

ABSTRACT

Progress towards achieving full sanitation coverage is still slow in small town settlements in most developing countries. Small towns are the new frontier in urbanization. However, investments have not kept pace with the growing demand for services. Small town's water supply and sanitation is a neglected area globally and Kisumu County is no exception. Water supply and sanitation systems in small towns are typically too complex to be well managed by community groups, but too small to be financially viable for professional Water Service Providers (WSP). In Kisumu County, these unique challenges have led to on-site sanitation particularly pit latrines as the most popular sanitation choice. The limited sanitation choices has partly contributed to poor sanitation practices in small towns. Most studies on water and sanitation have focused mainly on large cities and rural areas without appreciating the unique characteristics of small towns and secondly on water at the expense of sanitation. The purpose of this study therefore was to assess sanitation practices and preference in selected small towns in Kisumu County. Specifically it aimed at assessing sanitation practices, determine factors influencing sanitation preferences and examine existing barriers to improving sanitation. These objectives were linked up with other components of the study using a conceptual framework. The study employed a cross sectional survey design, with 356 households sampled from a population of 4903 households using systematic random sampling. Purposive sampling was used to select participants for in-depth interviews and FGD. Primary data was collected through questionnaires and interview schedules. Documentation review was used to collect secondary data. Data analysis was done using cross-tabulations, Chi square test, log linear and factor analysis. The findings showed that most residents do not conform to good sanitation practices. It was found that 21% of respondents did not have any form of sanitation facility, majority of the households (59%) were sharing. Open defecation was still practiced by 16% of respondents while 31% admitted poor practices on management of children wastes. Hand washing after visiting latrine was practiced by 70% of the respondents. Pit latrine was the most common form of sanitation technology (72%). The study revealed reduced risk of diarrhea and lack of flies as the main health factors that influenced sanitation preference, both factors were statistically significant at p-value 0.039 and 0.01 respectively. For technical factors, availability of water and ground condition were prevalent and were statistically significant p-value 0.031 and 0.044. Further, cost was the main economic factor influencing preference. Only 20% of residents use improved sanitation. However, all respondents desired improved facilities but faced barriers among them lack of reticulated sewer network and unreliable water supply for sanitation. This study recommends that interventions in small towns target health education and hygiene awareness, upgrading of on-site facilities and utilizing the existing demand for improved sanitation as springboard for intervention. Further research is however needed on willingness to pay for improved sanitation within small towns.