

GENDER AND SANITATION IN JIGAWA STATE, NIGERIA: TOWARDS GENDER MAINSTREAMING IN HEALTH AND HYGIENE PRACTICES

AMINU FAGGE MOHAMMED PhD.

*Department of Sociology,
Bayero University, Kano*

Abstract

The research explores the sanitation and water related practices employed by four communities in Jigawa State, Nigeria. The major concern of the study is the analysis of the role of gender in the performance of sanitation practices, and specifically the role assigned to women in these vital aspects of hygiene and health related practices. Using the radical strain of feminist theory as a theoretical foundation, the paper analyses how the work of women is organized in the communities' water and sanitation practices, and how it is evaluated by the patriarchal culture of the Nigerian society. The mixed-method approach to data collection and analysis was employed due to the complex traditional nature of the communities studied. Thus, both quantitative and qualitative data were generated using survey questionnaires, focus group discussion and qualitative in-depth interviews. From the findings it is discovered that there is a progressive decline in health and sanitation standards in the research area. It is also revealed that more than 58% of the households do not have water in their toilets. 39.9% said they do not wash hand after defecation, while majority of women (64%) do not wash hand before cooking. Other findings indicate that Hausa women and children are socially assigned the role of ensuring the availability of clean environment and water for domestic use and sanitation. Men in the communities only educate, instruct or order women to carry out major sanitation practices. The policy implications raised by this research are centered on a proper evaluation of the work of women in water and sanitation practices, and the efforts that are needed to make women realize their potentials as contributors to and stakeholders in water and sanitation resources of the communities. Another policy implication is the major concern of feminist scholars for women empowerment through giving them responsibilities in decision making and leadership positions.

Keywords: *Feminist theory, Gender, Hausa Women, Hand Washing, Water and Sanitation*

Introduction

The Hausa rural communities found in northern Nigeria share relatively homogenous socio-cultural practices, religion (Islam) and ethnic (Hausa-Fulani) characteristics (Robson, 2004). Islamic teachings, which are the major anchors of socio-cultural behaviours in these communities, place great emphasis on hygiene practices aimed at maintaining ritual purity. Islamic teachings have emphasized two types of impurities, major and minor, which have been elaborated to the Hausa communities by Muslim scholars. The tenets of Islam have a profound effect on the hygiene practices of

the Hausa communities. Directed primarily at maintaining ritual purity, for the most part they provide a sound and culturally acceptable basis for the promotion of improved hygiene practice. According to Stacey (2009) Muslims are required to take care of their personal hygiene by cleaning their bodies, clothing and surroundings. She quotes a verse from The Holy Qu'ran, which says: 'Truly God loves those who turn to him in repentance and those who purify themselves' (Quran 2:222); and a Hadith (teaching of the Prophet), which states that 'cleanliness is half of faith.'

The United Nations (2006) has laid much emphasis on the need to seek for

solution to water-related issues by ensuring the participation of women in water-related development efforts. These efforts are particularly crucial in meeting the United Nation's Millennium Development Goals (MDG's). The UN document, which explores the relation between gender, water and sanitation, argues for the adoption of gender mainstreaming in water and sanitation projects in order to attain women's empowerment and participation in project leadership. Water and sanitation are crucial to development because proper sanitation and water provision greatly reduces some diseases and encourage school enrolment, especially among girls. Women are also saved from the onerous daily burden of fetching water. If these conditions are implemented, it may also lead to the promotion of gender equality and boost school enrolment rates; improved access to clean water also reduces diarrhea and other water-borne diseases. This study is thus aimed at assessing the extent of the participation of women in the sanitation practices of Hausa communities. The study also attempts an analysis of gender roles and their effects on the health and sanitation practices of the communities studied.

Hausa women and domestic activities

Some studies have discovered gendered distribution of work in both domestic and public spaces of Hausa society. In one of these studies, Robson (2004) examined the myriad of tasks that make up the domestic work of daily reproduction in Zarewa, a Hausa village in Kano State that lacks basic amenities, and boasts of only a defunct electrification scheme and an intermittently functioning piped water supply. Robson's study found that women perform most of these tasks, but children also do some of them. According to her observations:

Children help women with many domestic tasks, by performing domestic

chores both inside and outside the household compound... Most water for domestic work is drawn by women from wells within the compound, and children ... frequently report doing this work too (Robson, 2004, 204).

Field notes by the researchers also indicated that there is a clear gendered division of household labour in Hausa society with women responsible for the domestic sphere and men paying attention to farming and the public sphere. Children's contribution to farm labour is significant and school holidays in July and August are important in facilitating children's participation in farming during the sowing and growing season. In Zarewa boys reported doing agricultural work, and they were frequently observed collecting fodder for household animals from the fields or uncultivated bushland. It is also a common theme that boys are likely to under take more livestock care than girls. Girls in Zarewa, on the other hand, participate in the work of childcare that includes: feeding children and infants, bathing them, plaiting girls' hair, playing with or watching over children. Robson's study of rural Hausaland shows how children's work is regarded as low status, "not least because much of it is alongside or associated with women's work in the private sphere, but also because the market economy needs cheap sources of agricultural or market place labour" (Robson, 2004, 207).

Callaway's (1987) study of Hausa women in Kano also discovered that during the socialization process a girl is made aware of her second-class status. She is assigned childcare responsibilities in addition to housework or domestic responsibilities. Girls are constantly, and very early in their life, reminded of their inferior status vis-à-vis their brothers, father, or male kin. A girl is told *ki dinga yin abu kamar mace*, "to behave like a woman" as she grows up in Hausa society (1987, 29-31). This socialization pattern has remained in practice in both rural and urban

communities of Hausaland. In addition to household responsibilities girls are sent out to hawk wares for their mothers. This study found that in the villages girls also fetch water outside the compound, and sweep animal dung for boys to carry to the farms.

Feminist theory

In feminist discourse, these definitions have led to assertions about how patriarchal values are imposed on society and how this has led to the exploitation and oppression of women. The view often held is that women receive less pay, less access to productive resources, and less attention or participation in decision-making. Women are treated this way, so the argument goes, because patriarchal values assume that they are biologically different and, therefore, inevitably inferior to men. This is why most feminist scholars are also advocates of women's rights to financial independence, education, and entry into the professions (Ruth, 1985). In developing societies (e.g. Nigeria), feminist scholars and activists are also interested in fighting harmful practices such as female genital mutilation (FGM), women trafficking, and child labor.

Feminist theories that emerge from the western world appear to have undergone changes or local transformations at different levels and periods. For example, black women in the United States were involved in the search for an alternative theory that addresses fully the peculiar problems facing black women. In this way, the emergence of black feminism somehow led to the birth of "womanism," which became involved in the struggles against racial and class oppression (Adeleke, 1996, p. 32). Womanism as an ideology of African women's liberation contains both woman-consciousness and race- or color-consciousness. This ideology marks a breaking away from a separatist concept of feminism, which disregards colored women's peculiar

oppressions. This perspective represents the concern of female writers who see no reason to hate their men. It is a kind of black feminism that is concerned with both women and men (Adeleke, 1996 and Adebayo, 1996).

The basic characteristics of women in Hausa rural communities include lower levels of literacy, lower purchasing power, poorer health status, and lower participation in formal employment-generation sector. Gender disparity and discrimination are also pervasive in the rural areas, where women are disadvantaged both at home and in society. The large majority of women work longer hours, contributing substantially to the viability of the household economy and the welfare of the family. In some societies women have little or no control over household assets or means of production even where they own these in a formal sense. Their control over household resources often depends on their husbands' goodwill (Lahiri-Dutt and Samanta 2002, 138). In Hausa communities, women depend on their husband's decision before undertaking major social and economic activities (Mohammed, 2004, 2007). In India rural women tend to face more intense difficulties than their urban counterparts. Some of these problems include lack of access to better education, health, nutrition, water and sanitation, burdensome and time-consuming domestic chores such as fodder and fuel wood collection, and fewer opportunities of formal employment (Lahiri-Dutt and Samanta 2002, 138).

Gender differences are created out of social norms of behavior which assign different roles to men and women in the society. These differences and divisions often lead to inequality in the distribution of resources, and particularly in the power relations between men and women. According to feminist theory the basis of this inequality in power relations is patriarchy, which reflects a social setting where men retain control over

women's lives and their daily activities. According to radical feminist theory, the concepts of patriarchy and sex class are key ideas in explaining women's situation in all societies. Thus, patriarchal relationships are considered as the foundation of sexual inequality (Ward, 1995).

Methodology

This study employs the data set generated by the JUWASS (Jigawa Urban Water and Sanitation Scheme) Formative Research (2005). The research was conducted for the purpose of assessing the water and sanitation practices in five communities of Jigawa State. A total of 203 respondents were surveyed in the study using a purposive sampling technique in the five communities, comprising of Gumel which has 57, followed by Kazaure with 48, Birnin Kudu 37, Auyo 32 and Ganjin Gebi 29. In each community focus groups were conducted with women, men, children, and teachers. These groups discussed

extensively the role of men, women and children in regard to water and sanitation. The discussions focused on diseases and their prevalence, hand washing, toilet practices, hygiene, water and sanitation practices. The survey was conducted in five communities in Jigawa State. The population comprises mostly Hausa speaking Muslims with a small minority group of Fulani pastoralists in Birnin Kudu. In Ganjin Gebi there are a number of mixed households including Fulani and Kanuri people incorporated by marriage. In Gumel, there is a small Ibo community. The predominant religion is Islam with both Sunni and Shiite elements represented. The communities studied are characterized by significant class differences with regards to wealth, ownership of animals, clothing, housing construction and floor coverings. Specifically, floor covering, and animal and TV ownership are markers of high social status. Latrine ownership is also a marker of status. Sanitation and other health related domestic practices in any Hausa community are

BASELINE DATA TABLE 1: OCCUPATION

Project Towns												
	Auyo		Birnin Kudu		Ganjin Gebi		Gumel		Kazaure		Total	
	n	%	n	%	N	%	n	%	N	%	n	%
Labourer	3	9.4	12	32.4	9	31.0	13	22.8	19	39.6	56	27.6
Farmer with land	28	87.5	4	10.8	12	41.4	12	21.1	06	12.5	62	30.5
Trader	–	–	1	2.7	5	17.2	5	8.8	5	10.4	16	7.9
Professional	–	–	–	–	–	–	8	14.0	1	2.1	9	4.4
Other (specify)	1	3.1	20	54.1	3	10.3	19	33.3	17	35.4	60	29.6
Total	32	100	37	100	29	100	57	100	48	100	203	100

Source: JUWASS Formative Research, 2005

The breakdown of the distribution on Table 1 indicates that there are variations in the concentration of people in certain occupations for each town. The distribution also shows that Auyo respondents are preponderantly farmers (87.5%). This confirms its characteristics as a rural area. Both Birnin-Kudu and Kazaure have fewer farmers on the sample (10.8% and 12.5% respectively) indicating a periurban status. More than half of the respondents (54%) of Birnin Kudu are found in other (informal sector) occupations, and about 32% of them are laborers. This can be explained by looking at the status of Birnin Kudu as an urban settlement (Birni implies urban). This town also comprises several immigrant peoples. Ganjin Gebi has more farmers and labourers (41.4% and 31% respectively) on the sample, which is also another characteristic of a rural settlement. Gumel respondents are spread across all occupations, but majority are either engaged in other (informal) occupations (33.3%) or employed as labourers (22.8%). This is another explanation for a periurban settlement. Majority of Kazaure respondents are also employed as labourers (39.6%) or found in other informal sector jobs (35.4%). This town also shares the same characteristics with Birnin-kudu. The occupational patterns explained above are likely to vary on seasonal basis as some people are likely to practice a number of trades, including farming, or move to other places as migrants. Survey data on the five towns studied indicated a variety of occupations for the respondents. Out of a total of 203 people studied in these towns, 56 (27.6%) are labourers, 62 (30.5%) are farmers with land, 16 (7.9%) are traders, 9 (4.4%) are professionals, while 60 (29.6) are found in other occupations which include street vending (petty-trade), service providers and several informal sector occupations.

Gender roles and sanitation

The qualitative data reveal that women are generally expected to play

important roles in improving the health and sanitation of the household. Several activities were mentioned as part of the roles of women. The most frequently mentioned as part of the roles of women in the entire sample are: bathing (wanka) and washing of clothes (wanki), washing of kitchen utensils (wanke-wanke), and cleaning the environment (shara). These activities have been assigned to women in Hausa communities for ages. Other activities mentioned are related to overall bodily hygiene, which include: Taking bath, washing hand, bathing the children, clipping of fingernails, cleaning the teeth, and plaiting the hair.

Some women also mentioned activities like using uncontaminated water, washing foodstuffs and cleaning the beddings. When asked where they learnt these activities, majority mentioned schools (a makaranta), parents (iyaye da kakanni) and husbands (a wajen mijina). This has been confirmed in the FGD'S where women reported being saddled with several roles in hygiene and family health which include: bathing with water, washing clothes and plates, sweeping the house, covering food, using clean water, provide husband with water to bathe, and provide clean water for drinking.

Women in Hausaland, as in other Nigerian communities, are generally responsible for taking care of their households by sweeping, washing plates, and taking care of the food before cooking. Women also use both plastic and Randa to store water and they are always covered. They put the moda (drinking cup) on top of it. "We do not normally keep the moda where children can play with it." If there is house-help she is the one who will sweep the room and put the rubbish in the dustbin. Asked whether their husbands are involved in taking care of the health of the family, the women answered that: "We are fully responsible. This is because the children are mostly at home with us. The husbands are out to find food" (JUWASS, 2005, FGD

Informants). In addition in some places the husband hires housemaids to do the cleaning and sweeping and in that case they contribute to the health of the household because they pay the cleaners. So basically apart from hiring housemaids the men do not contribute much toward family health unless the children are to be taken to hospital. It is primarily the responsibility of the women. They buy things that are needed in the household like soap, detergent and mosquito nets.

They mentioned that if there was no light then the water would not run. If there is constant of power supply then there is adequate supply of water, but without power supply, there is a shortage of water. That is when the husband will buy the water from the water vendors. In terms of refuse disposal it is the woman that is responsible because the husband is out. The woman is responsible for anything around the house. The rich men mentioned, "Women sweep the rooms, compound, toilets, and bathrooms.... It is true that in our community, women used to do general cleaning for the health of the family" (emphasis added). In the poor families, the responsibilities of women in regard to family health include bathing, provision of good food, covering of food, sweeping, washing of clothes and plates. Among the rich women several responsibilities regarding family health were identified. Some of the recurring ones explain the tasks of women for taking care of the welfare of the family as shown below:

1. Bathing with warm water and toweling after bath
2. Washing of clothes
3. Sweeping of house, putting dirt at the refuse dump
4. Covering food
5. Using clean water
6. Husband informed them on how to take care of family health
7. Women provide husband with warm water to bathe in the

morning

8. They get their water from the well inside the compound

They do their toilet normally in their compound. The type of toilet they need is the concrete one that will last a long time as their own gets easily spoilt. Girls mentioned hand washing in relation to the following:

1. After eating,
2. Before eating
3. In the night (da daddare) before sleep

Rich women in Auyo see their roles in regard to family health and cleanliness in this context:

"We cook good food three times a day, boil water for our family to drink. We wash dishes after each meal and sweep the compound". Poor men discussed that "I give my family food and purified water, and if any member falls sick, I rush them to the hospital". Auyo rich men discussed that "men and women join their efforts together in order to ensure the cleanliness of the household compound. We also educate our women that if we buy water from water vendors, we insist that they boil it before drinking". The poor women accept all these responsibilities in addition to "taking water to the bathroom for our husbands to take bath" (kai ruwan wanka). This is a major responsibility of women for their husbands, as we have seen above. They also keep water in Randa, as majority of them do not own tap. The responsibility of their men is "to bring food to the house and supply other household needs" (JUWASS, 2005, FGD Informants).

The African Development Bank (2009) has confirmed these features of African communities. The argument is that cultural and social settings determine power, status, prestige, rights and obligations. Women's

access to productive resources is also conditioned by these settings. Thus women and girls are assigned the chores of water fetching, transport, storage and usage. At the same time, they are also responsible for keeping public and private areas clean. In spite of these enormous responsibilities, women and youth are still not involved in managing and developing these resources due to social constraints that hamper their participation in decision-making bodies.

Auyo Boys discussed that “everyday we take our baths, wash our clothes, and sweep the environment both at home and at school. We also fetch water for domestic use”. These words have been re-echoed in Robson's (2004) data on Zarewa village examined above. They sweep and take animal dung to the farm sometime before or after burning it. “We wash our hands after visiting the toilets, taking the animal faeces or after playing with sands,” as one of them testifies. For their place of defecation they visit the latrine at their homes or in the bush and they “prefer local latrine because we are familiar with it.” The special roles the girls discussed include: washing dishes, sweeping their compounds, and when their mothers are busy they also help with cooking. They also bath and prepare their

younger ones for school, as well as fetch water, some within their compounds and others outside the compound. Girls wash their hands before and after eating. Auyo girls observed: “We get our water from taps, hand pumps and local wells. We prefer tap from the rest. The ward head is responsible for repairing of the hand pump. We also use local well and it is the responsibility of the people within the ward (to undertake repairs through self-help efforts) or a rich person can volunteer to pay either half or all of the cost (JUWASS, 2005, FGD Informant). The roles that women perform in the domestic sphere of the target communities were seen as the foundation of the health and sanitation practices of these communities. Some of the observed defaults which have hampered the realization of correct sanitation practices are assessed to be the result of the total reliance on women to implement and oversee all health related domestic activities. As a result the poor and low level of sanitation practices found in these Hausa communities have proved that women in the communities are overburdened with a multiplicity of domestic roles. Thus in poorer households sanitation practices would remain on the low level due to absence of resources needed to achieve sound sanitation.

SANITATION

Table 2: Place of Defecation

Place of Defecation	Project Towns										Total	
	Auyo		B/K		G/Kebe		Gumel		Kazaure			
	N	%	n	%	n	%	n	%	n	%	n	%
Bush	1	3.1	30	81.1	10	34.5	43	75.4	2.3	47.9	107	52.7
In a Hole (latrine)	30	93.8	7	18.9	8	27.6	13	22.8	13	27.1	71	35
Toilet							1	1.8			1	0.5
No response	1	3.1			11	37.9			12	25	24	11.8
Total	32	100	37	100	29	100	57	100	48	100	203	100

Source: JUWASS Formative Research, 2005

Historically it was common practice for digging a small hole in the sand and then to defecate into it, finally covering the faeces with the earth. Most men and boys now use the bush to defecate without bothering to cover it with the earth, as was the practice. The survey data reveals that in some towns this is still a common practice. Table 2 shows 81% of respondents in Birnin Kudu, 75% in Gumel and 47.9% in Kazaure, and about 35% in G/Kebe reportedly using the bush as the major place of defecation. More than 27% of the sampled respondents in Ganjin Gebi and Kazaure use the latrine. One of the major findings, however, is that more than half of the sample (52.7) actually reported using the bush to defecate. Only about 36% use the latrine, and just one percent uses the toilet facility, as a place for defecation. About 12% did not respond to the question. The category of 'No response' (37%) in Ganjin Gebi and Kazure (25%) probably hides some of those who use the bush, as the question might appear embarrassing. Auyo respondents preponderantly use the latrine (94%), while in the other towns less than 30% use the latrine. Auyo respondents (not surprisingly) are least in regard to going to the bush for defecation –just under 4% due mainly to the availability of water in their toilets. Over 70% of the respondents said that their toilets are covered with mud, while 27% have toilets that are covered with sticks. Only 1% of the toilets are covered with cement as revealed by the survey data.

Water and Sanitation

In discussing their toilet habits, some rich men discussed that they have modern toilet facility, but their family use the local latrine. The poor men use the latrine or if they are in the fields they dig a hole in the sand and cover it later. One poor man said, “We normally take water along with us. After defecation we first use sticks then use stone,

and then use water to wash the anus. If there is no water, we first use stick to clean three times, and then use different stones to clean three times” (JUWASS, 2005, FGD Informant). The practice of using stick or stone to wipe faeces (katse kashi) after defecation is widely adopted especially in rural communities where the bush is a major place of defecation. In some cases there is no water to clean so the tendency to adopt katsewa (wiping up with sticks or stone) becomes higher. The discussant, however adds, “then whenever you get water you can correct it.” Only the hygienic would bother washing up, especially with soap, when he or she finds water. Rich women use concrete latrine, which they prefer in Auyo, Birnin Kudu and Kazaure.

TABLE 4: Washing Hand After Defecation

Project Towns	Washing hand after Defecating		
	Yes	No.	Total
Auyo	18 56.3%	14 43.7%	32 100.0%
Birnin Kudu	19 51.4%	18 48.6%	37 100.0%
Ganjin Gebe	8 27.6%	21 72.4%	29 100.0%
Gumel	34 75.4%	14 24.6%	57 100.1%
Kazaure	34 70.8%	14 29.2%	48 100.0%
Tatal	122 60.1	81 39.9%	203 100.0%

Source: JUWASS Formative Research, 2005

The majority of respondents in all the communities (87.7%) said that they wash their hands before eating. Table 3 indicates that 32% of Birnin Kudu respondents do not bother to wash their hands before eating. 12.5% and 17.2% (of respondents) in Auyo and Gebi answered that they also do not wash their hands before eating. One of the major findings of this study (shown on Table 4) is that a significant percentage

of the sample (39.9%) does not wash hand after defecating. When this distribution is broken down, we see that over 72% of the respondents in Ganjin Gebi, 45% of those in Birnin Kudu and forty-four percent in Auyo never bother to wash their hand after defecating. The table also shows that over 75% of Gumel and 70% of Kazaure respondents wash their hands after defecating.

HAND WASHING Table 3: Washing Hand Before Eating

Project Town	Washing Hand Before Eating		
	Yes	No	Total
Auyo	28 87.5%	4 12.5%	32 100.0%
Birnin Kudu	25 67.6%	12 32.4%	37 100.0%
Ganjin Gebe	24 82.8%	5 17.2%	29 100.0%
Gumel	55 96.5%	2 3.5%	57 100.0%
Kazaure	46 95.8%	2 4.2%	48 100.0%
Total	178 87.7%	25 12.3%	203 100.0%

Source: JUWASS Formative Research, 2005

Table 5: Washing Hand After Cleaning Children's Buttocks

	Washing hand after cleaning Children's Buttocks		Total
	Yes	No	
Local Auyo Government	Count 14 43.8%	Count 18 56.2%	Count 32 100.0%
Birnin Kudu Government Area	Count 12 32.4%	Count 25 67.6%	Count 37 100.0%
Ganjin Gebe Government Area	Count 5 17.2%	Count 24 82.8%	Count 29 100.0%
Gumel Government Area	Count 39 68.4%	Count 18 31.6%	Count 57 100.1%
Kazaure Government Area	Count 28 59.6%	Count 19 40.4%	Count 47 100.0%
Total	Count 98 48.5%	Count 104 51.5%	Count 202 100.0%

Source: JUWASS Formative Research, 2005

Table 5 also shows a similar distribution that contains the characteristics of the sample (that of poor sanitation standard) in regard to role of women in hygienic practices of washing hands on some occasions. Majority (51.5%) of the sampled respondents said women do not wash their hands after cleaning their children's buttocks, which is mostly the responsibility of women in Hausa society and many other African communities. In Ganjin Gebi, Birnin Kudu and Auyo majority of the women also do not bother with hand washing after cleaning their children's buttocks.

Table 6: WASHING HAND BEFORE COOKING

		Washing hand before cooking food		
		Yes	No	Total
Local government Area	Auyo	5	27	32
		15.6%	84.4%	100.0%
	Birnin Kudu	9	28	37
		24.3%	75.7%	100.0%
	Ganjin Gebi	2	27	29
		6.9%	93.1%	100.0%
	Gumel	38	19	57
		66.7%	33.3%	100.0%
	Kazaure	18	30	48
		37.5%	62.5%	100.0%
Total		72	131	203

Source: J UWASS Formative Research, 2005

Table 6 seals this finding and confirms that Ganjin Gebi people are least hygienic in terms of hand washing. They are followed by Birnin Kudu and Auyo in their peculiar practices. Gumel and Kazaure respondents on the other hand have reported consistently that they have bothered with hand washing whenever they come out of the toilet or after cleaning their children's buttocks, or before cooking food; the last two have comprised mainly female roles. These revelations have been demonstrated in the distribution on Tables 7 through 9.

Table 7: Method of Storing Water

		Method of storing water					Total
		Tank	Bucket	Randa/Tulo	Jerrycan	Others	
Local government area	Auyo	2	1	29			32
		6.3%	3.1%	90.6%			100%
	Birnin Kudu	2	1	21	5		29
		6.8%	3.4%	72.4%	17.2%		100%
	Ganjin Gebe	2	6	21			29
		6.9%	20.7%	72.4%			100%
	Gumel	2	5	42	6	2	57
		3.55	8.8%	73.7%	10.5%	3.5%	100%
	Kazaure	8	5	24	11		48
		16.7%	10.4%	50.0%	22.9%		100%
Total		16	18	138	29	3	20
		7.9%	8.9%	68.0%	14.3%	1.0%	100%

Source: JUWASS Formative Research, 2005

Water related practices

There is a variety of water provisions in the households studied. Similarly water is stored in several types of containers. However, the most favorite of water storage in all the communities studied is the Randa or Tulu, the earthenware pot kept by women in their household. Table 7 shows that 68% of the total respondents use the Randa for water storage. When broken down we see that between 50 - 90% of all households in the town, studied employ the Randa or Tulu for water storage. In Kazaure there is a variation where 50% of the sample use jerry cans, buckets or tank to store their water. The survey respondents believe that clean water should be used to control diarrhea. Birnin Kudu, Ganjin Gebi and Gumel respondents' overwhelmingly accepted that clean water could be used to control diarrhea. However, Auyo respondents do not accept that clean water could be used to control diarrhea.

The qualitative data reveals that boys will continue with prayers to God for solution; they also call for the repair and increase in "the number of our taps". They also desire the water in the tap to be purified. Women who are poor in Kazaure said, "We want taps and hand pumps". Those that have taps or have been enjoying them say they are not running. Water is for those with power. Rich women need help with regard to mosquitoes. Women also requested for adequate water supply and drugs in the hospital.

Table 8: Availability of Water In The Toilet:

		Is Water available in the Toilet		Total
		Yes	No	
Local Govt Area	Auyo	12 37.5%	20 62.5%	37 100%
	Birnin Kudu	19 51.4%	18 48.6%	37 100%
	Ganjin Gebe	6 20.7%	23 79.3%	29 100%
	Gumel	16 28.1%	41 71.9%	57 100%
	Kazaure	28 58.3%	20 41.7%	48 100%
Total		81 39.6%	122 60.4%	203 100%

Source: JUWASS Formative Research, 2005

As indicated on Table 8, majority of the respondents have no water in their toilets. More than 60% claimed that they do not have water available. Over 51% of Birnin Kudu households and 58.3% of Kazaure households said they have water in their toilets. More than half of the households (59%) also have no soaps in their toilets, which indicates a level of hygiene similar to that explained on tables 7, 8 and 9 above.

Health Habits

In these communities girls use the toilet if it is available. “If we do not have them in our house then we go to the bush”. Individuals who break the rules of family health are reported to the authority. However, “because of politics, things have changed. If an individual is reported for polluting water the authority

hardly does anything”. One of the rich discussant in Birnin-kudu reported, “I told you about animal faeces in front of my house; if you report someone there will be open conflict with them. Thus you allow this type of things for God to judge” (JUWASS, 2005, FGD Informant).

Teachers in Ganjin Gebi made insightful observations regarding the sanitation habits of their pupils with the following comments:

1. Children go to the bush to pass their stool while they eat at the same time.
2. They also take a lot of mangoes during the mango season. You see them walking with a lot of flies on the mango while they suck the

- mango indifferently. This also leads to diarrhea.
3. Because the village is rural in nature some people without latrines have to go to the bush to defecate.
 4. Even near the houses in the village there are lots of faeces. For example, if you go the village and observe early in the morning you will see the villagers coming out both men women and children going or coming from the bush to defecate.

On whether every house has a latrine, the head teacher mentioned that:

“It is not true. You can send your representative to the entire houses to check, you will see that only houses of the well do to have latrines or the village head's; they are those that do not go out to the bush to defecate, or the young educated ones and their wives, who do not go to the bush to defecate. Otherwise most of the families that are not well to do, go to the bush” (JUWASS, 2005, FGD Informant).

The surveyed towns have also reported recent cases of diarrhea, malaria, vomiting, typhoid and measles. Majority of survey and FGD respondents accept that these diseases are common to the area as a result of poor hygiene and sanitation habits. The survey data also indicate that water supply, which was not hygienically treated, appear to be a major variable associated with incidence of diarrhea. Households on the sample have been found to neglect basic teachings of hygiene like washing hands with soap after going to the toilet, before eating or after washing their baby's buttocks. The cleanliness, and hygiene and water related activities are poorly handled in almost all households in the communities surveyed. This is because women have been saddled with the major role of

looking after hygiene, sanitation and water related activities. They are expected to clean the household environment, wash the dishes, cook meals, keep the water clean, prepare their children for school and generally make their husbands happy. There is a clear gendered division of household labour with women responsible for the domestic sphere and men paying attention to farming and the public sphere. While the women have all these chores to attend to, they rely heavily on their husbands or parents for learning what is required of them with regards to hygiene, sanitation and water supply. A discrepancy may occur, therefore, where the men (or parents) are not adequately informed on the required knowledge.

Radical feminist theory has contributed towards an understanding of the gendered division of household chores in which women are predominantly saddled with the major chores that include water and sanitation practices. Radical feminists often view the woman in terms of her sex roles where she is expected to remain submissive and passive to male desire and authority. These socially constructed female sex roles have “political significance because they operate to deprive women of equality in all spheres of life – social, economic, political and legal” (Ward, 1995, 874).

Role of men in water and sanitation: One of the rich men said that they used to educate their women to wash the clay pots. Also “we use to educate them (women) that if we buy from water vendors if it is meant for drinking, we used to insist that they boil it before drinking should it contains germs which can lead to diarrhea” (JUWASS, 2005, FGD Informant). Men also instruct women to sweep and wash the areas affected by animal's excreta because of mosquitoes and other related germs that can breed there. In Ganjin Gebi, one discussant observes that “there are

speculations that this thing is all confusion; the authorities will introduce something in order to attract you so that you pay. Majority of the people assumed that the mission was just to get people to pay (JUWASS, 2005, FGD Informant). This observation reflects the level of apathy in some communities regarding any new projects that are not clearly explained to the communities

Conclusion and policy implications

Gender inequality is often manifested at the domestic sphere where household chores, including hygiene and sanitation work are principally assigned to women. Within the communities studied in this research a gendered distribution of domestic work is responsible for giving women the role of keeping their households clean and ensuring that safe and clean water is available for domestic use. Alongside children women in these communities undertake various chores that ensure the health and sanitation standards are kept within required expectations. This is in addition to taking care of other chores such as cooking, childcare and serving their husbands and other family members. Despite performing these multiple tasks, women have very little control over the decision making process regarding water and sanitation practices. They have to wait for their husbands to take major decisions, and issue instructions on how to perform these onerous tasks. It is the contention of this paper that giving women more roles in decision making and leadership is a major requirement for lifting the health and sanitation standards of these communities from their dismal levels. If the Millennium Development Goals are to be achieved in these communities, then women must be made part of the decision making processes that address issues of hygiene, health and sanitation.

Some policy implications are apparent from the findings of this study. First of all there is an urgent need for an empirical

verification of the patterns of decision making and allocation of resources within the households prior to the design of intervention programs that address water and sanitation practices. This is essential because, as Quisumbing and McClafferty (2006) argue, detailed gender-disaggregated databases are rarely available in most project and policy contexts. For these databases to be generated further qualitative studies with key informants and participant observation are necessary. In water and hygiene related issues these databases are key to successful implementation of gender mainstreaming in resource allocation, and decision making processes.

Secondly, because of the cultural constraints placed on women in most Nigerian communities, the views of men and women must be solicited separately. This is also required for making women to identify the major obstacles to their participation in sanitation work and other community development projects without fear of the consequences. In this context several distinctions should be captured regarding the prevalent stratification patterns in the community, such as age, social position, ethnic stratification, and urban versus rural locations.

Finally, a needs assessment enquiry should be considered regarding the types of organization and institutions that are currently available for both men and women. These assessments may also consider the structure and roles of existing institutions in order to determine the kind of mix that may enhance project rate of success with regards to hygiene, water and sanitation practices with women as major stakeholders and key participants. This is why gender mainstreaming as advocated for by the United Nations is considered as a vital policy framework for gender and sanitation activities in this study.

Reference

- African Development Bank (2009) Checklist for Gender Mainstreaming in Water and Sanitation Sector, <http://www.afd.org/gendermainstreaming/pdf> -Sourced 02/04/2013
- Adebayo, A. (Ed.). (1996). *Feminism and black women creative writing*. Ibadan, AMD Publishers.
- Adeleke, J. A. (1996). *Feminism, black feminism and the dialectics of womanism*. In A. Adebayo (Ed.). *Feminism and black women creative writing* Ibadan: AMD Publishers.
- Callaway, B. (1987), *Muslim Hausa Women in Nigeria: Tradition and Change*, Syracuse University Press.
- JUWASS (2005) *Jigawa Formative Research Jigawa Urban Water and Sanitation Scheme*
- Lahiri-Dutt, K. and Samanta, G. (2002) *State initiatives for the empowerment of rural communities: experiences from rural India*, *Community Development Journal*, 37/2 137-156.
- Mohammed, A. F. (2004) *Women, religion and guilt in Hausa home video: an assessment*, in A. U. Adamu, Y. Adamu and U. F. Jibril (eds) *Hausa Home Videos: Technology, Economy and Society*. Adamu Joji Publishers, Kaduna
- Mohammed, A. F. (2007). *Women, religion and guilt in Hausa home video: An assessment*. *FilmInt Vol*, Pages.
- Quisumbing, A. R. and McClafferty, B. (2006) *Food Security in Practice: Using Gender Research in Development* International Food Policy Research Institute. Washington DC
- Robson, E. (2004), *Children at work in rural northern Nigeria: patterns of age, space and gender*, *Journal of Rural Studies* 20 193-210
- Ruth, S. (Ed.). (1980). *Issues in feminism: A first course in women studies*. Boston, MA: Houghton Mifflin Company.
- Stacey, A. (2009) *The Importance of Personal Hygiene in Islam. The Religion of Islam*<http://www.Islamreligion.com/personal/hygiene.htm> -Sourced 22/04/2013
- United Nations (2006) *Gender, Water and Sanitation Case Studies in Best Practices*<http://www.un.org/casestudies/water.htm> Sourced 30/09/2012
- Ward, C. V. (1995) *The Radical Feminist Defense of Individualism* Faculty Publications 89/3 871-899 College of William and Mary Law School Scholarship Repository <http://www.scholarship.law.wm.edu/facpubs.pdf> Sourced 02/04/2013
- [Http://www.sociology.org.uk/2005/feminist/sociology/htm](http://www.sociology.org.uk/2005/feminist/sociology/htm). Sourced 02/04/2013