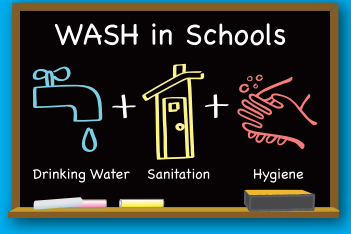
WASH in Schools in India

Commitments and Actions

An adaptation of
Raising Clean Hands



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This valuable assistance contributed greatly to the quality and completeness of the Joint Call to Action for WASH in Schools in India.

For more information about this publication and the Joint Call to Action, please contact Mamita Bora Thakkar, mbthakkar@unicef.org

WASH in Schools in India: Commitments and Actions 2014

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Foreword

August 15, 2014, the Honourable Prime Minister of India made a fervent and passionate appeal to the nation, to ensure that every child in India, especially girls have access to a toilet in school. The Prime Minister urged all parliamentarians to invest their constituency funds into building toilets in every school. This is the moment for WASH in Schools, as he appealed all stakeholders, including Corporate Sector, to increasingly invest in provision of WASH facilities to every school. In his message was the strong underlying point that providing quality education means creating a supportive environment to give children the best possible opportunity to enjoy school and perform to the best of their ability. This supportive environment not only includes well-resourced clean classrooms and well trained teachers, it also includes providing child friendly WASH facilities and hygiene education. If boys and girls have separate clean toilets, come together to wash hands with soap before eating their Mid Day Meal, and have safe drinking water throughout the day, they will be healthier, perform better in school. Beyond school, children also positively influence the hygiene practices at home; by investing in WASH in Schools, everyone wins.

"WASH in Schools in India: Commitments and Actions" is an adaptation of the UNICEF Global document, **"Raising Even More Clean Hands: Advancing Health, Learning and Equity through WASH in Schools"** launched in 2012, in which key global WASH in Schools initiatives and achievements have been documented and endorsed by 60 global organisations. Closer to home, this publication for India is a collaborative work by 13 development partners wishing to draw attention to the various components of WASH in Schools programming. These actors include civil society organisations, bilateral agencies, donors, academic institutions and researchers, who are all committed to an ambitious, but imperative vision that every child goes to a school where they have access to safe drinking water and child friendly toilets with group handwashing facilities. This document also provides the programming framework to scale and sustain WASH in Schools for better health and learning outcomes for children.

I hope this publication will provide guidance to translate the vision shared by the Prime Minister to finally realise WASH in Schools.

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Message

The impact of poor sanitation, unsafe and inadequate water supply, and inappropriate hygienic behaviour is known to be disastrous for infants and young children, and is a significant cause of death among of children under 5 years old. It also has a terrible impact on the health of school-aged children. Although older children are less likely to die because of disease related to inadequate water, sanitation and hygiene, they nevertheless suffer high rates of WASH- related illness.

Children spend long hours in school, and the physical environment and cleanliness of educational facilities significantly determine their health and well-being. Too often, schools are places where children get infected. Diseases spread faster where many children gather for many hours a day in cramped spaces with limited ventilation, unsanitary conditions, no hand- washing facilities or soap, and toilets in poor repair. An efficient and successful WASH in Schools programme addresses hygiene and sanitation problems in schools by keeping the school environment clean and healthy.

For the primary target audience of development practitioners, government officials and other programme and sector stakeholders, this document, **"WASH in Schools in India: Commitments and Actions"**, is designed to increase substantive awareness, ideally leading to decisive action in support of improved WASH in Schools. For the general public and the secondary target audience, it seeks to communicate the importance and many benefits of the WASH in Schools programmes and their role in increasing access and sustaining services in schools.

I hope the document will contribute significantly to the creation of an environment where all children go to school and all schools provide a safe, healthy and comfortable environment where children grow, learn and thrive.

With best wishes,

Pankaj Jain,
Secretary,
Ministry of Drinking Water and Sanitation,
Government of India

Abbreviations

ASCI	Administrative Staff College of India
ASER	Annual Status of Education Report
CBO	Community-based Organization
CC	Child Cabinet
CLTS	Community Led Total Sanitation
CSE	Centre for Science and Environment
DISE	District Information System for Education
EMIS	Education Monitoring Information Systems
FBO	Federation-Based Organization
GHD	Global Handwashing Day
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
GSP	Green Schools Programme
ICT	Information Communication Technology
KAP	Knowledge Attitude Practice
MDM	Mid Day Meal
MDWS	Ministry of Drinking Water and Sanitation
MHM	Menstrual Hygiene Management
MHRD	Ministry of Human Resource Development
MSDF	Michael & Susan Dell Foudation
MTA	Mother-Teacher Association
NBA	Nirmal Bharat Abhiyan
NGO	Non Government Organization
NGP	Nirmal Gram Puraskar
NVP	Nirmal Vidyalaya Puruskar
OD	Open Defecation
ODF	Open Defecation Free
OOS	Out of School
SACOSAN	South Asian Conference on Sanitation
SDMC	School Development and Monitoring Committee
SHG	Self Help Group
SLTS	School Led Total Sanitation
SN	Sanitary Napkins
SSA	Sarva Shiksha Abhiyan
SSHE	School Sanitation and Hygiene Education
SWASTHH	School Water and Sanitation Towards Health and Hygiene
TSC	Total Sanitation Campaign
UNICEF	United Nations Children's Fund
VDC	Village Development Council
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization
WinS	WASH in Schools

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1 Summary: Call to Action for WASH in Schools

Box 1.1: What is WASH in Schools

Access to sufficient quantities of safe water for

- Drinking
- Handwashing after defecation and before eating, for cooking and personal hygiene

Sufficient water for

- Cleaning school premises
- Cleaning/flushing toilets
- Cleaning food vessels (used for Mid Day Meals)

Toilet facilities that are

- Gender-specific (i.e. separate for boys and girls), sufficient, child-friendly, adequate, well-equipped, well-maintained and culturally appropriate

Hygiene promotion and education

- Child cabinets, included in curriculum, posters, wall-painting, messaging, events and competitions, community and household linkages
- Promote personal hygiene and school hygiene especially individual and group handwashing

Control measures and steps to reduce transmission and morbidity of WASH-related diseases

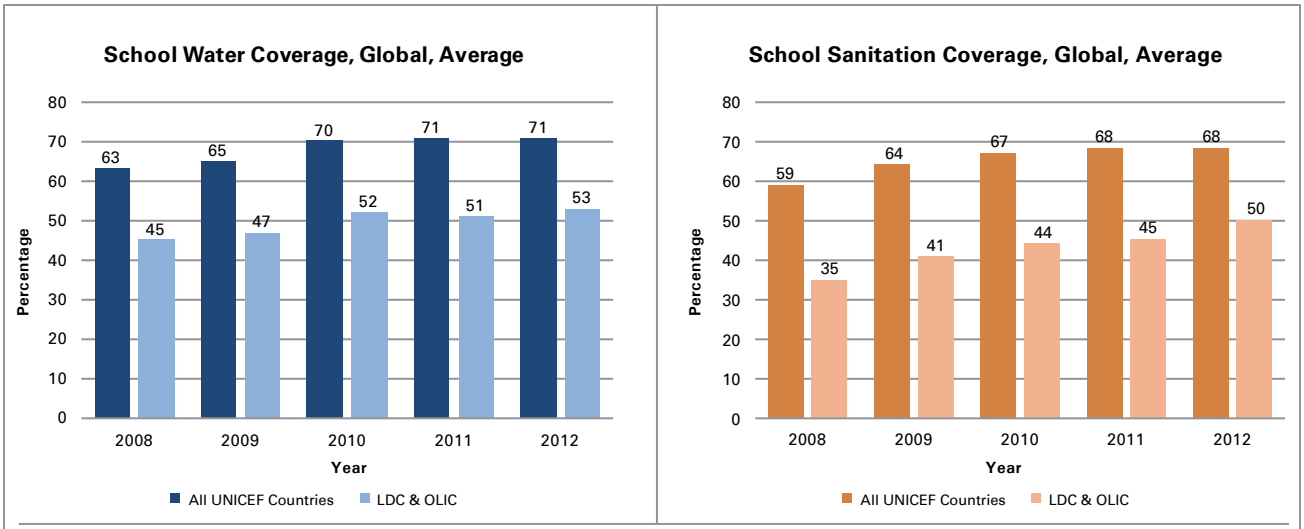
- Implement measures to prevent and/ or control WASH-related diseases
- Regular health check-ups, deworming campaigns, nutritional supplements

In accordance with the Convention on the Rights of the Child, every child's right to education is a fundamental principle to compulsory primary school education for all. WASH in Schools helps fulfil the universal right to education and health and meets its role in achieving the United Nations Millennium Development Goals, thereby increasing access to primary education, reducing child mortality, advancing gender equality and meeting targets for improving water and sanitation.

Meeting the global commitment to fulfilling every child's right to water, sanitation and hygiene is an ongoing challenge at policy, administrative and community levels. The fact that only about half the schools in low-income countries have provided access to water and sanitation facilities to their students, means that millions of children go to school either with the water that they will consume for the rest of the day, or with no water at all. They use any open space around their school to relieve themselves or wait until they reach home. When there is no water in the school, children cannot wash their hands and disease travels rapidly through crowded classrooms. Many of these children lack access to safe water at home too, often suffer from chronic diarrhoea and host intestinal parasites that stunt their growth. These conditions are detrimental for learning.

It is the role of policymakers, government representatives, citizens and parents, to make sure that that every child receives the benefits of WASH in Schools. By applying experience gained over the past decade, programmes can be brought to scale and be sustained to improve health, advance learning and enable children to serve as agents of change for their siblings, their parents and the community at large.

More than 60 organizations world-wide have joined together to renew their commitments and create a more cohesive group to support and advocate for WASH in Schools. They have called on decision makers and concerned stakeholders to join in this collaborative effort and support WASH in Schools, so that all children have the opportunity to go to a school with access to safe water, child-friendly sanitation facilities and hygiene education. To lend more strength and support to the WASH in Schools agenda, a document **"Raising Even More Clean Hands: Advancing Health, Learning and Equity through WASH in Schools"** was released by this group and UNICEF in 2012.



LDC – Less Developed Countries; OLIC – Other Low-Income Countries (*Source*: *UNICEF WASH Report 2012)*

Figure 1.1: Water and Sanitation Facilities in Primary Schools, 2008-2012 (in Percentage)

WASH in Schools: Global Six Points of Action

The **Call to Action for WASH in Schools** is the result of collaboration between CARE, Dubai Cares, Emory University Center for Global Safe Water, IRC International Water and Sanitation Centre, Save the Children, United Nations Children's Fund (UNICEF), Water Advocates, WaterAid, Water For People and the World Health Organization (WHO). It calls on decision-makers to increase investments and on concerned stakeholders to plan and act in cooperation for continued efforts in six key areas in order to ensure that every child in school has the right to safe water, sanitation and hygiene education.

Box 1.2: Global Six Points of Action

1. **Set minimum standards for WASH in Schools.** Adopt national, regional and local standards for WASH in Schools, based on UNICEF-World Health Organization guidelines. The minimum standards for WASH in Schools should be specific to each context. These standards should be the basis for national action plans that aim to reach all schools within a concrete time frame and should allow for gradual improvements to facilities and hygiene practices.
2. **Monitor WASH in Schools coverage through Education Management Information Systems (EMIS).** Advocate for the inclusion of WASH in Schools indicators in EMIS. Analyse data annually and use the findings for advocacy and better resource allocation. Support the compilation of data on coverage and practices at the global level to attract attention and funding to WASH in Schools.
3. **Engage with at scale WASH in Schools Programmes.** Contribute to the bigger picture by bringing individual or small-scale projects into cooperative initiatives that effectively reach more schools. Gradual improvements to facilities and hygiene practices require less investment in operation and maintenance and can be sustained with local resources. Steady progress is key to establishing sustainable, at scale programmes for WASH in Schools. These programmes include budget lines for capital improvements, operation and maintenance of WASH facilities, and recurrent costs such as purchases of soap and materials for personal cleansing.
4. **Involve multiple stakeholders to support WASH in Schools Programmes.** Community members, civil society advocates, members of the media, students, school staff, local and regional authorities, non-governmental organizations, faith-based groups, public-private partnerships, and ministries of education, water, health and finance, as well as donors, can all support planning and action for WASH in Schools.
5. **Contribute evidence on the impact of WASH in Schools Programmes.** Local and global academic communities have expertise that can support the design of WASH in Schools Programmes and chart their impact. Generating and sharing evidence will provide WASH in Schools advocates with a powerful tool to attract attention and funding to the sector.
6. **Raise the profile of WASH in Schools Programmes.** Adapt global and regional publications, advocacy materials and knowledge for the local context and disseminate them widely. Encourage members of the community to participate in customizing global WASH in Schools experiences to local settings. The process can begin with translating the publication **"Raising Even More Clean Hands"** into multiple languages. Local organizations can join the advocacy by endorsing a customized publication with their logos.

WASH in Schools: Framework of Action – South Asia

The Global Call to Action has generated impetus in the South Asian countries to take up the gauntlet for furthering the WinS agenda in their region also. Accordingly in the SACOSAN IV, held in Colombo in April 2011 and the SACOSAN V, held in Kathmandu in October 2013, the declarations specifically referred to certain concerted actions to be taken for WASH in Schools.

The South Asia Regional Conference on "WASH in All Schools: Making it a Reality" held in New Delhi in April 2012 was a collaborative attempt to provide a roadmap for creating a new culture of consciousness and promoting WASH in Schools as a critical component of institutional framework of schools. It provided an ideal platform for exchange of global and national perspectives of WASH in Schools and a stock-taking of the South Asia region, highlighting the growth, gains and gaps in these countries.

In South Asia, although most children of primary school-going age are enrolled in school, nearly 40 million children remain out of school. A majority of the out-of-school children are girls and children from marginalized and disadvantaged groups. Investments have resulted in increased public awareness and improved coverage of WASH in Schools. However, despite progress in recent years, many schools in South Asia still lack quality water supply, sanitation facilities and hygiene education. Well maintained and clean school WASH infrastructure that provides safety and privacy for girls and is used by all children, still

remains a challenge. Education and WASH sector policies need to reflect progressive government commitments to adequate and quality WASH in Schools, in line with Millennium Development Goals and national commitments. In line with this, the participants of the conference drafted the following **Framework for Action for WASH in Schools.**

Box 1.3: SACOSAN and WASH in Schools

FOURTH SOUTH ASIAN CONFERENCE ON SANITATION – Colombo Declaration (April 2011)

(iv) To raise the profile of WASH in Schools with the objective of ensuring that every new and existing school at every educational level has functioning, child-friendly toilets, separate for girls and boys, with facilities for menstrual hygiene management.

(x) To include in monitoring mechanisms specific indicators for high priority measures such as WASH in Schools, handwashing and menstrual hygiene.

FIFTH SOUTH ASIAN CONFERENCE ON SANITATION – Kathmandu Declaration (October 2013)

(v) Prioritize and promote child and disabled friendly services and menstrual hygiene management in all public buildings and especially schools, health clinics and reflect and monitor this in standards, design, delivery and monitoring.

(vi) Develop and implement guidelines and standards suitable for child, adolescent and gender and disabled friendly WASH facilities, with compliance indicators on handwashing and menstrual hygiene education and practice.

Box 1.4: Framework for Action for WASH in Schools, South Asia

1. WASH in Schools is an integral aspect of education and not a standalone programme, with a view to percolate in the overall learning environment and also to take advantage of systems and mechanisms available within the schools.
2. Establish national standards for WASH in Schools: Ministry of Education to lead and set standards for adequate and inclusive access to safe drinking water, sanitation and hygiene facilities in schools in collaboration with Ministries of Water Supply, Sanitation, Health, Rural Development, Women and Child Development, Local Government, etc. Highest priority must be given to provide basic safe drinking water, sanitation and hygiene to all schools, while progressively ensuring compliance with national standards. Approaches need to allow flexibility in norms, designs and costs for WASH in Schools to suit diverse situations.
3. Establish menstrual hygiene management mechanisms including the safe disposal of soiled napkins in all schools and menstrual hygiene education in schools.
4. Seek increasing convergence with Health, with WASH as an integral part of comprehensive school health programme, as both depend on and reinforce each other.
5. Establish operation and maintenance mechanisms for WASH in Schools: Allocate specific and adequate budgetary allocations for operation and maintenance of WASH facilities with appropriate technology (including running water, provision of soap and consumables/hygiene kits) to enable schools to keep their WASH facilities working.
6. Practice good hygiene: Ensure that all students, teachers and staff members drink safe water, use clean toilets and practice basic hygiene. The Education sector will progressively build good WASH practices in school, using skills-based education, based on daily group activities using appropriate group facilities.
7. Establish EMIS as the common, reliable, database for planning and monitoring of WASH in Schools, for use by all stakeholders.
8. Monitor WASH in Schools access, functionality and use: Improve WASH in Schools monitoring, (define measurable indicators and update indicators definitions as progress is made) through harmonized EMIS, and use the data for more equitable and transparent programming and resource allocations. Ensure basic hygiene behavioural practices through children participation in school and community.
9. Raise the profile of WASH in Schools and mobilize partners to create a social movement: Involve community members, households, students, teachers, civil society, local and mass media, local government, parent-teacher associations, private sector, community and Ministries of Health and Social Welfare in the planning and action for WASH in Schools. Ensure all children participate meaningfully in WASH in Schools and that forums are created for their voices to be heard and acted upon.

Source: WASH in ALL SCHOOLS - Making It a Reality: South Asia Conference Report April, 2012

2 WASH in Schools – India

WASH in Schools in India supports global efforts to realize the vision of a world where all children attend schools that provide a safe, healthy and comfortable environment where they can grow, learn and thrive. Evidence shows that WASH in Schools can improve attendance, health and cognitive development (See box 2.1).

WASH in Schools in India is driven by consolidated efforts of government, policy makers, implementers, communities and parents to realize the goal of ensuring that every child receives the benefits of WASH. Critical steps have been taken by government to ensure that policies for improving WASH are implemented. Mechanisms are being put in place to safeguard sustainable programming and there has been a call for improved monitoring to ensure that every child has access to safe drinking water, sanitation, handwashing facilities and hygiene promotion.

Due to these consistent and committed actions, India has made strides in WASH in Schools. Data shows that there has been an increase in coverage of schools with drinking water from 87% in 2007-08 to 95% in 2012-13. India's strong commitment to WinS has steadily increased the levels of children's access to drinking water and sanitation facilities (Fig. 2.1). Despite these achievements much needs to be done to ensure that all children have equal access, thereby benefitting from the health and education impacts of this intervention.

Challenges for WASH in Schools in India

Despite a favourable policy and administrative setting there are still challenges in terms of access to quality child friendly infrastructure and capacity to influence sustained behaviour change, ensuring improved water quality and functionality of WASH systems.

Water and sanitation facilities

Urban and rural schools face similar challenges for safe drinking water and toilet facilities. 40% of schools still do not have access to safe water and toilets.

Box 2.1: Four key benefits of WASH in Schools

- WASH in Schools provides a healthy and protective school environment minimizing the risk of disease, abuse and exclusion. A child friendly environment ensures that every child's basic needs are met, thereby contributing to the right of every child to receive quality education, with better health and equity outcomes.
- WASH in Schools encourages pride and commitment to school, by the children and their communities. Children are great agents of change who can contribute to facilitate the uptake of positive behaviours in water sanitation and hygiene.
- WASH in Schools is an investment in the health and well-being of future generations, valuable commodities for the countries' development and growth.
- WASH in Schools promotes equity. All children have the right to access child friendly WASH facilities, helping children reach their full potential. This includes the provision of separate toilets for boys and girls, ensuring privacy and dignity and contributing to girls' school attendance and retention. Accessible WASH in Schools facilities also means inclusion for children with special needs.

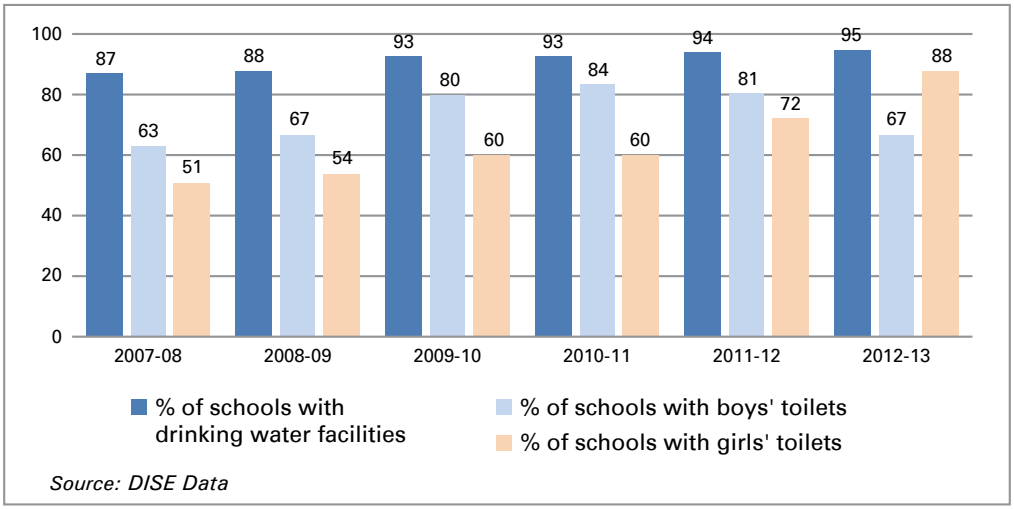


Figure 2.1: Water Supply and Sanitation Facilities in India 2008–2013

Box 2.2: Policy environment for WASH in Schools in India

Constitution

- Article 21-A "free and compulsory education of all children in the age group of six to fourteen years as a Fundamental Right".

Legislation

- Right of Children to Free and Compulsory Education (RTE) Act, 2009.
- RTE necessitates ensuring drinking water and sanitation facilities at school level.
- Supreme Court sets deadline for all states to ensure water and sanitation facility by November 2011.

Policy Implementation

- Sarva Shiksha Abhiyan (SSA) for universalizing elementary education.
- School Sanitation and Hygiene Education (SSHE) component of Total Sanitation Campaign (TSC).
- Nirmal Gram Puraskar (Clean Village Award) mandates functional toilets in all Government, Government aided and private schools and all co-ed upper primary schools to have separate toilets for boys and girls.
- NGP incentive amount can be used for creation of additional sanitation facilities in schools and anganwadis and construction of incinerators in girls' schools.

"Getting school WASH right is not so much about math (counting beneficiaries), but more about the ABCs: Aligning with national priorities, documenting and using Best practices, and Coordination with governments, other players, other sectors and with community-based efforts."

– Notes from a Panel Discussion

- Number of schools having separate toilet facilities for girls has increased from 0.4 million (37%) in 2005-06 to 1.24 million (88%) in 2012-13.
- In all, more than 89 million girls in schools have access to toilet facilities but 7 million (7%) girls do not have access to this facility.
- Number of schools having separate toilet facilities for boys have increased from 0.4 million (31%) in 2005-06 to 0.9 million (67%) in 2012-13.
- In all, more than 79 million boys in schools have access to toilet facilities but 23 million (22%) boys do not have access to this facility.

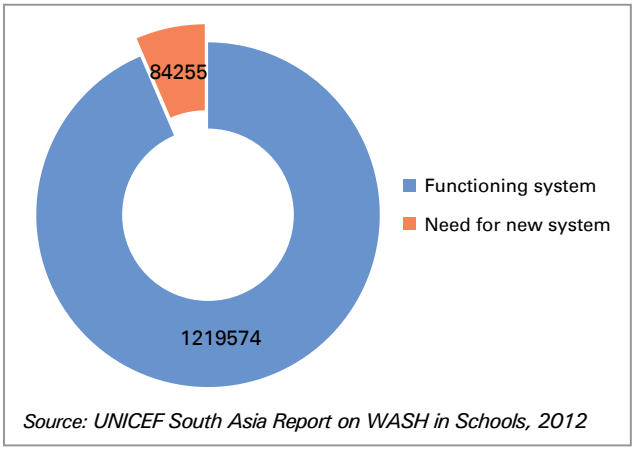
Source: DISE, NUEPA, New Delhi

Functionality of drinking water facilities

- Of the 92% of schools reported to have drinking water facilities, only 82% have improved drinking water facilities. Only 79% of these facilities function.
- 4 states (Andhra Pradesh, Assam, Bihar and Rajasthan) account for more than 50% children without access to drinking water facility in schools.
- Water quality remains a major issue, as many rural schools do not have adequate water treatment facilities to test for contaminants like iron, arsenic or fluoride.

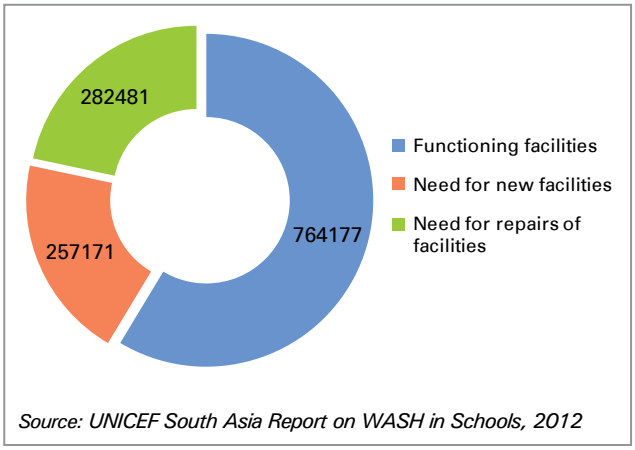
Access to toilets

- Only six out of ten schools have functioning toilet facilities. In three states less than 50% of toilets are functioning. An independent assessment of WASH facilities in schools highlights similar trends. Of the rural schools assessed one in ten does not have toilet facilities. Where toilets exist only one in two is usable.
- Functionality of toilet facilities in schools is less than the national average in 13 states.



Source: UNICEF South Asia Report on WASH in Schools, 2012

Figure 2.2: Water Supply Facilities in Schools in India



Source: UNICEF South Asia Report on WASH in Schools, 2012

Figure 2.3: Sanitation Facilities in Schools in India

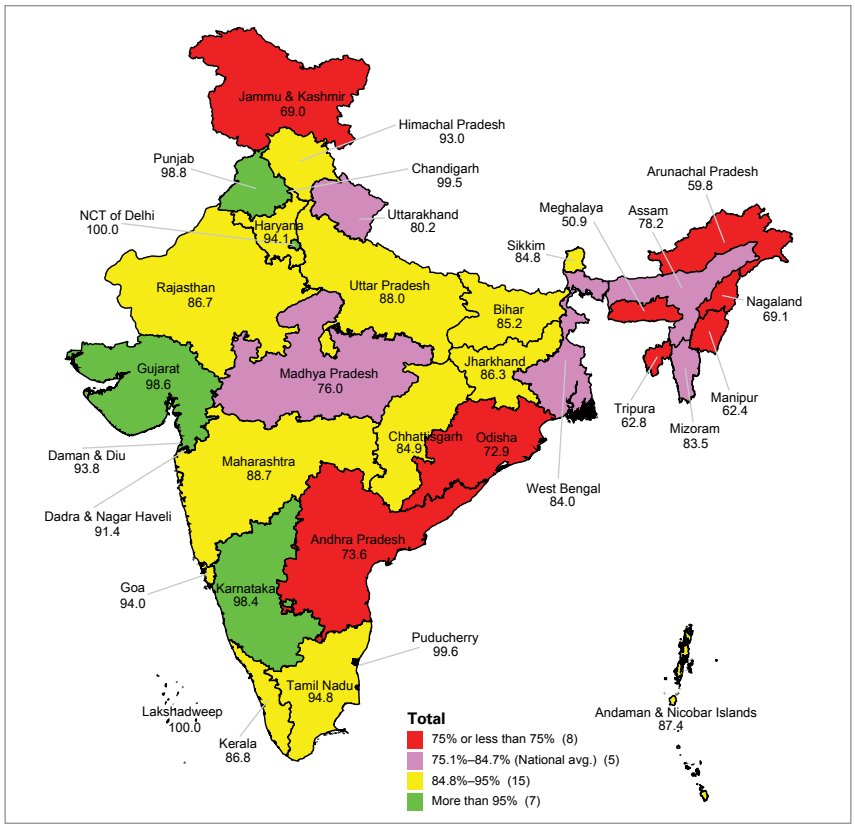


Figure 2.4: State-wise Functionality of Drinking Water Facilities in Schools in India*

**Source: U-DISE, 2012-13, NUEPA, New Delhi*

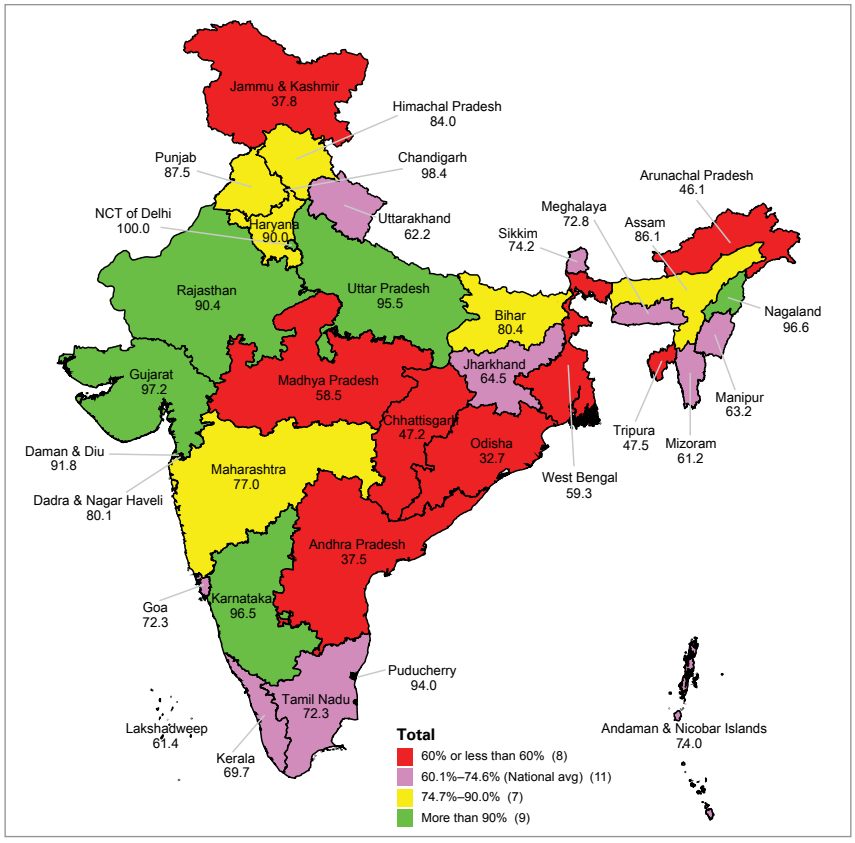


Figure 2.5: State-wise Functionality of Sanitation Facilities in Schools in India*

**Source: U-DISE, 2012-13, NUEPA, New Delhi*

Box 2.3: Study on gaps in WASH in Schools

A recent survey conducted by WaterAid in the state of Andhra Pradesh in 347 schools found the following:

- Only 36% of the school toilets were in use
- Only 29% of the schools maintained their toilet facilities
- Only 50% of the teachers surveyed had access to toilets
- Cleaning staff were available in only 45% of the schools
- Of the 50% of schools that distributed sanitary napkins only 25% provided disposal options for girls
- Over 60% of the girls went home during menstruation
- 79% of the schools reported teaching hygiene education such as handwashing with soap
- 74% of school children reported handwashing with soap
- 69% of schools have drinking water facilities, however none of them had quality testing systems in place

Case Story 2.1: National

WASH in Schools tops Government of India agenda

The Government of India has taken critical steps to scale up child friendly WASH in Schools across India by calling for increased efforts in the provision of sanitation and hygiene facilities in all schools.

In a Ministerial circular sent to all states the MHRD Ministry encourages them to take the necessary steps required to ensure an "effective and wholesome" WASH programme in their states highlighting 5 key strategies:

- Creating an enabling environment for better sanitation and hygiene standards through the timely provision of separate toilets for boys and girls and safe drinking water.
- Ensuring the provision of these facilities through convergence with schemes by the Ministry of Drinking Water and Sanitation for total coverage with periodic monitoring.
- Addressing the issue of non-functioning WASH facilities in some schools. States are to use resources and funds designated for operation and maintenance for regular cleaning and upkeep of water and sanitation facilities.
- Strengthen convergence with Department of Health to ensure periodical health checks for all school children through the National Rural Health Mission.
- Creating awareness among school children about the use of safe drinking water, toilets and good hygiene practices for social change. These key messages should be incorporated in the curriculum, teacher training programmes. Teachers should be encouraged to promote these key messages to school children to facilitate behaviour change.

Case Story 2.2: National

Government takes action for WASH in Schools

The Ministry of Human Resource Development, Department for School Education and Literacy has put WinS on the education agenda. Highlighting the impact of poor water, sanitation and hygiene on child health, the Ministry calls for all state departments to roll out handwashing with soap as part of the flagship welfare programme the Mid Day Meal, served to nearly 110 million children in 1.3 million primary and upper primary schools across the country.

Recognized as one of the simplest and most cost effective behaviour change interventions with proven impact on diarrhoea reduction, the government is now committed to handwashing with soap, a life-saving practice at one of the critical times, before eating. It is expected that this can help reduce absenteeism as a result of sickness from diarrhoea and respiratory infections.

Handwashing with soap before the Mid Day Meal is a significant shift in government programming. It aims to foster this essential life skill in children who can become agents for behaviour change in their homes and communities. In view of the huge benefits of this simple habit, all states are called to mainstream handwashing with soap by all children before the Mid Day Meal in all government schools by ensuring the availability of soap in all schools, organizing a dedicated time in the daily timetable to allow enough time for all children, cooks and teachers to wash hands together, essentially instilling the habit through daily communal practice. To ensure this is sustained, states are encouraged to provide handwashing facilities, monitor and provide data on the quantity, quality and functionality of WASH facilities for effective WASH in Schools. *"All of us in the field of education have a responsibility to ensure the health and well-being in the school community,"* says Dr. Amarjit Singh, Additional Secretary (erstwhile), Ministry of Human Resource Development. He emphasizes the importance of WASH for equity and development: *"Apart from disease prevention, Water Sanitation Hygiene (WASH) in schools has a profound impact on the learning and health of children especially for girls. It is directly related not only to physical, mental and social health, but ultimately to economic and political development."*

Case Story 2.3: Odisha

Kick-starting WinS Programmes

WinS partners have been engaged in various WASH activities aimed at improving the lives of children and create a positive learning environment for children. One such example is Plan India whose programme being implemented in two districts in Odisha, is designed to reach the most vulnerable and deprived communities in a state where government records show that two thirds of schools lack adequate sanitation facilities. Schools were selected based on need and overall goal to create a spark mobilizing communities for change.

As part of this process school management committees were given responsibility for constructing WASH facilities, health clubs were established and WASH champions emerged. They were encouraged to disseminate hygiene messages at school and in their communities. They carry out door-to-door hygiene promotion to increase awareness and raise the profile at household level for the uptake of good sanitation and hygiene practices.

Implementing Agency: Little Star Federation

Facilitating Agency: Plan India

3 WASH in Schools – Improves Children's Health

Learning, hygiene and health are strongly inter-linked as children absent themselves from school or perform poorly when they are suffering from WASH-related illnesses. Children get sick in school because illnesses can spread very fast where many children are closely confined together for many hours a day, often in poor hygienic conditions.

Recently it has been estimated that infections which children contract in schools will lead to infections in up to half of their household members[1] and that 88% of diarrhoeal diseases are caused by unsafe water supply, inadequate sanitation and inappropriate hygiene.[2] For schools, the health focus is generally on diarrhoea, worm infections and respiratory infections because these diseases affect school-going children most and the incidence of such illnesses can be greatly reduced through improved WASH facilities and behaviour in schools:

1. The use of improved sanitary facilities reduces the incidence of diarrhoea by 34%.[3] Washing hands with soap after toilet use and before eating has been cited as one of the most cost-effective public health interventions because it can reduce the incidence of diarrhoea by almost 40%.[4]
2. A study[5] comparing results from different countries found that handwashing can cut the risk of respiratory infections by 16%. However, more research is required on the expected rate of reduction.
3. All cases of roundworm, whipworm and hookworm infestation are attributable to poor sanitation and hygiene.[6] Around 47%[7] of children (ages 5-9) in the developing world suffer from worm infestations. It is quite common for children living in developing countries to be chronically infected with all three types of worms. Such children suffer from malnutrition, intellectual retardation, as well as cognitive and educational deficits.[8] Tests have shown that a child's memory, executive function, language and problem solving skills as well as attention span respond positively to periodic deworming. Interestingly, girls display greater improvements than boys.[9]
4. Studies conducted regarding absenteeism caused by gastrointestinal and respiratory-related illnesses in industrialized countries show that as the result of improved hand hygiene in schools the number of days lost can drop between 25 and 50%.[10]

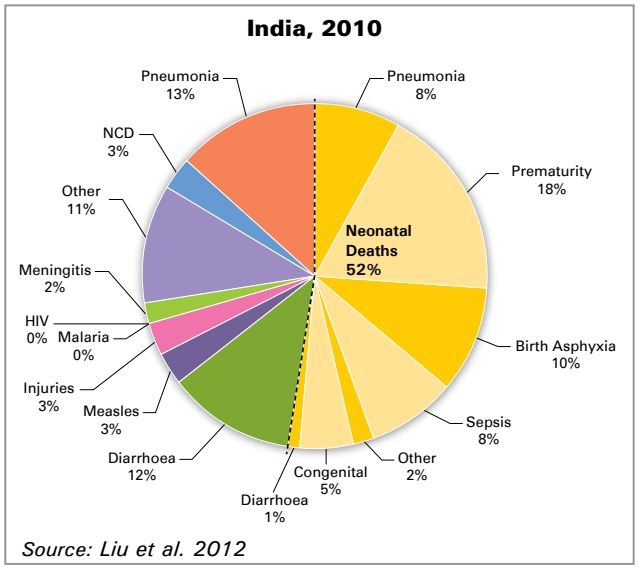


Figure 3.1: Causes of Infant Deaths in India

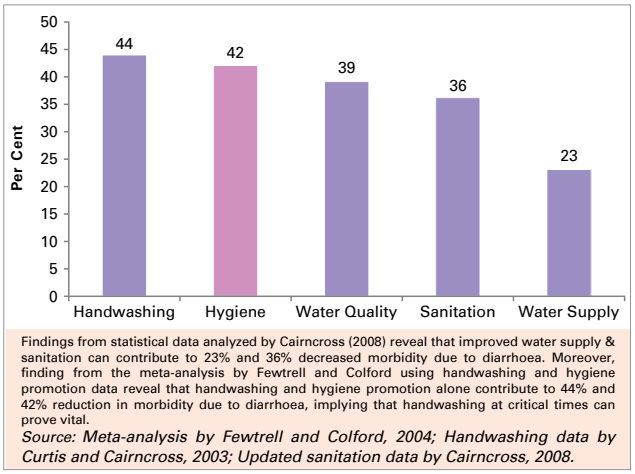


Figure 3.2: Percentage Reduction in Morbidity from Diarrhoeal Disease due to Improved Facilities and Hygiene Practices

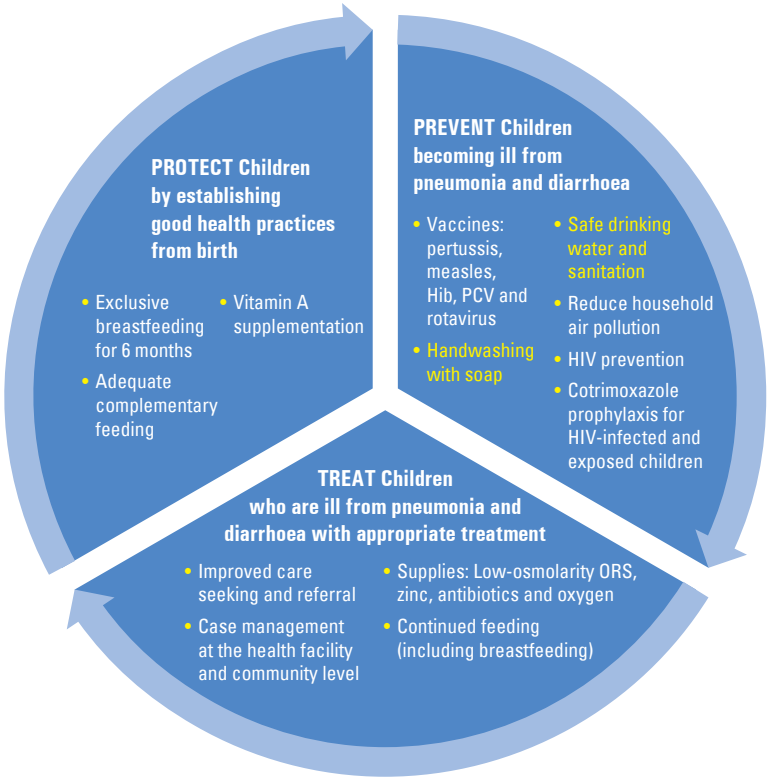


Figure 3.3: The Integrated Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea (GAPPD) – UNICEF and WHO 2011

Case Story 3.1: Andhra Pradesh

Research on Handwashing

Analysis of a unique "Super Amma" (Super Mum) handwashing campaign shows for the first time that using emotional motivators, such as feelings of disgust and nurture, rather than health messages, can result in significant, long-lasting improvements in people's handwashing behaviour, and could in turn help to reduce the risk of infectious diseases.

"Handwashing campaigns usually try to educate people with health messages about germs and diseases, but so far efforts to change handwashing behaviour on a large scale have had little success. Understanding the motivating factors for routine handwashing is essential to any initiative likely to achieve lasting behaviour change."

In this cluster-randomized community trial, researchers from St. John's Research Institute and communications consultants from the Center of Gravity in Bangalore, India, tested whether an intervention designed to increase handwashing with soap in southern Andhra Pradesh, India, was successful in bringing about behavioural change. As part of the Super Amma intervention, promoters staged community and school-based events involving animated films, comic skits, and public pledging ceremonies during which women promised to wash their hands at key occasions and to help ensure their children did the same. These activities targeted emotional drivers found to be the most effective levers for behaviour change: disgust (the desire to avoid and remove contamination), nurture (the desire for a happy, thriving child), status (the desire to have greater access to resources than others), and affiliation (the desire to fit in).

An evaluation of the behaviour-change intervention, published in *The Lancet Global Health* journal, shows that six months after the campaign was rolled out in 14 villages in rural India, rates of handwashing with soap increased by 31%, compared to communities without the programme, and were sustained for 12 months.

Box 3.1: The Parma Declaration

The Parma Declaration on Environment and Health was issued on 11 March, 2010 by ministers and representatives from the member states in the World Health Organization European Region. Ministers from several European countries and representatives from the United Nations Economic Commission for Europe, the United Nations Environment Programme and WHO, collaborated to acknowledge the links between health and the environment, and to create a time frame for achieving public health goals.

The Parma Declaration set the foundation for efforts to reach the goals established in the 2004 Children's Environmental and Health Action Plan for Europe. Primary among these goals is access to safe water and sanitation. The declaration commits the ministers and representatives to provide every child with access to safe water and sanitation in homes, educational centres, health-care institutions and recreational settings by 2020.[11]

Case Story 3.2: National

"Bowl Out Diarrhoea": An innovative approach to behaviour change

Sanitation remains one of the biggest challenges in India. Over 600 million people continue to defecate in the open, despite the efforts of NBA, the flagship sanitation programme which pays incentives for household toilet construction. These figures negatively impact global and national efforts for reaching the Millennium Development Goals for sanitation. For most households in India building and using a toilet is not viewed as a priority as the practice of open defecation is socially accepted. With this in mind, the government has put more emphasis on increasing knowledge and awareness about the ill effects of this practice, as well as promotion of other key hygiene interventions, such as handwashing with soap after defecation and before handling food, safe disposal of child faeces and safe handling and storage of drinking water. It is hoped that this new focus will lead to the uptake of good sanitation and hygiene practices leading to social transformation.

Innovations for behaviour change

Games for change: Game based learning (GBL) is a key approach used by for promoting WASH-related behaviour change through interactive, child focused, fun-filled activities and sports, which are instrumental in disseminating hygiene messages, which allow children to learn through play and retain and apply the knowledge gained to their daily lives. Children are given rewards to make them feel good about taking part, as well ensuring that they take away key messages to share with peers and families.

The power of sport: Cricket and football has been used to disseminate sanitation and hygiene messages as well as bring attention to key WASH issues. The use of Cricket stars as role models has also been a strong advocacy tool for WASH, particularly to engage children who often aspire to be like their sports role models, and are therefore likely to adopt and practice behaviours practiced by their role models.

Interactive games for good hygiene

Other interactive techniques used include:

- "Blue/Germ Hand Game" used to illustrate germ transmission and the importance of handwashing with soap after using the toilet.
- The "Handwashing Challenge" demonstrates the effectiveness of soap in removing germs and steps to handwashing with soap.
- The "Tippy Tap competition" encourages children to build their own low-cost handwashing stations.

Comic-style posters, featuring stories on the importance of practicing good WASH habits to help children stay healthy, safe and strong, are used as supportive materials for these interventions.

Implementing Agency: WASH United

Case Story 3.3: National

Global Handwashing Day – More than a day

India has been part of Global Handwashing Day celebrations since 2008. It embraced the Call to Action to promote the adoption of handwashing with soap at critical times; to make it a habit that is adopted by key institutions, such as schools and child care centres, in order to effect change in the lives of children who are the main beneficiaries of this simple but highly effective practice.

In 2012, an estimated 89 million children in schools and pre-school (Anganwadis) centres across India participated in activities across the country. Primary focus for GHD celebrations was institutionalizing handwashing by all children in all schools before the Mid Day Meal.

Why handwashing with soap?

Over 1,00,000 children, below the age of 11 months, die of diarrhoea annually in India which is the second leading killer of young children globally, after pneumonia. A latest study [Global Enteric Multicenter Study (GEMS), published in the Lancet in 2014] has suggested that India accounts for the highest number of diarrhoeal deaths. Evidence shows that children are most vulnerable to morbidity and mortality from diseases such as diarrhoea and pneumonia, which are easily preventable from handwashing with soap before eating and after defecation.

Main objectives for Global Handwashing Day in India

- Raising awareness among children, teachers, caregivers and the general public on the importance of handwashing with soap before eating and after defecating
- Creating systems and putting mechanisms in place to make handwashing an integral part of the Mid Day Meal Programme in all schools and pre-schools
- Raising the profile of Global Handwashing Day and addressing key bottlenecks in water, sanitation and hygiene programmes in schools

Key approaches

This hygiene promotion event focuses on children because they are the most energetic, enthusiastic and open to new ideas and change. As powerful agents of behavioural change children can take lessons they have learned at school back home to teach their parents, siblings and elders on good hygiene behaviours such as handwashing with soap.

The Mid Day Meal which is a government flagship programme operational in all schools across India serves nearly 120 million children in 1.3 million primary and upper primary schools. It provides an excellent opportunity to influence hygiene practices of children particularly handwashing with soap before meals. Learning this simple, but lifesaving habit in school, also means that children can inculcate this among other household members too.

Case Story 3.4: Uttar Pradesh

Alonso's winning formula for clean hands in Uttar Pradesh

Spanish Formula 1 driver and UNICEF Ambassador, Fernando Alonso, gave his support to the practice of handwashing with soap on his visit to Gautam Buddha Nagar District, Uttar Pradesh, for Global Handwashing Day 2012.

On his visit to a school in Tugarpur village he joined children in celebrating the event and encouraged participants to adopt this very simple act, which can save hundreds of thousands of children who needlessly die every year from diarrhoea. *"Hygiene is critical to good health as it reduces the transmission of disease,"* Alonso said.

The two-time world champion met and interacted with pupils and teachers who shared their views on the need for access to safe drinking water supply and sanitation. At school they have access to safe drinking water and child friendly WASH facilities. With good hygiene education and the promotion of handwashing with soap at key intervals; after defecation and before eating, they are clear about the importance of the adoption of good hygiene behaviours.

"Hygiene is critical to good health…we don't need a magic formula. We only need to know the importance of good hygiene"

So, what is Alonso's winning formula for the health and well-being of the children in Tugarpur? Soap and water. He encouraged all to simply wet, rub and rinse for cleaner hands and better health.

4 WASH in Schools – Boosts Attendance and Achievement

In the long term, educational achievement is one of the most important determinants of health, life expectancy, economic productivity, and the wellbeing of future generations. Safe water to drink, water and soap to wash hands, and clean and private toilets make healthy, child-friendly schools, and healthy schools make healthy children. Young children are more vulnerable to the ill effects of unsafe water, insufficient quantities of water, poor sanitation and lack of hygiene. Girls and female teachers are usually more affected than boys by the lack of sanitary facilities, because this may mean that they cannot attend school during menstruation, thereby giving rise to unequal learning opportunities. Some studies in rural India report that girls' attendance at schools rises when communities gain access to water, leading to a general rise in literacy levels in the area.[12] Studies from India and Nepal have presented some evidence, though self-reported, that when girls have access to safe and clean toilets and water at school, they are somewhat less likely to miss school during their menstrual cycle each month.[13] However, the presence of sanitary products, safe and clean toilets and sufficient water goes hand-in-hand. Each contributes to the creation of a clean, safe, and girl-friendly school.[14]

Box 4.1: Benefits of a well run WinS Programme

An efficiently and effectively implemented WASH in Schools Programme will lead to students who:

- Are healthier
- Perform better in school
- Positively influence hygiene practices in their homes, among family members and in the wider community
- Learn to observe, communicate, cooperate, listen and carry out decisions about hygienic conditions and practices for themselves, their friends and younger siblings whose hygiene they may care for (skills they may apply in other aspects of life)
- Change their current hygiene behaviour and continue better hygiene practices in the future
- Learn about menstrual hygiene and physical and emotional changes during puberty (learning to avoid menstrual odour, discomfort and urinary or vaginal infections will encourage girls to come to school during menstruation)
- Practice gender-neutral division of hygiene-related tasks such as cleaning toilets, fetching and boiling water and taking care of the sick.

Source: WASH in Schools – A companion to the Child-Friendly Schools Manual (UNICEF - 2012)

Dep. Ed.'s Essential Health Care Programme

Daily Handwashing

- Handwashing with soap
- Group activity
- Part of daily school routine
- No piped water needed
- Supervised by teachers and children

Daily Toothbrushing

- Toothbrushing with fluoride toothpaste
- Group activity
- Part of daily school routine
- No piped water needed
- Supervised by teachers and children
- Reduction in tooth decay by 40-56%

Bi-annualDeworming

- Supervised ingestion of albendazole
- Supervised by teachers
- Parent consent
- Reduction in worm load by 50%

Reduction of absenteeism by 25%, underweight children by 20%

The Essential Health Care Programme

Results compared to control schools after one year

Percentage Reduction

- Days of absence in 2009 – 27.3%
- Below-normal BMI (thin) – 20.4%
- Heavy worm infection – 47.2%
- Opportunities for tooth decay – 38.5%

Source: GIZ, 'Fit for School First Year Evaluation', 2010.

Figure 4.1: The Department of Education, Philippine, Essential Health Care Programme and its Impact on School Children

Case Story 4.1: Bihar

Child Profile – Saif Ali

"I want to be like A.P.J. Abdul Kalam!" (a scientist and former President of India), exclaimed Saif Ali excitedly, when asked about his dreams. Saif Ali is an 11-year-old student from Phulwari Sharif Middle School in Bihar. His father, Mohammad Bansi, earns 400 rupees a day (approximately £5) to feed, clothe, educate and provide medical care for a family of ten, living in a cramped 3 bedroom house. They do not have a toilet, so his family has to use the community toilet which is poorly maintained and filthy or defecate in the open.

Saif is a keen student who attends the local government school where he has consistently been at the top of his class. However, a year ago he began feeling weak and complained of frequent stomach aches. He was taken to a local doctor who prescribed some painkillers, but his condition continued to deteriorate – he lost his appetite and felt weak and tired. He found it difficult to study and over time his grades slipped, causing him to fall behind other children in his class.

A solution for Saif's condition was found by the school authorities. His teacher told the class that all the children were to be given Albendazole tablets to treat worm infestation. The medication was provided to the children under the State Government Programme with the assistance of Deworm the World. Saif was given a small tablet by a trained teacher who made sure the pill was taken and recorded basic information about him to help monitor his progress. Health care workers were available in the event of a rare side effect and to discuss issues with concerned parents or children.

"The tablet tasted sweet when I took it", said Saif. "Almost the very next day I started feeling better. I felt hungry and ate well. As the week went on I gradually got my energy and stamina back. Now my concentration level is improving and I am able to concentrate on my studies. My parents are also happy when they noticed my improvement. I feel good and think that one day I'll be like the man of my dreams."

It is hoped that after the school-based deworming campaign, millions of children like Saif will have a better shot at becoming the men and women of their dreams.

Case Story 4.2: Andhra Pradesh, Bihar, Delhi and Rajasthan

Deworming for better health outcomes

India has over 250 million school-age children suffering from intestinal worms. For these children, the consequences of worm infestation can be devastating resulting in malnutrition, iron deficiency, stunted growth and cognitive impairment. Not only does this impact school attendance, but some evidence also suggests that physical and cognitive disabilities associated with iron deficiency alone, cost less developed economies as much as 4% of the GDP. This has led to school based mass deworming programmes designed to be administered to children, in order to improve education and health outcomes. For assured impact, administering deworming treatment in schools where children are found in large numbers through teachers, has been identified as one of the most cost-effective developmental interventions.

India has seen increased mass deworming programmes being implemented in 4 states across the country (Andhra Pradesh, Bihar, Delhi and Rajasthan). In Bihar, with the support of the State Government, MSDF and Deworm the World, 17 million children were covered, making it the largest school-based deworming initiative in the world. In Delhi and Rajasthan the programme was able to reach approximately 3.5 million and 16 million children respectively.

Key factors for effective implementation and scale-up of mass deworming

- **Evidence based programming:** The programme was initiated after studies which estimated the prevalence of worm infections, which made it clear that mass deworming was required.
- **Stakeholder buy-in and coordination:** Rolling out large scale deworming requires buy-in and close coordination amongst stakeholders (Government, drug companies, and donors). This demands perseverance to ensure sustained commitment and coordination.
- **The ability to leverage and streamline existing structures:** Partnership with government is central to the programme's success enabling implementers with support of government to identify and use existing infrastructure and resources for teacher training, community sensitization, drug delivery and monitoring.
- **Independent monitoring:** There is a wealth of impact data to show the effectiveness of mass deworming from a health perspective. So the objective of monitoring should be to assess the effectiveness of the implementation plan and confirm that every child receives a deworming pill.

Implementing Agencies: Michael & Susan Dell Foundation and Deworm the World

Case Story 4.3: Odisha

School Sanitary Block: Students feel more comfortable in school than home!

Tentulida is a small community comprised of 121 households from various groups in Bhadrak District of Odisha State. Eight kilometres away from the nearest town, access to Tentulida is limited to a small dirt road which is often cut off during monsoon season. There is one primary school with 127 pupils and two teachers. With poor sanitation and drinking water facilities, attendance rates were low, with only 85 to 90 pupils attending on a regular basis. Although there was a toilet, it was dilapidated and not well maintained. Children had to defecate in the open, which meant that there was no privacy and dignity, especially for girls. There was no access to drinking water or handwashing facilities. The environment was unhygienic, foul-odoured and full of flies due to open defecation sites all around the school yard.

Parents were consulted about the poor attendance records in the school. They reported that the poor WASH facilities were the primary cause for poor attendance. The pupils were not the only ones affected by lack of adequate WASH facilities; teachers also reported being affected by the poor facilities; *"We faced a lot of problems due to lack of toilet and urinal facilities. In fact we wrote to authorities requesting support for reconstruction of the existing facilities".*

Following a community WASH assessment, a local organization supported by WaterAid, helped the school construct sanitation blocks with separate units for boys and girls, installed force lift water pumps with an overhead tank and handwashing facilities. To increase hygiene awareness, a school sanitation committee and child cabinet were formed. These were integral to the hygiene promotion programme. Children were given the responsibility of monitoring facilities and promoting key hygiene messages to their peers, ensuring maintenance and appropriate use of the new sanitation and hygiene facilities and ensuring that the school environment is kept clean and safe.

Thanks to this intervention school attendance has risen and absenteeism due to illness has dropped. *"Now we feel happy to be here in school," said Lipika Bal, member of the Child Cabinet. "The water and toilet facility in our school is better than what we have at home. School is a more comfortable place for us. In other schools, children prefer not to go to school during the rainy season, because they do not have toilets. Now we love coming to school because we have separate clean toilets, we have water for drinking and we are also lucky to have handwashing basins so that we can wash our hands before we eat."*

Case Story 4.4: Jharkhand

Creating an enabling environment for better learning outcomes

Improving school attendance is critical to WASH in Schools. Like many other government schools in the State of Jharkhand, Jogia Middle School had high records of poor attendance and drop-out rates. Gram Jyoti, a community based organization supported by WaterAid, conducted a rapid needs assessment to identify the underlying issues affecting poor attendance rates. Their assessment found that over half of the school population were girls. A large proportion of them regularly reported sick from water related diseases such as diahrroea. Parents complained of the lack of functional toilets in the school which discouraged girls from attending classes regularly. With such little support from district authorities, parents were not very enthused about insisting that their girls attend schools regularly.

By mobilizing community support, participation and commitment to improve the school environment, Gram Jyoti was able to improve access to WASH facilities by ensuring girls' toilets were user friendly and by enabling access to water for cleansing and handwashing. They also created demand-seeking behaviour within the school community, by raising awareness of teachers and pupils on WASH issues and providing them materials for hygiene education, and by establishing forums for children and teachers to voice their opinions and demand services from district authorities.

"This initiative has been a great success and because of what we have achieved here other schools are following suit. The government is also using our school as a good example in our district. It makes me feel so proud of what we, pupils, parents, teachers and Gram Joyti have achieved. The sickness rate has gone down because our children are practicing good hygiene like washing their hands with soap after using the toilet. School attendance has also increased and our drop-out rates have markedly reduced", said the head teacher of Jogia.

This success story has led government to provide funds for other schools to improve WASH facilities having seen its impact on health and education especially for girls.

5 WASH in Schools Promotes Equity

Fulfilling the rights of every child to ensure that they reach their full potential is central to programming for children. In line with the Convention on the Rights of the Child, this means that all children regardless of race, gender, class, religion, ability, geographical location have an opportunity to survive, develop without discrimination. This is one key aspect of strategic programming which ensures systems that allow access to all are put in place to meet the needs of all children.

Equity, Inclusion and Sustainability

Addressing discrimination in schools remains a challenge. All children have the right to be treated with dignity and respect. Since school is a central aspect of their lives where they are being moulded into the adults of tomorrow, it is necessary for steps to be taken by programmers and implementers to ensure that children who are socially marginalized or excluded, are supported to help overcome ingrained beliefs that they are not "born equal". By improving training and support systems to teachers, they in turn can understand the importance of belonging and equity for a just and productive society.

In a recent study,[15] researchers have explored inequities that are evident at the sub-national and school levels. The dimensions, as outlined below, were identified through a literature review, with specific focus areas derived from discussions with country-level and international stakeholders:

- **Urban-rural disparities:** Schools in urban and rural areas have varying access to replacement parts and require different low-cost technologies.
- **Climatic or geographical conditions:** Schools in semi-arid or arid areas may require more expensive technology for water access and may require sanitation facilities that use little or

Box 5.1: Study on Equity in School Water and Sanitation in South Asia – Findings

This study was conducted in the countries of Bangladesh, Bhutan, India and Nepal in 2009 and the findings were as follows:

- In all countries there were examples of schools with insufficient or inoperable water and sanitation facilities, hence creating a situation which disadvantaged all children. In many instances, there appeared to be confusion as to who had responsibility both for maintenance and for providing simple necessities such as materials for cleaning and soap for handwashing.
- In all countries adolescent girls were seen to face considerable disadvantage when they were menstruating. There was absence of any means of disposing of sanitary pads or washing cloths, as well as facilities which did not allow them necessary privacy or dignity. The result was that a large proportion of girls simply did not attend school for several days each month.
- Findings on discrimination against children for issues related to water and sanitation were more mixed and varied both between countries and within individual countries. However, there certainly were indications that some children were treated less favourably than others.

Good Practice: All country studies showed that practice was very varied and all of them had examples of excellent practice, which included:

- Sufficient and well maintained facilities
- Clearly worked out systems of cleaning
- A positive relationship between school and community so that good practice in one is reinforced by good practice in the other
- Children who are aware of the importance of good hygiene practices
- A strong ethos of inclusion in which all tasks and privileges are shared equally and children are automatically assumed to sit together and mix together regardless of social or economic divisions

no water. In areas with sandy soils, pit latrines may not be appropriate.

- **Type of school institution:** Certain schools are supported exclusively by the community, without government support. Populations in the areas where these schools are located are typically more marginalized and the community may not have the knowledge to promote WASH in Schools or the expertise to construct appropriate facilities.
- **Regional disparities:** Certain districts or provinces may receive less funding or attention because they are farther from the capital city, more remote, have poorer road access, or are occupied by minority or marginalized subgroups, tribes or ethnicities. Explicit policies that dictate equitable distribution of resources are essential to ensure that these areas are served.
- **Gender:** Much has been written about the impact of WASH in Schools on girls. Girls typically have lower rates of enrolment and primary school completion. They are frequently required to fetch water and clean latrines, and are more affected by inadequate WASH in Schools access. Standards need to account for girls' needs.
- **Age:** Young children's needs are frequently overlooked in the design and provision of WASH in Schools facilities and promotion of age-appropriate hygiene education materials.
- **Socio-economic status, caste or tribe:** Marginalized populations have poorer access to WASH in Schools due to a multitude of reasons, including discrimination in coverage and knowledge of how to use facilities properly.
- **Religion:** Different religions require different hygiene practices. Standards must be in place to ensure that facilities create an enabling environment for children of different faiths.
- **Disabilities:** Children with limited physical mobility and reduced mental abilities face pervasive exclusion from WASH in Schools. Based on the type of infrastructure available, facilities at school often do not accommodate children with disabilities.

Equity and Gender

Girls are particularly vulnerable to dropping out of school, partly because many are reluctant to continue their education when toilets and washstands are not private, not safe or simply not available. When schools have appropriate, gender-separated facilities, an obstacle to attendance is removed.[16]

Acceptable MHM facilities

- Provide privacy for changing materials and for washing the body with soap and water;
- Provide access to water and soap within a place that provides an adequate level of privacy for washing stains from clothes/ reusable menstrual materials; and
- Include access to disposal facilities for used menstrual materials (from collection point to final disposal).

Source: WHO-UNICEF Joint Monitoring Programme, 'Consultation on Draft Long List of Goal, Target and Indicator Options for Future Global Monitoring of Water, Sanitation and Hygiene', 2012.

In India, innovative projects demonstrate that menstrual hygiene can be incorporated into broader WASH in School interventions. Training and information for peer groups of children and female teachers show how women and girls can be empowered through improved menstrual hygiene management.

WASH in Schools supports girls' education by providing:

- **Appropriate hygiene facilities:** It is a fundamental premise of WASH in Schools that, girls who have reached puberty and female school staff who are menstruating need privacy. Providing female students and staff with private and safe facilities for menstrual hygiene management enables them to be in school more often.
- **Protection from harassment and violence in toilets:** WASH in Schools provides toilets and handwashing facilities that are located in convenient, safe locations, and separated for boys and girls. This encourages healthy hygiene practices and can protect girls from being assaulted. In a survey of schoolgirls in South Africa, more than 30% reported having been raped at school. This often happened in school toilets, particularly those that were isolated from the protective school environment.
- **Knowledge for students, teachers and school administrators about the physical changes adolescent children experience:** Schools play an important role in enabling open discussions where older children feel free to talk about issues such as menstruation. Because many children start school late and repeat grades, adolescence begins when they are still in lower primary school. Therefore, this type of education should be age-oriented rather than determined by grade level.
- **Equitable responsibilities:** School WASH clubs encourage students to participate in taking care of latrines and handwashing stations, and in providing safe water where necessary. Club members create rotating lists of responsibilities, sharing sanitation- and water-related chores among both boys and girls. This fosters pride and ownership, and it counteracts the belief that these tasks are only for women and girls or particular social groups.

Menstrual Hygiene in India: Field Realities

Addressing the issue of menstrual hygiene in India is an issue of scale in many respects. India's population includes 225 million adolescent girls for whom MHM is relevant in terms of health, well-being and educational opportunity. The country has 1.37 million government schools, where adequate facilities must be maintained.

Cultural factors and economic constraints lead to poor menstrual hygiene management among girls, particularly in rural areas, as indicated in the studies noted above and other research. Evidence shows that limitations are placed on girls' mobility during their menses, which in turn limits their school attendance. More broadly within society, menstruation is found to be associated with impurity, secrecy and shame.

Economic constraints lead to girls and women having limited access to hygienic materials for managing menses. Even girls and women who have access to sanitary pads may only change them once or twice a day. Limited resources also hinder access to private and hygienic sanitation facilities, both at home and in school. Almost 63 million adolescent girls live in homes without toilet facilities.

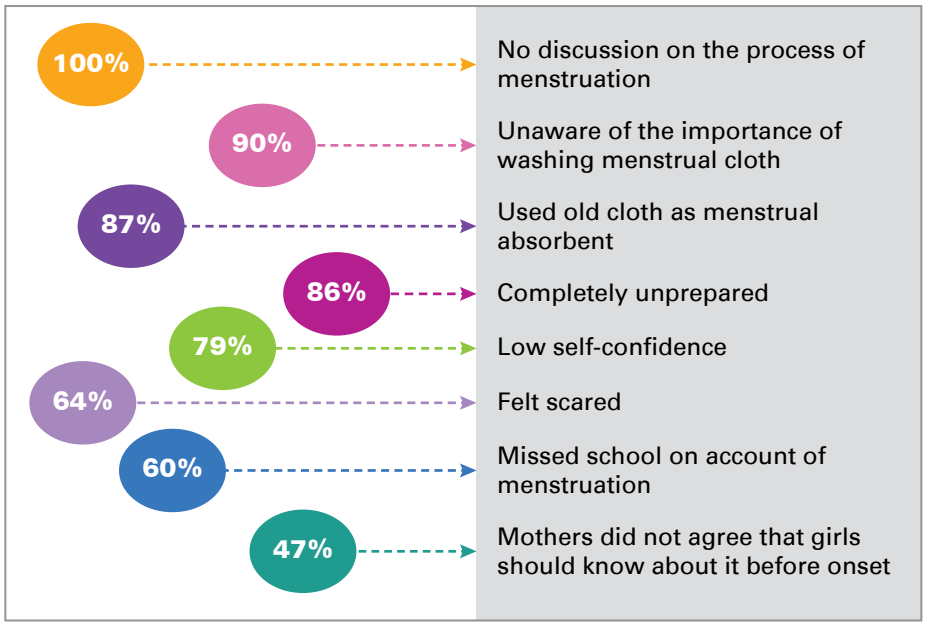


Figure 5.1: Knowledge about Menstruation – Results of a Study Conducted in Uttar Pradesh in 2013

The Government of India recognizes menstrual hygiene management as an important issue, and strides have been made towards increasing knowledge and the accessibility of sanitary materials in some areas. The National Rural Health Mission Programme, for example, provides sanitary napkins at subsidized prices to adolescent girls in 259 districts and is supporting the production of sanitary napkins by women's groups in 45 additional districts.[17]

These measures may have played a role in a higher Gender Parity Index (GPI). In enrolment at primary and secondary levels the GPI is the

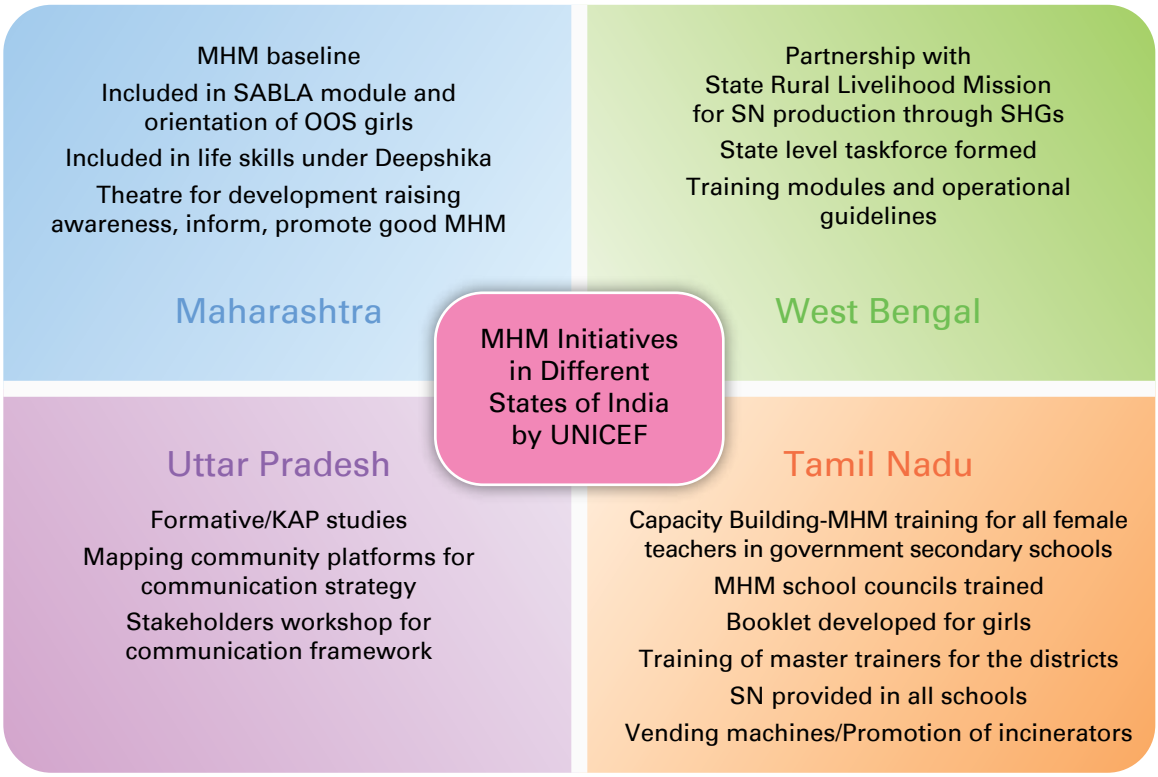
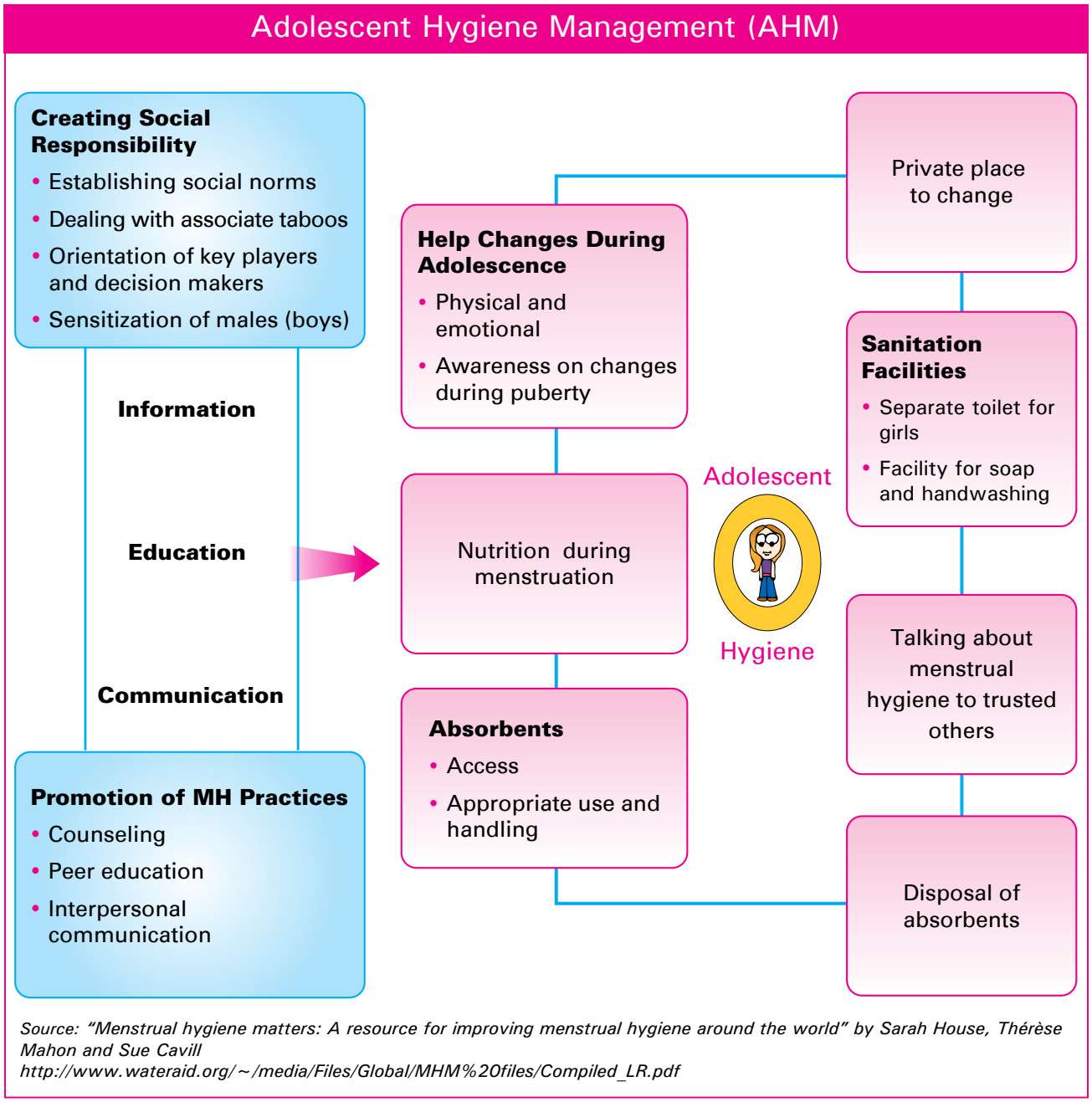


Figure 5.2: MHM Initiatives in Different States of India



Source: "Menstrual hygiene matters: A resource for improving menstrual hygiene around the world" by Sarah House, Thérèse Mahon and Sue Cavill
http://www.wateraid.org/~/media/Files/Global/MHM%20files/Compiled_LR.pdf

Figure 5.3: Illustrating Key Components of a Comprehensive MHM Programme in Maharashtra

ratio of the number of female students enrolled at primary and secondary levels in public and private schools to the number of male students. A GPI of 1 indicates parity between the sexes or no gender disparity. A GPI that varies between 0 and 1 typically means a disparity in favour of males whereas a GPI greater than 1 indicates a disparity in favour of females. In general, at the national level, the number of girls enrolled in primary and secondary education is less than their counterparts. However, the female-male ratio in education has been steadily improving over the years. In primary education, the GPI has gone up from 0.76 in 1990-91 to 1.01 in 2010-11 and in secondary education the increase is from 0.60 in 1990-91 to 0.87 in 2010-11.

Case Story 5.1: West Bengal

WASH in Schools for girls

Ambika Khatua like many rural girls in India has been faced with many challenges in managing menstruation at school. A confident and smart pupil, Ambika was frank about her experience since the onset of puberty. "I was totally shocked when I first saw my period. No one told me about it, so when it happened during class I felt embarrassed because there was blood on my uniform. I felt there was no one I could talk to. I was so afraid that there was something wrong with me".

For many girls like Ambika, talking about menstruation is considered taboo. They are unlikely to have any information before menarche from school or parents. If at all they get any information it is likely to include rules on why it is necessary to stay silent. This poses a risk to girls as they continue to practice poor hygiene during menstruation such as using old cloths that have not been properly sterilized (washed well with soap and dried in the sun), not changing regularly and not practicing handwashing with soap. As a result girls increase the risk of infections that can over time if not treated lead to reproductive tract infection.

> *"I preferred to stay at home rather than going to school during those days of menstruation because there was no availability of cloth and running water in the toilet. We faced so much trouble during those days"*

With no provision of a separate girls' toilet, changing rooms to dispose or change cloth, no sanitary napkin facilities, no incinerators or running water and soap for handwashing, Ambika confessed that she was not comfortable going to school when she was on her period missing school for days which affected her studies.

Water For People-India along with its local partner NGO, implemented School Water Sanitation and Hygiene programme which changed the lives of many girls in Ambika's school. By providing a package of financial assistance, technical and software support her school now has a sanitary block with separate toilets for girls with running water and soap, a changing room and an incinerator. Raising awareness among the girls in school on menstruation and how to safely manage menstrual hygiene is also central to their intervention.

Today Ambika is a confident and happy girl who like others in her school now understands the importance of good menstrual hygiene and is able to attend school regularly.

Implementing Agency: Water For People-India

Case Story 5.2: Uttar Pradesh

Reasons to be cheerful

Menstrual hygiene has been recognized by government as an important issue that needs to be addressed to improve quality of life and empower girls. In line with this thinking UNICEF is implementing a project in Uttar Pradesh in three districts. It aims to reaching 200,000 girls, 65,000 women and 5,000 frontline workers to improve knowledge and awareness on menstrual hygiene, using a mix of interpersonal communication change agents and mass media.

Key benefits for girls

- Girls gain a better understanding of menstruation and understand the benefits of good menstrual hygiene practices.
- Girls feel comfortable talking about menstruation and other issues related to reproductive health with their peers and other community members such as frontline workers who can also offer support.
- Girls gain knowledge and awareness of the various menstrual absorbent options available and gain confidence to seek and use alternatives.

Key benefits for community members that influence girls

- Teachers, frontline workers and women self-help groups, peer educators and promoters have the knowledge and skills to reach out to girls at school and in their communities to promote menstrual hygiene.
- Teachers, frontline workers and women self-help groups as well as peer educators become safe and reliable support systems for girls at school and in the community.

Case Story 5.3: West Bengal

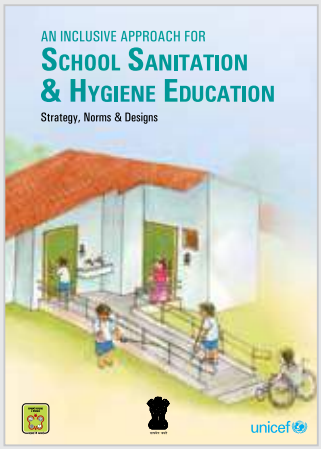
Kheyali, 13 years and Dipyanti 14 years, are both pupils of Panchagram High School in a district in West Bengal. As members of the School WATSAN committee they are determined to promote change for a healthy and conducive school environment. In their commitment to ensuring that all children benefit equally from the WASH facilities, these girls visit each of the classes to teach their peers the importance of hygiene and responsibility for all to maintain facilities.

As effective leaders they are at the forefront of the toilet cleaning rota. Of particular interest is the girls' toilets and changing rooms. They make sure soap is available for cleansing and handwashing. They are strong counsellors for the younger girls who need assistance during menstruation and make sure girls are aware of who to contact if they need napkins and how to use the WASH facilities.

Inclusion and Disability in WASH in Schools

There is considerable evidence[18] throughout the South Asian region, including India, which shows how disabled children are significantly under-represented in school, but concludes that, while lack of access to suitable water and sanitation facilities might play a part in this exclusion, the overriding reasons for this exclusion tended to be other than those related to water and sanitation.

Addressing Exclusion: WASH Interventions in a Madarsa in Uttar Pradesh



In 2008, UNICEF and the Ministry of Drinking Water and Sanitation published a manual entitled, *"An Inclusive Approach to School Sanitation and Hygiene Education (SSHE)"* which elaborated the features of the SSHE Programme, the key principles which must guide the construction of drinking water and sanitation facilities in schools as well as a decision-making tool and finally, the detailed engineering drawings and designs for 16 different core designs. The key parameters used for the design were gender, expandability, inclusiveness, strength of students and space availability.[19]

6 WASH in Schools Reaches Families and Communities

Over 600 million people in India still defecate in the open. For households that have constructed toilets, there are large numbers that do not use or maintain them. Despite incentives provided through the government flagship programme Nirmal Bharat Abhiyan, toilet use and construction remains a challenge. Other hygiene practices such as handwashing with soap, safe disposal of child faeces and safe handling and storage of drinking water are equally neglected resulting in high incidence of water-borne diseases.

One key shift by government in the implementation of this programme is recognizing the challenge in changing poor hygiene and sanitation habits that are socially accepted and which are proving to be problematic for the achievement of open defecation free status in India. To accelerate the uptake of positive sanitation and hygiene practices, the government is promoting the use of communication to increase knowledge and awareness in communities as well as for creating demand for sustainable behaviour change.

Schools can serve as an effective entry point to implementing community-based WASH programmes and putting public health policies into action. Direct engagement with students, along with interventions to reach parents and others in the community, can lead to the adoption of good WASH behaviours and improved health.[20] Although some studies have pointed to challenges in reaching parents with WASH in Schools technologies, others have found evidence of households adopting facilities and practices that originated in schools.[21] The key is to promote simple messages and low-cost approaches through schools.

School Led Total Sanitation (SLTS)

Operating within the TSC's School Sanitation and Hygiene Education (SSHE) framework, SLTS is an educational programme at the school level that strives to ignite positive behavioural change

and foster leadership in children of various ages, resulting in an open defecation-free (ODF) environment. In India, SLTS has been undertaken in multiple states, and met with particular success in Haryana, Himachal Pradesh, Meghalaya and Maharashtra.

While benefiting from the water and sanitary amenities provided to schools as part of TSC's hardware support, SLTS additionally seeks to educate children to use the facilities responsibly, and to develop hygienic practices, such as handwashing and safe water storage.[22] The use of educational games, challenging puzzles, and other participatory activities engages school children, generates awareness and enthusiasm, and has the potential to influence the community, as children call for improved sanitation and hygiene at home and in their surrounding environment. Interactive methods also allow for the natural formation of leadership amongst school children, enabling them to take on an expanded role as agents of change within the larger community.

Case Story 6.1: Himachal Pradesh

A boy of the 6th standard in Purbani Village of Kalpa block of Kinnour district in Himachal Pradesh in August 2007, after witnessing a SLTS triggering exercise in his school, started collecting boulders near a dilapidated store house along with his younger brother, identified a place for his household toilet and dug a small pit. By the time their parents returned home in the evening from their work site and asked who did it, he explained the triggering in his school that taught him that 'kha' (shit) comes back to us after we leave it in the open. This became the talk of the village and apparently inspired others in the village. As a result, many villagers started constructing make-shift toilets (dry simple-pit) and the village became open defecation free within ten days. The village was awarded the Nirmal Gram Puruskar (clean village award) from the President of India in 2008. In April 2008, following a triggering in a school in Summerkot Gram Panchyat (GP), Rahul, a boy of 6th standard, shared that *"Although we have the squatting plate at home, we have not yet dug a pit and are still defecating in the open. But now I will compel my grandmother to dig a pit. I will also help her in making the pit".* Summerkot GP is now ODF and nominated for NGP this year.

One specific tactic of SLTS involves a triggering session tailored for each age group, in which children explore the consequences of their actions, as well as of the sanitary practices of the community. This process empowers children by instilling in them the confidence that they can implement and lead the desired change. The underlying assumption is that the awareness generated among children with leadership potential ('natural leaders') will create individuals who propagate change by demanding improvements and placing pressure on their peers, families and other members of the community to cease OD. In addition to promoting healthy behaviours in the community and thereby minimizing exposure to disease, entrenching positive behaviours in children is likely to ensure that they continue practising them in adulthood also, contributing to the approach's sustainability.

While the focus of SLTS, as of SSHE, is on encouraging children to adopt healthy beliefs and attitudes, there is recognition that the decision to change household or community practices, especially OD, lies ultimately with adults. Therefore, the concept of child empowerment is intertwined with, and must be accompanied by changes in the awareness level and behavioural choices of adults.

Teachers are influential. They are often community leaders and help develop students' capacities to become community role models. Schools are contained environments where behaviours can be taught and monitored by teachers. Improvements in school infrastructure and training materials can empower teachers and increase their influence.

Parents involved in school-based projects can also become stronger agents of change within the community. Participating associations learn how to manage WASH in Schools funds, contract skilled labour, purchase materials and supervise construction projects, including sanitation facilities and handwashing stations. Traditionally, the majority of members are women, so the strategy puts mothers in charge of local development and empowers them to develop other types of projects without outside assistance. With the Mid Day Meal Programme becoming an integral part of the school system in India, the women who prepare the Mid Day Meal in schools are also looked upon as change agents in school, who can facilitate hygiene behaviour change among the students. The most significant and positive change they have been able to enforce is the practice of making children wash

their hands before they partake of their Mid Day Meal. There are mothers who are members of the Mother-Teacher Associations (MTAs) who are also often active in this regard. The mothers of Child Cabinet (CC) members have played an important role in this also as they feel that they have a special responsibility to fulfil as the parent of a CC member.

Lessons Learnt in SLTS

- SLTS approaches have been widely applied and have met with success in many developing countries and regions. Often, however, they are most successful when applied in collaboration with CLTS.[23]
- Rapport building through games serves as a good entry point to get children's full involvement in the triggering process.
- Triggering children is not sufficient. Success largely depends on the understanding and knowledge of teachers. It is good to trigger children and teachers simultaneously. This would help in bringing attitudinal and behaviour change not only in children but also in teachers. If teachers are not fully sensitized they may not effectively inspire enough confidence in the children or community at large to mobilize them to take action
- A long term monitoring mechanism with the support of the implementing organization/ education office and encouraging a reward/ recognition system at local and national level is necessary to promote the scaling up of SLTS.
- It is very important to work with all stakeholders, NGOs, CBOs, FBOs, VDCs, government line ministries and other similar bodies, for local level resource mobilization, to secure their ownership over the process, and to support community level decision making, planning and implementation in order to obtain best results, and for sustainability purposes.
- Teachers and students' action beyond school into the village enhances their involvement in improving sustainability efforts at the community level. Hence, a school–community relationship is very helpful in achieving the goals of total sanitation.
- Proper operation and maintenance of the installed infrastructure in school and village is important because if this is not done, the facilities created may suffer from disrepair and become defunct. If this happens, then students and teachers will revert to OD, which will in turn adversely affect the community's efforts to attain ODF status.

Case Story 6.2: Jharkhand

SWASTHH Plus

'You must meet Parvati Kumari, our Minister of Health,' says William Baa. 'She is so popular that she has been re-elected for three years in a row.' The Minister is duly summoned, along with the Prime Minister, and other Ministers for Finance, Environment, Culture and Sports. All are neatly uniformed in blue, with hair combed immaculately (boys) or braided (girls), and tidy shoes. None is over the age of 17. This is the Child Cabinet for the Middle School in Kakaria, a remote village in Ranchi district in the Indian state of Jharkhand.

Every day, Parvati arrives at Kakaria school early, and checks the compound. She has a roster of helpers, and she puts them to work, cleaning and sweeping. *'Everyone in the school has to play their part',* she says. And this includes regular washing and scrubbing of the two toilets, which are extremely basic and both allocated for girls' use only. Parvati ensures that, throughout the day, they are kept clean and pleasant. *'If there is a problem and a new girl does not know proper toilet usage, I ask a member of staff to explain the proper hygiene practice to her.'* Similarly, children who come to school unwashed, without shoes, with dirty finger-nails or hair in a mess, will be gently taken in hand. Parents are told through the Village Education Committee that personal hygiene for students is a must. Every student contributes to the funds collected by the Minister of Finance. They pay for replenishments of soap, brushes and cleanser.

Educational change has reached this remote village of Ranchi, in the form of a programme known as SWASTHH (School Water and Sanitation Towards Health and Hygiene). In Ranchi district alone, over 1,800 schools have benefited during the last three years.

Ashok Berai, president of the Village Education Committee, says: *'Up to 2005, diarrhoea was a rampant problem here. After SWASTHH, radical changes have come about. Children started trimming their nails and washing their hands with soap, and insisting that their parents do so as well.*

Case Story 6.3: Karnataka

Today, they take a promise – not only to themselves and to the local community, but also to the World at large. The children of today hold the key to a better tomorrow!!

Success story of a school cabinet

In a remote community in Mysore district, Karnataka. The local government school with a total of 65 pupils by normal standards provides the basic requirements: school building, teachers, and the Mid Day Meal. There is no proper kitchen and children have limited access to water as they draw water from the village tank. Despite having toilets, limited access to water meant that the facilities could not be used. The school compound was equally challenging for the children – full of overgrown weeds and littered with rubbish.

Swami Vivekananada Youth Movement took up the challenge of working for improving the status of the school. In partnership with teachers, pupils and parents they agreed on a few simple strategies for sustainable change:

- That the design, plan and implementation of the necessary changes in the school will be led by the school
- That the pupils will be involved in all stages of this process

Two core groups played a critical role in bringing about change:

1. School Cabinet: Comprised of leaders elected by pupils, they were anchors to the process of change and were pivotal in monitoring ensuring sustained behaviour change. The Health Minister and Hygiene Ministers raised awareness on good personal hygiene. The Water Resources Minister ensured made arrangements for proper water supply for drinking and handwashing. The garden also got its share of water, and bloomed, under the care of the Horticulture Minister.
2. School Development and Monitoring Committee (SDMC): Teachers, parents and community leaders were brought together to coordinate and implement the plan of action. The SDMC roped in more support from the community. A handwashing platform was built with support from the community. A new kitchen was built for which financial support was leveraged from a government scheme.

In no time the children were engaged in rallies and other programmes in the village, motivating the community to adopt better hygiene practices. Now the school receives a regular stream of visitors from other schools wanting to learn from this success story!

Case Story 6.4: Delhi, Uttar Pradesh, Rajasthan, Bihar, Madhya Pradesh and Uttarakhand

Beyond WASH in Schools: A community-centred approach

Plan India has been committed to achieving results for children through a holistic approach to water sanitation and hygiene. Working in remote communities in six states: Delhi, Uttar Pradesh, Rajasthan, Bihar, Madhya Pradesh and Uttarakhand, their goal is to reach vulnerable communities to improve access and ensure the uptake of good sanitation and hygiene habits by all. Plan supports children to lead hygiene promotion initiatives both at school and in their communities.

Targeting 2,500 schools across 11 north Indian states to build awareness and create a desirable WASH culture, Plan India provides hygiene promotion training to develop teacher capacity to support and facilitate children as champions; and improves leadership skills for school children through Students Health Clubs. School Management Committees serve as the bridge between schools and other key community stakeholders. Using a mix of innovations in selected schools and communities that includes provision of safe drinking water using various technical options, promoting inclusive, child friendly toilets and promoting the adoption of good hygiene practices, Plan's intervention has led to positive health outcomes for children in vulnerable communities.

The impact in schools

- Piloting new innovations in government schools has created a more positive attitude among the teachers towards WASH in Schools.
- Hygiene and sanitation has improved considerably. This is especially reflected in the greater frequency of handwashing and general cleanliness of the pupils. Key hygiene messages are reaching communities, with a focus on safe drinking water and cleaner surroundings.
- The creation of child-led health and media clubs within school and in the community has created a child-centred approach to problem solving. Children have been enabled to become advocates for social change in their communities.
- Forming partnership with the Accredited Social Health Activists (ASHAs) has enabled schools to promote menstrual hygiene management among the adolescent girls and strategically addressed the issues of lack of female teachers.
- Establishing women's clubs has given women a voice to influence behaviour change in WASH and led to their participation in planning, implementing and monitoring provision of WASH services to their communities.
- As a whole, the communities themselves are developing a rights-based approach, and now understand their roles and responsibilities and the need to advocate for better services as a basic human right.

Implementing Agency: Plan India

7 WASH in Schools: Monitoring for Results

Good information on the status of WASH in Schools and the progress of ongoing programmes is critical for governments and support agencies alike. Only with adequate and timely information is it possible to know the scale of the problem, to engage in evidence-based advocacy, to assess progress, or to learn from successes and mistakes. Without adequate monitoring information it is ultimately impossible to reach the goal of adequate WASH in all schools.

The Call to Action campaign incorporates six key action points, one of which calls for improved monitoring of WASH in Schools Programmes. National monitoring systems for WASH in Schools are often weak; many countries do not have even basic data on the WASH situation in schools. This lack of information on the status of WASH in Schools hampers planning and resource allocation decisions, and makes it difficult to ensure accountability and evaluate progress.

UNICEF has designed a package to help address the WASH in Schools monitoring deficit at the national level. It is designed as a resource for WASH and Education professionals and practioners to strengthen national monitoring systems and to improve the quality of monitoring at the project level.

The package consists of three modules:

- **EMIs module:** a set of basic monitoring questions on WASH in Schools to be incorporated into national Education Monitoring and Information Systems (EMIS), usually administered annually
- **The survey module:** a more comprehensive set of questions, observations and focus group discussion guidelines for use in national WASH in Schools surveys as well as for sub-national, project level or thematic surveys
- **The children's monitoring module:** a teacher's guide and tool set for the monitoring of WASH

in Schools by students, including observation checklists, survey questions and special monitoring exercises.

The modules are designed to gather key data on all components of WASH in Schools programming, including water, sanitation and handwashing facilities; hygiene knowledge and practices; waste disposal; and operation and maintenance systems. The modules focus on data collection in schools, with supplemental tools for gathering complementary information from communities (within the children's module) and from government officials responsible for WASH in Schools (within the survey module).

This package is generic and will have to be implemented in a customized way in each of the countries, in line with their national priorities and conditions. Further modifications may be made at the state-level also, in keeping with the manner in which the WinS Programme is being implemented therein.

Case Story 7.1: National

Innovative approaches to monitoring WASH in Schools

The Green Schools Programme

The Green Schools Programme (GSP) was launched in 2006, responding to the Supreme Court directive making the school environment green. Efforts were made by states governments and education authorities, as a result, introduced various schemes to encourage schools to turn green. However, there was no system or mechanism in place yet for recording or monitoring their progress or impact. Everything was piecemeal and done as a standalone activity.

The Centre for Science and Environment (CSE) plugged this gap by developing the Green Schools Programme. The overall goal is to help schools understand the objective of the programme and provides strategies for action on the ground using the following steps:

- **The Green Schools Manual:** A guide book that explains step-by-step, how to audit natural resources like water, air, energy, waste, and land, within the premises of a school. It introduces a new methodology for assessing the performance of the school community as a manager of these natural resources. The audit does not require any special equipment or funds. CSE teaches the schools how to collect data using simple techniques that are part of a school's daily routine work.
- **A two-day training workshop:** For teachers and students to help implement the programme and familiarize them with the steps and methodology laid out in the manual.
- **The audit process:** The end product is a report card, which CSE helps the school community to prepare, quantifying its achievements, as well as identifying shortfalls that require attention.
- **The Award ceremony:** The Green Schools Programme Awards Ceremony as an annual event, where top 20 performers (based on their green schools reports) from across the country are rewarded for their enterprise and innovative skills. The objective is to acknowledge the effort made, and also encourage more institutions to come forward and take part in this movement.

Case Story 7.2: National

WASH in Schools monitoring in India: Working towards harmonization and alignment of data

The Government of India has promoted significant developments in policy and practices to support WASH in Schools. Reaching all of its 1.3 million schools with adequate water, sanitation and hygiene education, however, remains a challenge. One major bottleneck to universal access has been the lack of a comprehensive monitoring and reporting system that provides consistent data. This results in inadequate information for making effective decisions regarding the availability, use, functionality, and operation and maintenance of facilities. Reliable data on hygiene education and handwashing with soap are negligible, further undermining WASH in Schools Programme success.

There are three major sources for WASH in Schools data in India: the District Information System for Education (DISE), which contributes to the Government's database; the Annual Status of Education Report (ASER), an independent civil society initiative; and the Management Information System administered by the Ministry of Drinking Water and Sanitation. Data presently capture coverage and functionality, but there are inconsistencies across the three data sets and none takes into account hygiene education, handwashing practices and availability of handwashing facilities. There are also differences in the definitions of indicators, leading to a lack of coherence and hindering an accurate picture of the WASH in Schools situation.

The Department of Education and the Ministry of Drinking Water and Sanitation are working with UNICEF to address these issues and to include key qualitative WASH indicators in the EMIS, including hygiene behaviours. This will improve alignment and harmonization of data at the national and sub-national levels, with clear definitions of indicators, and improved methods of data collection and analysis for better decision making.[24]

Case Story 7.3: National

Using technology to monitor WASH in Schools

Monitoring WASH behaviours or for that matter any behaviour at scale, has proved to be a challenge. Paucity of tools as well as skills, along with the need for sustained tracking over a substantial period of time to document change has resulted in subjective and anecdotal reporting. Over the years, the development sector has felt an increasing need for qualitative reports and on-going documentation of processes. In this context, the role of ICT in monitoring qualitative parameters for behaviour change has gained credence.

Using ICT for monitoring WASH in Schools has its advantages and disadvantages. For one, captive audiences make it easier to manage logistics and maintain quality monitoring. However, given that schools in low-income countries are under-funded, under-staffed, and in many cases, over-burdened with different administrative tasks beyond education, they emerge as sites of competing priorities. Also, infrastructure in public schools is questionable, with limited access to electricity, absence of which makes using mobile/ internet tools difficult to engage with.

Akvo Foundation, an international non-profit foundation specialises in creating open source mobile and Internet tools for reporting real time data collection and analysis in sectors including water, sanitation, health, education and economic development. Of the total 1,135 projects hosted on RSR, approximately 52 projects are related to WASH in Schools. Trajectory of use has been photographic documentation of handwashing practices, handwashing awareness campaigns, installation of toilet blocks and safe water delivery systems. The availability of the RSR app for androids coupled with FLOW, an online data collection tool that works on android phones, is offering new avenues of monitoring WASH behaviour at scale. FLOW (http://akvo.org/products/akvoflow/), a mobile-based data collection tool can be equipped with a survey based on indicators that capture progress of WASH behaviour. It also collects photos related to handwashing indicators, like condition of drinking water and handwashing areas, soap availability, condition of taps, etc. Data collected on a regular basis will allow monitoring availability of WASH facilities at scale.

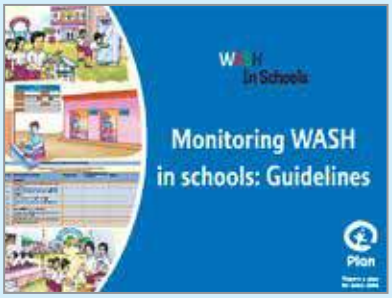
The data collected can be plotted on a map with simple colour coding to understand which schools are exhibiting limited progress with handwashing practice, e.g., marked red on the map and the schools which are performing well, e.g., marked in green on the map. Such mapping, using readily available open source mobile-based tools will help to assess the impact of promoting handwashing at scale and plotted on Google maps.

Enabling environments to promote such innovations are being created all over the country. Current efforts in India to connect 2.5 lakh (quarter of a million) Panchayats with broadband and wi-fi hotspots, with solar power supply is evidence that energy and institutional infrastructure will soon catch up with the current pace of mobile connectivity and handset usage. Both these offer substantial scope for effective use of mobile tools for monitoring at scale.

Case Story 7.4: National

Monitoring toolkit

An institutionalized Monitoring Mechanism for WASH in Schools is a critical programme component which contributes to planning interventions, resource allocation and ensures accountability. Good monitoring systems are also essential for evaluating progress for strategic programming.

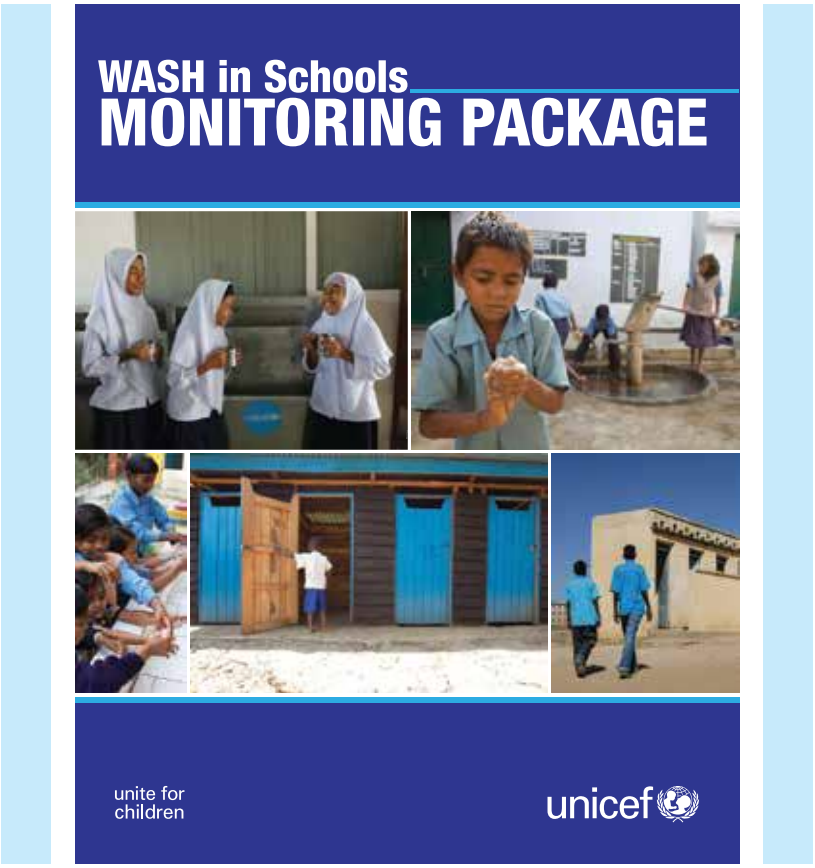


To support WinS monitoring Plan has developed a child-friendly monitoring toolkit to be used by school children, helping them contribute to sustainable WASH in Schools. The toolkit aims to capture data on all WASH in School components to evaluate programme status and impact such as the following:

- Linkages between water, sanitation and handwashing facilities
- Hygiene knowledge and practices
- Solid and liquid waste disposal
- Operation and maintenance mechanism
- School-Community

Children's opinion on quality and functionality of facilities in schools, if solicited at regular intervals can instil pride, dignity through their contribution in ensuring facilities are designed to meet their needs. Using monitoring boards, school attendance register and structured observation to gather data it offers programmers the opportunity to learn from children and strengthen WinS programming.

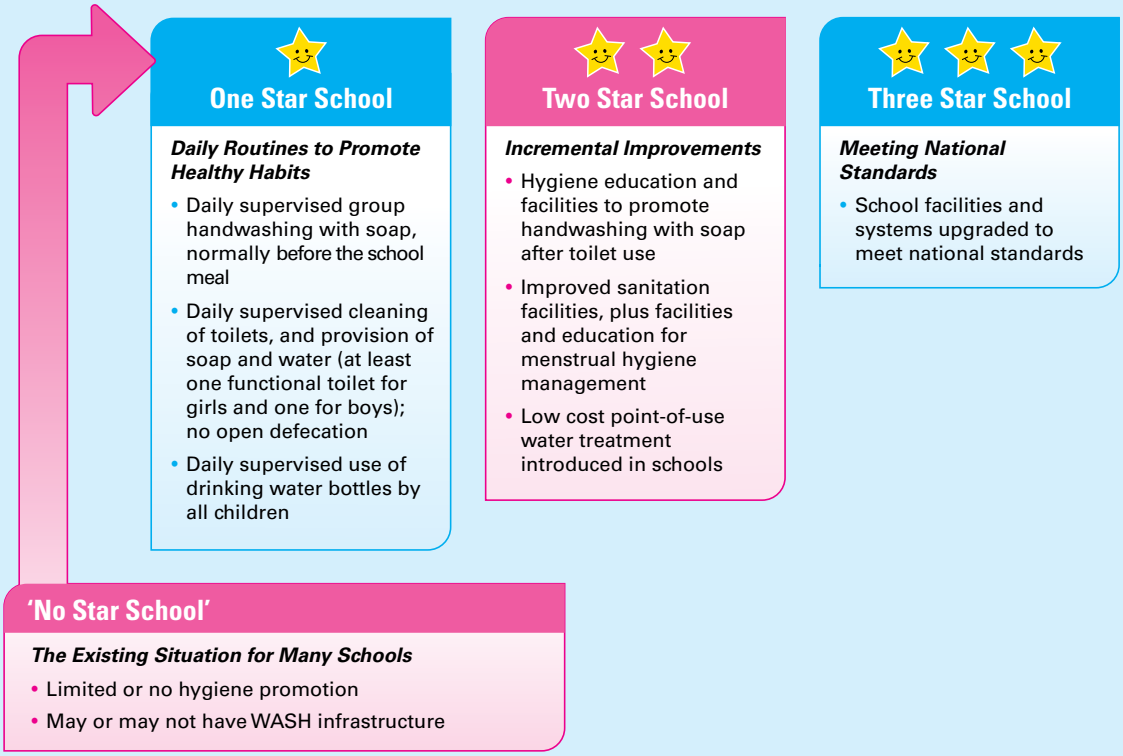
Implementing Agency: Plan India



Three Star Approach to WASH in Schools: Focusing on what counts

The Three Star Approach to WASH in Schools has been developed by UNICEF and GIZ to improve the effectiveness of hygiene behaviour change programmes for children and ensuring schools meet minimum criteria for a healthy school environment.

This approach is designed to improve the effectiveness of the Mid Day Meal in achieving its aims of improved school attendance and learning, equity and inclusion and improving the nutritional status of children. It is also meant for undertaking an annual benchmarking of Food Safety and Hygiene practices in schools. It provides a clear pathway for all schools throughout India, to meet national standards for water, sanitation and hygiene and for all school children to have access to nutritious and safe food and preparedness for emergencies. It encourages local action and support from communities and does not make the school dependent on expensive hardware inputs and external monitoring. This approach will help the schools to address bottlenecks in the current situation, and provide motivation to schools to achieve minimum standards for Food Safety, Nutrition, Water and Sanitation and Hygiene.



The Three Star Approach to WASH in Schools

Using this approach, schools are encouraged and supported to take simple steps to meeting basic hygiene requirements which include handwashing with soap, access to clean, gender friendly toilets and drinking water. Group activities by school children and ensuring minimum norms, drive this incremental approach. Once minimum standards are achieved, schools can move from One Star to Three Stars.

Monitoring of successive years performance of schools, will encourage schools to improve their Food Safety, Nutrition and Hygiene performance. This in turn will contribute to improvements in school learning, equity and nutrition status of children. Once minimum standards are achieved schools are further encouraged to move to the next level by expanding hygiene related activities, improving WASH infrastructure to meet national WASH in Schools standards. The approach emphasizes local action and community involvement encouraging local systems to come up with inexpensive yet innovative solutions to their hardware requirements.

Interventions at all three levels are guided by the KISS concept – keep it simple and scalable – allowing for realistic scale up at national level.

Case Story 7.5: West Bengal

Nirmal Vidyalaya Puruskar

The Nirmal Gram Puruskar (NGP) is already positioned as an incentive scheme within the overall NBA/ TSC guidelines and provide for social mobilization, demand generation and raising awareness to achieve sustained behaviour change. School sanitation is a non-negotiable component for eligibility of NGP, but this is largely limited to existence of infrastructure for water and sanitation which helps in attaining the coverage. What still remains as a critical issue is proper use, maintenance and sustenance of the existing facilities which requires behavioural and attitudinal change. The PRIs of a NGP recipient panchayat get a lot of recognition but this is not true for the school authorities or school as an institution of that village/ panchayat. Thus the schools do not have any incentive or motivation to make efforts in the areas of sanitation and hygiene. To add vigor to an already dynamic initiative, it is proposed that there is a similar incentive scheme for the best performing schools in the area of environment sanitation including school sanitation and hygiene education.

The award is now known as the Nirmal Vidyalaya Puruskar (NVP). The state of West Bengal has developed an award programme for schools as a part of its initiative for promoting and sustaining a clean and healthy learning environment for healthier, happier children. The guideline document "Strategy towards developing child friendly schools in West Bengal" has three main objectives:

1. To strengthen convergence between two flagship programmes SSA and NBA.
2. Generate competition among primary schools to help improve the school environment.
3. Encourage children and teachers to achieve child friendly norms and standards by ensuring improved WASH facilities and practices.

To be eligible for this award schools must adhere to the following criteria:

- Children age 6-14 years are enrolled in the neighbourhood school
- School has protected drinking water source with water testing report
- School has functional clean and separate toilets for boys and girls that they can access during school hours
- School surrounding is clean with no faecal matter on campus
- At least 1 teacher is trained in school sanitation and hygiene education, child cabinet and disaster management to promote hygiene education in and out of the classroom
- Children have access to soap for handwashing throughout the year
- Active child cabinet exists
- School celebrates School Hygiene Day on 7th April
- School runs Mid Day Meal Programme
- School compound is protected by fencing or boundary wall

Nirmal Vidyalaya Puruskar being distributed by the Education Minister, Government of West Bengal, at an Awards function

The School winning the award is provided funds which must go towards operation and maintenance of WASH facilities and improvements to other school facilities and has been introduced by the State Government of West Bengal. The School Education Department has adopted the Water, Sanitation and

Contd...

Hygiene in School (WinS) interventions as a tool for RTE Compliance by making schools safe, clean, protective and equitable to all children, with increased ownership of stakeholders as defined by the apex court. In a major move to achieve Child Friendly Norms & Standards, the department has launched an award scheme under the Sarva Siksha Abhiyan (SSA) on the occasion of the first National Education Day on 11 November 2011. One school from each education circle (cluster of 100-140 schools) has been selected on the basis of evaluation criteria for Nirmal Vidyalaya Puraskar (NVP) that consists of cash prize of Rs. 5,000, the Nirmal Vidyalaya Trophy and Certificate of Appreciation. Out of the NVP qualified schools, two best schools from each education district were awarded the Sishumitra Vidyalaya Puraskar (Child Friendly School Award) that consists of cash prize of Rs. 25,000, the Sishumitra Vidyalaya Trophy and a Citation.

The objective is to encourage the teachers, children and parents to achieve the Child Friendly Norms & Standards through enhanced WinS facilities and practices. *"The results are mixed, but most encouraging. This inspired us to take it forward to junior High and High School levels,"* said Bratya Basu, the Minister, School and Higher Education, Government of West Bengal in his National Education Day address. *"If Nirmal Vidyalay Abhiyan triggers the process, the Nirmal Shishumitra Vidyalaya Puraskar has ignited it,"* Choten Dhendup Lama, the State Project Director of Paschim Bangal Sarva Siksha Mission, Government of West Bengal added.

"I am thankful to the District Award Committee of Purulia to provide me the rare opportunity to receive the award from the highest authority of the state in front of thousands of people of my district," says Deepak Chakraborty, the Head Teacher of Dhabani Primary School. The school has also awarded with the Sishumitra Vidyalaya Puraskar on 11 November. *"This will intensify the competition amongst the schools in next year and the children will reap the dividends of it,"* he added.

8 Six Points of Action for WASH in Schools

Commitment to global priorities for WASH in Schools

Every child in India has the right to be in a school that provides child and gender friendly WASH facilities. Therefore, Government of India is committed to making this happen by pulling various partners together for strategic implementation and sustainable programming. Some of the actions taken by GoI for each of the six Call to Action points for WASH in Schools are mentioned below:

1. **Set Minimum standards for WASH in Schools:** National action plans are being put in place to reach all schools allowing for improvements to facilities and hygiene practices. A guideline has been developed for designing and maintaining MDM kitchens. This includes basic requirements for safe food handling and storage, safe drinking water and handwashing with soap. A directive has been sent out to all states requesting mainstreaming of handwashing with soap before the Mid Day Meal (MDM) in all government schools.
2. **Monitor WASH in Schools coverage through Education Management Information Systems (EMIS).** This is already in place. Data is analysed annually and findings have been used to advocate and leverage resources for operation and maintenance and continued efforts to improve WASH in Schools for all children.
3. **Engage with at scale WASH in Schools Programmes.** Government of India has shown clear commitment to a national WASH in Schools Programme and will continue to drive the vision of equal access to WASH in Schools for every child with support from key players.
4. **Involve multiple stakeholders to support WASH in Schools Programmes.** Realizing the vision of

equal access to WASH in Schools for children in India has brought a number of key players such as NGOs, civil society organizations and government to sit together and plan the way forward. Convergence is being done between ministries to ensure that operation and maintenance is institutionalized in all schools. The aim is to maintain steady progress for sustainable, scalable programme that ties together innovation, technical expertise and government commitment.

5. **Contribute evidence on the impact of WASH in Schools Programmes.** Generating and sharing evidence on WASH in Schools Programme in India has been central to India's strategy for success. Nationally, evidence has been used to advocate for and leverage resources to improve WASH facilities in schools; on the global forum India has contributed to the discussions adding value to advocacy efforts for more attention and funding to WASH in Schools.
6. **Raise the profile of WASH in Schools Programmes.** This document is one of a number of initiatives by WASH in Schools partners and government to share their experience and efforts made so far in the sector, to improve quality education for children in India. *Raising Clean Hands – India* is a collaborative project by various partners NGOs, CBOs and government.

How can we support WASH in Schools: Take Action

Advocates are found across sectors in many different roles. Individuals and groups, governments and donors, larger agencies and smaller organizations are all vital to improving, expanding and sustaining WASH in Schools Programmes.

Government officials support WASH in Schools when they...

- Advocate for WASH in Schools Programmes in parliament, public forums and seminars.
- Lobby for setting minimum standards, allocate a budget for WASH in Schools and monitor coverage and progress.
- Increase communication and cooperation between ministries or departments of health and family welfare, education, water, rural development, women and child development, finance and other relevant offices.
- Include WASH in Schools Programmes in education sector policies and funding.
- Promote equity by targeting resources to reach the most underserved populations, improving

Box 8.1: WinS Agenda of Action Points for the Central and State Governments

- Improve coverage of functional drinking water and sanitation facilities in schools to 100% – presently it is only **92%** and **76%** respectively.
- Improve the quality of design and construction with a view to making the facilities 'child-friendly', usable and sustainable.
- Budget for and allocate adequate resources for maintenance of WASH facilities in schools.
- Step up efforts for hygiene education and promotion, convergence and synergy with BCC programmes of NRHM and NBA and capacity development of teachers and other functionaries for BCC in WASH.
- Promotion of improved Menstrual Hygiene Management practices among adolescents, with the support of targeted hardware and software interventions.
- Promote and upscale Group Handwashing Initiative linked with Mid Day Meal.
- Programme, supported by hardware and software interventions and social marketing.
- Harmonization of WASH in Schools indicators across different monitoring systems like EMIS, DISE, ASER, MIS system of NBA and so on, so that meaningful and coherent information/data is collected towards improvement in the WinS Programme.
- Building of institutional capacity among relevant stakeholders through specialized training programmes for different categories of stakeholders and practitioners involved in WinS – some courses like the WASH in Schools Leadership Course being run in ASCI have already commenced – after evaluating these courses, similar ones may be started to cater to a wider base of stakeholders involved.

the curriculum and providing accessible facilities for girls and boys, as well as equipment for menstrual hygiene management.

The private sector and foundations support WASH in Schools when they...

- Provide funding for programmes that are national, sustainable and include government participation.
- Share their knowledge on the importance of WASH in Schools with other corporations, foundations and philanthropists.
- Form partnerships with non-governmental organizations, local governments or local communities to support schools that are in need of safe water, sanitation facilities and hygiene education.
- Provide the funding or materials necessary for health interventions, such as deworming treatments, as part of a holistic WASH in Schools Programme.

Non-governmental organizations support WASH in Schools when they...

- Make WASH in Schools a priority on their agenda, including internal and external advocacy across sectors.
- Work in coordination with multiple stakeholders to ensure that WASH in Schools Programmes are at scale and sustainable.
- Encourage children of all ages to participate in WASH in Schools activities and become agents of change for healthier habits in their homes and communities, as well as their schools.

Journalists and the media support WASH in Schools when they...

- Increase coverage in print, television, radio and social media such as blogging, Facebook and Twitter.
- Reach broad audiences by using statistics and covering stories from WASH in Schools Programmes in a compelling way.

Religious leaders support WASH in Schools when they...

- Promote sustainable WASH in Schools Programmes for faith-based, private and government schools in your community.
- Encourage participation of students, teachers and community members in all aspects of a WASH in Schools Programme, including planning, construction, operation and maintenance, behaviour change, monitoring and evaluation.
- Educate congregations on the health, education and economic benefits of improved WASH in Schools.
- Promote gender equity through WASH in Schools, including girls' education and attendance, as well as separate sanitation facilities for boys and girls.

Teachers support WASH in Schools when they...

- Integrate WASH in mainstream subjects such as maths, science and reading.
- Educate students about proper toilet use and handwashing, including washing hands before meals and after toilet use, and supervise daily WASH activities.
- Inform students about the changes they will go through during adolescence, and provide space for girls and boys to talk about menstruation and learn about menstrual hygiene.
- Encourage students to consistently use, operate and maintain school WASH facilities.
- Support children in taking an active role in keeping up hygiene practices, both in school and at home.
- Ensure that soap and water are always available at handwashing stands.
- Include supervision of WASH activities in teachers' responsibilities and performance evaluations.

Households support WASH in Schools when they...

- Participate and contribute to WASH in Schools Programmes, for example, by donating soap or contributing to the cost of maintaining facilities.
- Construct WASH facilities at home and encourage children to use them properly.
- Promote healthy hygiene practices at home and in your neighbourhood.

Community members support WASH in Schools when they...

- Join parent-teacher associations and school management committees, where they can advocate for protecting children's health through WASH in Schools.

- Participate in and contribute to the installation, operation and maintenance of WASH facilities in schools.
- Encourage children's regular school attendance, especially for girls, throughout your community.
- Contribute to recurrent costs of WASH-related supplies such as soap and toilet paper.

Students support WASH in Schools when they...

- Participate in WASH in Schools activities such as Child Cabinets, school health clubs and encourage other students to join them.
- Help keep their WASH facilities clean and well maintained – and tell a teacher or administrator if something is broken.
- Promote healthy hygiene at home and in the community by sharing the lessons they learned at school with their siblings and friends.

School administrators support WASH in Schools when they...

- Work with parents and government officials to generate funds for keeping WASH in Schools facilities functioning and clean at all times.
- Work with teachers to continuously promote hygiene.

9 Maintain the Momentum

Milestones for WASH in Schools India

India is making steady progress towards improving the learning experience for children and achieving results for education, health and development for future generations. To ensure a sustainable WinS Programme the government is being supported with a number of activities designed to strengthen WinS.

- A detailed school mapping tool was developed for teachers and students, where WASH is a critical component, in Maharashtra.
- In Tamil Nadu, monthly monitoring Star Card System for monitoring functionality, operation and maintenance have ensured that toilets constructed are also used and maintained.
- Validation studies carried out in schools and Anganwadi centers in Gujarat provides evidence on usage and functionality of toilets and drinking water facilities.
- In UP, for instance, the technical standards for schools toilets were accepted, printed and shared with all 820 block officials in 71 districts. A total of 2,400 toilets were upgraded using this concept, leveraging about $2 million USD in government funds.
- Technological innovations continue to be promoted in many of the states. Inclusive, child, gender, and disabled-friendly designs were demonstrated in states. In Bihar, Rajasthan and

Chhattisgarh, normal hand pumps were converted into a child-friendly force-and-lift pump to ensure water availability inside the school toilet unit and handwashing facility. These were demonstrated in more than 500 schools.

UNICEF has supported the development of resource materials to promote hygiene education and piloted the materials in target primary and upper primary schools. These resource materials incorporate key messages into a set of teachers guide books, supplementary reading materials, other materials like games, posters, songs, etc. In many states, these materials have been distributed by the School Education Department to all primary and upper primary schools, and are being regularly used in schools.

Global Handwashing Day is celebrated every year since 2008, in partnership with the State Education Department, Department of Rural Development or Department of Water Supply and Sanitation. UNICEF provided support in developing resource materials, teachers guide books and reference materials on handwashing with soap. In 2013, about 44 million children were reached in more than 5 lakh schools in 14 states.

In many states, UNICEF is supporting the 20-day in-service mandatory teacher training programme, under SSA, by incorporating WASH and hygiene issues, as a part of the training design. Along with SSA and Department of Education, training modules and resource materials on hygiene for teachers have been developed and key resource persons trained.

Case Story 9.1: National

WASH in Schools Leadership Course

UNICEF in partnership with the Government of India (MDWS and MHRD), the Administrative Staff College of India (ASCI), Hyderabad and Emory University, US have facilitated the development and launch of a dedicated WinS Leadership Course for a diverse range of professionals with an interest in the management and functioning of WASH in Schools programming across India. This is to result in a significant increase in the number of professionals with the capacity to plan, implement, monitor, sustain; manage and/or oversee a WASH in Schools Programme.

The WinS Leadership Course in India is an adaptation of an ongoing global certification course on Water, Sanitation and Hygiene (WASH) in Schools conducted by Emory University, US and UNICEF, New York. The course aims at teaching development professionals and increasingly, their counterparts around the world, about effectively managing and implementing WASH programmes in schools. Through this intensive programme, participants in a variety of countries, across a variety of time zones, connect to online training sessions to analyse readings and case studies. Learners come from a broad range of sectors, including education, health, communication, and government, bringing practical knowledge from their own fields to each discussion.

Delivered in two phases, the course offers professionals the opportunity to receive a WASH professional certificate.

- **Phase 1:** Three days of class room training, covering ten modules that build knowledge and skills
- **Phase 2:** Participants complete a field project, aimed at transferring learning gained in the classroom

This course will be rolled out over three years, reaching stakeholders such as district collectors and district sanitation coordinators.

Case Story 9.2: National

Mid Day Meal guidelines

UNICEF has supported government to revise the Mid Day Meal guidelines which will be launched by the end of 2013. This now includes specific reference to the impact of sanitation, hygiene and handwashing with soap on health and nutrition for school going children. Guidelines now stipulate the need for good hygiene, handwashing and sanitation and calls key actions which include:

- Adequate water, food washing, handwashing and sanitary toilet facility for food safety
- Adequate allocation for soap for washing utensils and hands
- Intensive training of all handling food for maintenance of their personal hygiene as well as kitchen hygiene and food hygiene
- Regular health checks for food handlers including stool test for worms and intestinal infections
- Protocol for safe water and regular water quality monitoring at school level
- Random microbiological testing of cooked food from MDM kitchen

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F O R C E

“Good sanitation and hygiene can increase school performance and reduce absenteeism - especially among adolescent girls - thereby contributing to their empowerment and equality.”

- Ban Ki-Moon, United Nations Secretary-General