Implementing a Sustainable, Scalable Safe Water Project in Les Cayes, Haiti

Background: Implementing safe water projects in Haiti requires partnerships between donors, in-country organizations and communities. Religious entities can improve population health by serving as important partners in each of these roles, but little is known about the assets of religious entities related to safe water projects. US churches, FBOs, NGOs and mission groups invest large amounts of resources in public health efforts in Haiti. However, opportunities are lost if investments are made without the technical expertise necessary to promote sustainability. On the other hand, public health organizations possess the expertise to manage large cost-effective programs, but their relationship with community structures and churches must not be overlooked. Improved communication and knowledge sharing between the fields of religion and health is essential to maximize the impact and sustainability of future projects.

Research: We started our research by spending one week in Jolivert, which is located in the north region of Haiti. Jolivert, though a small rural town seemingly in the middle of nowhere, is home to the Jolivert Safe Water for Families Program (JSWF). This program produces a chlorine solution which is then distributed to families in several surrounding villages. The program teaches families not only how to properly use this locally generated product but also about water sanitation, safe storage and personal hygiene. Another component of this program is to help replicate and expand projects in other parts of Haiti. Water technicians and the local program managers give technical assistance, best practices and techniques for monitoring and evaluation. This replication has happened in Gros-Morne and Leogane and is planned for Les Cayes.

While we were in Les Cayes, our team had three main components. One member of our team conducted a random household survey in three communities surrounding Les Cayes. This colleague collected quantifiable data about acquisition of water, water use, and (if any) water treatment at an individual and household level. A second colleague worked on developing and editing curriculums for educating high-school students about safe water and business to be implemented in nine schools in the three target communities. By the end of the summer, the teachers and school directors were trained and the kids excited about a new class and interactive learning techniques. As the third component of the team, I co-facilitated community leaders meetings and personally conducted in-depth interviews with local NGOs. Both of these methods were used to better understand the relationship of religion and health, to grasp the breadth and depth of efforts used to provide safe water for communities in religious and public health spheres and to identify mechanisms for sustainable safe water projects in Haiti.

A Few Results from the Meetings in Haiti

- Pictures and tangible materials are important for promotion & education
- People who hold various roles can be effective in one-on-one promotion of safe water systems (Community health workers, religious leaders and political leaders can all work together)
- Assets need to be matched with roles: large NGOs can be effective in providing funds and supervision, others external partners can craft and produce promotional materials while Haitian CBOs can be effective in organizing, finding materials for construction, and providing labor. Communities can be effective in many different roles in many different projects, but clearly defined expectations from the outset are critical
- Haitian communities utilize many different channels of “passing the message” (schools, churches, cockfights, advertising in the street or market, meetings) and several forms of media (megaphones, bandrolls across the street, notes on trees and walls, radio spots, invitation letters). All should be considered and used.
- Members of in-country organizations want more coordination to take place, but all organizations must feel like they are receiving some benefit from the partnership in order for it to succeed. Areas of potential coordination include: logistics and shipping, community events, planning trips for volunteers from the US, linking with existing community networks.
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Additional Research fueled by findings in Haiti:

During the three months spent in Haiti we began to understand the relationship of religion and safe water through in-depth interviews, focus group discussions and participatory action research. We also realized US organizations, churches and individuals have a huge effect on the programs and systems implemented in Haiti. The second half of our research and project was thus informed; in-depth interviews of US stakeholders were necessary to fully understand the role US churches, FBOs and leaders play in safe water projects in Haiti.

After talking with more than a dozen FBOs and individuals in the Atlanta area, and following transcription and analysis of the interviews, nine major themes emerged regarding best practices for safe water projects and partnerships in Haiti. They are: Roles from the United States, Community Involvement, Leadership, Communication, Expectations, Personal Relationships, Integration of Problem and Solution, Culture and Language, and Mechanisms for Sustainability. Details and case studies about these themes, along with additional findings from the community meetings in Haiti, will be published in a best practices manual for implementation of safe water projects in Haiti. Also a community dialogue about “Safe Water in Haiti” was held May 6th at Emory University. This symposium brought together more than 75 people, all from the Atlanta area, who work in safe water, in Haiti or a combination of the two. New partnerships, channels for resource and knowledge sharing, and potential projects were developed.

In addition to propelling further research on safe water, my summer in Haiti changed and expanded by vocational and educational goals. This field experience in Haiti and my research in Atlanta ignited in me a passion for studying the relationship of faith and health and the desire to obtain a public health degree. This year I advocated for a joint Master of Divinity and Master of Public Health degree, and with its approval I intend to pursue this joint degree.