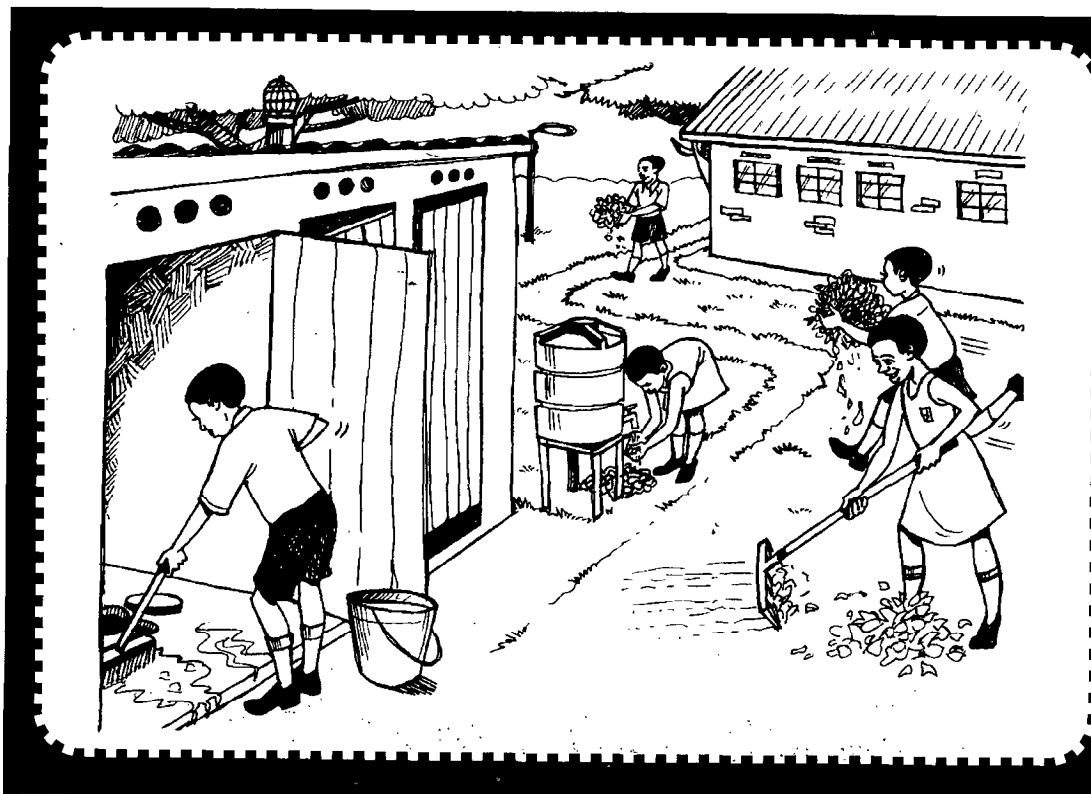




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Sanitation Promotion

What Teachers need to know and Do



January 2000

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Sanitation Promotion

“What Teachers need to know and Do”

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Introduction

This booklet is designed to support you: Teachers. Teachers already in service need the opportunity to upgrade the knowledge and skills they obtained during teacher training courses. Training of teachers, especially in effective teaching methodologies, e.g. the use of participatory techniques is a key element for effective hygiene education. Teachers need to know how and where to apply for assistance, how to mobilise community members and how to promote good hygiene behavior in children in order to improve hygiene and sanitation in schools.

Why is it important to focus on schools?

After the family, schools are most important places of learning for children; they have a central place in the community. Schools are a stimulating learning environment for children and stimulate or initiate change. If sanitary facilities in schools are available, they can act as a model, and teachers can function as role models for school children. Schools can also influence communities through outreach activities, since through their students, schools are in touch with a large proportion of the households in the community.

Why is it important to focus on children?

Several studies have shown that most diseases suffered by children are related to unsanitary conditions and lack of personal hygiene. Such survey results show the need for a focus on children. Also, it is generally recognised that childhood is the best time for children to establish life long hygiene behaviours. Children are future parents and what they learn is likely to be applied in the rest of their lives. They have important roles in the household, taking care of younger brothers and sisters. Depending on the culture, they may also question existing practices in the household. If children are brought into the development process as active participants, they can become change agents within their families and a stimulus to community development. They are eager to learn and help, and if they consider environmental care and their role in this as important, they will take care of their own health and the health of others. Being tomorrow's parents, children are also likely to ensure the sustainability of the programme's impact.

This booklet contains the current definition of sanitation by the Ministry of Health, basic facts about sanitation, and information about your roles and responsibilities. The main objectives of this booklet are to:

- Provide information on sanitation and hygiene to enable teachers to teach sanitation confidently.
- Motivate teachers to participate in sanitation improvement.

1.0 School sanitation overview

The problem

Poor sanitation is a national problem and everybody's responsibility. In Uganda it has an effect on health status, education, trade and development. In the process, it drains the national economy and slows down the national poverty reduction interventions.

The environmental sanitation status in primary schools in this country falls below the expected standards. Sanitation related diseases are the greatest cause of illness and death among our children. Recent studies show that sanitation related diseases like malaria, cholera, and diarrhoea are the top killer diseases among children in this country.

In 1995 there were 8,531 government-aided primary schools with a total number of 2.6 million pupils. Of these schools, 44% had a water supply and the reported ratio of students to stances was 328:1 compared to the recommended ratio of 40:1. Currently with the increased enrolment of almost 6.5m pupils due to UPE, the pupil stance ratio in most schools has gone up, and the sanitation situation has worsened. Many schools, particularly rural schools do not have separate latrine facilities for girls and boys.

A study undertaken by the Uganda National Examination Board (1996) in a number of sampled districts found that:

- 66.7% of schools had safe water.
- 8% schools had adequate number of latrine stances.
- 33% had separate latrines for girls.

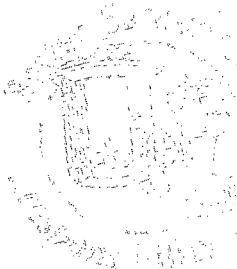
In addition, a study by RUWASA in September 1998 in a sample of 7 districts and 128 schools, found that:

- about 60% of schools had access to safe water.
- 98 % schools had latrines but **none** had adequate pupil stance ratio by RUWASA standards (30:1)
- 82% had separate facilities for girls
- 13.7% had hand washing facilities next to the latrines

Another survey done by a consultant for UNICEF-WES in April 1999, in 9 districts and 90 schools found that:

- 80% had safe water
- 99% schools had latrines but **only 2%** schools had adequate number of stances by national standards(40:1)
- 82% had separate latrines for girls
- 20% had hand washing facilities next to the latrine and 20% had evidence of use

During the recent cholera epidemic a number of schools were closed due to lack of adequate and acceptable sanitation facilities. To date few schools in Uganda have access to adequate sanitation facilities. In addition, local leaders/administrators, politicians, and school management committees and communities do not regard school sanitation and hygiene as their responsibility.



In light of this, the Government of Uganda has found it necessary to supplement the on going efforts by UNICEF – WES, RUWASA, and other agencies, to promote better sanitation in primary schools through the provision of supplementary funds to UPE supported schools.

The funds are an additional Government of Uganda contribution to funds already committed by WES/RUWASA funding for school sanitation. These funds shall be channeled through the existing District WES/RUWASA account and their utilisation shall follow established government procedures.

In addition, the following activities are being supported:

- Mobilisation for UPE school sanitation
- The school sanitation mass media campaign
- The training of primary teachers
- Hygiene education in primary schools
- The politically driven sanitation promotion
- Involvement of the private sector

This assistance is in support of the Kampala Declaration on Sanitation 1997 signed by LC V Chairpersons of all district local councils at the National Sanitation Forum, which states that:

“Focus on schools: ‘We shall ensure that every primary school and all other institutions of learning have adequate sanitation facilities (latrines, safe drinking water supply and hand washing facilities; with separate facilities for girls) by the end of 1998’ (action point 5)”

The responsibility for the promotion of sanitation in schools shall remain with the community; the resources provided under this activity, are intended to help communities to meet their responsibilities. This is important for community empowerment reasons and sustainability purposes.

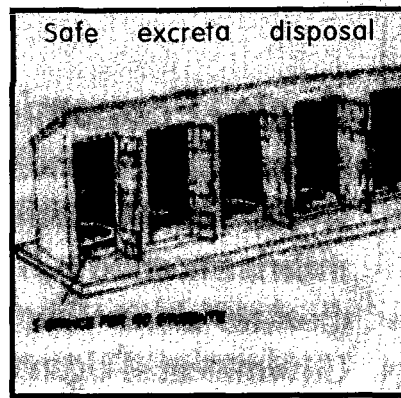
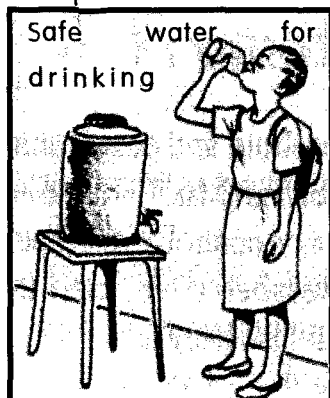
2.0 What is Sanitation?

Sanitation is personal and environmental cleanliness.

Better sanitation is the promotion of facilities, skills and practices that enable individuals, families and communities to improve their quality of life through:

- safe disposal of human excreta (faeces and urine).
- practicing of good personal, domestic and food hygiene
- safe disposal of solid and liquid waste, (rubbish, garbage, animal waste, dirty water)
- safe collection and storage of water especially for drinking
- control of insects and rodents that can spread disease (flies, rats, mosquitoes).

Sanitation is more than the promotion of latrines. Traditionally, in Uganda, the term “sanitation” has a broad meaning. It includes not only health aspects but social aspects like esteem, enlightenment and admiration.



3.0 Effects of Poor Sanitation

Poor sanitation has far reaching implications on health, socio-economic factors, education and the environment.

Education

Poor sanitation affects academic performance. Available informative shows that 2.7% of student time is lost due to sanitation related diseases. Many adolescent girls lose 25% of their school time or drop out of school due to lack of sanitation facilities to accommodate their menstrual cycles. Today, schools need more sanitation facilities as a result of increased enrolment from UPE.

Health

Sanitation related diseases are the major causes of illness and death. Common illnesses from outpatient's clinics in Uganda show that diarrhoea, worm infestations, eye infections and skin diseases accounted for 23.5% in all health units in 1996. Malaria accounted for 25.5% (i.e a total of 49% of all outpatient diagnoses resulting from sanitation related illnesses).

The Burden of Disease study (1996) showed that 11.5% of children below 5 years died of diarrhoea diseases.

The cholera epidemic of 1997/98 by December 1999, had recorded 54,230 cases and 2,267 deaths of cholera in 41 districts.

Socio-Economic

There is high expenditure on sanitation related diseases both at household and community levels. The 1997 expenditure on treatment of sanitation related diseases (MoH) including malaria amounted to 27 billion shillings while 4 billion shillings was spent on control of diarrhoeal diseases alone. The cholera outbreak of (December 1997 to October 1998) cost the Government of Uganda approximately 4.3 billion shillings in treatment and drugs.

Similarly, districts spend a lot of money on drugs and treatment of sanitation related diseases. A lot of savings could be made if investment was put in sanitation promotion. The 1992/1993 integrated household survey revealed that 3.5% of all work time is lost due to sanitation related diseases approximately 40 million working days in a year.

Environment

The environment is affected by poor sanitation through the indiscriminate disposal of human faeces, urine, garbage and dirty water. It is estimated that an average human being excretes 0.25 kg of faeces daily. Therefore, a group of 1000 people without latrines would pollute the environment with: $1000 \times 0.25 \text{ kg faeces} = 250 \text{ kgs of faecal matter daily}$. In Uganda, there over 50% of the total population without safe excreta disposal means. (Ugandans excrete 470 g on average a day, Burkitt, Walker and Painter)

4.0 Benefits of Improved Sanitation

Improved sanitation can reduce:

- diarrhoea diseases, malaria and cholera
- intestinal worm infestations
- guinea worm infestations
- trachoma and poliomyelitis, to mention but a few.

Improved sanitation also has the following benefits:

- Reduction in nutritional stunting rates of children under five
- Increased number of girls attending school
- Increased teaching and learning hours
- Reduced financial expenditure by households, schools and government. Such savings could be available for development purposes
- Improved environmental protection
- Increased social status of individuals/communities
- Promotion of tourism and trade,

5.0 Government Commitment to Sanitation Promotion

Government is committed and supportive to the promotion of sanitation and has put in place the following:

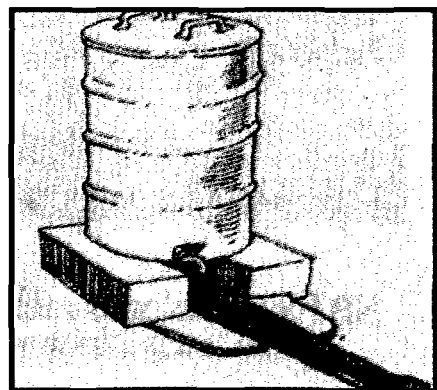
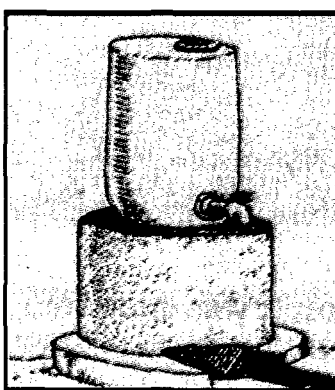
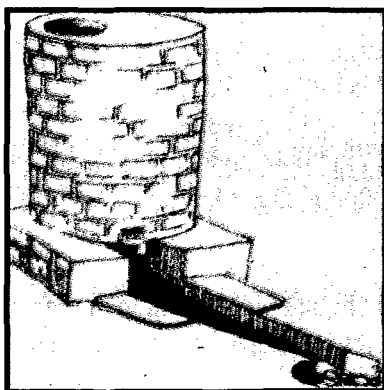
- The 1995 Constitution (chapter 3, Article 17(i)) mandates ‘every citizen to create and protect a clean and healthy environment’, in addition it is every citizen’s right to have a clean and healthy environment (chapter 4, article 39)
- The 1997 Local Government Act also emphasizes the importance of sanitation promotion.
- The Kampala Declaration on Sanitation (October 1997) which was endorsed by all the districts, puts sanitation high on the development agenda
- The National Health Policy, the National Health Services Bill and the National Environmental Health Policy drafts also emphasise sanitation promotion.
- President Y. K. Museveni’s Election Manifesto (1996) highlights the importance of Sanitation and Hygiene.

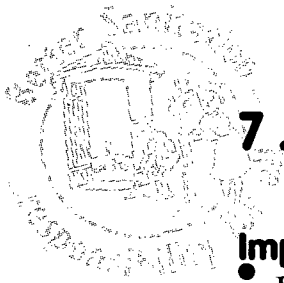
6.0 Handwashing

The best and most effective way to stop the spread of diseases is for the pupils to be taught how to wash their hands with soap after using the latrine and before eating food. Washing hands with soap and plenty of water removes germs. If soap is not available, ash is a good substitute for soap. UPE conditional grant funds can be used to buy soap.

A hand washing facility should be provided next to the latrine for easy access. It could be any of the following:

- A drum fitted with a tap and mounted on a concrete platform
- A small brick tank, fitted with a tap
- A plastic jerrican or tank
- A cement tank, big pot/jar (rainwater or filled regularly)





7.0 Excreta disposal

Importance of proper disposal of excreta (faeces and urine)

- Reduces chances of contaminating food and water
- Reduces fly and other nuisances in the environment
- Influences healthy behaviour in schools and eventually the community.
- Reduces the faecal related diseases

Common excreta disposal technologies:

Technology	Advantage	Limitations
Ordinary pit latrine	<ul style="list-style-type: none"> - Low cost - Can be built using local materials - Easy to operate 	<ul style="list-style-type: none"> - Life latrine depends on the Number of users - Difficult and expensive to empty when full - Smell problem if not well maintained
Lined pits latrine	<ul style="list-style-type: none"> - Suitable in collapsing soils - Can be emptied when full 	<ul style="list-style-type: none"> - Expensive to build - Smell problems if not well maintained
Raised pit latrine	<ul style="list-style-type: none"> - Suitable in rocky and water logged areas. 	<ul style="list-style-type: none"> - Expensive to build - Difficult to climb - Can be a source of contamination to water sources - Difficult to climb - Can be a source of contamination
Alternative pit latrine	<ul style="list-style-type: none"> - Once constructed it becomes more or less permanent - Solid contents can be used as fertilisers 	<ul style="list-style-type: none"> - More expensive than ordinary Latrine - Bad smells common during use - Desludging difficult and messy and people may not be willing to dig out the contents
Ventilated Improved Pit latrine	<ul style="list-style-type: none"> - Reduce flies - Reduce odour 	<ul style="list-style-type: none"> - More expensive than traditional pit latrines - Should be kept dark - Difficult to empty when full - Need to replace the fly screen regularly

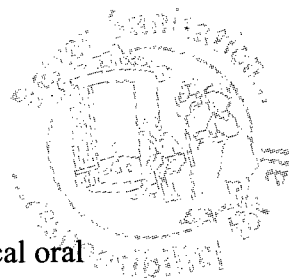
NB For technologies suitable for people with disabilities , please contact your health Inspector.

Points to consider when constructing latrines using permanent materials.

- Constructed in accordance with the sanitation guidelines for primary schools.
- Constructed of well burnt bricks, roofed with corrugated iron sheets and provided with
- wooden shutters to ensure privacy.
- Floor should be of washable material for improved hygiene.
- Walls should be plastered to a smooth finish.
- Males and females should be provided with separate latrines.
- Construct a new latrine before the old one is filled-up.
- Demolish old ones

Points to consider for maintenance of pit latrines.

- Keep grass or plants growing around latrine short.
- Latrine floor should be regularly swept and washed clean.
- Squat hole should be covered to prevent flies and smells
- Anal cleansing materials usually papers and leaves should be made available.
- Pupils should be taught proper use of a latrine and transmission of routes of faecal oral borne diseases.
- Pits should be kept as dry as possible to stop mosquito breeding
- If too much water enters the pit, ashes or dry cow-dung should be thrown in the pit to help absorb water and odours.
- Do not put disinfectant into the pit
- Disinfect floor during outbreaks of dysentery or cholera.
- Repair any damages within the super structure and leaks in the roof.
- When the contents of the pit reach a level of 1 metre (3ft) from the surface, demolish the pit and use a new one.



8.0 Safe water chain

- The safe water chain is the process of making sure that water remains safe from the source, during collection, and storage up until consumption.

Sources of contamination of water

While water is “life” it is also the medium of transmission of water borne diseases.

There are many ways of contaminating water and the most common ones are:

- Contamination by germs from faeces and agricultural chemicals
- Use of dirty collecting vessels, storage facilities and mugs for scooping water from the storage facilities.
- Run-off water contaminated by human and animal excreta.
- Direct bathing, swimming and defecating in the water or near the water source.
- Seepage through the soil from nearby latrines.
- Leakage of pipes in the case of gravity flow scheme water

Ways of Preventing Water Contamination:

- Protect water sources, e.g. springs and wells.
- Use clean water containers.
- Put water in the sun in a clear container for the whole day
- Patients with water borne diseases should be excluded from handling water for public use.
- Location of latrines should be at least 100 feet away from home.
- People should not swim, bath or wash in water sources used for drinking and other domestic purposes.
- Animal watering should be a distance from source of water for domestic use .
- Chickens, dogs, cats and other domestic animals should be kept away from water containers.
- Drinking water should be stored in a raised, covered container, if possible after boiling

For schools that have no access to safe water: please encourage children to come with safe water from home.

9.0 Personal and environment Hygiene

This is the practice of keeping oneself and surroundings clean in order to prevent germs from entering body and causing diseases.

Personal hygiene includes cleanliness of the body, hands including finger nails, feet, face, mouth (teeth), armpits, genital areas, ears, eyes, etc.

Environmental hygiene refers to the cleanliness of the surroundings, e.g. compound classrooms, etc.

Keeping the body clean

Part of the body	What to do	Likely problems if not done
Head <ul style="list-style-type: none"> - Hair - Teeth/mouth - Ears - Eyes 	<ul style="list-style-type: none"> - Bathing - cleaning teeth after meals & mouth wash - Cleaning ears - Washing/cleaning 	<ul style="list-style-type: none"> - Lice - Tooth decay; bad smells & wounds - Ear wax - Trachoma, conjunctivitis
Body <ul style="list-style-type: none"> - Clothing - Skin 	<ul style="list-style-type: none"> - washing clothes - bathing regularly 	<ul style="list-style-type: none"> - Lice - Lice, scabies, ring Worms
Hands <ul style="list-style-type: none"> - Nails, fingers & Palms 	<ul style="list-style-type: none"> - Proper hand washing with plenty of water and soap 	<ul style="list-style-type: none"> - Dysentery - Diarrhoea - Typhoid - Cholera - Worms
Feet <ul style="list-style-type: none"> - Washing of feet 	<ul style="list-style-type: none"> - Keeping feet dry 	<ul style="list-style-type: none"> - Jiggers - Athletes foot

Keeping the Environment clean

Surroundings	What to do	Likely problems if not done
Class room <ul style="list-style-type: none"> - floor dust - wall cracks 	<ul style="list-style-type: none"> - Smear/cement floor - Plaster walls 	<ul style="list-style-type: none"> - Jiggers and coughs - Bed bugs
Compound <ul style="list-style-type: none"> - grown up grass - scattered refuse - stagnant water 	<ul style="list-style-type: none"> - Cut grass short - Collect & dispose refuse - Destroy breeding sites 	<ul style="list-style-type: none"> - rats, snakes, mosquitoes - sharp objects, - mosquitoes, rats, - rubbish - mosquitoes -

10.0 Approaches to behaviour change

What are the best approaches for dealing with sanitation improvement?

The participatory approach is one of the effective means of achieving sustainable behaviour change. It involves working in collaboration with people and allowing them to take more control in the design, implementation and management of sanitation systems. It involves taking time to understand the people so that you can know how they feel about the problem. Most communities feel sanitation is either not a problem or it not their responsibility. The challenge then is to help them see the problem and see it as their responsibility.

Information alone will not do this. And neither will coercive methods result in sustainable behaviour improvements and practices. There is need for the use of more learner centred approaches which see change as a **process**. People usually move through several intermediate steps before they change their behaviour.

What do teachers need to do?

Since behavior change is a slow process, teachers need to do the following things:

1. Read and learn as much as possible about hygiene and sanitation. Especially the benefits of good hygiene and low cost ways of implementing good sanitation and hygiene.
2. The teacher then needs to pass on this information to the pupils in a way that is simple, easy, participatory and fun. (see section 11)
3. The teacher also needs to ensure that the facilities that will enable the children to practice the good hygiene behavior are available. E.g. hand washing facilities with soap and water for the promotion of the behavior; washing hands.
4. Teachers need to minimise as much as possible the barriers to adopting the behavior being promoted. The children will begin to practice the behavior once they understand how and why to do it. They will also do it if the behavior does not pose any threat or constraint to them. E.g. if the hand washing facility is too far, they may decide not to use because it will take too much of their time.
5. Continually give the message over a period of time so that those who have forgotten may be reminded and also as a form of motivation. This can be called reinforcement. It can be done through rewarding children who are practicing the behavior. Rewards can be in the form of words of encouragement like 'well done' or announcements at the parade time, or even material things like soap, exercise books etc
6. Teachers should act as role models. The children will copy what they see the teachers doing because they respect and believe in their teachers.
7. Monitoring change is very important. This means that the teachers need to look back and see whether the message they sent was received and whether the behavior being promoted is taking effect. This will help them identify problems that had not been anticipated so that they can introduce appropriate improvements to their messages to eliminate the problems. Monitoring can be done daily by using charts filled in by the students.



11.0 Approaches to sanitation promotion:

Children need to be interested in sanitation promotion if they are to participate and learn good hygiene behaviours. This calls for teachers to be more creative and make their hygiene lessons more active and interesting for the children. Below are a few examples.

- **Health clubs:** Organise pupils to form clubs according to their levels of education. They will:
 - write on sanitation topics
 - clean compound
 - discuss sanitation issues
 - visit other schools and surrounding homes
 - organise sanitation demonstrations
 - Monitor cleanliness of each other

Role of Patron

1. Organise elections of student officials
2. Guide student officials developing cleaning up system for latrines, compound
3. Guiding students officials in carrying health inspections along parade
4. Monitor and prepare regular progress reports
5. Mobilise any resources from within and without the school for club activities.
6. Any other activities that will promote hygiene and sanitation in the school.

Debates and Quizzes

Debates and clearly sorted out quizzes on sanitation should be organised. These will raise the awareness, enhance academic performance and promote behavioural change.

The patron of the debate club can set some motions for debate in the school. The patron is the moderator together with the master on duty. These debates can be chaired by chairmen Health Clubs, Head Girl or their deputies.

At the end of the motions there should be voting to establish who has won or convinced better. Then the patrons can raise a number of learning issues in the debate.

Some of the topics can be:

- "A latrine is more important than a kitchen in the home"
- "Only girls should clean latrines"
- "A teacher is better than a doctor"
- "Water is better than fire".

Quizzes are another activity that can quickly get children to adhere to health habits. These can be organised locally depending on the school sanitation plan.

Possible questions

- Why do we wash hands after visiting latrines?
- Why do we clean latrines every day?
- What should we do to avoid diseases like diarrhoea, cholera - the school?

- What should we tell our parents to avoid diseases like cholera?

The one who scores highest marks should be rewarded with a simple gift e.g. a pen, notebook, ruler e.t.c.

Music Dance & Drama

This is one activity which attracts and keeps the audience committed. Each school should also develop their own hygiene and sanitation song which can be sang every morning before lectures begin. It is possible to develop songs on sanitation and hygiene even under these broad areas e.g.

Under Environment:

- Lack of sanitation can contaminate the school environment

Under politics:

- Stability can enable pupils to collect water for drinking
- Good leaders support facilitation promotion in schools.

Drama/Poems

Just like songs, it is possible to organise drama shows with in the school. These drama shows can depict a positive or negative scenario. But what is most important is that the patron evaluates from the pupils whether they have learnt something.

Health Parades

Regular parades will improve on the cleanliness of each individual child. The teachers together with the prefects should organise morning parades daily to check on the personal cleanliness of each child. For full participation other children should be involved in checking their peers in turns so that they get familiar with all aspects of personal hygiene.

The following should be checked at these parades:

- **Hair** - Is it well kept and with or lice?
- **Mouth & teeth** - Is there tooth decay, bad smells and deposits of food?
- **Ears** - Is there ear wax or pus?
- **Eyes** - Are they clean? Any abnormal discharge? Any abnormal colour?
- **Face** - Is it well washed?
- **Clothing** - are the clothes well washed and ironed? Are lice hiding in the clothes?
- **Skin** - Is the skin well washed? Are there ringworm and or skin reactions to insect bites? Is there scabies?
- **Finger nails** - Are the nails kept clean and short?
- **Feet** - Are the toe nails short? Are there jiggers and athlete's foot or wounds?

If the child is found to be dirty appropriate advice should be given on the spot e.g. cutting hair and nails short, washing and ironing clothes, washing the body, going for treatment of eye, ear and skin diseases etc.

If the child is found to be clean they should be commended for it and may be used as a model.

Mass Media

Includes the use of radio, television, print media (News papers, Posters, Magazines etc.)

- Buy Newspaper everyday – Sanitation News on Friday's and Sunday's
- Participate in the games for children
- Write letters asking questions or sharing ideas

- Write articles about sanitation in your school
- Design games for children
- Draw pictures
- Develop poems
- Participate in District Radio programmes recording songs, plays, discussions - questions

Sanitation Box

Teachers can introduce a Sanitation Box in which pupils can slot their ideas and questions regarding a challenge or question posed by the teacher (or fellow pupil). On the sanitation box a piece of paper is stuck that bears the challenge or question. This box should be monitored regularly or periodically. The box should then help the school administration to understand the constraints pupils face in their attempt to practice good sanitation habits.

12.0 Roles and Responsibilities of Teachers

1. **Exemplary leadership** Charity begins at home. As teachers you should have and use sanitary latrines, keep your homesteads clean and practice good hygiene.
2. **Development and implementation of sanitation plan.** Ensure that provisions for sanitation facilities and activities in the school plans and budgets are catered for. All schools should have adequate sanitation facilities (latrines and hand washing facilities).
3. **Mobilisation:** Mobilise locally available resources and solicit for external support. In addition, increase the allocation of resources to sanitation activities especially hygiene education, community mobilisation and participation planning.
4. **Teach Sanitation and Hygiene to include how to utilise facilities correctly.**
5. **Develop/create participatory activities that promote Sanitation and Hygiene**
-Debates -Clubs -Competitions -Quizzes -Parades -Drama and plays.
6. **Monitoring/supervision of sanitation activities**
7. **Carry out outreach activities**
8. **Introduce systems to ensure adequate water and soap for hand washing is available and cleanliness of the sanitation facilities especially latrines**
9. **Ensure availability of safe water for drinking.**
10. **Ensure availability of anal cleansing materials in the latrine**
11. **Encourage self inspections of the pupils during Health Parades**
12. **Relate sanitation teachings (syllabus) to real sanitation practices.**

SCHOOL SANITATION WORKPLAN

A work plan is a guide that explains events and when they should be implemented. It also includes the person responsible, time and budget.

The following is an example

Objective	Activity	Time frame	Term	Responsible Person	Indicators	Resources	Source of funding
To ensure that latrines are always maintained clean	Cleaning latrines	Daily	All Terms	Sanitation teacher	Clean slab/ floors & squateholes	Brooms, Pails, Soap	School
To encourage pupils to wash hands after using latrines	Providing water for hand washing	Daily	All Terms	Sanitation teacher	Availability of facility and water Availability of soap Wet soak pit Water, Soap	Hand washing facility	Sub-county School Donors

SANITATION MONITORING TOOL

Monitoring is a process of looking back to see how planned activities are progressing.

The district WES team including the District Inspector of Schools, Internal auditors, District Engineer and the District Leadership will carry out monitoring within the district.

Teachers, especially those responsible for sanitation should carry out regular follow up inspections. They can also develop a system whereby children can participate in monitoring each other.

Objectives:

- ⊙ To help the school authorities to evaluate the progress of the sanitation activities and re-plan accordingly.
- ⊙ To assess the levels of sanitation promotion in primary schools

(To be filled monthly by the Sanitation Teacher and submitted to the Head Teacher)

Name of School:.....

Name of Sanitation Teacher:

Date.....

Activity	Responsible Person	Yes	No	Indicator	Remarks
Make sanitation work plan and use it				- Plan developed and available	
Form science clubs				- Club formed - Date of last meeting	
Promote school competitions				- Competition held	
Clean and maintain the latrine and hand washing facilities				- Slab visibly clean	
Construct latrine				- Construction completed - Date	
Provide hand washing facilities				- Facility provided	

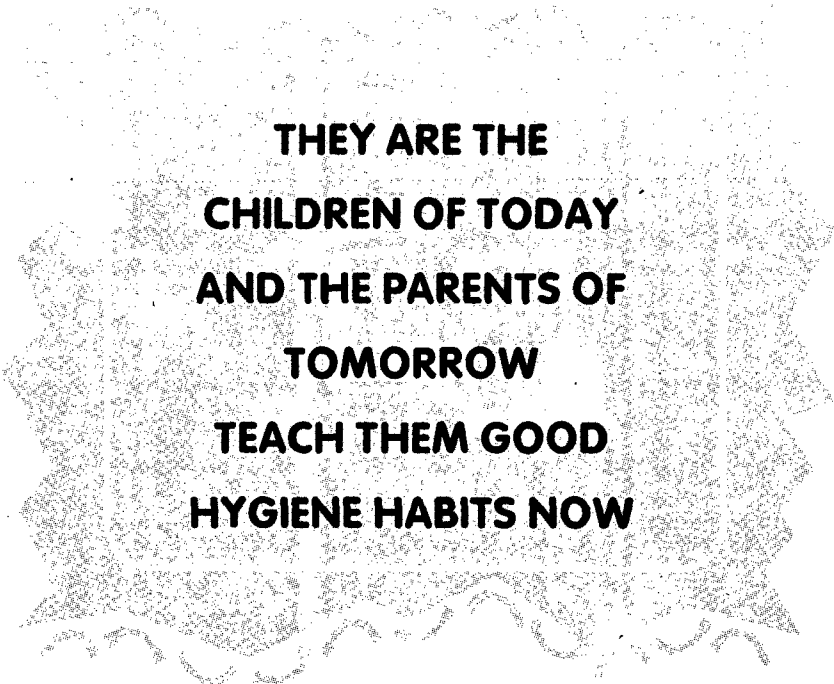
Activity	Responsible Person	Yes	No	Indicator	Remarks
Clean the compound				<ul style="list-style-type: none"> - Compound grass kept short - Compound free of rubbish 	
Meet the PTA to explain the sanitation programme				<ul style="list-style-type: none"> - Meeting held - Date 	
Meet pupils to explain the sanitation programme				<ul style="list-style-type: none"> - Meeting held - Date 	
Form drama groups				<ul style="list-style-type: none"> - Drama group formed - Play formed 	
Brief the head teacher and staff				<ul style="list-style-type: none"> - Briefing conducted - Date 	
Construct refuse pits				<ul style="list-style-type: none"> - Refuse pit exists - Pit used regularly 	
Carry out sanitation parades				<ul style="list-style-type: none"> - Date of last parade 	
Carry out sanitation debates and quizzes				<ul style="list-style-type: none"> - Date of last debate 	
Provide drinking water				<ul style="list-style-type: none"> - Existence of adequate drinking water 	
Construct a water source				<ul style="list-style-type: none"> - Existence of school water source 	
Maintain the water source for safe water				<ul style="list-style-type: none"> - Date of last inspection 	

13.0 Conclusion

Sanitation promotion is a continuous process, therefore, mobilisation of resources from within and outside the district is important.

While seeking additional support, you will be more eligible for assistance if you have the following:

- Latest information/data on the sanitation situation in the school
- School plan of action for sanitation based on district and school priorities
- The district budget reflecting contribution from the subcounty, urban councils, community, NGOs and other sources
- Commitment from the PTA and district council to follow-up and motivate SMT to work with community resource persons.



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