibilities to provincial, metropolitan and local authorities. Section 73 of the Constitution of Zimbabwe focuses on environmental rights whilst Section 77 focuses on the Right to safe, clean and portable water.

The management of urban areas in Zimbabwe is governed by the Urban Councils Act Chapter 29:15. Section 168–181 of the Act provides for the powers and functions of Councils with respect to sewage and drainage. According to the Act, the urban councils should take measures necessary for the collection, conveyance, treatment and disposal of sewage or storm water. Section 183-187 outlines the powers of urban councils in relation to water supply. The Environmental Management Act (Chapter 20:27) empowers the Environmental Management Agency (EMA) to formulate quality standards on water, sanitation and waste management. The Public Health Act Chapter 15:9 states that it is the duty of a local authority to furnish residents with water and sanitation supplies in line with health requirements. The Zimbabwe Agenda for Sustainable Socio Economic

## **2.7 THEORETICAL FRAMEWORK: HUMAN DEVELOPMENT APPROACH**

This approach emerged in response to the need and demand for new approach to development. In the 1980s there was huge cost in terms of Structural Adjustment policies which saw the need of a discussion of the concept at 3 north South Round Tables engineered by Malibubul Hq in 1980s and proposed by UNDP with Amartya Sen as the main architects with much of the credit being

given to Aristotle and Immanuel Kant. UNDP's (1990) defined Human Development as the process of enlarging people's choices. In 2010 the United Nations Development Programme redefined the term Human Development as the expansion of people's freedom to live healthy long creative lives. Human Development emphasises five instruments of freedom which are of paramount importance which are political freedom, economic facilities, social opportunities, transparency guarantee and protective security. For human beings to obtain other goals they have reason(s) to value. All these are efforts to craft development equitably for sustainability making human beings drivers pushing factors of human development and beneficiaries to it as individuals or groups. Human Development in this approach has two major functions which are complex functioning's and elementary functioning's. By complex functioning's, it refers to the doings or abilities of an individual such as the ability to travel and feeding a family. Whereas elementary functioning's refers to the well being of an individual thus considering issues of human safety and personal security, education level, health issue just to mention a few. Principles of Human Development include equity which refers to a concept of justice as fairness, efficiency meaning maximizing the use of material and community resources, participation and empowerment which are the key foundational principles and lastly sustainability which include all aspects of its broadness from environmental, economic, social and cultural all fall to this.

### **2.7.1 CAPABILITY APPROACH**

Amar-tya Sen's Capability Approach on development is not defined as an increase in Gross National Product per capita or in consumption, health and education measures alone, but as an expansion of capability. In the same line of context he defined capability to a person(s) or group(s) freedom to promote or achieve valuable functions (being or doings) that one can achieve. He views capability as opportunity and is inborn potential capacity relates to trained potential which test one's skills and abilities. For Sen changing capability into functioning is influenced by personal character as well as social and environmental factors. He went on to reinterpret development as freedom and people as agents thus to say one who acts and about change giving emphasis on

both opportunity freedom and agency freedom. Freedom becomes an instrumental value meaning a means to other things. Sen focuses expansion of human capabilities as both the ultimate goal of development and the front lead means of achieving economic growth with different strands in modern economics.

## **2.8 CONCLUSION**

The chapter reviewed results of previous researches relevant to the study. Only credible sources of literature were reviewed. The sources for this literature review mainly centered on scholarly journals, research reports, Acts of Parliament, government publications and World Bank and UN reports. The three objectives of the study outlined in section 1.6 Chapter 1 guided the literature review. Key findings related to the study were summarized and a critique of what was left out by the previous researchers was done, at the same time indicating how the study will fill the gaps. The literature review was presented according to thematic areas and. The theoretical and conceptual frameworks guiding the research were also explained.

### **3 CHAPTER 3: RESEARCH METHODOLOGY**

#### **3.1 INTRODUCTION**

This chapter looks at the methodology that was used by the researcher to gather information relating to the impact of the W.A.S.H programmes in rural communities. The researcher sought out to use qualitative research methods as the method for identifying and gathering information and these were utilized to explore and analyze the various causal factors that have attributed to the lack of access to clean water and poor sanitation in the area of study. As well as to give the researcher a deeper insight on the attitudes and perceptions of the people these programmes are aimed at. This chapter will also describe the research instruments used to collect data. These research methods will include questionnaires and interviews. Collected information will be presented in the form of tables and written explanations. Henceforth, research methodology refers to the instruments and techniques used to obtain data both primary and secondary. As this data will be used in the presentation of data for the next chapter. According to O'Leary (2004) research methodology refers to the framework associated with a particular set of paradigmatic.

#### **3.2 RESEARCH DESIGN**

According to Churchill (1987) research design is the tool of networking the collection of data that is used as a guide in collecting and analyzing data. The purpose of the research design is to identify and deal with the research instruments to be used by the researcher, how data is to be collected, how the research instruments will be utilized and the way in which the gathered data is to be organized, presented and analyzed. Methods of data collection in this research include questionnaires and interviews. Therefore the role of a research design is to make certain that the evidence obtained helps us to respond to the original question and objectives of the research as explicitly as possible.

Saunders (2000) defines a research design as a general plan of how a researcher goes about answering the research questions. Burns and Groove (2001) define

the research design as a blue print for conducting a study with a maximum control over factors that may interfere with the validity of the findings. Bleikie (2000) describes research design as a process that links research questions, empirical data and research conclusions. In addition (ibid) explains the most common types of research designs are social surveys, experiments and field research. This research made use of the field research methodology, which by definition is any activity, aimed at collecting primary data using methods such as individual interviews and questionnaires.

### **3.3 QUALITATIVE**

This type of research method is utilized when the researcher seeks to describe and explore a certain phenomena as well as to become more experienced with it. The qualitative method of research is much more concerned with soft data presentation in a descriptive manner through the use of sentences or symbols. Neuman (2000). Furthermore Neuman attributes that this method of research focuses on the quality of the texture of the data collected rather than the magnitude unlike quantitative data. This is one of the mostly used methods utilized by researchers when they seek to gain an insight on the attitudes, perceptions and thoughts of the participants. Moreover, it helps the researcher draw a better understanding of the problem at hand. This research method used questionnaires and individual interviews for collecting information, which sought explaining the impacts effective WASH practices, have on the health, wellbeing and economy of the participants of the study. This type of research requires the researcher to be on the ground in the natural setting meaning to say that the researcher has to be in direct contact with the site thus going there in person as attributed by to Creswell (2003). As a result the researcher had to conduct in person individual interviews and distribute questionnaires to participants in rural settings who were the target population. Qualitative research methods often differ with quantitative methods in the sense in which there are used to gather data. Unlike quantitative data, which focuses on the statistical aspect of findings, qualitative data focuses more on attitudes and perceptions of the people being studied by the researcher.

### **3.4 TARGET POPULATION**

Target population refers to a particular set of units to which research findings are to be aimed at in relation to specific criteria or characteristics chosen by the researcher to help find the answers relating to the study. Target population may also refer to the entire group of individuals, which the researcher is interested in generalizing the conclusions. According to Cox (2013) the target population explores the outcomes of the units that the research is to generalize. The target population of this study will be villagers of Runde and W.A.S.H District Sub Committee Members .The constituency has 19 wards with a population of 70 047,women being 36 286 whilst men are 33 761.

#### **3.4.1 SAMPLING**

Sampling involves a process of selecting a sub-section of a population that represents the entire population in order to obtain information regarding the phenomenon of interest. A sample is a sub-section of the population, which is selected to participate in a study. There are two methods sampling, one yields probability samples in which the probability of selection of each respondent is assured. The other yields non-probability sample in which the probability of the selection is unknown. (Polit & Hungler 1995:279) Fraenkel and Wallen (2001) emphasize that time and budgetary constraints prevents the coverage of the entire population hence the need to focus on sample populations. The sample for this study was carefully selected to ensure that the findings from the research could be generalized to find the impact of W.A.S.H programmes in the Runde Rural.

#### **3.4.2 SAMPLING METHOD**

The researcher had a wide range of sampling methods to select from at his disposal. However, the key question that guided the researcher was how representative the sample selected would be in relation to the entire target population. Sampling methods are classified as probability or non-probability. Probability sampling gives every person an opportunity to participate in the study and the sampling techniques include: simple random, systematic and



stratified sampling. On the other hand, on-probability sampling implies respondents are selected in non-random ways and this may result in a situation where not all participants are selected to partake in the study. The non-probability techniques include convenience, purposive, quota and snowball sampling techniques.

### **3.5 SAMPLING TECHNIQUES**

The researcher made use of non-probability sampling techniques. These techniques consisted of convenience and purposive sampling. The researcher made use of convenience sampling method to select participants to respond to the questionnaire in Runde. A convenient sample consists of using the most readily available or most convenient group of subjects for the sample (Cohen et al 2000: 102) this method was chosen because it provided the researcher with easy access to the participants. It was simple, practical, economic and quick and did not require an elaborate sampling frame which was not available (Nachmias & Nachmias 1988 :87) The respondents were selected from the people who were using the water source points such as boreholes and dip wells. In particular, the researcher focused on women and children who were fetching water.

Purposive sampling is a sampling technique whereby the researcher relies on his or her own judgement when choosing members of the population to participate in the study. It occurs when elements selected for the sample are chosen by the researcher. Catherine (2002) states that purposive sampling techniques are a type of non-probability sampling that are most effective when one needs to study a certain domain within knowledgeable experts. The bias involved in selecting participants under purposive sampling makes the selection criteria rich in terms of data quality and reliability. In this respect Patton (1990) highlights that the logic and power of purposive sampling lies in selecting information rich cases for the study. Information rich cases refer to those respondents from which the study will gather informative data of central importance to the research study thus the term purposive sampling. Purposive sampling was useful to the researcher in selecting key informants in Runde District who provided well-informed information with regard to water sanitation and health issues.

These included executive staff, field agents, councillors housing and relevant ministries. The rationality of targeting these emanate from the nature of their job description that had a direct bearing on the provision of water and sanitation in Runde District.

### **3.6 DATA COLLECTION**

Data collection involves the process of gathering information from different sources. These sources may come in primary or secondary form. According to Kumar (2011) primary data is original data from the ground thus, it adopts a firsthand approach. While, secondary data is the data that was obtained for use in the study by the researcher but was not originally intended for the research and is being used as a complimentary source. Secondary sources of information were used to fill the knowledge gap of the literature under investigation in regard to the study. Government publications, organizational publications, articles, journals and textbooks were encompassed in the quest to find data that is relevant to the field of study. Primary sources were used to gather information relevant to the field of study. The distribution of questionnaires in the field to participants was utilized along with individual interviews with members of the district W.A.S.H. Sub Committee were undertaken. Before initiating the study, the researcher had to request for permission from the local authorities through the use of the introductory letter in order to conduct the research in the rural settlement of Runde.

#### **3.6.1 QUESTIONNAIRES**

This is one of the tools that are used for collecting data by asking questions in a sequential manner relating to a specific area of concern. It is chronologically arranged with questions providing specific reference to clear instructions and the space to fill in the answers or administrative details. The researcher used survey questionnaires. According to Turney and Robb (1971) they define a questionnaire as an instrument that consists of a series of questions of statements to which individuals are asked to respond. In addition to the definition Carman (2004) attributes that a questionnaire is a data collection tool that is in written form, in which questions are written down presented and

answered by the respondents. Kumar (2011) stresses that in a questionnaire respondents read the question and interpret it and write down the answer. The questionnaire age group targeted local residents of Runde so as to gain an understanding of their perceptions and attitudes. The researcher chose to use the questionnaire based on the notion of increased speed of data collection as the researcher was working with limited time and the low costs they have in producing them.

### **3.6.2 INTERVIEWS**

Interviews are a popular and widely used means of collecting qualitative data from people with knowledge on the relevant subject (Burns 1999). According to Taylor and Bogdan as cited in Kumar (2011) interviews are face to face encounter discussions whereby the researcher ask questions aimed to generate answers relating to the views, opinions and belief relating to the subject manner in their own thinking. The main task in interviewing is to understand the meaning of what the interviewee say as attributed by Kvale (1996). Since it is a qualitative research, interviews seeks to cover both a factual and a meaning level, though it is usually more difficult to interview on a meaning level thus according to Kvale (1996). Interviews are an imperative as they explore the different angles in articulation of the manner based on the participant's experiences. The interviewer can peruse in-depth information around the topic. Interviews may be useful as follow-up to certain respondents to questionnaires for example to further investigate their responses attributed by McNamara (1999). The interviewer is free to choose from the possible list of questions to ask the interviewee. This then gives a chance to the interviewer to obtain all relevant information since the conversation is focused on the interviewer's research objectives and explanation. The researcher made use of individual interviews with members of district Sub Committee Members of W.A.S.H. This was in a bid to gain information from the service provide pertaining to the impacts of W.A.S.H. in Runde.

### **3.6.3 SECONDARY DATA**

Secondary data is information or data, which is planned and developed. It is data based on previous research by other scholars. They are previous documents gathered through reviewing published and unpublished articles, pamphlets, journals and annual reports. Most of the sources used present related and enough data pertaining to the research at hand (Johnston 2014:64)

### **3.7 CONCLUSION**

The chapter gave a vivid account of the research design to be employed for data collection, analysis and data presentation. The research design was stated explicitly. The qualitative research method was used as the researcher was focused on perceptions and attitudes of the participants. Sampling techniques were also considered. The researcher used non-probability sampling for the research. The researcher made use of convenience and purposive sampling as techniques. In addition, the research tools for gathering information were stated and discussed.

## **4 CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND DISCUSSION**

### **4.1 INTRODUCTION**

This chapter presents the findings based on responses to the research questions stated in chapter one of the project. The researcher made use of a thematic analysis approach to present the finds of the data. The findings were informed by questionnaires and individual interviews that were conducted with the target population. In addition, findings include secondary data that was collected at relevant ministries such as Ministry of Health, District Development Fund and Social Welfare. An assessment of the findings was done to show the impact of WASH programmes in Runde.

### **4.2 RESPONSE RATE**

The following tables 1,2 and 3 summarizes the response rate on questionnaires, interviews and the overall response rate which is the total number of respondents against the sample size.

Response rate from local residents

**TABLE 1: QUESTIONAIRRE RESPONSE RATE**

<b>Respondents</b>	<b>Sample</b>	<b>Response</b>	<b>Response rate %</b>
<b>Residents in Ward 7</b>	<b>20</b>	<b>20</b>	<b>100%</b>
<b>Residents in Ward 13</b>	<b>20</b>	<b>20</b>	<b>100%</b>
<b>Total</b>	<b>40</b>	<b>40</b>	<b>100%</b>

**Source: Primary Data**

A total of 40 questionnaires were distributed to two different wards in Runde District. In each ward the researcher distributed 20 questionnaires and the

above table shows that all of the questionnaires were completed successfully. As the above table shows the questionnaire response was a 100%, as a result the researcher considered this response rate suitable for making meaningful conclusions.

**TABLE 2: INTERVIEW RESPONSE RATE**

<b>Respondents</b>	<b>Sample</b>	<b>Response</b>	<b>Response Rate</b>
<b>DDF</b>	<b>1</b>	<b>1</b>	<b>100%</b>
<b>Social Welfare</b>	<b>1</b>	<b>1</b>	<b>100%</b>
<b>Ministry of Health</b>	<b>1</b>	<b>-</b>	
<b>Women's Affairs and Gender</b>	<b>1</b>	<b>1</b>	<b>100%</b>
<b>Total</b>	<b>4</b>	<b>3</b>	<b>75 %</b>

**Source: Primary Data**

From the four interviews that were supposed to be conducted, only three were successful. The interviews arranged for stakeholders from the ministry of health proved not to be fruitful. Interviews seemed to be a difficult data collection instrument as the researcher failed to book meaningful appointments with the required individuals due to a number of constraints, more notably the individuals failed to be interviewed due to grueling work duties as a result, the individuals could not make time for the researcher to conduct the interview. In spite of this the researcher did manage to interview three individuals resulting in a 75 % response rate.

**TABLE 3: TOTAL RESPONSE RATE**

<b>Sample Size</b>	<b>Participated Respondents</b>	<b>Response Rate</b>
<b>45</b>	<b>44</b>	<b>97%</b>

**Source: Primary Data**

As table 3 above shows the sample size of forty-five people were selected. From the sample size selected 44 out of the 45 selected of the respondents participated in this research, resulting in a 97% response rate, according to Yin (2009) a response rate should fall between 20% and 94% to be considered acceptable.

### **4.3 W.A.S.H AND RURAL LIVELIHOODS**

The findings of the research reveal that there is a close connection between W.A.S.H. and the livelihoods of people in Runde District. Inadequate water access for productive purposes is one of the factors that increases vulnerability and poverty of women in the households. The unavailability of clean water sources and good sanitation was stated as amongst one of the leading causes of poverty and poor health in rural areas. From the responses of the respondents the researcher was able to draw out the impact of W.A.S.H. programmes on rural livelihoods. When asked about if the W.A.S.H programmes were beneficial to them 80 % of the respondents stated W.A.S.H. programmes were beneficial to them. The reasons they stated was that since the inception of W.A.S.H programmes water was now more easily accessible saving them time from travelling long distances to fetch water from unprotected water. However, 20% of the respondents begged to differ, citing that the programmes did not benefit them, they stated that the rehabilitated boreholes and dip wells were overwhelmed by community members and some still so it better to travel long distances to fetch water. When asked what the respondents mainly use the water for, 100 % stated they use the water for general consumption. When enquired if the water accessed was used for agricultural purposes 70 % of the respondents who participated in the questionnaire stated that they use the water for agricultural purposes, whilst the remaining 30% stated that they did not use the water for agricultural purpose but for other needs. 65% of the respondents stated their livelihoods was based on farming, whilst 25 % of the respondents had livelihood based on other industries, how which required the use of water. According to the responses, the participants stated that productive activities

such as farming and livestock herding were done on a small scale due to limited water supplies. However, they expressed that after the establishments of the W.A.S.H programmes activities were being practiced on a much larger scale due to availability of water. 55 % of the respondents stated that their monthly income was increased due the programmes as a result of being able to participate in productive activities that required the use of water whilst 45% of the participants stated that their monthly income was not affected by the programmes.

#### **4.3.1 W.A.S.H AND RURAL HEALTH**

Respondents were asked questions on how the unavailability of water and poor sanitation affected health. 70 % of the respondents stated that their general health was improved by the inception of the W.A.S.H and that mortality cases related to water diseases have decreased immensely. The respondents stated that the prevalence of poor sanitation practices such as open defecation led to a high number of cholera and diarrhea cases in the area. As a result the inception of the W.A.S.H programmes that focused on educational and awareness campaigns on the benefits of practicing good sanitation practices helped in addressing sanitation problems. However, the other 30% stated a lack of benefit from the programmes on health. When considering how good sanitation affected their health 30 % of the respondents stated that they benefited from partaking in the demand led sanitation projects in the district and this had a direct bearing on the state of sanitation in their households.70% of the respondents however, stated that they did not benefit from the sanitation programmes. The findings of the research show that there is form of resilience amongst most of the locals in Runde emanating from the refusal to adopt behavior change towards sanitation and hygiene methods. The researcher was able to note that the impediment towards improved health in Runde District was behavior change. The greater part of respondents refused to accept W.A.S.H programmes, in particular the adoption of new sanitation practices were shunned at as they felt that the traditional methods of open defecation and inconsistent hand washing worked well and did not affect the health of people in the district significantly.



The respondents stated that the W.A.S.H programmes had an impact on child health with 60 % of the respondents echoing the sentiment. They mentioned that before the establishment of the programmes which saw a significant increase in the availability of clean water sources being used now by the community, they used to access water from unclean open water sources, as a result this increased the likelihood of diarrhea and cholera amongst their children with many respondents highlighting severe cases of diarrhea their children experienced when consuming water from a unsafe local water sources. 40% of the respondents, however did express differing views stating that the programmes had no bearing on child health. From the findings it can be noted that, the establishment of improved water sources such as boreholes, dip wells and taped water systems to the people of Runde increased the quality of water as well as the quantity available for general consumption thus reducing the risk of contaminating diseases such as diarrhea and cholera. Moreover, through the findings the researcher was able to pin point the relationship between W.A.S.H. and health. Findings from the individual interviews done with W.A.S.H sub committee members revealed that cases reported in Runde of under five mortality and infant mortality were prevalent in areas where there was inadequate clean water supply as well as poor sanitation practices thus leaving the residents their susceptible to disease. The inability to access water affects child growth as well as deprives the child of necessary nutrients required for growth and sustenance. In comparison to areas in the district where there was more reliable clean water supplies and good sanitation practices which reported lesser cases of under five and infant mortality.

Maternal mortality is defined as the death of women whilst they are pregnant or within 40 days of termination of a pregnancy. It has a negative impact on women as many women die from maternal mortality. 70 % of the respondents agreed that W.A.S.H has a direct impact on maternal mortality and newborn health. Whilst 30% of the respondents disagreed that W.A.S.H. had an impact on

maternal mortality stating other causes such as family genetics. From the findings of the study, the researcher was able to identify the nexus between W.A.S.H. and maternal health. Of the 70% that agreed that the programmes benefited them stated that they enjoyed improved medical services due to the programmes through being educated on the practices that promote good health in pregnant women and how to reduce and prevent the chance of maternal mortality during labour. Moreover, the provision of W.A.S.H. infrastructure at medical institutions that cater for women during and after pregnancy helped the pregnant women in the District. Moreover, the improved W.A.S.H. service delivery helped improved the Health sector in Runde.

The findings of the case study reveal that there is a strong relationship between maternal mortality and W.A.S.H. The inability of birth attendants in medical institutions to practice hand-washing practices has a direct impact on maternal infection in Runde. Indirect effects of poor sanitation on maternal health include the risk of anemia which can be caused by urinary tract infections arising from harmful coping mechanisms such as delayed urination or reduced water or food intake associated with a lack of safe access to facilities. Moreover, unsafe water management can encourage the breeding of mosquitoes and associated transmission of malaria, which poses a high risk to pregnant women. In addition, water collection can cause spinal injuries, hernias and an increased risk of spontaneous abortion. The researcher was able to deduce from the findings that women living in households with poor sanitation were more likely to die from maternal causes than those with adequate sanitation. Thus addressing the link between W.A.S.H. and maternal mortality.

#### **4.3.2 W.A.S.H AND GENDER EQUALITY**

From the research findings of the study the researcher was able to denote that there is a link between W.A.S.H. and gender equality. From the questionnaires distributed 80% of the respondents agreed that W.A.S.H programmes improved the plight of women. Whilst the other 20% argued that W.A.S.H programmes had not addressed the gender issues in the district of Runde. The respondents of the

questionnaire agreed stated that the introduction of the W.A.S.H programmes such as the rehabilitation and construction of new community boreholes and dip wells by the District Development Fund of Runde improved the plight of women significantly. They stated that prior to the programmes that they had to travel distances up to ten kilometers to fetch water from an unimproved source in the early morning hours risking the threat to be harassed whilst fetching water. The other group that disagreed and stated that they did not benefit from the programmes had tapped water or a water source within 500 metres from their homes. From the findings of the research it was noted that 60% of the respondents travelled over ten kilometers to fetch water whilst the other 40% travelled shorter distances of 500 metres or one kilometer to access a water source such as a community borehole from their homes.

Results from interviews with members of the W.A.S.H district sub committee members reveal the nexus between W.A.S.H. and gender equality too. From the interviews undertaken the researcher was able to note the impact the programmes had on Runde District. As a result of the programmes time poverty of the women in Runde was reduced and granted them better opportunities to engage in economics activities thus improving household income of women headed homes. Moreover, access to clean water and good sanitation has a bearing on women health. The interview highlighted that the majority of the women in Runde who had access to clean water sources and good sanitation showed better health statuses as compared to those who lacked access to the water sources. The accessibility of water helped to improve the livelihoods of women, increasing income, thus allowing the women to afford access to reliable health care for themselves and their families.

From the findings of the study, the researcher identified the impact of W.A.S.H. in promoting gender equality. 75% of the respondents stated that the construction of new easily accessible water points for drinking safe water improved girl child enrollment and participation in school. Whilst the remaining 35% stated the programmes had no bearing on child enrollment in school. From the interview done with a member of W.A.S.H. district sub committee it was noted that there was a significant rise in the enrollment of the girl child in areas of Runde where

W.A.S.H in schools programmes were being undertaken as compared to areas of the district, which had no W.A.S.H schools programmes. Moreover, it was noted in the interview that areas in the district, which had W.A.S.H programmes that improved the accessibility of clean water, recorded a higher attendance of the girl child at schools as compared to areas, which did not have such services. This phenomenon was attributed to the long distances girls in the areas had to travel to fetch water for family use. As a result of this the several hours spent having to access water would eventually result in the girl child missing school and a dropping in school attendance and eventually dropping out. In addition, the interview also identified that schools with good hygiene and strong sanitation facilities reported a higher girl attendance as compared to schools with weak sanitation facilities in the district. This phenomena is attributed to how girls are affected by a lack of sanitation facilities especially during the period when puberty arrives and the undergo menstrual periods. Henceforth, the findings of the research reveal that there is a nexus between W.A.S.H. and gender.

#### **4.3.3 W.A.S.H. AND RURAL DEVELOPMENT**

From the research findings, the researcher deduced the effectiveness of W.A.S.H. in developing the rural community. 90% of the respondents articulated that the programmes have brought development to their community. The establishment of new water point sources has improved the livelihoods of the Runde as they can now access a basic right to clean water. In addition, the availability of water for productive purposes has increased the incomes of households that rely on agricultural production as a form of livelihood. 10% of the respondents, however did not find the W.A.S.H programmes helpful in developing the district citing a lack of inclusiveness of the people at the grassroots level in decision making pertaining their wellbeing and a bias in the selection of the vulnerable districts.

Findings from the interviews done with a member of the W.A.S.H. district sub committee member, the researcher identified the impacts of W.A.S.H. on rural development. From the interview it was noted that the district had a significant improvement of W.A.S.H. infrastructure such as boreholes and dip wells. As a result this improved access to available reliable water sources for the residents

of the Runde. It also highlighted that over fifty jobs were created for the local people in the community due to the inception of the programmes.

The programme saw the establishment of water point committees that were given the duty to monitor and evaluate every water point in the district. This saw the training of 525 water point officers. These officers were responsible for monitoring and evaluating the water points, educating the locals about sustainable use of water and the impacts of water and good sanitation practices to the community, they were also responsible for acting as a medium between the grassroots and the top line management in the program through reporting systems as well as keeping financial records of the projects being undertaken in Runde. 60 % of the respondents stated that these programmes did indeed improve the community, while the other 40% stated that these projects did not develop the community in any way.

#### **4.3.4 RESPONDENTS ATTITUDES TOWARDS SIGNIFICANCE OF W.A.S.H. PROGRAMMES**

55 % of the respondents who the questionnaires were administered to stated to have a general understanding towards the W.A.S.H. programmes. They expressed a general understanding of the importance of the programmes within the community. The remaining 45% expressed a lack of knowledge to the term W.A.S.H. as well as the programmes that were currently undergoing in the community. When asked about the significance of the programmes on the people of Runde.60 % of the respondents stated that in the sense of social cohesion and economic development the program has improved the plight of the people in Runde District. The remaining 40% of the respondents stated that the programmes in fact did not benefit the community citing a lack of homogenous development in Runde.

The beneficiaries of the programmes seemed to have a positive attitude towards the WASH programmes in the community. 65 % of the respondents accepted and welcomed the change the W.A.S.H. programmes brought to the community, stating that the programmes have improved the livelihoods of the people in the district and 35% of the respondents conveyed negative perceptions towards the

programmes. When asked about the beneficiaries perceptions towards sanitation programmes in the district 70% of the respondents accepted the change the sanitation programmes brought to the community citing that the inception of the programmes have improved rural livelihoods, rural health and addressed gender issues due to improved sanitation. 30% of the respondents showed resistance and a negative perception towards sanitation programmes, citing traditional methods of sanitation practices effective. The findings revealed to the researcher that the attitudes towards open defecation and hand-washing practices are one of the stumbling blocks amongst people in Runde District. The problem lied with the change in mindset. In spite of the provision of water washing points and the construction of latrines in the District, the majority of the individuals still sought to open defecation and rarely used water-washing points as this proved a major problem in tackling socio-economic challenges in Runde.

#### **4.3.5 W.A.S.H. AND WATER QUALITY**

When asked about if W.A.S.H programmes have met their water demands 60% of the respondent agreed arguing that the programme has improved the quality of water they take for general consumption. Prior to the programmes the majority of the respondents stated that the water they consumed was marked with a brownish yellow color and contained particles that would remain at the bottom after the water was boiled. Furthermore, the respondents stated that the water they used from an unsafe water source resulted in severe cases of diarrhea when consuming the water. Whereas 40% of the respondents stated that there was no significant improvement in the quality of the water since the inception of the programmes, stating that the water being fetched at the community boreholes and dip wells that were rehabilitated had water that was causing cases of minor diarrhea. The findings of the research reveal that the people of Runde are mostly satisfied with the water quality that is being provided for by the W.A.S.H programmes in the district.

#### **4.3.6 W.A.S.H AND SUSTAINABLE DEVELOPMENT GOALS**

The researcher was able to draw out the linkage between the provision of reliable water, sanitation and hygiene and the achievement of sustainable

development goals. From the interview conducted with W.A.S.H. district sub committee members the researcher noted that the provision of water has a direct and indirect bearing on the achievement of other developmental goals that are of paramount importance to achieve nation development in the country. The provision of water affects other development goals such as poverty eradication, health, education and energy. Addressing these factors will accelerate the country's development achievements and help in attaining the sustainable development goals.

#### **4.7 CONCLUSION**

The chapter presented the findings of the research carried out by the researcher. Data gathered through primary and secondary sources was analyzed and presented in tables and thematic analysis. The first part of chapter shows the questionnaire, interview and total response rate. The later part of the chapter shows the themes adopted from the research findings that will help the researcher on drawing up sound conclusions. Findings that are presented in this chapter also reflect the impact of WASH programmes in the provision of water and sanitation services and the effects it had in Runde District. The next chapter dwells on the summary of the research, results and its findings as well as its conclusions and its recommendations.





## **CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS**

### **5.1 INTRODUCTION**

The concern of this research was to assess the impact of WASH programmes in rural Zimbabwe with reference to Runde District. Whilst, also looking at how these programmes have affected livelihoods of the rural people as well as how health, gender equality and rural development is affected by the provision of W.A.S.H. services The present chapter seeks to give a summary of the findings of the preceding chapters and give recommendations and to make concluding remarks on the research.

### **5.2 SUMMARY**

The research looked at Sustainable Development Goals and the impact of WASH programmes in rural Zimbabwe with reference to Runde District. The first part of the chapter provided the background of the study and the statement of problem, which as a result brought out the problem of the area under study. It also highlighted the following objectives: to analyze the impacts of WASH programmes in rural Zimbabwe, to assess the impact of WASH programmes on child health, to assess the impact of WASH programmes on promoting gender equality and to offer solutions to improve the effectiveness of the programmes.

The literature review of this research was the base upon which the research was carried out. It considered the problem statement, the research objectives and research questions as well as the theoretical framework related to the research area. The literature review looked at the overview of Sustainable Development Goals, Zimbabwe and its position on Sustainable Development Goals and the policy framework guiding WASH procedures in Zimbabwe. It also looked at the history and development of the W.A.S.H sector in Zimbabwe as well as an overview of W.A.S.H. It also took into consideration the impacts these programmes have in health, gender equality and rural development. Furthermore, stemming from the research objectives the reviewed literature looked at cases where WASH programmes were being employed in the region and

country and how these programmes affected the livelihoods of the rural poor with a case study of Runde.

Chapter three of the research looked at the research methodology utilized by the researcher in which the researcher made use of both of case studies and descriptive research designs to tackle the research objectives of the research which was to analyze the impacts of WASH programmes in rural Zimbabwe. As an approach to the study, the researcher made use of qualitative methods of research in collecting data. The rationality behind the researcher using qualitative methods was that the researcher was enquiring on the attitudes and perceptions of the participants. The research had a sample size of forty -five respondents that consisted of (40) local residents and interviews with (4) members of the district committee of WASH in Runde. The researcher used convenience and purposive sampling as a sampling technique. This was because the target population being researched was a small time frame given was limited and as to avoid bias by the researcher. The study also used data collection techniques instruments such as questionnaire's and interviews. Data collection was done and the researcher managed to collect data from the field. From the sample size selected all respondents managed to respond. The questionnaire response rate was at a 100% as everyone managed to respond. The interview response rate was at 75% and in total a response rate of 90% was achieved. In terms of data presentation the research findings were presented in the form of tables and themes.

The research findings show that W.A.S.H programmes have had more positive impacts than negative impacts in the Runde District. Through the employment of W.A.S.H the livelihoods of the rural people was improved. In particular women and the girl child. The issue of health is tackled as well as other Sustainable Development Goals such as the end of poverty, right to education and the promotion of gender equality.

### **5.3 CONCLUSIONS**

Moreover, through the findings the researcher was able to see the impact lack of water has to the Runde District. From the response of the questionnaire most of

the respondents stated that water is used for agricultural production both for subsistence and commercial farming. This as a result is the number one source of income within the people of Runde District. The inability to access clean water and sanitation hampers the economic productivity of the rural people and thus reduces the Gross Domestic Product of people's in the rural homestead.

The research findings show that the current state of water and sanitation in Runde is in direct contrast to the provision of Section 73 of the Constitution of Zimbabwe Amendment (No. 20) that ensures that every citizen for Zimbabwe as a right to live in a clean, safe and healthy environment. This is evidenced by residents continued lack of access to sufficient water supply and sanitation services a situation which forces them to rely on both protected and unprotected sources of water. In this vein the majority of sampled residents rely on unimproved pit latrines and as such chances of catching diseases are high that pit toilets and surface overflow will pollute these wells. This reduces the quality of life of people and hampers economic growth and development.

The researcher noted that W.A.SH infrastructure in the local rural authority is in poor state. Therefore there is need for government and other relevant stakeholders to be involved in the provision of water and sanitation services so that residents of the Runde District have access to sufficient portable water and sanitation services. This will go a long way in meeting the key targets of SDG six as well as meeting the 2030 agenda of sustainable development.

The findings also highlighted the effects inadequate water, sanitation and hygiene has on the health of the people of Runde. The inability to easily access safe improved water has a direct bearing on the people of Runde resulting in severe cases of diarrhea.

Moreover, the researcher found out that gender is affected by the availability of water, sanitation and hygiene infrastructure and services. Due to long distances travelled girls missed out on attending schools. Women too were also burdened as time spent travelling to fetch water decreased the opportunity for them to

partake in economic activities that would increase family income and reduce the risk of extreme poverty, particularly in female headed households.

The findings also revealed that rural development hinged on the provision of reliable water, sanitation and hygiene services. The findings identified that the majority of the people in Runde relied on agricultural activities as source of income and the availability of water improved their plight. The provision of water, sanitation and hygiene in the district helped address other socio-economic issues such as gender equality, health, poverty and education. The provision of water has both a direct and indirect on these elements and the insurance of access to water can help the country realize the 2030 sustainable development agenda.

#### **5.4 RECOMMENDATIONS**

In light of the findings of the study and the conclusions made above, the researcher made the following recommendations:

The research established that the lack of adequate water and sanitation has an adverse effect on people's health. Therefore the need to address the issue by increasing clean reliable water points is of paramount importance. The need to get the community more involved through community schemes that are bottom up is important, as a top down approach seems to be failing to completely address the problem of a lack of adequate water supply and does not address the immediate needs of the residents.

The continued health problems faced in the country especially in the rural areas are usually related to water related to diseases. Infant mortality, maternal mortality and child fertility rate are still a pressing health issue in the country. This has hampered the development and growth of the health sector. In the case of Runde health problems were closely related to the inability of having reliable W.A.S.H infrastructure. Therefore there is a need for more engagement by development partners and the government to increase sustainable infrastructure and training of community residents to monitor and maintain the infrastructure.

The need to create people centered and inclusive policies is vital by relevant ministries that are in line with W.A.S.H programmes. The need to adopt more people friendly policies that consist of decentralized power, monitoring and evaluation systems to continually record the progress is required to buttress the already existing systems. The relevant stakeholders should engage in community awareness and educational campaigns to inform the local residents on the benefits of good sanitation practices and drinking from safe water sources.

The findings also revealed that the residents of Runde rural district were mostly aware of the programmes, however, in regards to sanitation the problem was not with providing the infrastructure to promote good sanitation, but the problem was with the behavior of the residents. The research revealed that the majority of respondents practiced open defecation and refrained from utilizing hand washing soap facilities based on local culture.

It is best for the relevant stakeholders involved in the W.A.S.H programmes seek not only to provide residents with infrastructure to benefit them. However, there is a need to change the behavior patterns of the residents. A need to adopt behavioural change models that seek to educate and sensitize local residents on the benefits of adopting sanitation practices that are sustainable as well as the need to train local individuals to teach and disseminate information on sanitation and have regular monitored and evaluated educational awareness campaigns, in the schools in order to promote behavior change in the younger generation. Furthermore, there is a need to increase gender friendly sanitation facilities to increase girl child attendance.

The researcher also noted that W.A.S.H has both negative and positive impacts on promoting gender equality. Women and the girl child are the most affected by the lack of W.A.S.H resources as women are the custodians of water in the homes.

As a result the researcher recommends that there is a need to adopt more gender inclusive policies that seek to empower women. Moreover, there is a need for the local authorities to create a platform for women and a women's league to

address W.A.S.H issues that relate to women in the district which helps deal with women problems that are linked to water, sanitation and hygiene service.

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## Appendices

### **Research Questionnaire for local rural residents in Runde District (Zvishavane)**

My name is Mwiza Ngwira. I am a fourth year student at the Midlands State University studying a Bachelor of Science in Politics and Public Management Honors Degree.

I am hereby carrying out a research on, “ **Sustainable Development Goals and the impact of W.A.S.H programmes in rural Zimbabwe. Case of Runde District Zvishavane**” As part of my curriculum, I am under obligation to carry out research that is in line with my area of study. The information that shall be issued will strictly be utilized for academic purposes and the research by shall no means be used for political expedience. Note, it is advisable that one should refrain from writing personal details for security reasons.

**NB: Only write your answer and respond with a tick where possible.**

### **SECTION A: PARTICIPANTS DETAILS**

#### **1. Individual details**

District.....

#### **2. Demographics**

<b>Age [years]</b>	12-19	20-29	30-39	40 and over

3. **SEX**

MALE	FEMALE

4. **Level of education**

Primary	Secondary	Tertiary	Non attendant	Other

5. **Family income per month \$**

0-99	100-199	200-299	Other
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**SECTION B: AWARENESS TOWARDS W.A.S.H. IN RUNDE**

6. Are you aware of the W.A.S.H programs currently going on in your district?

<b>Yes</b>	<b>No</b>

7. If yes, in your own words what is your understanding of W.A.S.H?

.....

.....

.....

.....

.....

.....

8. Did you receive any service from the W.A.S.H. programs?

<b>Yes</b>	<b>No</b>

9. If yes, state the service received

.....

.....

.....

.....

.....

10. How did you view the service you received?

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.....  
.....  
.....  
.....  
.....

11. How far do you travel to access water?

.....  
.....  
.....  
.....

12. How do you view the quality of the water you consume in the district?

.....  
.....  
.....  
.....  
.....

**SECTION C: EFFECTS OF W.A.S.H ON RURAL LIVELIHOODS**

13. What is your main usage of the water for?

Yes	No

.....  
.....  
.....  
.....  
.....

14. Do you use water for agricultural purposes?

15. How does the lack of water affect your livelihoods?

Yes	No

.....  
.....  
.....  
.....  
.....

16. Has there been any previous out break of diseases related to water and sanitation?

17. How did this outbreak of disease affect you?

.....  
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.....  
.....

18. Have the W.A.S.H services improved the health conditions of the community? If yes, state how.

.....  
.....  
.....  
.....  
.....  
.....

19. Have the W.A.S.H programmes helped in developing your community? If yes, state how.

.....  
.....  
.....  
.....  
.....

**THANK YOU**

### **Interview guide for W.A.S.H District Sub Committee Members**

1. How long have you been a member of the W.A.S.H district sub committee?
2. What are your duties and responsibilities as part of the committee?
3. How would you describe the current state of water and sanitation in the district?
4. Are the services you are providing benefiting the targeted beneficiaries?
5. What challenges are you facing as an organization in providing these services?
6. In what ways do you think inadequate water and sanitation service provision affected the livelihoods of the residents?
7. Who do you think is the most affected by this phenomenon?
8. What counter coping strategies have been implemented to tackle such challenges?
9. Are the residents actively involved in issues pertaining to water and sanitation?



**EVIDENCE OF RESEARCH**

89

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124 APR 2018  
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~~E.O.A  
File~~  
Munz - 17.04/18  
16 April 2018

REF: APPLICATION TO ACQUIRE DATA FOR PROJECT ENTITLED  
SDGs and the impacts of WASH programmes in rural Zimbabwe  
Case of Rumde District

I Mwira Ngunwa am a fourth year students at Midlands State University I am currently doing and Honors Bachelors in Politics and Public Management and doing a project entitled, "SDGs and the impacts of WASH programmes in rural Zimbabwe: Case of Rumde District, Zvishavane. I am earnestly seeking information that could aid in completing my research. Your assistance in helping out in any way will be greatly appreciated and kindly received.

Yours Sincerely  
Mwira Ngunwa  
M

RECEIVED  
DATE 16/4/18