A STUDY ABOUT KNOWLEDGE AND PRACTICE OF SAFE DRINKING WATER

By

Durga Khadka Exam Roll No: 2180103/069 T.U Regd. No: 9-2-218-157-2007

A Thesis

Submitted to the Health Education Department in the Partial Fulfillment of Requirements for the Master's Degree of Health Education

> TRIBHUBAN UNIVERSITY FACULTY OF EDUCATION JANATA MULTIPLE CAMPUS ITAHARI, SUNSARI APRIL 11, 2015

DECLARATION

I hereby declare that this thesis has not been submitted for candidature for any other degree.

Ms. Durga Khadka Med 2nd Year

ACKNOWLEDGEMENT

This thesis has been completed with the great deal of support and guidance from many persons. It was impossible to complete without their valuable inputs. Now, I'm taking this opportunity to express my sincere acknowledgement for the input.

First of all, I would like to express my thesis supervisor Mr. Sanjiv Kr. Yadav, Lecturer, Health Education Department for his able guidance, critical suggestions, encouragement, support, co-operation and supervision throughout this study. Mr.Manoj K. Chaudhary, Asst. Lecturer and Mr. Birendra Karki Asst. Lecturer for providing me opportunity to conduct this study.

I would like to express my special thanks to VDC Secretary of Pakali VDC and all the key persons of my study area who helped me directly in data collection process. My sincere thanks go to all the respondents of this study because without their cooperation it wouldn't have been possible to complete this study. I would like give many thanks to my friend Mrs. Uma Tiwari and Sushila Poudel for their in valuable suggestions as well as selfless encouragement.

> Durga Khadka Med 2nd Year JMC Itahari

ABSTRACT

This study entitled "knowledge and practice regarding safe drinking water . The study has been carried out among the selected ward no. 3 of Pakali VDC. The General objective of this study was to find out the knowledge and practice of safe drinking water. However, specific objectives of the study were to identify the socio economic factors that determine the knowledge and practices of safe drinking water, to find out the knowledge about of safe drinking water among the people, to access the practice of the safe drinking water adopted by the people. Primary data were collected from 102 household using simple random sampling method in Pakali VDC ward no. 3 and data were analyzed manually then data were presented in tables, figures and in percentage form on the basis of analyzed data; appropriate summary, conclusions and implication are presented at the end of the patt of the study.

The study tried to give clear information about knowledge and practice of safe drinking water of Sunsari district especially respondents of Pakali VDC ward no. 3. This study was not able to get knowledge and practice of safe drinking water as a whole VDC. Only 67.64 percent people had good knowledge and proper practice of safe drinking water in the study area. In fact, Safe drinking water is important not only for human being but also it is needed to other living creatures. The availability of safe drinking water directly or indirectly helps in the reduction of infant and child mortality rate and improve sound health of public as well. Such indicators improve public health related Human Development Index (HDI). Similarly, education is a major factor for proper utilization of safe drinking water and management of sanitation. The educational status of study area was found satisfactory but higher education condition was very poor over there. Among 102 respondents, 48 percent respondents had good knowledge about water borne diseases, in the study area. The study gave focus on searching water resources, way of drinking water, protective way from disease and so on.

Due to lack of awareness program and knowledge of safe drinking water in study area almost all respondents were found using plain water (directly) instead of using various purification methods. So the people have suffered from water borne diseases like Diarrhea, Jaundice, Typhoid, Dysentery etc. This may be due to their poor condition of educational background and lack of knowledge related to safe drinking water. Among the 102 respondents, only 11 percent respondents had got higher education. In conclusion, the knowledge and practice of safe drinking water in Sunsari district of Pakali VDC ward no. 3 was not very poor but not well in condition. Hence, it is necessary to aware such community. For this different NGOS, INGOS and Government agencies can launch the programs related to safe drinking water.

TABLE OF CONTENTS

	Page No.	
DECLARATION	ii	
RECOMMENDATION LETTER		
APPROVAL SHEET		
ABSTRACT	v	
ACKNOWLEDGEMENTS		
TABLE OF CONTENTS	viii	
LIST OF TABLES	xi	
LIST OF FIGURES		
ABBREVIATIONS	xiii	
CHAPTER –I INTRODUCTION		
1.1 Background of the study	1	
1.2 Statement of the problem	3	
1.3 Objectives of the study	4	
1.4 Significance of the study	4	
1.5 Delimitation of the study	5	
1.6 Operational Definitions of the key terms	6	
2.1 Review of Theoretical literature	7	
2.2 Review of Empirical literature	8	
2.3 Implication of the review of the study	10	
2.4 Conceptual framework	11	
CHAPTER- III: METHOD AND PROCEDURES OF THE STUDY		
3.1 Design / Method of the study		
123.2 Population sample and sampling strategy	12	
3.3 Study area/field	12	
3.4 Data collection tools and techniques	12	
3.5 Data Collection Procedures	13	
3.6 Data Analysis and Interpretation Procedure	13	
CHAPTER- IV ANALYSIS AND INTERPRETATION OF RESULTS		
4.1 Demographic and Socio- economic Characters	14	
4.1.1 Distribution of population according to sex	14	
4.1.2 Distribution respondents by religion	15	
4.1.3 Education status of the respondents	15	
4.1.4 Occupational status of the respondents	16	

4.1.5 Income per-month of the respondents	17
4.2 Knowledge and practice about Safe Drinking Water	18
4.2.1 Knowledge about safe drinking water	18
4.2.2 Knowledge about characteristics of safe drinking water	19
4.2.3 Knowledge about methods of purifying water	20
4.2.4 Method of using purification of water	21
4.2.5 Knowledge about disease are infected by used unsafe	
drinking water	21
4.2.6 Sources of receiving information about safe	
drinking water	22
4.2.7 Knowledge about amount of water required to drinks pe	er day
23	
4.2.8 Knowledge about different methods of purifying water	23
4.2.9 Use of different chemicals	24
4.2.10 Causes of not purifying water	25
4.2.11Sources of water used to drink	25
4.2.12 Types of pot for collecting water	26
4.2.13 Cleanness and covering of water collecting pot	27
4.2.14 Knowledge about the arsenic contamination	28
4.2.15 Understanding about arsenic	28
4.2.16 Use of fresh water of the respondents	29
4.2.17 Sources of water used for cooking	30
4.3 Summary/Discussion of Findings	30
CHAPTER – V: CONCLUSIONS AND RECOMMENDATION	
5.1 Conclusion	33
5.2 Recommendation	33
5.2.1 Policy related	33
5.2.2 Practice related	34
5.2.3 Further research related	34
REFERENCES	

APPENDIX

LIST OF TABLES

Table no.Title	Page No.			
1:Distribution of population according to sex	14			
2: Distribution of respondents by religion				
3: Educational status and use if safe drinking water				
4: Occupational status and water purification				
5: Income per month of the respondents and use of safe drinking water				
6: Knowledge about the methods of purifying water				
7: Knowledge about disease are infected by use unsafe drinking water	20			
8: Sources of receiving information about safe drinking water	22			
9: Knowledge about different methods of purifying water	22			
10: Use of different chemical	24			
11: Sources of water used to drink	24			
12: Understanding about the arsenic	28			
13: Use of fresh water of the respondents	29			

LIST OF FIGURES

Figure no.	Page No.
1: Knowledge about safe drinking water	19
2: Knowledge about characteristics of safe drinking water	20
3: Methods of using purification of water	21
4: Knowledge about required amount of water per day	23
5: Cause of not purifying water	25
6: Types of water collecting pot	26
7: Cleanness and covering water collecting pot	27
8: Sources of water used for cooking of the respondents	30

ABBREVATIONS

CBS	:	Central Bureau of Statistics
CMR	:	Child Mortality Rate
DOHS	:	Department of Health Services
HDI	:	Human Development Index
HOD	:	Head of Department
IMR	:	Infant Mortality Rate
INGOs	:	International Non-Governmental Organization
MOHP	:	Ministry of Health and Population
NEWA	:	Nepal Water Association
UN	:	United Nation
UNDP	:	United Nation Development Program
UNICEF	:	United Nations International Children's Emergency Fund
VDC	:	Village Development Committee
WHO	:	World Health Organization