



Residential water supply at Kersa Demographic Surveillance and Health Research Center field site

This brief characterizes residential water supply of the population in the study site. The result is based on census conducted on July 2007 in Kersa District Eastern Hararge, Eastern Ethiopia.

Introduction

Water in general and clear water supply in particular is strongly associated with life. It prevents the occurrence of many communicable diseases. Understanding the characteristic mechanisms of the locality helps to identify what intervention should be directed in improving the water supply in the locality.

The study was conducted on 48,192 residents of the study site. The highest population count was recorded in Adele Key Key kebele and the lowest in Kersa town. Which is 6053 and 1811 respectively.

The residents of the studied kebele fetch water from different sources. Pipe water is used by 37.4% of the households. The rest get water from protected well, unprotected well, protected spring, unprotected springs, ponds, river and lake with descending percentage of 21.1, 16.8, 7.8, 6.2, 5.4, 4.9, and 0.4 % respectively.

Overall 66.3 % of the households have access to safe water supply. The remaining get water from unprotected spring, pond, river, and lake.

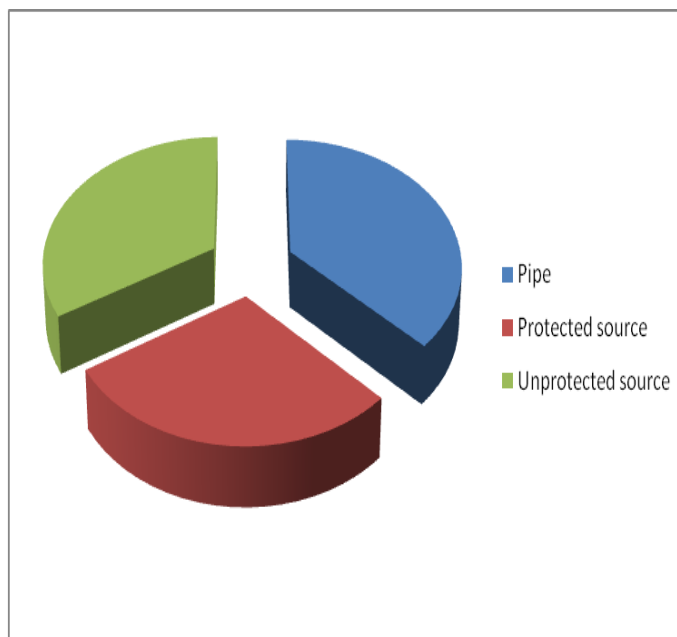


Fig1: Source water for residents among 12 selected Kebele of Kersa District Eastern Hararge, East Ethiopia, July 2007

Conclusion

Although the majority of the residents have access to safe water supply, a significant number of the households (34 %) are getting their water supply from unprotected sources. This will favor the occurrence of many communicable diseases. Hence, the situation warrants special attention in improve access to safe water supply in the study area.

Recommendation

- Further initiative should be taken to achieve universal coverage of safe water supply in the locality.
- Researches on the content water and contaminants should be done.

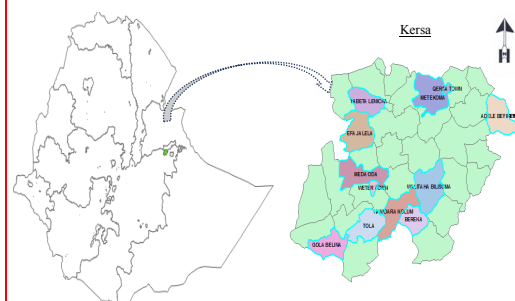
Kersa Demographic Surveillance and Health

Research Center (KDS-HRC),

Haramaya University:

The surveillance site was established in September 2007 in Kersa district, Eastern Hararge of Oromia region, East Ethiopia with aim of tracking demographic changes like death, birth, migration and marital status change. The surveillance activities further extended by adding surveys in Nutrition, Reproductive Health, Environmental Health, HIV/AIDS, Morbidity/health seeking behavior and health care utilization during the month of January-March 2008.

The surveillance activity is instituted in 12 kebeles (the smallest administrative unit in Ethiopia with approximate population Size of 4-5 thousand). Two of the kebeles are semi urban and the remaining 10 are rural kebeles.



According to the first census there were 10,256 households and 53,482 people in the study site with an average household size of 5.2 and sex ratio of 104.5. In the study area the crude birth and death rates were 26.8 and 9.2 per 1000 population. Infant and under five mortality rates were 44.9 and 108.2 per 1000 live births respectively.

The activities of the surveillance are lead by a coordinator and a group of six staff members from the College of Health and Medical Sciences.

