COMMUNITY INTEGRATED DEVELOPMENT INITIATIVES (CIDI)

FINAL REPORT

MAPPING STUDY FOR EVIDENCE GATHERING AND DEVELOPMENT OF FACT SHEETS ON WATER, SANITATION AND HYGIENE BUDGET ALLOCATION IN KAMPALA

FEBRUARY 2020

TABLE OF CONTENTS

List of Tables

List of Figures

List of Acronyms

CIDI	Community Integrated Development Initiatives
CLTS	Community Led Total Sanitation
DPHE	Department of Public Health and Education
ENR	Environment and Natural Resources
FY	Financial Year
KCCA	Kampala Capital City Authority
MoWE	Ministry of Water and Environment
NDP	National Development Plan
NW&SC	National Water and Sewerage Corporation
PWDs	Persons with Disability
SDGs	Sustainable Development Goals
UGX	Uganda Shillings
WASH	Water, Sanitation and Hygiene
WB	World Bank
WHO	World Health Organisation

Foreword

It is my pleasure to present to you this report on the mapping study for evidence gathering and Development of fact sheets on Water, Sanitation, and Hygiene Budget Allocation in Kampala.

This study was commission by Community Integrated Development Initiatives (CIDI) Policy and Advocacy Department under the project: Kampala Advocacy Project for Improved Water, Sanitation and Hygiene [WASH] Resource Allocation and Reduced Water Tariffs.

Community Integrated Development Initiatives (CIDI) in partnership with Democratic Governance Facility (DGF), promote and support the citizen rights to participate in all governance issues in their country especially service delivery planning and implementation. In order for all stakeholders to do their part, practical evidence in form of study reports with sector budget allocations, trends, are important to inform citizens advocacy towards improved WASH service delivery.

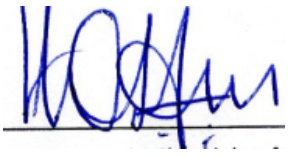
The purpose of the mapping study was to generate evidence and development of fact sheets on WASH budget allocation to guide budget advocacy for increased WASH budget allocation for communities and institutions especially for Kampala City.

This intervention will help citizens' and duty bearers with relevant information to guide WASH budget advocacy and consequently increase responsiveness on WASH issues in the sector. This is against the back ground that Good sanitation matters for many reasons, but particularly for human dignity, public health, and environmental protection, especially water. Poor sanitation entrenches the cycle of poverty and disease thus the need for such studies.

The recommendations made in this study report can also be leveraged for project scale up or extension given the fact that WASH Budget Allocation, Water and Tariff issues issues are still a major concern in the informal settlements of Kampala and the entire City at large.

This publication provides a better understanding on WASH budget allocation, WASH budget allocation trends, analysis of WASH sector issues and recommendations that policy and decision makers can adopt to address issues of accessibility, availability and affordability of WASH services in Nakawa, Lubaga, Kawempe divisions and Kampala Capital City at large.

Dr. Jjuuko Fulgensio



……

Executive Director CIDI

Executive Summary

This is the report on a mapping study for evidence gathering and development of fact sheets on water, sanitation and hygiene budget allocation in Kampala but also Uganda at large. This study was commissioned by the Community Integrated Development Initiatives (CIDI), a Not for Profit Organization founded in 1996.

CIDI is implementing a project that intends to improve responsiveness by the WASH duty bearers (Government Institutions, KCCA, NW&SC MoWE) in advocacy for reduced water tariffs, quality and affordable WASH services in selected divisions of Nakawa, Lubaga and Kawempe as well as increase engagement of citizens, CIDI and CSOs with WASH duty bearers towards reduced water tariffs and increased WASH budget allocations.

The purpose of the mapping study was to generate evidence and development of fact sheets on WASH budget allocation to guide budget advocacy for increased WASH budget allocation for communities and institutions.

Information was collected using prepared questionnaires. There were three sets of questionnaires; a Household Questionnaire for the general public which was used for collecting data from 150 respondents (50 each) in each of the 3 divisions of Kampla, viz – Nakawa, Kawempe and Lubaga. The sample was selected from at least 3 villages from 3 parishes from each division using a stratified simple random sampling frame formula guided by the Krejcie and Morgan Table. A Focused Group Discussion Guide was also used to pick information from at least 3 special interest gender groups of women, men and Persons with Disability from each of the villages and parishes visited. The other was a Key Informant Guide that helped pick information from Government Ministries, Departments and Agencies (MDAs) as well as Civil Society Respondents.

A Desk Review was also used to review the literature on the subject matter to inform the mapping study. More so it was used to analyse funding for WASH across the last three financial years and for informing the development of fact sheets on WASH Budget Allocation in communities and institutions. The major sources of information were approved budget Estimates for the Water and Environment Sector from FY 2017/18 2019/20.

Good sanitation matters for many reasons, but particularly for human dignity, public health, and environmental protection, especially water. Poor sanitation entrenches the cycle of poverty and disease (for instance, cholera, typhoid, stunting, lowered immunity to malaria, tuberculosis and human immunodeficiency virus [HIV] arising from worm infestations), slows development, entrenches slums, as well as makes cities less attractive places to work, live, and invest in. Poor water, sanitation and hygiene leads to diarrheal diseases, which are responsible for 17% of all deaths of children under five (World Health Organization)[1].

To date, the Government of Uganda (GoU) has given strong emphasis to eradicating open defecation, and to encouraging people to invest in safe containment systems. But as the pace of urbanization picks up in the country and the scale and density of urban settlements rise, local

authorities and the ministries that support and service these areas will need to give greater attention to safe management of wastes beyond the on-site facilities of individual users.

Despite the critical contribution of the sector to economic growth, The Ministry of Water and Environment (MWE) Strategic Investment Plan (2018- 2030) estimated that UGX 5.10 trillion is required annually and increasing to 10 trillion by 2030 to meet targets and is measured by the indicators of the revised Sector Investment Plan (2017) which has incorporated 24 Environment and Natural Resources (ENR) subsector indicators.

The sector budget allocation has significantly increased over the past two years largely attributed to external financing amounting to 43% of the total sectoral budget in FY 2018/19.

Budget allocation trends in Billion shillings			
2017/18	2018/19	2019/20	2020/21
1,265.808	1,265.808	1,092.803	1,351.038

Key Sector Issues for FY 2020/21

1. High Water Tariffs for Priority Public Institutions
2. Poor Funding for Sanitation and Hygiene
3. Poor Environmental Sanitation in Kampala City

Study Findings

A total of 150 questionnaires were received for data analysis of which the valid tools were 147 while the invalid tools were 3. Of the 147 valid tools, 5 respondents' gender status on sex was not capture. For respondents whose gender by sex was captured, 84 of the respondents (60%) were female while 57 respondents (40%) were male.

The majority of the respondents were aged between 20 to 49 years of age. It was also observed that most of the household heads' highest level of education was secondary with 58 respondents (43%), this was followed by primary education with 26% (35) respondents, while university had 12% (17) respondents.

Water

Main source of domestic water

From the analysis, it was observed that the main water source for the citizens were public tap/stand pipe with 49% (69) respondents noting that they use the public tap/stand pipe as the main water source.

Water storage facility

From the survey, it was revealed that 91.7% (132) respondents had a water storage facility while 8.3% (12) respondents had no water storage facilities.

Cost of 20-litre Jerry-can of water

The study was also interested in establishing the cost of water in the survey areas. The price of a 20-litre jerry-can of water ranged between UGX 50 and UGX 1,000. The majority of the respondents noted that a 20-litre jerry-can of water cost UGX 200.

Sanitation

Cost of Solid waste disposal

The cost of solid waste disposal ranged between UGX 300/= and UGX 40,000/=. The majority of the respondents (35) paid UGX 1,000/= monthly for solid waste disposal.

Satisfaction with Solid and Liquid waste disposal

One hundred and seven (107) respondents provided response on their levels of satisfaction with the current disposal of solid waste. Results indicated that the majority of the respondents 48% (52) were very dissatisfied with the current level of solid waste disposal, 20% (21) respondents were very satisfied.

Hygiene

Hand washing

On washing hands, respondents gave multiple answers. The majority of the responses were in favour of washing hands after visiting the toilet and before eating food. For respondents who wash their hands, 89% (126) respondents used water and soap for washing their hands while 11% (15) respondents used only soap in washing their hands.

Access to information

Radio

One hundred and forty-three (143) respondents noted that they listen to radio. The majority of the respondents (101) listened to radio daily, 8 respondents listened to radio on a weekly basis. It was observed that CBS radio was the most listen to radio station with 35 listeners of the interviewed.

TV

One hundred and Thirty-Nine (139) respondents noted that they watch television. Results show that Bukedde TV has the largest number of viewers at 90.

Newspapers

One hundred and thirty-five (135) respondents noted that they read newspapers. Of these, 15 respondents read newspapers on a daily basis, 10 respondents read on a weekly basis, and 7 respondents read the newspapers less than once a week. On the other hand, 63 respondents rarely read newspapers and 40 respondents never read newspapers. Bukedde newspaper was

the most read with 49 readers (37%), Daily Monitor was the second most read with 28 readers (21%) and New vision was the third most read newspaper with 27 readers (20%).

Conclusions

This study has established that there has been an overall though modest increase in the Water and Sanitation budget at the national level over the last 4 years from UGX 1,265.81 in FY 2017/18 to UGX 1,351.04 proposed for the FY 2020/21. However, most of the budget has been retained by the Ministry of Water and Environment UGX 1,190.46 (88%), while the budget for KCCA has stagnated at UGX 15.93 Bn (1.18%) of the national budget for FY 2020/21. That for Local governments has stagnated at UGX 59.3 Bn (4.4%) for both 2019/20 as well that proposed for FY 2020/21.

Significant challenges within the three divisions of Kawempe, Nakawa and Rubaga for WASH were found to centre on the high cost of water, poor waste management and high dissatisfaction by citizens on the management of both solid and liquid waste disposal by the KCCA. A significant percentage of respondents (42%) noted not to have heard about hygiene information also luckily, a significant percentage (89%) were found to wash their hands with soap and water. The most effective way to reach to the survey group would be through radio, followed by television on the most preferred stations indicated.

These findings all point to the fact that government does still have a big job of having the financing of WASH impacts reaching the ordinary people in the peri urban areas targeted by the study.

Recommendations

General

- The sector should introduce pro-poor measures in the institutional tariff by disaggregating public institutions with a reduced tariff for public schools and healthcare facilities.
- The sector should also increase on the clean water distribution points in the surveyed divisions of Kawempe, Nakawa and Lubaga to serve more people and perhaps this can bring down the overall cost of public water supply.
- It is also important to take care of the special needs of women, children and persons with disabilities especially related to distance to the nearest clean water facility as well as accessibility and use by People with Disabilities.

Recommendations by Specific Gender Groups

Women

- "Bring us garbage collection vehicles to pick it from selected points in our community".
- "Build for us public toilets/latrines in our community".
- "Ladies in our community should be sensitised on hygiene and sanitation".
- "The cost of water and garbage collection should be reduced".

Persons with Disability

- "Construct a public utility which is accessible for PWDs. The ordinary toilets are too high for PWDs".
- "Increase the number of taps to build competition and bring down the price of water to at least UGX 100".
- "PWDs should also be involved in their Local Council decision making processes".
- "Reduce/lower the cost of water for PWDs who do not have enough money".

Men

- "Construct for us public latrines in our communities".
- "Construct water sources in communities where our wives can access them easily".
- "Dumping of rubbish along the railway line, especially of medical waste should be banned".
- "The price of water should be reduced to at least UGX 100".

Key Messages

- Funding to local governments needs to be increased, to enable them to fulfil their sanitation mandate.
- Community mobilisation programs should be expanded with sustained follow-ups, to stimulate demand for improved sanitation, to all districts.
- Investment is needed to improve sludge and wastewater treatment capacity in urban areas.
- Lower the cost of Public Piped Water to at least UGX 100 for end users.

1. INTRODUCTION

This is the report on a mapping study for evidence gathering and development of fact sheets on water, sanitation and hygiene budget allocation in Kampala but also Uganda at large". This study was commissioned by the Community Integrated Development Initiatives (CIDI), a Not for Profit Organization founded in 1996. CIDI currently operates in over 25 districts in Uganda and its head office is located in Muyenga. CIDI's vision is to have "Communities enjoying a decent life free of hunger, poverty and disease". CIDI's mission is to improve people's livelihood and create self-sustaining communities through provision of equitable, participatory integrated development interventions. One of its sector programs under which this study falls is Water and Environmental Sanitation.

1.1 Background to the Study

CIDI is implementing a project that intends to improve responsiveness by the WASH duty bearers (Government Institutions, KCCA, NW&SC MoWE) in advocacy for reduced water tariffs, quality and affordable WASH services in selected divisions of Nakawa, Lubaga and Kawempe as well as increase engagement of citizens, CIDI and CSOs with WASH duty bearers towards reduced water tariffs and increased WASH budget allocations. This is in line with Project Outcome 1: Improved responsiveness by the WASH duty bearers (Government institutions, KCCA, NW&SC MoWE) in advocacy for reduced water tariffs, quality and affordable WASH services in selected divisions in Kampala. This was mainly raised on the basis of continued high prices for water despite increased though modest funding to the sector over the years.

1.2 Purpose and Rationale

The purpose of the mapping study was to generate evidence and development of fact sheets on WASH budget allocation to guide budget advocacy for increased WASH budget allocation for communities and institutions.

1.3 Methodology

The Consultant commenced the assignment with an inception meeting with the CIDI Management Team. At the meeting a coordinating team for the assignment was established. The Team was the Client's main contact for the consultant during the assignment and also provided the necessary assistance to the Consultant Team in terms of accessing information and logistical support. The Consultant then carried out a thorough review and analysis of information and data obtained from all the documents in relation to the subject matter in lieu of preparing the consultancy intervention report.

Information was collected using prepared questionnaires. There were three sets of questionnaires; a Household Questionnaire for the general public which was used for collecting data from 150 respondents (50 each) in each of the 3 divisions of Kampla, viz – Nakawa, Kawempe and Lubaga. The sample was selected from at least 3 villages from 3 parishes from each division using a stratified simple random sampling frame formula guided by the Krejcie and Morgan Table. A Focused Group Discussion Guide was also used to pick information from at least 3 special interest gender groups of women, men and Persons with Disability from each

of the villages and parishes visited. The other was a Key Informant Guide that helped pick information from Government Ministries, Departments and Agencies (MDAs) as well as Civil Society Respondents.

A Desk Review was also used to review the literature on the subject matter to inform the mapping study. More so it was used to analyse funding for WASH across the last three financial years and for informing the development of fact sheets on WASH Budget Allocation in communities and institutions. The major sources of information were approved budget Estimates for the Water and Environment Sector from FY 2017/18 2019/20.

Key Informant Interviews were also used to hear expert opinions from relevant stakeholders on the mapping study in the relevant Ministries, Departments and Agencies such as KCCA, NWSC, MoWE, Ministry of Finance, Parliamentary Committee on Natural Resources as well as the Parliamentary Forum on WASH and Civil Society.

2. WASH CONTEXTUAL ANALYSIS

Good sanitation matters for many reasons, but particularly for human dignity, public health, and environmental protection, especially water. Poor sanitation entrenches the cycle of poverty and disease (for instance, cholera, typhoid, stunting, lowered immunity to malaria, tuberculosis and human immunodeficiency virus [HIV] arising from worm infestations), slows development, entrenches slums, as well as makes cities less attractive places to work, live, and invest in[2]. Poor water, sanitation and hygiene leads to diarrheal diseases, which are responsible for 17% of all deaths of children under five (World Health Organization)[3]. Better sanitation practices play a significant role in driving improvements in people's standards of living and quality of life, and ensuring those improvements can be sustained into the future.

2.1 WASH in Uganda

The Water and Environment sector is mandated with ensuring the sustainable utilization and appropriate management of Uganda's environment and natural resources for the improved livelihood of the population. This includes the development and management of the country's water resources, provision of safe water and hygienic sanitation facilities, catchment management and ensuring compliance to sector standards and regulations.

To date, the GoU has given strong emphasis to eradicating open defecation, and to encouraging people to invest in safe containment systems. Grant funding, to local governments to support community-led total sanitation (CLTS) and home improvement campaigns, is spurring sanitation improvement on a significant scale. But as the pace of urbanization picks up in the country and the scale and density of urban settlements rise, local

[2] World Bank, 2018
[3] WHO Health Status Report 2010

authorities and the ministries that support and service these areas will need to give greater attention to safe management of wastes beyond the on-site facilities of individual users[4].

Despite the critical contribution of the sector to economic growth, The Ministry of Water and Environment (MWE) Strategic Investment Plan (2018- 2030) estimated that UGX 5.10 trillion is required annually and increasing to 10 trillion by 2030 to meet targets and is measured by the indicators of the revised Sector Investment Plan (2017)[5] which has incorporated 24 Environment and Natural Resources (ENR) subsector indicators[6].

According to the Ministry of Water and Environment[7] sector performance report (2017) and the Ministry of Education and Sports' School WASH mapping (2016), the situation of WASH in Schools in Uganda is not meeting Uganda's national standards. Meeting the national WASH in Schools' standards is critical to children staying in school, performing well in school and keeping healthy and well, among other benefits.

The national standards recommend a pupil to stance ratio of 40:1 in schools. According to district reports, the national pupil: stance ratio reduced from 73:1 in FY 2017/18 to 71:1. Access to hand washing facilities in schools increased from 40% in FY 2017/18 to 42%.[8]

2.2 Sector financing trends and Budget allocations for FYs 2017 - 2021

The sector budget allocation has significantly increased over the past two years largely attributed to external financing amounting to 43% of the total sectoral budget in FY 2018/19. This increase in external funding was attributed to the increased loan financing portfolio to the sector to finance urban water and sanitation infrastructure.

Table 1: Budget allocation trend and 2020/2021 projection

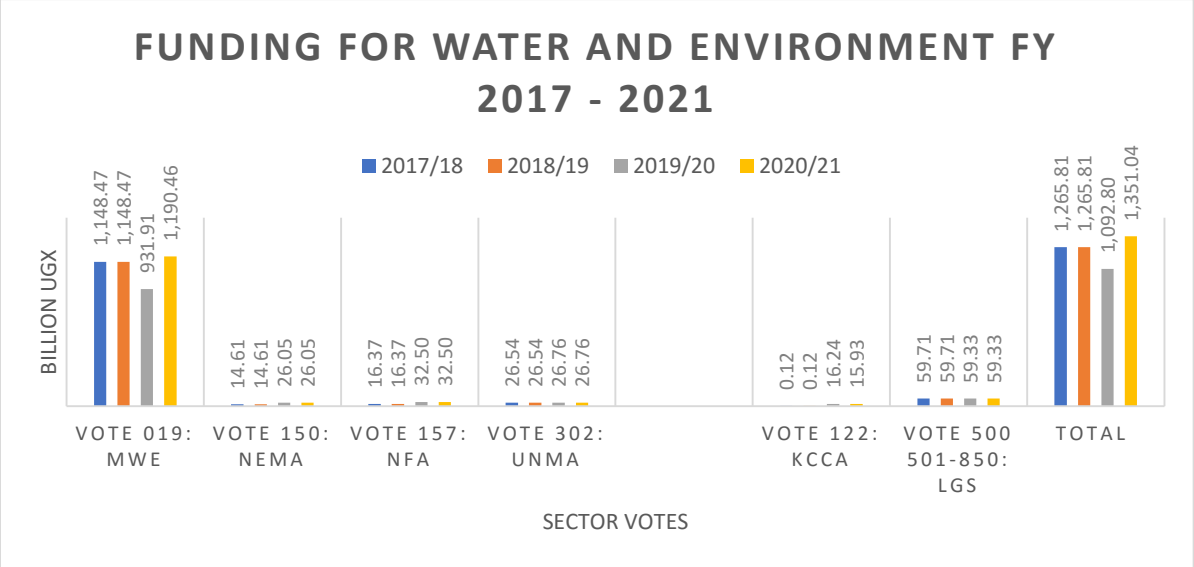
	Budget allocation trends in Billion shillings			
	2017/18	**2018/19**	**2019/20**	**2020/21**
Vote 019: Ministry of Water & Environment	1,148.465	1,148.465	931.914	1,190.459
Vote 150: National Environment Management Authority	14.605	14.605	26.052	26.052
Vote 157: National Forestry Authority	16.369	16.369	32.499	32.499
Vote 302: Uganda National Meteorological Authority	26.535	26.535	26.763	26.763
Vote 122: Kampala Capital City Authority	0.124	0.124	16.244	15.934
Vote 500 501-850: Local Governments	59.710	59.710	59.330	59.330
Total	**1,265.808**	**1,265.808**	**1,092.803**	**1,351.038**

Source MWE NBFPs FY 2018/19, 2020/2021

[4] World Bank, 2018
[5] Water and Environment Sector Investment Plan 2017
[6] Ministry of Water and Environment Performance Report 2019
[7] MWE Sector Performance Report 2017
[8] SPR MWE 2019

It can be observed that allocations to local governments did not increase significantly over time to match the growth in new districts and other administrative units. This affected the delivery of services as the Sector Performance Report 2019 reported a decline in access to safe and clean water from 70% in 2018 to 69% in 2019[9] despite increasing population growth and this was likely to affect the realization of sector targets in the NDP II, III and Vision 2040.

Figure 1: Water and Environment Sector Budget Allocation in the 3 FYs



Vote 122: KCCA budget had a slight decrease of only about UGX 31 million between 2019/20 and 2020/21. There was however a significant increase of the KCCA Budget from UGX 120 million in FY 2018/19 to UGX 16.24 Bn in FY 2019/20.

CSOs Contribution to Water and Sanitation

According to the MWE, Civil Society Organizations (CSOs) investment in FY2018/19 was UGX 69.13 bn[10]. This was a reduction from UGX 91.02 bn in FY 2017/18. UGX 28.25 bn was invested in water supply and UGX 9.86 bn in sanitation and hygiene. UGX 18.83 bn was invested in WASH emergency interventions in refugee settlements and host communities in Arua, Adjumani, Ntoroko, Yumbe, Kiryandongo, Lamwo, Kyegegwa, and Moyo districts. CSOs reported construction of 1,651 new water supply facilities and 2,495 rehabilitated. A total of 60,367 household sanitation facilities and 1,788 school latrine stances were constructed.

It can be seen that the Percentage of pupils enrolled in schools with basic hand washing facilities had gone up from 34% in FY 2015/16 to 40% in FY 2017/18 to 42% in FY 2018/19[11].

[9] ibid
[10] MWE SPR 2019
[11] ibid

2.3 Sector Issues for FY 2020/21

1. High water Tariffs for priority public institutions

Government revised the NWSC tariff during the FY 2018/19 to include an industrial tariff aimed at enhancing industrialization in the Ugandan economy. Similarly, government through NWSC has put in place pro-poor measures to ensure that water and sanitation access remains a fundamental human right through the construction of Public Stand Pipes with an affordable tariff of UGX 25 per 20-Litre Jerrycan covering at least 2,000 villages with 17,186 Public stand Pipes growing at 136% by 2019.

However, the pro-poor measures have failed to address the outstanding access challenge in public schools and healthcare facilities especially in urban areas that are billed the same institutional tariff as other government institutions. This has affected the quality of service delivery in these institutions experiencing regular water disconnection due to unpaid bills. Survey findings from the three divisions of Lubaga, Nakawa and Kawempe posted an average cost of UGX 200 for a 25 litre Jerrycan which the majority of the respondents in these areas said was still too high for them. The challenge was that most places still did not have access to clean water making the prices non-competitive.

2. Poor Funding for Sanitation and Hygiene

Studies have proven that provision of safe and clean water supplies as well as improved sanitation facilities reduce disease burden and improve public health. A study undertaken by World Bank (2012)[12] revealed that Uganda loses USD177 million as a result of poor sanitation. According to the SPR (2019)[13] rural sanitation reduced from 79% from FY 2017/18 to 77.2% in FY 2018/19 while the national pupil to stance ratio was currently at 71:1 below the standard of 40:1.

An analysis of WASH funding in the NDP II period revealed that 66%, of the funding for the Water and Environment sector was allocated to water supply and sanitation in both rural and urban areas[14]. Of this, only 3% was allocated to community sanitation leaving 63% to water supply. This explains why sanitation and hygiene coverage remain low (19%) improved-toilet coverage and 34% hand washing)[15]. Menstrual Hygiene Management has remained largely unattended to yet it is critical especially to retention of the girl child in school. Sanitation and Hygiene at Institutions like Schools, Health care facilities, Prisons, Barracks needs urgent attention if the country is to attain universal access and "Leave No One Behind"[16].Given the human right to sanitation, sanitation planning needs to ensure that no groups are marginalized from having access to the full sanitation value chain.

[12] World Bank 2012
[13] Uganda Water and Environment Sector Performance Report 2019
[14] CSBAG in 2019
[15] Uganda NDP III p.158
[16] Uganda Water and Environment Sector Performance Report 2019

3. Poor environmental sanitation in Kampala city

One of the key roles of KCCA is to improve and maintain a clean, habitable and sustainable city environment through collection, transportation, disposal and treatment of the municipal waste production in Kampala. KCCA collects about 1300 tonnes per day which translates into 468,000 tonnes per annum representing a collection capacity of about 40%. In the FY 2018/2019, KCCA was allocated UGX 479,640,000,000 of which UGX, 38,813,491,709 was allocated to the Department of Public Health and Education (DPHE) representing 8% of the total allocation to the entire institution from government in addition to the non-tax revenue of approximately 14.97bn from solid waste management.

The Parliamentary Budget Committee in 2018 recommended that the allocation to solid waste management program be reduced by 2.17bn from the planned 14.97bn[17]. This reduction instead affected the recurrent expenditure for KCCA as the Non-Tax Revenue (NTR) from solid waste management could not be reallocated. Moreover, KCCA continues to face solid waste management challenges including frequent breakdown of garbage trucks and limited capacity of the concessionaires to effectively collect and transport waste from their respective service zones[18]. These facts are backed by the study findings which reveal poor garbage collection and management especially in the divisions of Kawempe and Lubaga.

3. STUDY FINDINGS, ANALYSIS AND INTERPRETATION

3.1 Study Population Characteristics

Gender of Respondents

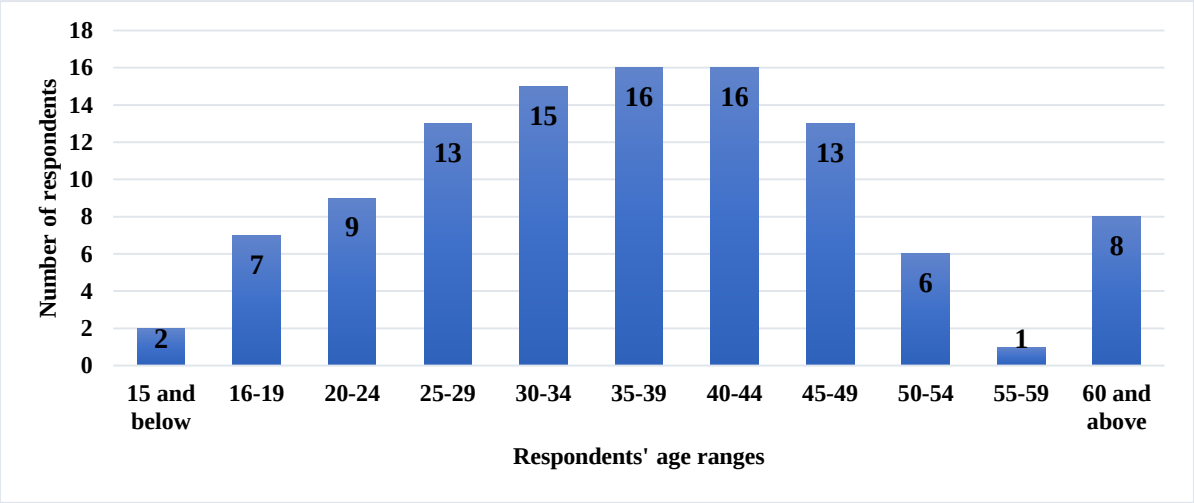
A total of 150 questionnaires were received for data analysis of which the valid tools were 147 while the invalid tools were 3. Of the 147 valid tools, 5 respondents' gender status on sex was not captured. For respondents whose gender by sex was captured, 84 (60%) were female while 57(40%) were male.

Respondents' age

The majority of the respondents were aged between 20 to 49 years of age. See figure 2 for distribution of respondents' age in years.

[17] Budget Committee Report on NBFP 2017/18, Parliament of Uganda, 2017
[18] (MWE BFP, 2020/2021).

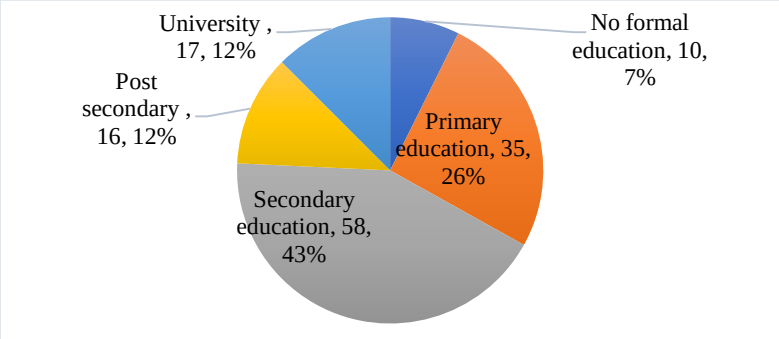
Figure 2: Distribution of respondents' age



Highest level of education of household head

The levels of the household heads were categorized into five categories namely; no formal education, primary education, secondary education, post-secondary, and university. See figure 3 for details.

Figure 3: Highest levels of education for household heads

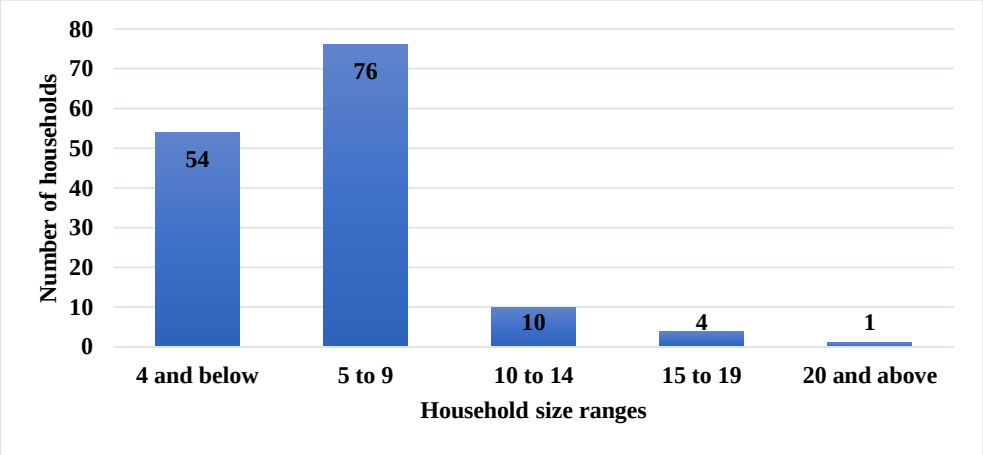


From figure 3, it was observed that most of the household heads' highest level of education was secondary with 58 respondents (43%), this was followed by primary education with 35 respondents (26%), while university had 17 respondents (12%). On the other hand, post-secondary and no formal education were the least with 16 respondents (12%) and 10 respondents (7%) respectively.

Size of household

Results indicate that most of the households had a size of 5-9 members in the house hold followed by 4 members and below as shown in figure 4.

Figure 4: Household sizes

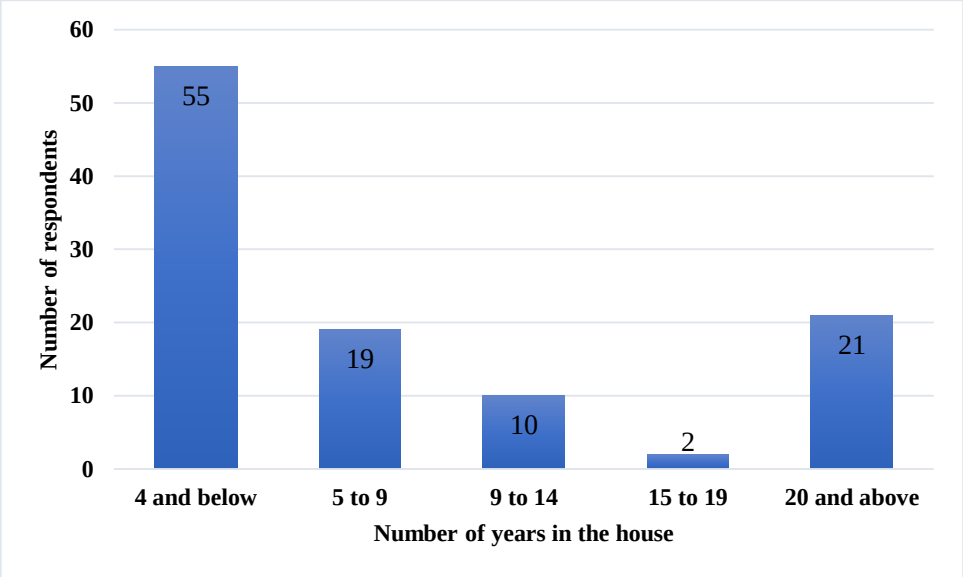


On ownership of the house, 65 respondents noted yes while 64 noted no. Similarly, on renting, 64 respondents noted yes while 65 respondents noted no.

Number of years spent at house

Results indicate that the majority of respondents (55 respondents) had spent 4 or less years in their houses, 19 respondents had spent 5 to 9 years in their houses, 10 respondents reported to have spent 9 to 14 years in their houses, 2 respondents had spent 15 to 19 years in their houses while 21 respondents noted to have spent 20 or more years in their houses. See figure 5 for details.

Figure 5: Length of time spent in house



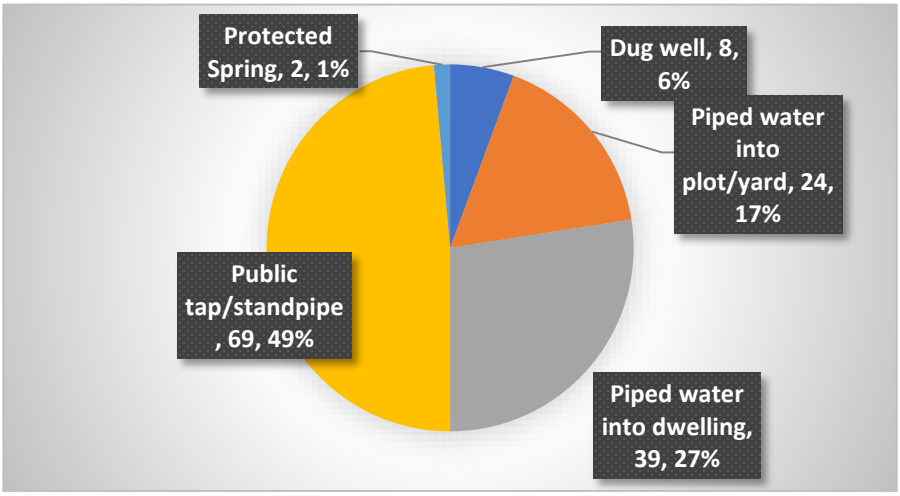
3.2 Key WASH Findings

3.2.1 Water

Main source of domestic water

From the analysis, it was observed that the main water source for the citizens were public tap/stand pipe with 69 respondents noting that they use the public tap/stand pipe as the main water source representing 49% of the population. This was followed by piped water into the dwelling with 39 respondents (representing 27%) while protected springs were the least with only 2 respondents (equivalent to 1%). See figure 6 for details.

Figure 6: Main sources of domestic water



Water storage facility

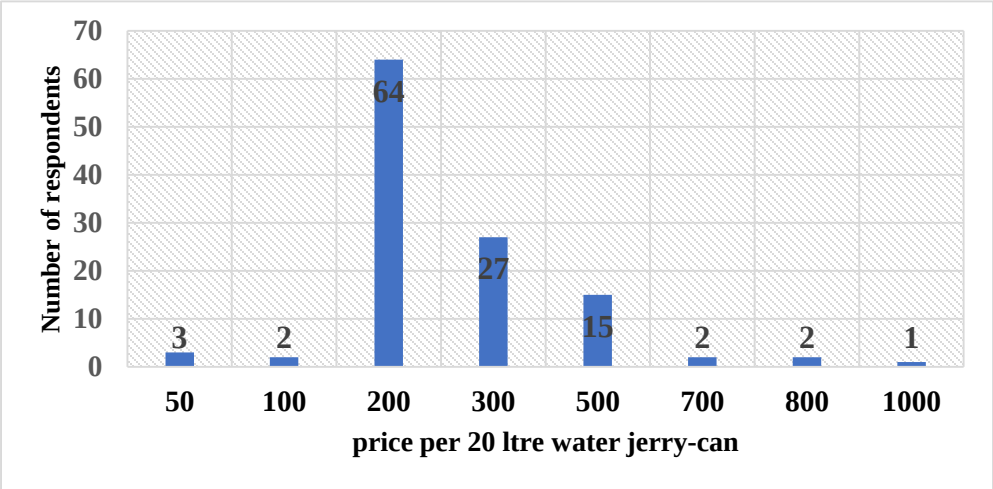
From the survey, it was revealed that 91.7 percent (132 respondents) had a water storage facility while 8.3 percent (12) respondents had no water storage facilities. Seventy-nine respondents provided information on their status of cleaning their water storage facilities. Of these, 34 respondents (43%) noted that they clean their water storage facilities every day, 16 respondents (20.3%) clean their water storage facilities at least once a week, 13 respondents (17.7%) clean at least once a month, 10 participants (12.7%) rarely clean their water storage facilities, 3.8% of the respondents never clean their water storage facilities.

On treating drinking water, 95.7% of the respondents pointed out that they treat their drinking water while 4.3% of the respondents don't treat their drinking water. One hundred and forty-five respondents provided information on the method of water treatment used. Of these, 136 respondents (93.8%) reported to boil their drinking water, 5 participants representing 3.5% filter their water, 0.7% add chlorine to their water while 1.4% leave their water in the sun to settle before drinking it. In drinking bottled water, 30 respondents (31%) out of the 96 participants who responded to this noted that they didn't drink bottled water while 66 participants (69%) noted that they drink bottled water.

Cost of 20-litre Jerry-can of water

The study was also interested in establishing the cost of water in the survey areas. The price of a 20-litre jerry-can of water ranged between UGX 50 and UGX 1,000. The majority of the respondents noted that a 20-litre jerry-can of water cost UGX 200 as illustrated in figure 2.

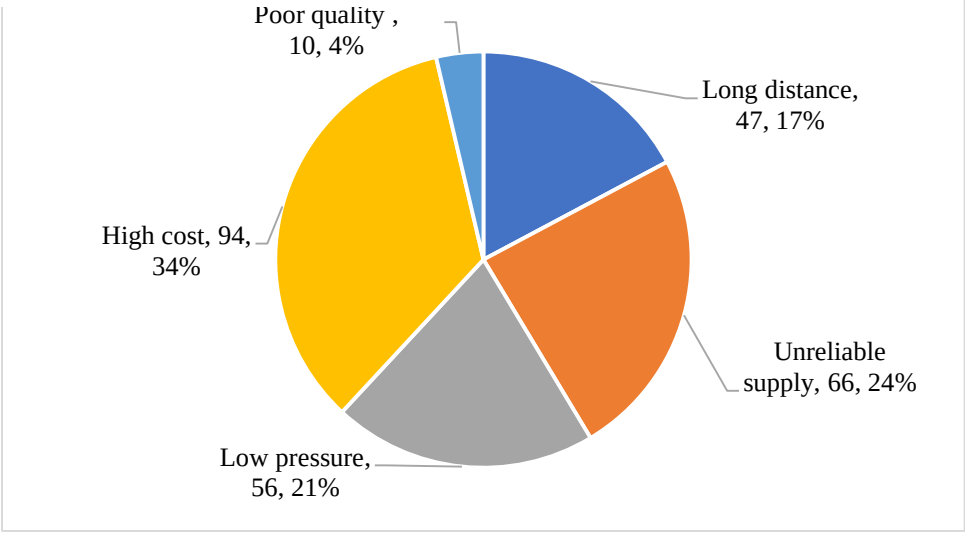
Figure 7: Prices of 20-liter water jerry-can



Main challenges of accessing water

The respondents were asked about the challenges they faced in accessing water. The challenges faced included; long distance to obtain water, low pressure, unreliable supply/regular shortage, high cost/price was too high, and poor quality. On this particular section on main challenges faced by the respondents in accessing water, most participants were found to face more than one challenge. See figure 8 for details.

Figure 8: Main challenges affecting access to water



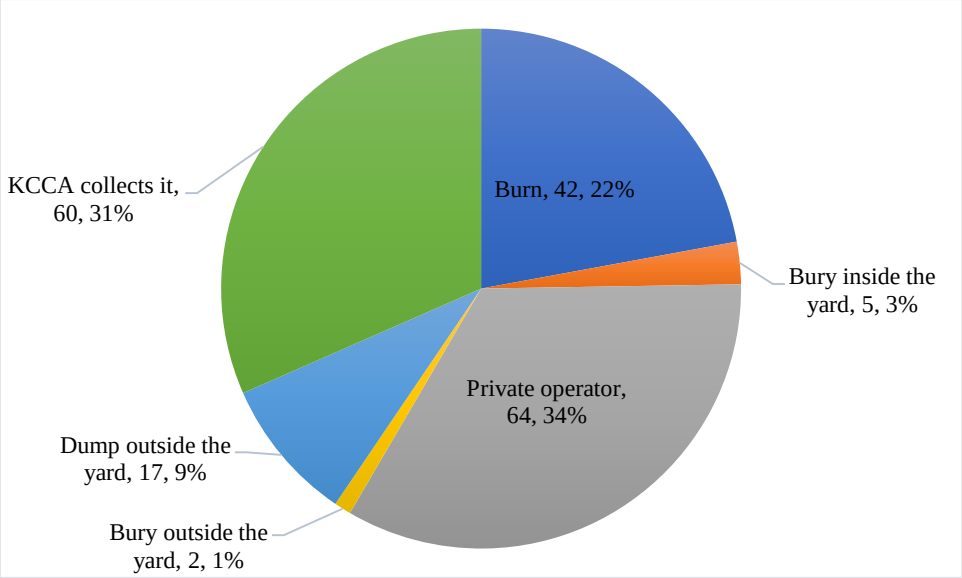
From figure 8, it was observed that high cost of water was the main reported challenge faced by the respondents with 94 respondents (34%), unreliable supply was the second highest challenge face with 66 respondents (24%), Low pressure as a challenge had 56 respondents (21%), long distance had 47 respondents (17%) while poor quality was the least reported challenge with 10 respondents (4%).

3.2.2 Sanitation

Disposal of solid waste

On disposal of solid waste, respondents had multiple answers to choose from and these included; burning, bury inside the yard, private operator comes to collect it, bury outside the yard, dump outside the yard, KCCA collects it, and any others which they were asked to specify. From figure 4, it was observed that the majority of the respondents-64 (34% of the respondents) noted that a private operator collected their solid waste, 60 respondents (31%) noted that KCCA collects the solid waste, 42 respondents (22%) burn their solid waste, 17 respondents (9%) dump their solid waste outside the yard, 5 respondents (3%) bury inside the yard while 2 respondents (1%) burry their solid waste outside the yard.

Figure 9: Disposal mechanisms of solid waste

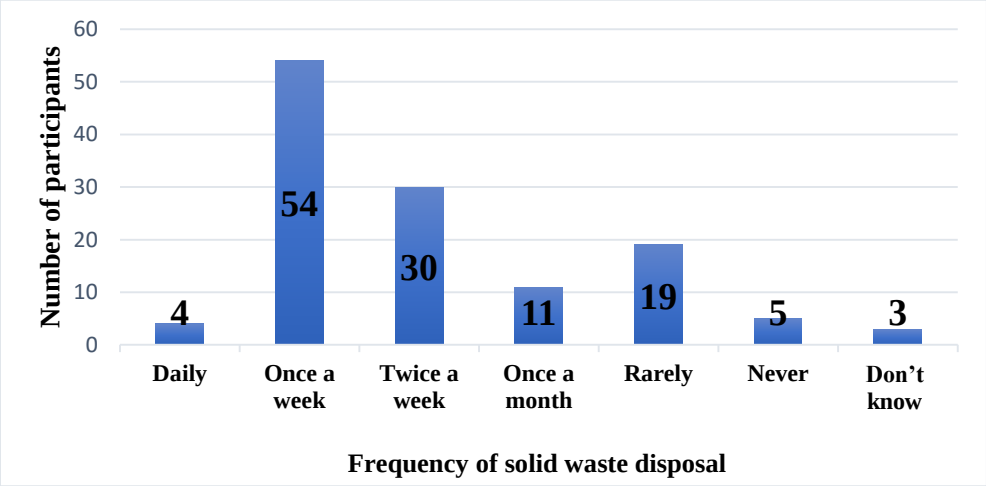


Frequency of solid waste collection

On frequency of solid waste collection, respondents were to choose from daily, once a week, twice a week, once a month, rarely, never, and don't know. One hundred and twenty-six (126) respondents provided answers to this.

From figure 10, it was observed that the majority of respondents (54 respondents) noted that they dispose of their solid waste once a week followed by 30 participants who noted to dispose their solid waste twice a week. Furthermore, from figure 10, it was observed that 5 respondents don't dispose off their solid waste while 3 participants didn't know.

Figure 10: Frequency of solid waste collection



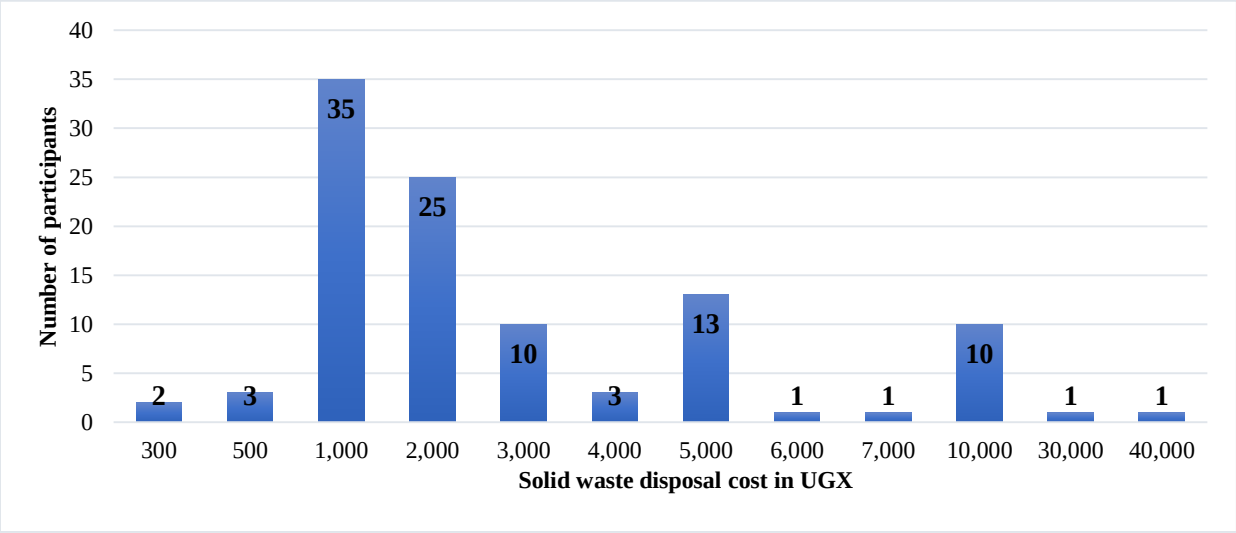
Cost of solid waste disposal

The cost of solid waste disposal ranged between UGX 300/= and UGX 40,000/=. The majority of the respondents (35 respondents) pay UGX 1,000/= monthly for solid waste disposal. See figure 11 for more details on the cost of solid waste disposal. Furthermore, on cost of solid waste disposal, two (2) respondents didn't know how much they incurred on solid waste disposal while 3 respondents noted that they freely dispose of their solid waste.

Infant in household

Respondents were asked on whether they had infants in their respective households. One hundred and forty-one (141) participants provided response to this. Of these, 65% (92 respondents) noted to have infants in their house holds while 35% (49 respondents) did not have infants in their respective households. Respondents were also asked on where they disposed off faeces the last time their infants defecated. The majority of the respondents, 75% noted that they disposed of their infants' faeces in their own latrines, 14% disposed of their infants' faeces in public toilet, 5% disposed of in neighbours' toilet and also disposal of faeces together with other solid waste was at 5%. Furthermore, 1% of the respondents noted that they disposed of their infants' faeces in a nearby water body.

Figure 11: Costs of solid waste disposal



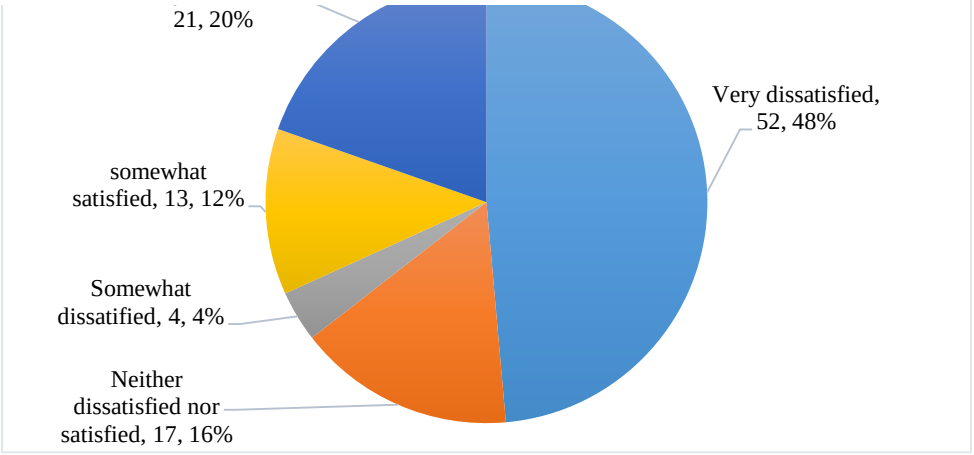
Disposal of liquid waste from kitchen and bathing

On disposal of liquid waste from the kitchen and bathing, 85 respondents noted that they dispose of liquid waste from the kitchen and bathing by draining it through a trench/furrow, 45 of the respondents throw in the compound while 6 do nothing but let the liquid waste/ stagnate in the compound. Relatedly, 6 respondents noted that they put the liquid waste in containers and dispose away from the compound.

Satisfaction with current solid waste disposal

The respondents were also asked about their levels of satisfaction with the current state of solid waste disposal. The levels of satisfaction included; very dissatisfied, somewhat dissatisfied, neither dissatisfied nor satisfied, somewhat satisfied, and very satisfied. One hundred and seven (107) respondents provided response on their levels of satisfaction with the current disposal of solid waste. As seen in figure 12, results indicate that the majority of the respondents-52 respondents (48%) are very dissatisfied with the current level of solid waste disposal, 21 respondents (20%) were very satisfied, 17 respondents (16%) were neither dissatisfied nor satisfied, 13 respondents (12%) were somewhat satisfied while 4 participants (4%) were somewhat dissatisfied with the current level of solid waste disposal.

Figure 12: Level of satisfaction with solid waste disposal

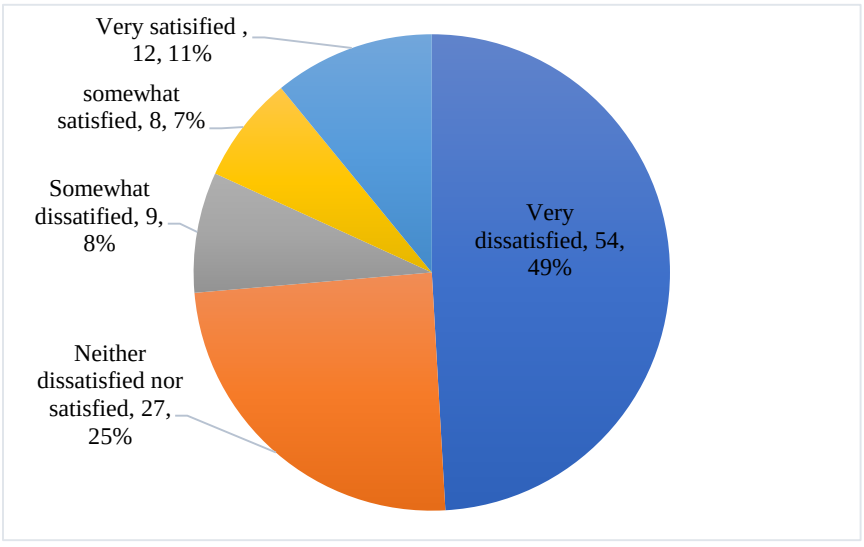


According to the dissatisfied respondents the main causes of the dissatisfaction were; heaps of garbage bring flies and bad smells (at 32%); lack of removal by KCCA (at 29%); High cost of service (at 24%); and neighbours dump garbage in our compound (at 15%).

Satisfaction with current liquid waste disposal

One hundred and ten (110) respondents provided response on their levels of satisfaction with the current disposal of liquid waste. In figure 13, results showed that 54 respondents (49%) were very dissatisfied with the state of liquid waste disposal; 27 respondents (25%) were neither dissatisfied nor satisfied; 12 participants (11%) were very satisfied, 9 respondents (8%) were somewhat dissatisfied, while 8 respondents (7%) were somewhat satisfied.

Figure 13: Level of satisfaction with liquid waste disposal



According to the dissatisfied respondents the main causes of the dissatisfaction were; smell

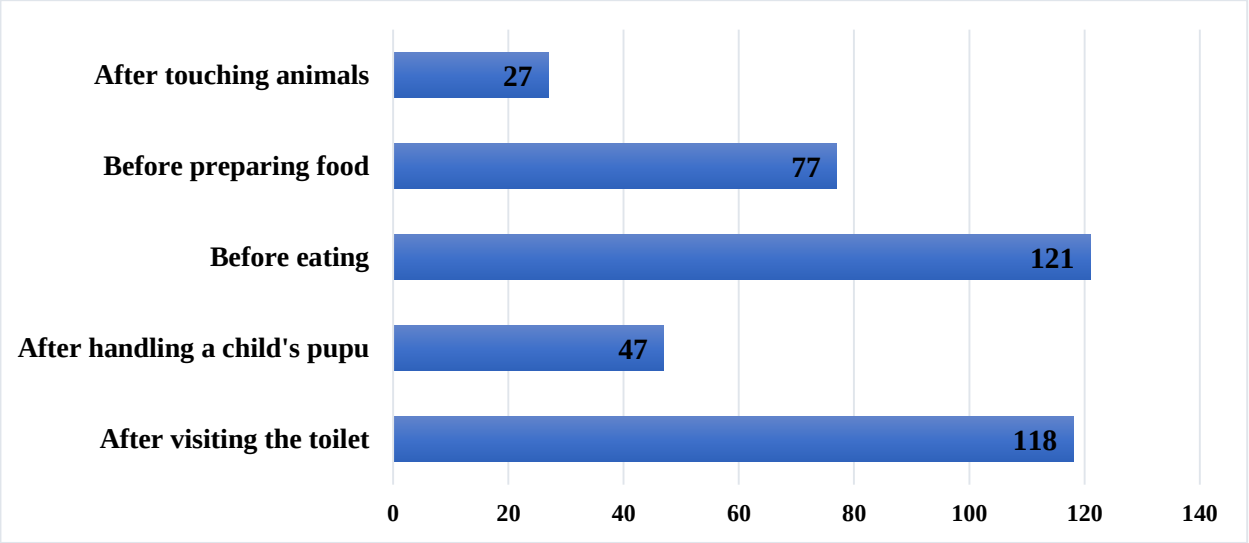
(32%); Causing diseases (20%); bringing flies (29%); and causing discomfort at 19%. Others include bring mosquitos.

3.2.3 Hygiene

Hearing about hygiene information

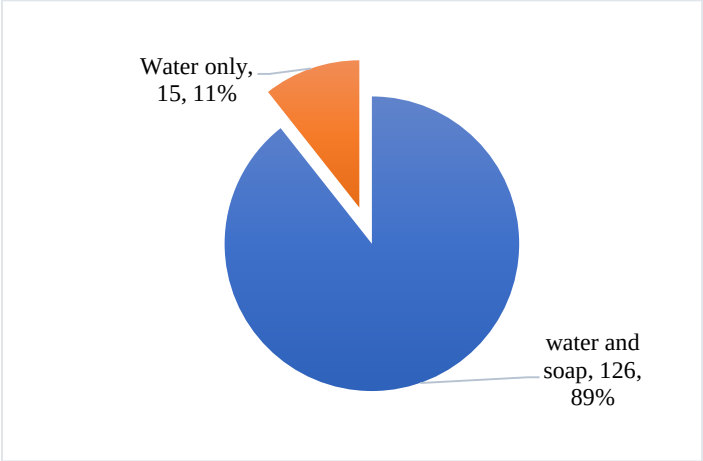
One hundred and thirty-four (134) respondents provided information on hearing about any information on hygiene. Of these, 56 respondents (42%) noted that they had never heard about any hygiene advice while 78 respondents (58%) revealed to have heard about hygiene information. Of those who have heard hygiene advice before, the advice was on collecting garbage and keeping the environment clean, drinking clean water, using a latrine, washing hands with soap, food hygiene, trapping waste water and cleaning latrines among others.

Figure 14: Times when one washes their hands



On washing hands, respondents gave multiple answers. The majority of the responses were in favour of washing hands after visiting the toilet and before eating food. See figure 15 for distribution of responses on hand washing.

Figure 15: Hand washing



For respondents who wash their hands, 126 respondents (89%) use water and soap for washing their hands while 15 respondents (11%) use only soap in washing their hands.

On location of the hand washing facilities, 59% of the respondents noted that their hand washing facilities are located next to the latrines, 29% of the respondents noted that their hand washing facilities are located inside houses or bathrooms while

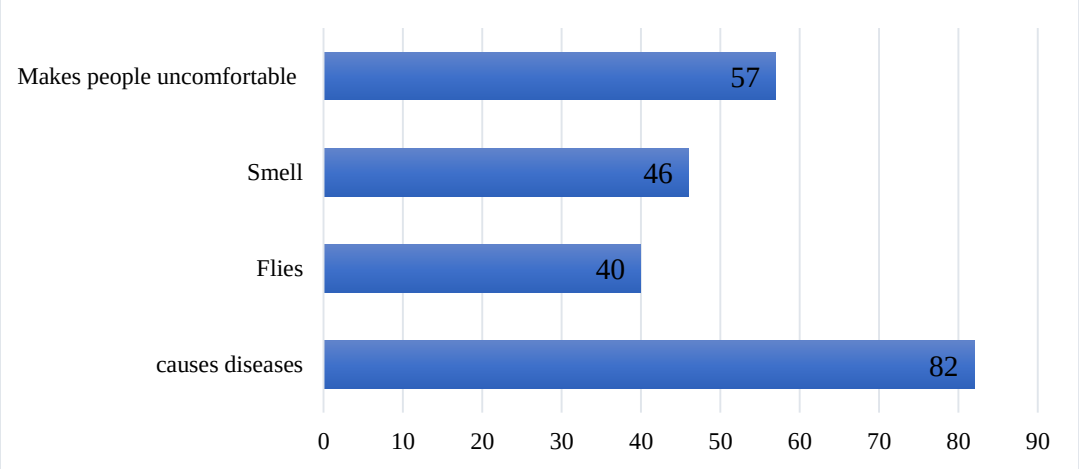
11% of the respondents noted that presence of hand washing facilities at their places of work and worship.

On the importance of washing hands, 136 participants responded of whom 135 respondents noted that it was important to wash hands while only one respondent confessed not knowing the value of washing hands. For those who agree with washing hands, they gave various advantages of washing hands which included; removing dirt, preventing diarrhoea and other diseases, preventing dirt from getting into mouth/dirt among others.

Participants also responded on the threats brought about by poor hygiene to them and their families. Respondents gave multiple answers as indicated in figure 16.

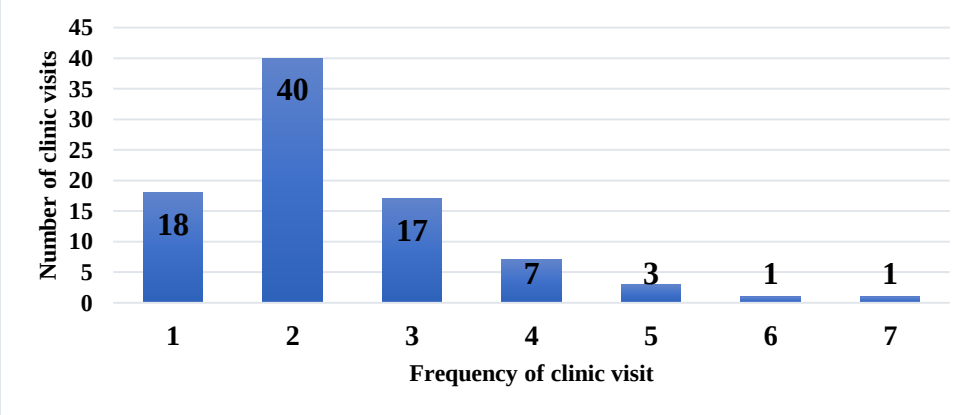
In the last six months as at 14th, January 2020, respondents noted some of the diseases that have attacked their households which include diarrhoea, malaria, intestinal worms, itching/skin problems, cough, flue, asthma among others. Households with members suffering from malaria in the last six months as at 14th, January 2020 were 102 (54%), Diarrhoea were 57 households (30%), itching skin had 18 households (10%) and intestinal worms had 6 household (3%). Others like flue, cough and asthma were reported in 6 households (3%). From the analysis, malaria remains a major cause of morbidity in Uganda.

Figure 16: Threats brought about by poor sanitation and hygiene



On visiting a clinic in the last six months as at 14th, January 2020, 137 respondents provided response to this.

Figure 17: Clinic visits made in last 6 months as at 14th Jan 2020



Of these, 77 respondents (56%) noted that some of their household members had visited the clinic in the last six months as stated in this report while 60 respondents (44%) noted that none of their household

members had visited the clinic in the last six months as stated in this report. See figure 17 on the numbers and frequencies of clinic visits.

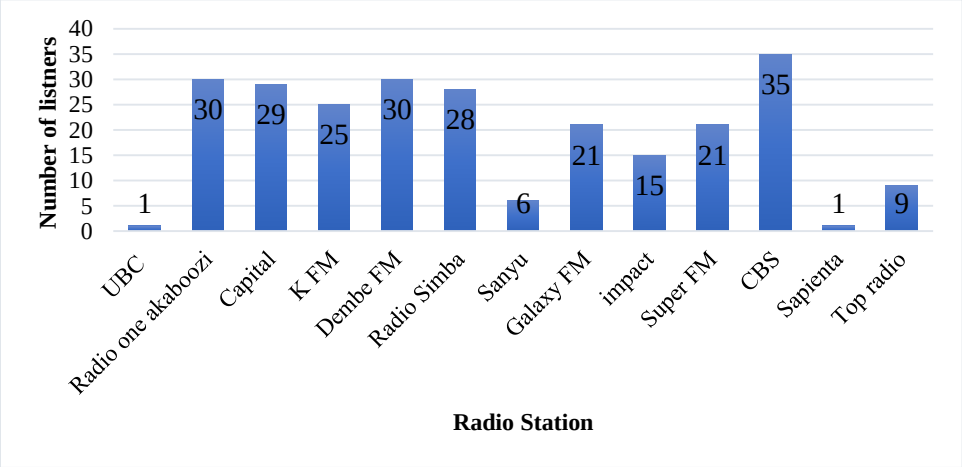
From figure 17, it was observed that 40 households reported that some of their household members visited the clinic 2 times in the last six months, 17 respondents noted that some of their household members visited the clinic 3 times in the last six months, 18 respondents noted that some of their household members visited the clinic once in the last six months.

3.2.4 Access to Information

Radio

One hundred and forty-three (143) respondents noted that they listen to radio. The majority of the respondents listen to radio daily-101 respondents, 8 respondents listen to radio on a weekly basis, 1 respondent listens to radio less than once in a week while 33 respondents rarely/never listen to radio. From figure 13, it was observed that CBS radio was the most listen to radio station with 35 listeners of the interviewed respondents followed by radio one Akaboozi and Dembe FM each with 30 listeners of the 143 respondents. On the other hand, UBC radio and Sapienta FM are the least listened to radio stations. See figure 18 for details.

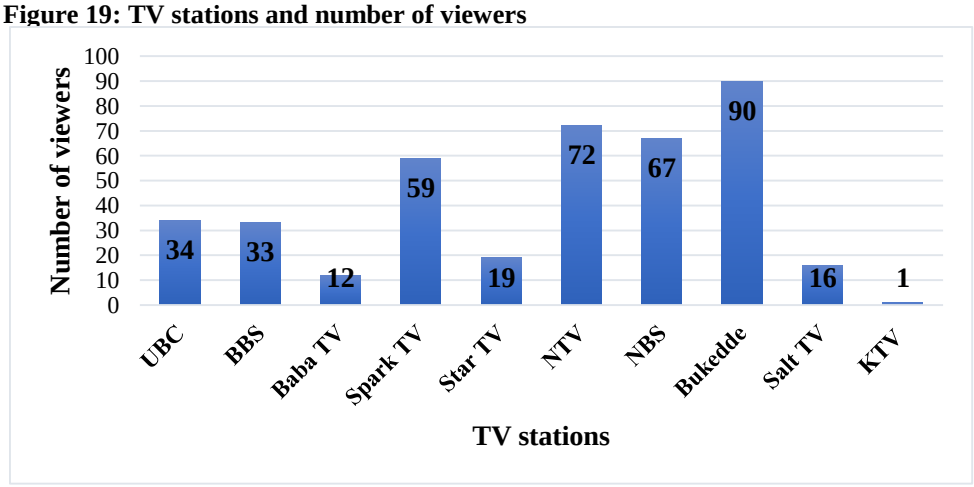
Figure 18: Radio stations and number of listeners



Television

One hundred and Thirty-Nine (139) respondents noted that they watch television. Results show that Bukedde TV has the largest number of viewers at 90 followed by NTV with 72 viewers and NBS with 67 viewers. KTV on the other hand has the least viewership with just one viewer from the interviewed respondents. See figure 19 for details on number of listeners by TV station.

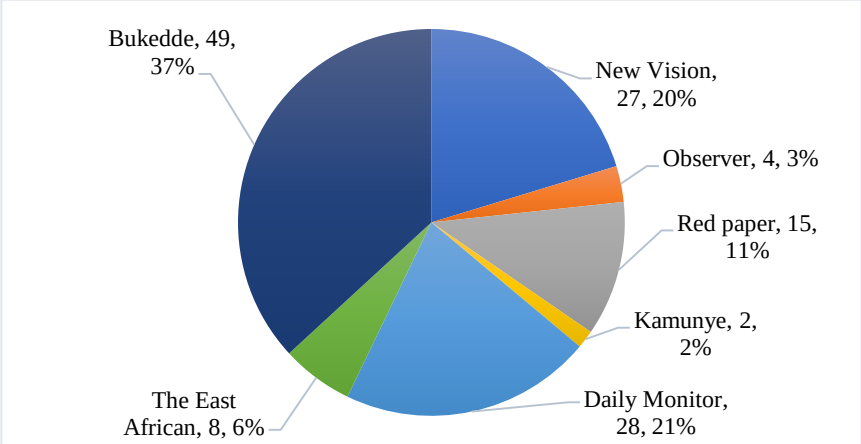
Figure 19: TV stations and number of viewers



News papers

One hundred and thirty-five (135) respondents noted that they read newspapers. Of these, 15 respondents read newspapers on a daily basis, 10 respondents read on a weekly basis, and 7 respondents read the newspapers less than once a week. On the other hand, 63 respondents rarely read newspapers and 40 respondents never read newspapers.

Figure 20: Newspapers and number of readers



Bukedde newspaper was the most read with 49 readers (37%), Daily Monitor was the second most read with 28 readers (21%) and New vision was the third most read newspaper with 27 readers (20%). See figure 20 on the readership details for other newspapers.

Exposure to hygiene and/or sanitation information or outreach campaigns in your community

One hundred and thirty-seven (137) respondents responded to whether they had exposure to hygiene and/or sanitation information or outreach campaigns in their community or not. Of these, 64 respondents (47%) were exposed to hygiene and/or sanitation information or outreach campaigns while 73 respondents (53%) were not exposed to hygiene and/or sanitation information or outreach campaigns. For those who were exposed to hygiene and/or sanitation information or outreach campaigns, it was noted that these were provided by area local councils, schools, Mengo Hospital, KCCA, Victoria Hospital, Village Health Teams (VHTs) among others.

3.3 Citizen Perspectives

What was going well

Nakawa

- Garbage trucks come a bit more regularly
- Rubbish collection was better especially the collection of plastic bottles
- The river drainage was a bit better after stone paving
- There are also people with big tanks that sale rain water.
- There are more taps with water flowing. Now more reliable and does not disappear as it used to.
- There was a protected spring which the residents resorted to when water is not flowing in the taps.
- Walakira well was cemented and protected
- Zoning areas of work into market area and repair areas has improved sanitation

Rubaga

- Hygiene officials sensitise us to keep clean latrines
- KCCA occasionally collects rubbish.
- People have access to commercial water cheaply between UGX 100 – 200 a jerrycan
- Safe protected wells
- We harvest and keep rain water
- We keep our surroundings swept before going out of our homes.
- We pay people to collect our rubbish

Kawempe

- Good hygiene practices help us in the prevention of sicknesses like typhoid, cholera and diarrhoea etc.
- Some of the garbage was used for making charcoal in our homes
- Water was used as an Income Generating Activity in our community.
- We use some of the garbage as fertilisers in our gardens
- We use water for washing cars
- We use water in making of bricks

The challenges

Nakawa

- All kinds of garbage are thrown in the drainages
- Latrines are so high for the PWDs
- People were using the railway line as a dumping ground which was hazardous
- Polythene bags (Kavera) were still a big problem. They were being thrown anywhere with all kinds of content.
- Sometimes, rubbish was being collected after a long time of over flowing.
- The paved areas of the drainage that break is never repaired
- The price of water was considered to be quite high. It was at UGX 50 two years previous, but was now between UGX 200 -300.
- There were so many stray dogs that scattered rubbish in polythene bags.
- Water pipes were being cut and people collected water illegally. This was causing water to stagnate, causing hygiene problems.

Lubaga

- Gutters were silted
- Public toilets were not clean enough
- There was dumping of garbage in vacant plots
- There was no planning for rain water
- UWSC were leaving sewerage to overflow for a long time.
- "We do not have enough garbage bins".
- "We experience flooding in our homes".
- "We never see water officials bringing water to our places".

Kawempe

- As PWDs, we have to use assistants to help in collecting water or disposing off of garbage
- Delay to pick garbage causes sickness in our community
- "During dry seasons, it is hard for us to cross the roads in search for wells and swamps for water".
- Garbage brings bad smells in our communities
- Garbage brings flies which causes diseases in our homes.
- It takes long to collect rubbish by KCCA and other private companies
- Landlords end up chasing us away due to poor hygiene in our homes
- "No visitors will come to your home when the environment is not clean".
- Our children are always falling sick due to drinking un-boiled water
- Our children are exposed to sexual harassment at different wells
- Our children fight at the wells in search for water and in the process, they end up losing Jerrycans and other water collection containers
- Our water sources are always dirty during the rainy season which makes us sick.
- PWDs face a lot of discrimination in access to a range of facilities in the community.
- There are limited garbage collection points in our communities
- "There is no consideration for PWDs while in long queues for water".
- "Water access is on and off making women suffer long distances to collect water from the wells".
- Water distances are still far off for most PWDs
- We move long distances to collect our water.
- "When there is no water in our areas, ladies are infected with diseases due to lack of water". to clean our underwear.
- Women are the only ones who collect water.

4. KEY CONCLUSIONS

This study has established that there has been an overall though modest increase in the Water and Sanitation budget at the national level over the last 4 years from UGX 1,265.81 in FY 2017/18 to UGX 1,351.04 proposed for the FY 2020/21. However most of the budget has been retained by the Ministry of Water and Environment UGX 1,190.46 (88%), while the budget for KCCA has stagnated at UGX 15.93 Bn (1.18%) of the national budget for FY 2020/21. That for Local governments has stagnated at UGX 59.3 Bn (4.4%) for both 2019/20 as well that proposed for FY 2020/21.

Significant challenges within the three divisions of Kawempe, Nakawa and Rubaga for WASH were found to centre on the high cost of water, poor waste management and high dissatisfaction by citizens on the management of both solid and liquid waste disposal by the KCCA. A significant percentage of respondents (42%) noted not to have heard about hygiene information also luckily, a significant percentage (89%) were found to wash their hands with soap and water.

A significant percentage of respondents (56%) were found to have had a household member visiting a clinic in the last six months. The biggest ailment in this period was malaria which had afflicted 54% of the respondents.

These findings all point to the fact that government does still have a big job of having the financing of WASH impacts reaching the ordinary people in the peri urban areas targeted by the study.

5. RECOMMENDATIONS

5.1 General

- The sector should introduce pro-poor measures in the institutional tariff by disaggregating public institutions with a reduced tariff for public schools and healthcare facilities. This is in line with the "Leave No One behind" ambition as per the sector commitment to the Sustainable Development Goals (SDGs) to meet the needs of the different excluded groups within society.
- The sector should also increase on the clean water distribution points in the surveyed divisions of Kawempe, Nakawa and Rubaga to serve more people and perhaps this can bring down the overall cost of public water supply.
- It is also important to take care of the special needs of women, children and persons with disabilities especially related to distance to the nearest clean water facility as well as accessibility and use by People with Disabilities.
- There is need to provide more public toilet facilities that are also affordable, accessible and usable by persons with disabilities.
- Sanitation and Hygiene needs an independent vote within the priority sectors of water, with particular investment in preventive interventions especially community mobilization as well as menstrual hygiene management.
- The allocation to Department of Public Health and Education (DPHE) towards environmental sanitation including solid waste management as well as operation and maintenance of public sanitation facilities be doubled to 16% of KCCA's total budget to increase efficiency of solid waste management to approximately 70% while improving operation and maintenance of public sanitation facilities.

5.2 Recommendations by Specific Gender Groups

Women

- "Bring us garbage collection vehicles to pick it from selected points in our community".
- "Build for us health centres for easy accessibility".
- "Build for us public toilets/latrines in our community".
- "Ladies in our community should be sensitised on hygiene and sanitation".
- "Provide for us sanitary pads for free since condoms are also distributed for free".
- "Provide for us taps and boreholes in our communities".
- "Rubbish should be collected regularly".
- "The cost of water and garbage collection should be reduced".

- "The drainage should be enlarged".
- "There is need for more sensitisation on sanitation to improve on our rubbish collection".
- "We need some training in handiworks".

Persons with Disability

- "Bring water sources nearer PWDs to improve accessibility".
- "Construct a public utility which is accessible for PWDs. The ordinary toilets are too high for PWDs".
- "Desilt and collect rubbish from the drainage at least once a week".
- "Increase the number of taps to build competition and bring down the price of water to at least UGX 100".
- "Put a garbage collection point or skips in different locations".
- "PWDs should also be involved in their Local Council decision making processes".
- "Reduce/lower the cost of water for PWDs who do not have enough money".
- "There is need for more sensitisation on how to use public toilets".
- "There is need special treatment for PWDs in our community".
- "There is need to introduce IGAs for PWDs to improve their income and livelihood".
- "There is need to mainstream inclusion for PWDs in all spheres of community life".

Men

- "Construct for us public latrines in our communities".
- "Construct water sources in communities where our wives can access them easily".
- "Dumping of rubbish along the railway line, especially of medical waste should be banned".
- "Every household should have a rubbish/garbage bin".
- "Garbage trucks should collect every day".
- "Get dumping containers in our communities".
- "Need for cleaning water sources in our area".
- "Polythene bags should be regulated or assign a single collector for only polythene bags".
- "Sensitise communities on good hygiene practices especially for our wives".
- "Stray dogs should be killed".
- "The price of water should be reduced to at least UGX 100".
- "There is need for the construction of more water channels in the slum areas".
- "Water and sewerage pipes that have broken should be repaired in good time".
- "We need water harvesting tanks in our area".

5.3 Key Messages

- Low household incomes constrain investment in sanitation improvement. Targeted subsidy options, therefore, should be carefully considered to support universal access to services[19].
- Funding to local governments needs to be increased, to enable them to fulfil their sanitation mandate.
- Community mobilisation programs should be expanded with sustained follow-ups, to stimulate demand for improved sanitation, to all districts.

[19] World Bank 2018

- A major investment program is needed, along with ongoing funding support, to improve schools' sanitation.
- Investment is needed to improve sludge and wastewater treatment capacity in urban areas.
- A comprehensive and integrated national capacity building program that gives emphasis to supporting implementation by local government of its sanitation responsibilities needs to be developed.
- Lower the cost of Public Piped Water to at least UGX 100 for end users.

REFERENCES

1. *MWE Sector Performance Reports 2017 - 2019*
2. *National Budget Framework Paper 2020/2021*
3. *Ministry of Water and Environment Budget Framework Paper 2020/2021*
4. *GAPR 2018*
5. *World Bank, 2018, Reviewing Sanitation in Uganda to Reach Sustainable Development Goals*

6. ANNEXES

Annex 1: Household Survey Questionnaire

A MAPPING STUDY FOR EVIDENCE GATHERING AND DEVELOPMENT OF FACT SHEETS ON WATER, SANITATION AND HYGIENE BUDGET ALLOCATION IN KAMPALA AND UGANDA AT LARGE

HOUSEHOLD SURVEY QUESTIONNAIRE

Complete before entering household	
Questionnaire No.	[Enter Questionnaire No.]
Enumerator Name	[Enter your name]
Interview Date	[Enter date]
Division	[Enter Division Name]
Parish	[Enter Parish Name]
Village	[Enter Village Name]
Start Time	[Enter start time]
GREETING	
Hello, my name is [NAME] and I am conducting a survey on behalf of the Community Integrated Development Initiatives (CIDI) to collect information on water and sanitation issues in Kampala and the country at large to inform upcoming projects. We are visiting many households in different parts of Kampala, namely in the Divisions of Kawempe, Nakawa and Rubaga. We would like to ask some questions about water, sanitation and hygiene practices and needs. This will take less than 20 minutes. Information collected was kept confidential.	
Informed Consent: May I ask you a few questions?	
Yes (Continue to signature)	No (Thank respondent and end survey)
Informed Consent - Signature of respondent	[Record respondent's signature]
What is the respondent's role in the household?	
Head of Household	Spouse
Child	Other Relative (Specify)
No Relation (Specify)	

	WATER AND WASTE MANAGEMENT		
W1	**What is the main source of domestic water in your household? (Domestic water includes water for drinking, cooking and washing)** *Tick only one*		
	Piped water into dwelling	Piped water into plot/yard	
	Public tap/standpipe	Borehole	
	Dug well	Rain water harvesting	
	Bottled water	River/stream/ponds (surface water)	
	Other (specify)		
W2	**Do you have water storage facilities in your household?**		
	Yes	No	If no move to Question W3
W2a	**Is your water storage facility covered?**		Answer if W2 = Yes
	Yes	No	
W2b	**Do you clean your water storage facility?**		Answer if W2 = Yes
	Yes	No	
W2c	**How frequently do you clean your water storage facility?**		Answer if W2b = Yes
	Every day	At least once a week	
	At least once a month	Rarely / Never	
W3	**Do you treat your DRINKING water?**		
	Yes	No	If no move to Question W3b
W3a	**How do you treat your drinking water? (Select all that apply)**		Answer if W3 = Yes
	Boiling	Add Chlorine/Chemical	

	Filtration	Leave in the sun	
	Let it stand and settle	Other (specify)	
W3b	**Do you drink primarily bottled water?**		Answer if W3 = No
	Yes	No	
W3c	**What is the cost of your water per 20-liter Jerrycan?**		
	[Enter Figure in UGX]		
W4	**What are the main challenges you face in obtaining domestic water? (Select all that apply)**		
	Long distance to obtain water	Unreliable supply/regular shortage	
	Low pressure	High cost/price is too high	
	Poor quality	Other (specify)	
W5	**How do you dispose of your solid waste?** *(Rubbish, garbage, food waste, animal waste. NOT human waste) (Select all that apply)*		
	Burn	Bury outside the yard	
	Bury inside the yard	Dump outside the yard	
	Private operator comes to collect it	KCCA collects it	
	Other (specify)		
W5a	**How frequently is your solid waste collected?**		Answer if W5 = Private operator or KCCA collects
	Daily	Once a week	
	Twice a week	Once a month	
	Rarely / Never	Don't know	
W5b	**How much does it cost for collection of solid waste? (per collection) (UGX)**		
	Enter Amount in figures		Answer if W5 = Collection (private or KCCA)
W6	**Is there an infant in the household?**		

	Yes	No	If Yes goto W6a;If no, go to W7
W6a	**The last time he/she defecated, where did you dispose of the faeces?**		
	In own latrine	In the open ground	
	In a nearby water body	In a neighbour's toilet	
	In a public toilet	Other (specify)	
W7	**How do you dispose of the liquid waste from your kitchen and from bathing? (Select all that apply)**		
	Throw in the compound	Drain it away from the compound through a furrow/trench	
	Nothing - let it stagnant in the compound	Put in containers and dispose away from compound	
	Don't know	Other (specify)	
W8	**How satisfied are you with your current solid waste disposal?**		
	Very dissatisfied	Somewhat dissatisfied	
	Neither dissatisfied nor satisfied	Somewhat satisfied	
	Very satisfied		
W8a	**What are the main reasons for your dissatisfaction with solid waste disposal? (Select all that apply)**		
	Heaps of garbage bring flies and bad smells	Lack of removal by KCCA	
	High cost of service	Neighbours dump garbage in our compound	
	Other (specify)		
W9	**How satisfied are you with your current liquid waste disposal?**		
	Very dissatisfied	Somewhat dissatisfied	

	Neither dissatisfied nor satisfied	Somewhat satisfied		
	Very satisfied			
W9a	**What are the main reasons for your dissatisfaction with liquid waste disposal? (Select all that apply)**			
	Smell	Causes disease		
	Brings flies	Causes discomfort		
	Other (specify)			
	HYGIENE AND HEALTH			
H1	**Have you heard about any hygiene advice before?**	Yes	No	If yes go to H1a; If no, go to H2a
H1a	**What hygiene advice have you heard before? (Select all that apply)**			
	Drink clean water	Use a latrine		
	Wash your hands with soap	Food hygiene (cover your food, etc)		
	Other (specify)			
H2a	**When do you wash your hands? (Select all that apply)**			
	After visiting the toilet	After handling a child's pupu		
	Before eating	Before preparing food		
	After touching animals	Other (specify)		
H2b	**What do you use to wash your hands?**			
	Water only	Water and soap		
	Water and ashes	Other (specify)		
H2c	**Where is the hand-washing facility located within the household?**			
	Inside or next to the latrine	Inside the house/bathroom		
	Outside or next to the latrine			
H3	**Do you think washing your hands is important?**			
	Yes	No		If no, go to H4

H3a	**Why do you think washing your hands is important? (Select all that apply)**		
	Removes dirt	Prevents diarrhea and other diseases	
	Prevents dirt from getting into mouth/food	Don't know	
	Other (specify)		
H4	**In your view, what are the threats brought about by poor sanitation and hygiene to you and your family? (Select all that apply)**		
	Causes disease	Smell	
	Flies	Makes people uncomfortable	
	Other (specify)		
H5	**What are the main diseases that have faced your household in the last six months? (Select all that apply)**		
	Diarrhoea	Malaria	
	Intestinal worms	Itching/Skin problems	
	Other (specify)		
H6	**Have you or has any member of your household visited a clinic in the last six months for stomach ailments?**		
	Yes	No	
H6a	**How many times have you or any member of your household visited the clinic in the last six months?**		
	[Enter number] [Total number of visits for the household]		
	ACCESS TO INFORMATION		
12	**How often do you listen to the radio?**		
	Daily	Weekly	
	Less than once a week	Rarely/Never	
I2a	**What radio stations do you usually listen to?**		
	Radio One Akaboozi	KFM	
	Capital	Dembe FM	

	Radio Simba	CBS		
	Sanyu	Radio One		
	Galaxy FM	Sapentia		
	Impact	Top Radio		
	Super FM	Other (Specify)		
13	**How often do you watch TV?**			
	Daily	Weekly		
	Less than once a week	Rarely	Never	
13a	**What TV stations do you usually watch?**			
	UBC	NTV		
	BBS	NBS		
	Baba TV	Bukedde		
	Spark TV	Salt TV		
	Star TV	KTV		
	Other (Specify)			
	How often do you read newspapers?			
	Daily	Weekly		
	Less than once a week	Rarely	Never	
	What newspaper do you usually read?			
	New Vision	Daily Monitor		
	Observer	The East African		
	Red Pepper	Bukedde		
	Kamunye	Other (Specify)		
15	**Have you ever been exposed to hygiene and/or sanitation information or outreach campaigns in your community?**			
	Yes	No		
15a	**Who conducted the campaign?**			Answer if I5 = Yes

	[Enter name of organization or agency]		
	OBSERVE GENDER OF RESPONDENT		
	Male	Female	
	Enter respondent's age (years)		[Enter age]
	Highest education level completed by head of household		
	No formal education	Primary education	
	Secondary education	Post - Secondary	
	University		
	Size of household - Number of people living in the household (people who eat together)		
	Number of adults above 18 years	[Enter number]	
	Number of children aged 6 - 18 years	[Enter number]	
	Number of children 5 years old and below	[Enter number]	
	Total household members	[Total]	
	Do you own this house?		
	Yes	No	
	Do you rent this house?		
	Yes	No	
	How long have you lived at this house? (years and months)	[Enter number]	
	What are the main recommendations you would like make to improve the water, hygiene and sanitation situation in your village?		
	Enter respondent comments 1.		

	2. 3.		
	Thank the respondent for his/her time and participation.		
	End Time [Enter end time of interview]		
	Is this interview complete? *[For the Numerator]*		
	Yes	No	
	Why isn't it complete? [Enter comments]		Answer if interview is not complete

The Community Integrated Development Initiatives thanks you for your time and for allowing to be part of this very important study. God Bless You!

Annex 2: Focused Group Discussion Guide

A MAPPING STUDY FOR EVIDENCE GATHERING AND DEVELOPMENT OF FACT SHEETS ON WATER, SANITATION AND HYGIENE BUDGET ALLOCATION IN KAMPALA AND UGANDA AT LARGE

FOCUSSED GROUP DISCUSSION (FGD)

Complete before starting the FGD			
FGD Category	[Enter FGD Category, e.g. Women, Men or PWDs]		
Enumerator Name	[Enter your name]		
Interview Date	[Enter date]		
Division	[Enter Division Name]		
Parish	[Enter Parish Name]		
Village	[Enter Village Name]		
Start Time	[Enter start time]	**End Time**	[Enter End time]
GREETING			
Hello, my name is [NAME] and I am conducting a survey on behalf of the Community Integrated Development Initiatives (CIDI) to collect information on water and sanitation issues in Kampala and the country at large to inform upcoming projects. We are visiting many households in different parts of Kampala, namely in the Divisions of Kawempe, Nakawa and Rubaga. We would like to ask some questions about water, sanitation and hygiene practices and needs. This will take less than 20 minutes. Information collected was kept confidential.			
Informed Consent: May I ask you a few questions?			
Yes (Continue to signature)	No (Thank respondent and end survey)		
Informed Consent - Signature of FGD Head	[Record FGD Head signature]		
Number of Participants in the FGD	[Record number of participants]		

1. What are the good things about the Water, Hygiene and Sanitation Situation in your area?

2. What are some of the challenges you face with Water, Sanitation and Hygiene in your area?

3. What recommendations would you give to improve the Water, Sanitation and Hygiene situation in your area?

The Community Integrated Development Initiatives thanks you for your time and for allowing to be part of this very important study. God Bless You!

Annex 3: Pictures Highlighting the WASH Situation in the Divisions