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REPORT SWI/ROTARY MALAWI VILLAGES DRINKING WATER PROJECT Larry Siegel Visit to Chipaso, Malawi, April 1 to April 26, 2010

Summary: The initial purpose of my April 2010 visit to Malawi was to reorganize the project team at work on the Rotary funded Malawi Villages Drinking Water Project and to check on the project's progress. The project focuses on 10 remote villages in the Kasungu District of central Malawi and seeks to create a model for bringing safe drinking water to such villages in an affordable and sustainable manner.

In addition to site visits and meetings with the project team, there were meetings with Peace Corps Malawi, the Livingstonia Presbyterian Synod, Marion Medical Mission, Water Aid Malawi, UNICEF Malawi, DAPP Malawi, and Connect International. These discussions largely focused on gaining support for a Malawi-wide drinking water program based on point-of-use (household) water treatment solutions. In the course of these conversations, opportunities arose to expand the SWI/Rotary drinking water project in the Chilowamatambe TA (Traditional Area), and to make it a demonstration area for the larger, country-wide program. There was also agreement on a second demonstration area, the 8000 residents of Usisya in the Nkhata Bay District of northern Malawi. Further, the Development Aid from People to People (DAPP) program in the southern commercial center of Blantyre agreed to identify a focus community in southern Malawi.

Malawi Villages Project. In the fall of 2009, the Malawi Villages Drinking Water project installed 10 shallow wells in rural villages within the Chilowamatambe Traditional Area (TA), which is comprised of 323 rural villages and is overseen by a traditional chief. Prior to the new wells, these villages relied on open pits that provided highly contaminated water for all of their water needs. (The same is true for almost all the villages in the area.) Following completion of the 10 wells, hygiene and health education classes began in two of the project villages, and these classes are now extending to six more villages.

The project wells were installed with the help of Marion Medical Mission, a U.S. based non-profit that has installed some 12,000 shallow wells in Malawi, Zambia, and Tanzania. Discussions with



Old Well at Chisonkwe

Marion's field staff and its president, Tom Logan, who was visiting Malawi, led to an agreement that Marion join SWI in focusing on Chilowamatambe TA and the Usisya area as models for a larger Malawi-wide effort. This may mean that up to 50 more Chilowamatambe villages will receive new wells during 2010.

The approach in these villages is based on a self-help agreement. To participate, a village must



SWI Project Coordinator, Patrick Chimphamba, and Chisonkwe Well Committee

commit to providing 4000 bricks, 50 pails of sand, 50 pails of gravel, and to dig the new well. They must also form a well committee to maintain the new well. In return SWI and/or Marion commits to providing the cement needed to complete the well – usually 8 to 10 bags – and a hand pump. The cost of these items, together with a small stipend for local brick and a cement worker, is about \$350 USD per well.

SWI Project Team. To accommodate expanded work in Chilowamatambe TA, 3 new members were added to the SWI team. Two of them,

Frederick Chiza and Chimanga Stambo, will work with villages that need new wells, help them form village well committees, and provide health and hygiene classes. Mr. Stambo will also conduct classes on pump maintenance and repair. The third member, Cornelius Mvula, began a two-week well drilling and pump manufacturing class in late April. He will use this knowledge to test new prototype pumps and drill bits to see if they can reduce the cost of shallow wells in Chilowamatambe TA.

SWI Project Coordinator, Patrick Chimphamba, continues to supervise the overall effort. He is a medical para-professional with vast experience in the training of village health volunteers. For the past 2 years, Chimphamba has been assisted by Peace Corps Volunteer Audra De Vault. The two worked with Chief Chilowamatambe to identify villages for the project, oversee construction of shallow wells in those villages, and begin health and hygiene classes. De Vault completed her two years of Peace Corps service in mid-April, and her replacement, Colin Pearson, begins his service in mid-May. Since Peace Corps Volunteers have wide discretion in the projects they undertake, our plans for expanding the project team did not presume Colin's involvement, though he has already expressed interest in doing so,

SWI's experience in Malawi to date strongly suggests that village water and sanitation programs can have much greater impact if there is church involvement. The Presbyterian and Catholic Churches count some 65% of Malawi's population and are often the only organizations present in the remote villages that most desperately need help. New SWI team member, Frederick Chiza, is also the Chipaso Catholic Parish representative for the Chilowamatambe area, and the Presbyterian and Anglican parishes there are active in Marion Medical Mission's work. In the north, the Usisya project will be coordinated by Jim

McGill, the water and sanitation coordinator for the Livingstonia Presbyterian Synod. These church groups will be important in carrying the message to project villages that safe drinking water is vital to family health and economic progress.

300in6. SWI has been an advocate and promoter of the 300in6 initiative which seeks to address the drinking water and sanitation needs of 300 million of the world's poor in the next 6 years. 300in6 is headed by Henk Holtslag of Connect International Netherlands.

During my April visit, Henk visited our project, gave classes, and participated in several meetings to develop a larger, Malawi-wide approach. Malawi can be one of the first countries to reach the 300in6 goal by addressing at least 6 million of its residents with safe drinking water. The work in Chilowamatambe and Usisya can become springboards for the larger effort in Malawi and serve as showcases for what can be accomplished. The large international organizations that operate in Malawi, such as UNICEF, Water AID, and Catholic Relief Services have all expressed interest in 300in6 but wait to be convinced that it is a successful approach. The expanded effort in Chilowamatambe TA and the new work in Usisya may be the levers that gain the participation of these larger organizations.



Henk Holtslag, Connect International, giving class on his new silver sand filter

Conclusions. It became clear during the April visit that success in addressing drinking water needs for all Malawi rests on local success in Chilowamatambe TA. The expanded partnership with Marion Medical Mission will spread drinking water purification efforts into dozens of new villages this year, and the result should influence even the most jaded opinions. Additionally, the new effort in Usisya in the north brings the SWI approach to a large community of 8000 which now must rely on terribly contaminated water.

This bottoms-up approach is very much in the style of SWI work on Rotary funded projects in both Mexico and Malawi, and the outcome of lessons learned in those projects. Clearly, 2010 presents several important opportunities. It promises to see SWI's efforts to date scaled-up to a level that can influence similar efforts in other parts of Malawi. It promises to be a time when the health and hygiene education program now starting in Chilowamatambe can be documented and transferred to other parts of Malawi. Finally, with the expansion of the SWI project team and the involvement of the Presbyterian, Anglican, and Catholic churches in the Chilowamatambe effort there is the promise that this work can continue on its own momentum in years to come.



New SWI Team Member, Cornelius Mvula at Well Drilling School



Practice Well with Manual Drilling Rig



Hand Washing Class Teaching Aids (created by SWI supporter, Bob Schmolze)



Well Digging Students



Rope and Washer Pump Class



Sisters