

Child feces management in humanitarian context: How do mothers and caregivers in Ethiopia cope?

What is this research about?

The research was done to understand the specific needs of people suffering from incontinence and how child feces is being managed in humanitarian settings. The findings on incontinence is covered in the first brief of the research. This is the second brief and covers findings on child feces management in humanitarian context in Ethiopia. It summarizes findings from the research and provides suggestions on how mothers and caregivers can be supported to adequately manage their children's sanitation needs.

What did the researchers do?

IOM collaborated with the Norwegian Church Aid (NCA), to conduct the research among internally displaced persons (IDPs), refugees and their host communities in two regions in Ethiopia i.e., East Hararghe zone in Oromia region and Jewi refugee camp in Gambella region.

IOM and NCA gathered qualitative data through Key Informant Interviews and Focused Group Discussions. Data was analyzed, and results were documented in two reports for each region. This brief has been drawn from these reports and focuses on child feces management for children aged below 3 years.

What did the research find?

1. *Limited diversity and prohibitive cost of products for managing child feces.*

There is a small range of sanitary products available in the communities to help mothers and caregivers to adequately manage their children's feces. Most mothers and caregivers use pieces of clothes, plastic sheets, potties, and soap. Disposable and reusable baby diapers are also mentioned but they are reported to be unaffordable to most households. Moreover, reusable diapers are said to be usually in short supply. This compels caregivers (who can afford) to buy disposable products. Thus, posing environmental challenges with their disposal after use.

Some members of the communities' report to be using modified underwear and local diapers.

What you need to know

Young children's feces are considered harmless and are not safely disposed of, yet they are up to 5 times more hazardous compared to the adults' feces.

Unsafe disposal of child feces can cause diarrheal diseases which can lead to chronic malnutrition (stunting). Stunting affects the physical development and cognitive capabilities of the affected children, lessen their capability to be productive and other adverse life-long health impacts.

In Ethiopia:

- ☞ only about one-third of households with young children dispose of their children's feces safely.
- ☞ diarrhea is the major cause of mortality for children accounting for 23% of all under-5 mortalities and more than 70,000 child deaths annually.
- ☞ about 40% of children in Ethiopia are stunted with diarrhea among the major contributing factors.

2. *Open defecation and open field disposal of children's faeces*

Due to lack of latrines and alternative means to dispose of faeces, some caregivers dispose of their children's faeces in the field or allow them to defecate in the open fields. Open defecation particularly in the refugee camps is due to most toilets filling up. Also, the available toilets are neither child-friendly nor disability friendly adding another layer of challenge for children living with disabilities.

3. *Excessive cost related to purchase of water and soap to wash soiled clothes.*

Caregivers decry the extra costs they incur in purchasing soap to wash and clean up clothes soiled by their children. For example, one caregiver indicated that she buys up to five bars of soap in a month just for cleaning up her children's clothes. Additionally, inadequate water supply has often compelled households into buying more water incurring further costs.

4. *Sanitation for children with disabilities.*

Children living with disabilities face additional challenges related to restricted mobility including constraint access to

facilities due to for example lack of wheelchairs. Additionally, the latrines are constructed without consideration of their special needs and are not children friendly. These children also lack adequate supply of sanitary clothes, water, and soap.

How do mothers and caregivers cope with the challenges?

- Most primarily use pieces of clothes to manage urine and feces of their young children and later wash and re-use.
- They encouraged their children who are able to walk to urinate and defecate around the compound.
- Some mothers and caregivers reportedly use bedpans.
- Disposing of feces collected using pieces of clothes, from the outdoor areas and bedpans, in the toilet, at the back of the households, or in the open fields for those households that lack toilet facilities in the refugee camps.
- Few caregivers, mainly from the host communities, reported that they use diapers particularly at night-time and when taking children out of their homes. They either dispose of used products in the toilet facilities, burn or dispose them of with other household wastes.

How can you use this research?

About the researchers

The International Organization for Migration (IOM) - UN Migration is the leading intergovernmental organization in the field of migration and is committed to the principle that humane and orderly migration benefits migrants and society. As the leading UN organization working on migration, IOM is committed to saving lives and helping populations move out of harm's way. We protect and assist those displaced or stranded by crisis, and support populations and their communities to recover. We work to mitigate adverse drivers that force people from their homes, help build resilience and focus on reducing disaster risks so that movement and migration can be a choice.

Norwegian Church Aid (NCA) is a Norwegian humanitarian and ecumenical organization with headquarters in Oslo. It was traditionally affiliated with the state Church of Norway but is now independent. Norwegian Church Aid works together with people and organizations across the world to eradicate poverty and injustice by helping those whose needs are greatest, regardless of ethnicity, creed, political or religious affiliation.

This research snapshot is based on the needs assessment reports by NCA and IOM conducted in Gambella region and East Hararghe zone of Oromia region and Dire Dawa city respectively. The research was funded by Innovation Norway from the Norwegian Government. However, the views expressed do not necessarily reflect the Norwegian Government's official policies.

Humanitarian response actors, the government relevant agencies can work collaboratively with the private sector to develop environment friendly sanitary solutions that are cheap, accessible, and acceptable by mothers and caregivers of children in humanitarian context.

Open defecation remains a big challenge and humanitarian response actors, and government agencies should continue working with the targeted communities to educate them on the dangers open defecation and poor management of child feces pose to public health and the environment.

WASH actors should make WASH facilities and supplies accessible to mothers and caregivers of young children. They should provide child-friendly toilets that accommodates the needs of children living with disabilities. Water should be provided in sufficient quantities and soap distribution should consider more supplies for households with young children.

Limitations and next steps

The data collected was qualitative in nature and was only from a few selected sites in two regions. Therefore, it is difficult to generalize the findings of this assessment to the whole population in humanitarian context in Ethiopia.