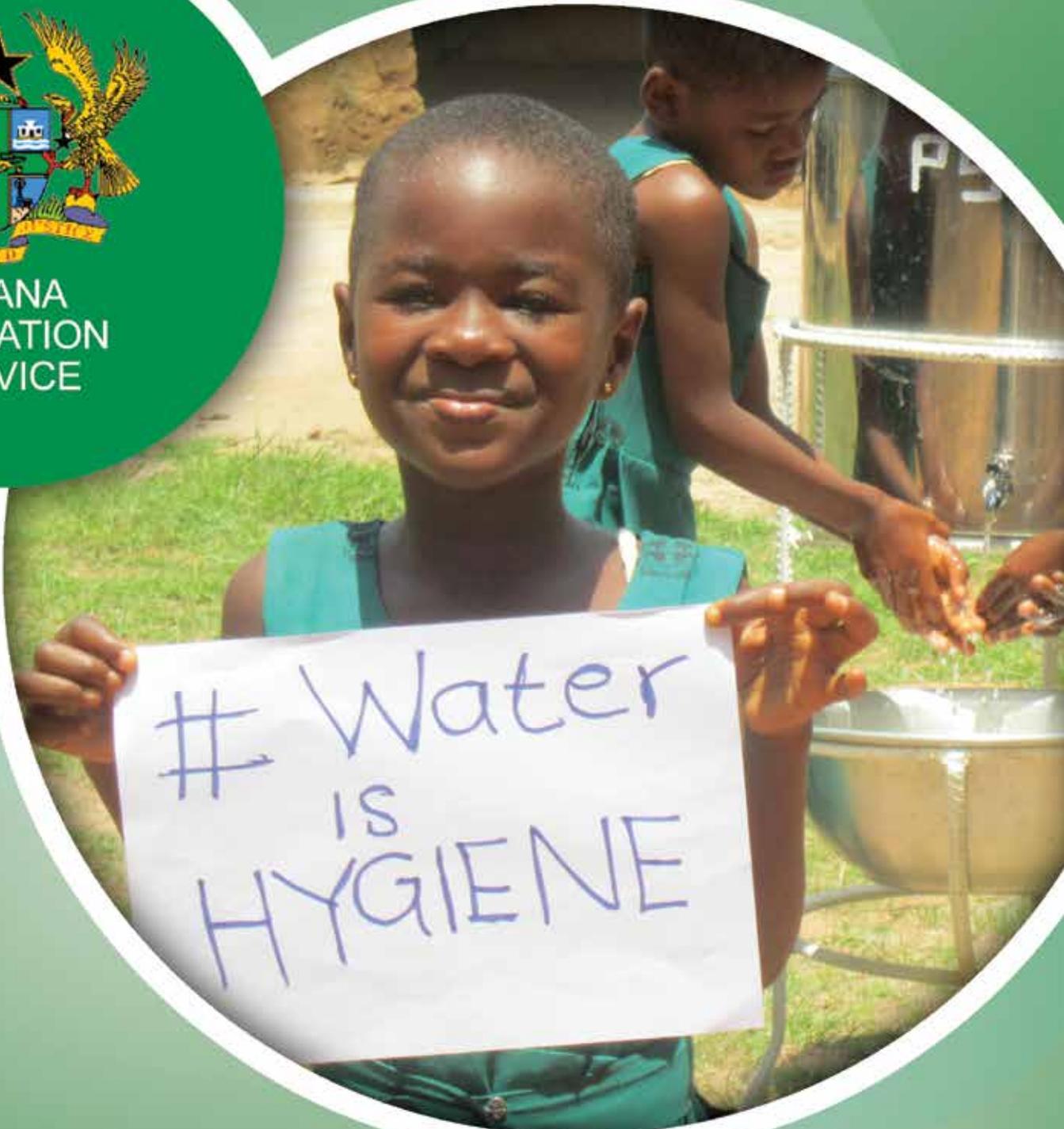


WASH IN SCHOOLS

National Implementation
Model



GHANA
EDUCATION
SERVICE



Ghana Education Service
WASH in Schools National Implementation Model
January 2014

Developed with technical and financial support from:
UNICEF, DFATD (Canada) and DGIS

Preface

The SHEP Unit of the Ghana Education Service (GES) was established in 1992 with the active collaboration of other key stakeholders like the Community Water and Sanitation Agency (CWSA), Environmental Health and Sanitation Directorate (EHSD), Ghana Health Service (GHS), National and International NGOs, Development Partners to mention a few. The programme has a vision to “develop well informed health conscious school populations who have full potentials to act as change agents in their homes and communities and to contribute effectively and efficiently to national development”.

The SHEP Unit since its establishment has spearheaded the implementation of the health education programmes at the pre-tertiary level. One of the component areas of SHEP implementation falls under Safe and Healthy School Environment which captures activities under Water, Sanitation and Hygiene (WASH) in Schools (WinS).

The Education Strategic Plan (ESP) 2010-2020 of the Ministry of Education (MoE) includes WinS under Policy Objective, Quality Education (QE) 12 – “Expand and Improve School Health, Sanitation and Safety Systems”. This objective includes goals in hygiene systems, sanitation and potable water (with the goals of 100% of Basic Education Schools having hygiene and sanitation systems by 2015 and 75% of schools having access to potable water). The School Health Education Programme (SHEP) Unit has been tasked to carry out this policy objective.

The GES and the SHEP Unit has had some challenges in coordinating and harmonizing the interventions mainly due to project based, donor financed approach which often had little recourse to the GES for direction. Many of these projects have been temporary and without full involvement and ownership of GES-SHEP. As a way of providing leadership and direction for WinS implementation, the GES-SHEP with the support of UNICEF, through its CIDA and DGIS funded GoG-UNICEF WASH project, has developed National Standards for WinS and an Implementation Models for holistic WinS programming

The materials developed include the following:

- National Implementation Model for WASH in Schools
- Technical Guide for WASH in Schools Facilities (including technical drawings and Bills of Quantity)
- WASH in Schools Facilities Planning and Management Guide
- WASH in Schools Facility Management Plan
- WASH in Schools Checklist
- Education Guide WASH in Schools
- Guidelines for the implementation of school health clubs
- Children’s Role in Community Led Total Sanitation (CLTS) Implementation
- Children and Youth Ambassadors for WASH
- Right to Play/UNICEF Menstrual Hygiene Manual

It is the expectation of GES that the National Standards for WinS infrastructure and Implementation Models for WinS programming would serve as a reference for all WinS projects/interventions in Ghana as well as enable the GES to coordinate and harmonise interventions in the schools. The standards and implementation models would also contribute to the implementation of the Child Friendly Schools (CFS) Framework adopted by the GES.

CHARLES AHETO-TSEGAH

AG: DIRECTOR GENERAL

Acknowledgement

The WASH in Schools (WinS) National Standards for WinS and Implementation Models were developed with technical and financial support from UNICEF Ghana, through its DFATD and DGIS funded GoG-UNICEF WASH project for holistic WinS programming.

The models were technically put together by the Ghana Education Service (GES) and three consultants, one international with broad based WinS expertise and two local; (one with an Engineering background and the other with Hygiene Education and Sanitation background namely:

Mrs. Annemarieke Mooijman: International WASH Consultant (Team Leader, WinS Specialist)

Mr. Vincent Tay: Hygiene Education and Sanitation Consultant (Software)

Mr. Harold Esseku: Technical Consultant (Hardware)

Special appreciation goes to Madam Benedicta Naana Biney, the former Director General, Mr. Charles Aheto-Tsegah, the Acting Director-General, Mr. Stephen Adu, Director, Basic Education Division, Mrs. Cynthia Bosumtwi-Sam, Director Curriculum Research and Development Division, Mrs. Elizabeth A. de-Souza, Greater Accra Regional Director of Education, Madam Rosetta Sackey, Accra Metro Director of Education, Mr. Nii Lante Quarcoopome of the Funds and Procurement Management Unit of the Ministry of Education and all other Divisional Directors and Units Heads of GES Headquarters for their immense contribution towards the development of this policy.

Our special gratitude also goes to UNICEF for all the logistical support and the procurement of consultancy services to facilitate the process. We make special mention of Ms. Susan Namondo Ngongi, UNICEF Country Representative, Mr. David Duncan, Chief of WASH, Mrs. Lorretta Roberts, WASH Specialist, Mr. George Kobla Dorgbetor, WASH Officer (WinS), Ms. Lucinda Ramos, Chief of Education and Mr. Andrew Osei, Education Officer.

The GES further wishes to put on record special gratitude to Ms. Kate Opoku, the National SHEP Coordinator, Ms. Ellen Gyekye, Programme Officer, SHEP and the staff of SHEP Unit for the initiative and drive to see this project through.

We are also grateful to our stakeholders engaged at the Water Directorate, the Chief Executive of CWSA and his staff, the Acting Director of Environmental Health and Sanitation Directorate of the Ministry of Local Government and Rural Development, The Ghana Institution of Engineers, CHF (Global Communities), CRS, Embassy of the Kingdom of Netherlands, New Energy, Plan Ghana, Right to Play, World Bank, IRC, WaterAid, SNV, TREND, PRONET and ACONIWAS.

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We are grateful to our cherished partners those who participated and provided valuable inputs towards the development of the models at the presentation of the assessment of the state of WASH in Ghana and validation meetings.

Finally, we are indebted to our Regional and District Directors of Education, Regional and District SHEP Coordinators, teachers and school children of Ghana for the cooperation and support in diverse ways toward the development of the model.

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Abbreviations

| | |
|----------------|---|
| CG | Capitation Grant |
| CFS | Child Friendly Schools |
| CIDA | Canadian International Development Agency |
| CLTS | Community-led Total Sanitation |
| CWSA | Community Water and Sanitation Agency |
| DANIDA | Danish International Development Agency |
| EHSD | Environmental Health and Sanitation Directorate |
| EMIS | Educational management information system |
| FMP | Facility Management Plan |
| GES | Ghana Education Service |
| GoG | Government of Ghana |
| KVIPs | Kumasi Ventilated Improved Pits |
| MMDAs | Metropolitan, Municipal and District Assemblies |
| MoE | Ministry of Education |
| O&M | Operation and Management |
| PTA | Parent Teacher Association |
| RCC | Regional Coordinating Council |
| SbHC | School based Health Coordinators |
| SHEP | School Health Education Programme |
| SMC | School Management Committee |
| UNICEF | United Nations Children's Fund |
| WASH | Water, Sanitation and Hygiene |
| WB | World Bank |
| WC | Water Closet |
| WinS | Water, Sanitation and Hygiene in Schools |
| WHO | World Health Organization |



1. Introduction

Background

Whereas Ghana has achieved the Millennium Development Goal for water supply, it is seriously lagging behind in sanitation. The latest data of the Joint Monitoring Programme for Water Supply and Sanitation (by UNICEF/WHO), state access to safe drinking water in Ghana at 86% while total access to sanitation is just 13% (or 15% according to MICS). For the rural population, safe sanitation coverage is as low as 8%¹. This is mainly because of the wide-spread (app. 59% of the population) use community/shared toilets.

So far, WASH in Schools (WinS) in Ghana has been delivered as part of traditional water, sanitation and hygiene promotion projects in communities. In 2010, 56%² of schools (Creche/Nursery, Kindergarten, Primary Schools and Junior High Schools) had toilet facilities and 49% had access to water onsite. The figures do not indicate the condition and use of the facilities and since 2010, many more school WASH facilities have been constructed. Therefore, no accurate data on functional school toilets and water systems are available.

The Ghana Education Service (GES) of the Ministry of Education (MoE), under whose responsibility WinS falls, has had some challenges in coordinating and harmonising WinS interventions mainly due to this project based approach which often had little recourse to the GES for direction.

In 2010, the GES developed the School Health Education Programme (SHEP) Policy and Strategy Framework. The SHEP policy and strategic framework offers general direction for school health programming and provides a good context for WinS programming. SHEP comprises of four components: (1) disease prevention and control; (2) skills based health education; (3) food safety and nutrition education; and (4) a safe and health school environment. Safe water and sanitation is one of the three key interventions areas under the “safe and healthy school environment” (the other interventions are: healthy psychosocial school environment and safe physical environment).

So far, various stakeholders and donors have used their own project specific standards and strategies (all with the best intentions). To assure minimum quality, the initiative was taken to develop National Standards and an Implementation Model as described in this document.

Potential impact of WASH in Schools

Improvements in WASH in schools provide safe drinking water, build good sanitary facilities and establish appropriate hygiene habits. The impacts of such improvements include³:

- a. Improved primary school attendance, health and cognitive development;
- b. Positive hygiene behaviours that may last for life;
- c. Outreach to families and communities, through the participation of pupils in hygiene promotion;
- d. Greater girls' participation in school;

a) Improved primary school attendance, health and cognitive development

Learning, hygiene and health are strongly inter-linked as children miss school or perform poorly when they are suffering from WASH-borne illnesses. Schools are also places where children get sick. Illnesses can spread very fast in schools where many children are together in class rooms for many hours a day 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 members⁴. 88% of diarrheal diseases are caused by unsafe WASH conditions⁵.

¹ Progress on Drinking Water and Sanitation – 2012 update', WHO and UNICEF, data for 2011

² Source: 2011/2012 School Year EMIS report

³ The information in this section has been collected by A. Mooijman and Peter van Maanen, Consultant UNICEF New York and was the main text was originally published in WASH for School Children edited by A. Mooijman for UNICEF ROSA.

⁴ Aiello, A.E.†, Larson, E.L., Sedlak, R. (2008) Personal health. Bringing good hygiene home. American Journal of Infection Control. 36(10 Suppl):S152-65

⁵ WHO 2008. By Prüss-Üstün A, Bos R, Gore F, Bartram J. Safer water, better health: costs, benefits and sustainability of interventions to protect and promote health. World Health Organization, Geneva, 2008

For schools, the health focus is generally on diarrhoea, worm infections and respiratory infections because these diseases affect school-age children most and are illnesses which can be drastically reduced through improved WASH conditions in schools. More specifically:

- The use of improved sanitary facilities reduces the incidence of diarrhoea by 34%⁶. 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%⁷.
- A study⁸ comparing results from different countries/studies found that hand washing can cut the risk of respiratory infections by 16%. Although the impact is clear, more research is needed on the expected rate of reduction.
- All cases of roundworm, whipworm and hookworm infestation are attributable to inadequate sanitation and hygiene⁹. An estimated 47%¹⁰ of children (ages 5-9) in the developing world suffer from worm infestations. It is common for a child living in a developing country to be chronically infected with all three types of worms. Such children suffer from malnutrition, intellectual retardation, as well as cognitive and educational deficits¹¹. 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 through deworming than boys¹².
- Studies focusing on absenteeism caused by gastrointestinal and respiratory-related illnesses in industrialised countries (show that as the result of improved hand hygiene in schools the number of days lost can drop between 25 and 50%¹³.) that improved hand hygiene can reduce days lost by between 25% and 50%.

Absenteeism can also occur when primary school-age children are involved in tasks such as the collection of water from distant sources that are from their homes (these are called "opportunity costs" for attending school). ie. collection of water from sources that are distant from their homes.

b) Positive hygiene behaviours that may last for life

In a study¹⁴ of the long-term effects of community hygiene education programmes for both adults and children it was found that, contrary to general belief, people are not reverting to earlier practices as years go by. The data demonstrate that hygiene behaviours, if taught well, are sustained at least 7-9 years beyond the end of an intervention. Researchers assume that when handwashing becomes part of daily routines in childhood it does not easily fade¹⁵. Therefore, schools form an ideal setting for skills-based hygiene education, where children can learn and sustain life-long hygiene practices.

⁶ 3IE. 2009. Water, sanitation and hygiene interventions to combat childhood diarrhoea in developing countries International Initiative for Impact Evaluation (3IE). Synthetic Review 001. Hugh Waddington, BirteSnilstveit, Howard White, Lorna Fewtrell.

⁷ 3IE. 2009. Water, sanitation and hygiene interventions to combat childhood diarrhoea in developing countries International Initiative for Impact Evaluation (3IE). Synthetic Review 001. Hugh Waddington, BirteSnilstveit, Howard White, Lorna Fewtrell.

⁸ Rabie, T, and V Curtis (2006), "Handwashing and risk of respiratory infections: a quantitative systematic review", *Tropical Medicine and International Health*, Vol 11 pp 258-267 March 2006

⁹ WHO 2008. By Prüss-Ustün A, Bos R, Gore F, Bartram J. Safer water, better health: costs, benefits and sustainability of interventions to protect and promote health. World Health Organization, Geneva, 2008

¹⁰ Hall, A., Hewitt, G., Tuffrey, V., de Siva, N, "A review and meta-analysis of the impact of intestinal worms on child growth and nutrition," *Maternal Child Nutrition*, Apr 4 Suppl. 1:118-236, 2008.

¹¹ Bethony, Jeffrey, Simon Brooker, Marco Albonico, Stefan M Geiger, Alex Loukas, David Diemert, and Peter J Hotez. 2006. "Soil-transmitted helminth infections: ascariasis, trichuriasis, and hookworm." *Lancet* 367 (9521) (May 6): 1521-1532. doi:10.1016/S0140-6736(06)68653-4.

¹² WHO 2005. Deworming for health and development. Report of the third global meeting of the partners for parasite control. Geneva: World Health Organization, 2005

¹³ Master, D., Hess Longe, S.H. & Dickson, H., 1997. Scheduled hand washing in an elementary school population. *Family Medicine*, 29(5), pp.336-339.

Dyer, D.L., Shinder, A. & Shinder, F., 2000. Alcohol-free instant hand sanitizer reduces elementary school illness absenteeism. *Family Medicine*, 32(9), pp.633-638.

White, C.G. et al., 2001. Reduction of illness absenteeism in elementary schools using an alcohol-free instant hand sanitizer. *The Journal of School Nursing: The Official Publication of the National Association of School Nurses*, 17(5), pp.258-265. Guinan, M., McGuckin, M. & Ali, Y., 2002. The effect of a comprehensive handwashing program on absenteeism in elementary schools. *American Journal of Infection Control*, 30(4), pp.217-220.

¹⁴ Bolt, E. and Cairncross, S. (2004), "Sustainability of hygiene behaviour and the effectiveness of change interventions. Lessons learned on research methodologies and research implementation from a multi-country research study" IRC International Water and Sanitation Centre, Delft, the Netherlands

¹⁵ Valerie A. Curtis, Lisa O. Danquah, and Robert V. Aunger (2009). Planned, motivated and habitual hygiene behaviour: an eleven country review. *Health Educ. Res.* 24: 655-673

c) Outreach to families and communities, through the participation of pupils in hygiene promotion

When school-based programmes are designed in a coordinated way with community-based programmes, children can become 'agents of change' and pass on the health and hygiene information learned at school to family and community members. This benefits the entire community.

Another impact, the motivation to build and use toilets in the homes of the children, depends on having successful, well-maintained toilets within the school¹⁶. There is some indication that if institutions (schools, health centres etc.) continue to provide information to families; this will lead to better handwashing practices¹⁷.

School-based studies have demonstrated the potential for influencing handwashing behaviour through membership of well set-up safe-water-clubs¹⁸, peer-to-peer teaching, classroom sessions with focused training materials¹⁹ and role-playing or songs²⁰. These studies demonstrate that while teachers can successfully transfer knowledge to pupils, motivated pupils can also influence family members by sharing this information, which in turn may change behaviour at the community level.

d) Greater girls' participation in school

The lack of proper knowledge, lack of water and sanitation facilities, lack of privacy, lack of sanitary pads (leading girls to use and re-use pieces of cloth), hinder proper menstrual hygiene practices. This can compromise the health and the quality of education of adolescent girls.

If adolescent girls²¹ (and female teachers) attend schools during their menstruation, the availability of gender-appropriate toilets and water supplies are essential to comfortably change and dispose of sanitary pads and wash themselves in private. If not already motivated by religious and cultural beliefs that staying home during menstruation is normal, the absence of facilities means that for many girls it is preferable to stay at home during menstruation and not attend school. At home, they do not have to worry as much about sanitary protection, or about having adequately concealing clothing. This might add up to 30 to 40 school days missed each year. Studies did not find a direct link between menstruation and drop-out from school, but did conclude that absenteeism has a profound impact on girls' potential for success in school.

In many schools, girls (and boys) face the threat of (sexual) abuse or violence from both male teachers and older male pupils. Studies show that girls are most likely to be abused on their way to or from school, in or near toilets, in empty classrooms and other isolated places. This shows the importance of constructing girls' toilets at safe locations.

Every additional year that a girl spends in school is crucial. For those girls who eventually become mothers, each additional year of education brings down the under-five mortality rate of their children by up to 10%. Add issues of dignity and empowerment, and it becomes clear that better sanitation is at the heart of better lives for children and women.

¹⁶ The sustainability and impact of school WASH in Kenya. IRC 2008.

¹⁷ The sustainability and impact of school WASH in Kerala, Southern India. IRC 2008.

¹⁸ O'Reilly, C. E., M. C. Freeman, M. Ravani, J. Migele, A. Mwaki, M. Ayalo, S. Ombeki, R. M. Hoekstra, and R. Quick. "The impact of a school-based safe water and hygiene programme on knowledge and practices of students and their parents: Nyanza Province, western Kenya, 2006." *Epidemiology and Infection* 136, no. 1 (January 2008): 80-91.

¹⁹ Bowen, Anna, Huilai Ma, Jianming Ou, Ward Billhimer, Timothy Long, Eric Mintz, Robert M Hoekstra, and Stephen Luby. "A cluster-randomized controlled trial evaluating the effect of a handwashing-promotion program in Chinese primary schools." *The American Journal of Tropical Medicine and Hygiene* 76, no. 6 (June 2007): 1166-1173

²⁰ Onyango-Ouma, W., J. Aagaard-Hansen, and B.B. Jensen. 2005. "The potential of schoolchildren as health change agents in rural western Kenya." *Social Science & Medicine* 61, no. 8 (October 2005): 1711-1722.

²¹ This text has been adapted from: Kirk, J. and Sommer, M (2006), "Menstruation and body awareness: linking girls' health with girls' education" *Gender and Health Special*. Royal Tropical Institute (KIT), Amsterdam, Netherlands

The National Standards and Implementation Model

With the increased focus on WinS in Ghana, the Ghana Education Services (GES) developed the **National Standards** for WinS infrastructure and **Implementation Model** for WinS programming as described in this report. They:

- Are child and gender-friendly and promote quality delivery and sustenance of WinS services through processes that ensure adequate planning, implementation, monitoring and evaluation, training and capacity building, child participation and community involvement,
- Serve as a reference for all future WinS projects/interventions in Ghana,
- Will enable the GES to coordinate and harmonise interventions in schools,
- Contribute to the implementation of the Child Friendly Schools (CFS) Framework developed by the GES.



2. Overview of the Implementation Model

In addition to this document on the implementation model, the standards include the following documents:

- ✓ (2.1) Technical Guide for WASH in Schools Facilities in Ghana,
- ✓ (2.2) WASH in Schools Facilities Planning and Management Guide,
- ✓ (3.1) Education Guide WASH in Schools.
- ✓ (3.2) Guidelines for the implementation of school health clubs,
- ✓ (3.3) Children's Role in CLTS Implementation,
- ✓ (3.4) Children and Youth Ambassadors for WASH, and

This chapter gives a brief introduction/summary of the above documents.

(2.1) Technical Guide for WASH in Schools Facilities in Ghana

The key factors to be considered for the design of the facilities are:

Hygiene Promotion and Hand Washing with soap

- Teachers and pupils will be given training in the use, operation and maintenance of all school WASH facilities.
- All school toilets will be provided with hand washing facilities.
- Hand washing facilities will also be provided at the canteen or location of food vendors where children take their meals.
- Hand washing facilities for different categories of children will be at appropriate height and features for ease of use especially for younger children.
- Hand washing facilities must be designed such that washing of hands is done under running water.
- Provision of soap for all hand washing facilities will be the responsibility of the school with support from the PTA/SMC.
- Drainage or soakaways will be provided for all facilities. Water from hand washing facilities in toilets will drain through urinals to facilitate cleaning of urinals and to reduce smell.
- Hygiene promotion activities will be incorporated in school curriculum. Additionally, as is currently practiced in most schools, a session of morning assembly in schools will be dedicated to hygiene promotion.
- Hygienic practices including safe disposal of anal cleansing material and good menstrual hygiene will be taught in all schools as part of the curriculum.



The "Tippy Tap"
credit: www.tippytap.org

Availability and Quality of Water

An assessment of water quantity and quality available for each school will be carried out for schools without piped water.

- Water quality parameters will be ascertained to ensure it falls within the Ghana Standards Authority (GSA) Standards.
- Water available for drinking and hand washing will be a minimum of 5 litres per pupil per day for day schools and 20 litres for boarding schools.

- Water quality and yield tests will be carried out annually to ensure adequacy. In the event of emergencies such as flooding, water quality tests will be done immediately.
- Plastic overhead storage tanks providing one-week storage will be provided for schools if the water provision is not regular.
- Where the water quality does not meet the GSA standards, simple appropriate filtration mechanisms will be used in filtering drinking water for use.

School Toilets

- A maximum of 50 pupils will use one drop hole/toilet cubicle.
- Separate blocks will be provided for boys and girls toilets.
- Separate units will be provided for urinating.
- Water for hand washing will be available within each toilet facility.
- Changing room for adolescent girls will be provided in each toilet block for girls. Changing rooms will have (running water), mirrors and hooks in the walls for hanging apparel.
- Toilets for children will be appropriately sized to ensure the children are comfortable and feel safe in the use of the toilet. Foot rests for squatting units will be appropriately sized and positioned for age and sex.
- Toilet cubicle doors will have bolts and be boltable from inside.
- Toilets should be located at reasonable distances to the school buildings for ease of access by children, especially the younger ones while still meeting the privacy demands and protecting children against violence.
- Toilets will be hygienic to use and easy to clean and will have a cleaning and maintenance schedule in place.

Urinals

- Separate urinals will be provided for boys and girls.
- Elevated squatting or standing area where feet will be placed while urinating should be provided.
- The floors of urinals will be made of tiles or other easily cleaned material.
- Adequate slopes (1:50) will be provided to ensure urine does not stagnate.
- If possible, water for hand washing will drain through the urinals to wash regularly.
- Where flowing water is available, the urinals will be constructed with water for cleaning mechanism incorporated.
- The roof of urinals will have sections made of transparent roofing material to allow light into the toilets.

Cleaning, Disposal and Recycling of Solid Waste

- Where school pupils are required to do the cleaning, a schedule must be prepared for both boys and girls to undertake the cleaning under the supervision of a teacher.
- Separation of waste into organics, plastics, paper and others should be encouraged.
- Where municipal solid waste services are available, waste collected in schools should be collected and disposed off along with the municipal waste.
- Organic waste may be buried or used for composting in schools under the supervision of teachers.
- Where collection agents are available, plastic waste should be sent to the collection agents for recycling.
- Burning of solid waste on school compounds should be avoided.

Menstrual Hygiene and Management

- Provision will be made for adolescent girls to have a changing and washing room in all toilet buildings for girls.
- A plastic bucket with a lid will be provided in the changing room for initial disposal of sanitary pads.
- Contents of the bucket will be emptied at the close of each day into the waste bin of the school if municipal solid waste services are provided for the school.
- A special pit for burying may be provided especially in rural areas where solid waste services are not available. Alternatively, disposal should be done along with the solid waste disposal arrangements in the community in which the school is located.

Special Design Considerations

- Schools toilets will be designed and constructed for ease of use by all categories of pupils including very small children and the physically challenged.
- All toilets will be disability friendly. An access ramp will be provided into the toilet.
- At least one cubicle/drop hole will be provided for use by children with disabilities.
- The size of the disability cubicle/drop hole will ensure pupils, especially young ones, are comfortable in use of the toilet.
- Special grips, guiding systems and proper lighting will be provided for poor-sighted children.
- There will be no step at the entrance to the disability cubicle. Railings will be provided at the sides and back of the cubicle to enable children sit or squat and use the facilities safely.

Management, Operation and Maintenance for School WASH

- The School Management Committee (SMC) and Parent Teacher Association (PTA) are responsible for the overall governance of School WASH.
- The SMC and PTA will facilitate the provision of soap, ensure availability of water from community water supplies and facilitate the provision of desludging services in conjunction with the Environmental Health Officers.
- The Head Teacher and the teacher responsible for hygiene education will have overall responsibility for the day-to-day management of the facilities.
- All teachers will be trained on the basic tenets of school WASH to enable them undertake proper supervision of the pupils when they are on duty.
- The District Assembly officials, especially the Environmental Health Officers, will include monitoring of school WASH facilities in their schedules as is required by law. They will facilitate the desludging of toilets when the pits/tanks get full. The District Works Department will monitor to ensure that school WASH facilities are constructed according to national standards as required by law.
- The District Coordinator of the School Health Education Programme (SHEP) will coordinate with the Environmental Health Officers and the District Works Department (DWD) in ensuring school WASH facilities are properly constructed and managed. They will also ensure appropriate hygiene materials are available for use in all schools in their district.
- Where there are Non-Governmental Organisations (NGOs) and Community Based Organisations working in WASH activities in the community, they may be included in the management of the school WASH facilities.

(2.2) WASH in Schools Facilities Planning and Management Guide

The typical project cycle will be used in the delivery of school WASH services.

Promotion

The promotion of WinS will focus on key stakeholders in a district including the district SHEP office, the district Environmental Health Office, the District Works Department, the school circuit supervisors in the district, School Heads, Parent Teacher Associations, School Management Councils, Assembly Members, teachers and pupils.

The District SHEP officer will liaise with the District Works Department and the District Environmental Health Office for all WASH in Schools (WinS) interventions. The district officials will then contact school heads and give relevant information on WASH in Schools. The school head will also inform the School Management Committee (SMC) and the Parent Teacher Association (PTA) about the interventions. Other WASH stakeholders in the community or district who have the interest of school pupils at heart may be engaged to support in the process.

The benefits of having appropriate school WASH infrastructure and the benefits of the proper use and maintenance of the facilities will be the focus of the information, education and communication approach to be adopted. The details of the promotion message will include:

- The importance of hygiene, sanitation, and water in schools.
- Responsibility of the school for the continuous management and the operations and maintenance of WASH facilities provided for the school.
- Responsibility for financing the operations and maintenance and ensuring sustainable management of the facilities.
- Technology options and service level options and their implications for the sustainable management of the facilities.
- Minimum technical standards and quality.
- Ownership, roles and responsibilities before construction activities in the school commences, during construction and for the management of the facilities provided.
- Application and proposal formulation requirements.

Application

To strengthen ownership, all schools will have to formally apply to benefit from the relevant WASH facilities and services. The national WASH in Schools guide and manuals will be made available to all schools. The head teachers will be responsible for signing the application. The SMCs/PTAs and school management committees will be proactive to ensure the school undertakes the process in a timely manner.

The school will commence the process of filling the WASH in Schools (WinS) Facilities Management Plan (FMP). This will indicate the choice of facilities and the willingness of the school to manage them in a sustainable manner. The school will also show that they have the required knowledge on WASH issues and have put measures in place to impart key WASH messages to pupils in the school. During the application process the District SHEP office and the Environmental Health Office will maintain open communication lines with all schools.

Planning for an effective and efficient management of WASH facilities in schools is critical for the long term sustainability of the facilities provided. It is essential that the identified stakeholders play their roles effectively during the design process and in the operation and maintenance of a facility.

The School Management Committee with support from the head teacher will then carry out a basic plan for the location of the toilet as well as for the operation and maintenance of all the WASH facilities. The committee will take into consideration all possible options in the selection of a toilet type.

Pre-Selection

The pre-selection process will not be aimed at eliminating any school from having improved WASH facilities. It will serve to prioritise the schools which will benefit first from the intervention. It is expected that when well prepared and motivated schools in a district benefit from the project, other schools in the district will be encouraged to apply when the benefits accruing to the schools which have benefitted become obvious.

Pre-selection criteria will be prepared for every district with standardized score sheets. The District Education Office and the circuit supervisors, the District Planning Office, District Works Department and the District Environmental Health will be members of the pre-selection committee. A representative of the District Coordinating Director will chair the pre-selection committee.

Proposal Formulation

All pre-selected schools will finalise the FMP indicating how the various components of the FMP will be achieved. A baseline study and situation assessment will be carried out to ensure the appropriate information is incorporated in the FMP.

In addition to the FMP, the school would be required to prepare a sketch, indicating the proposed location of school toilet, hand washing facilities. Where a borehole is to be provided, the services of an expert will be required to provide the exact location for drilling to be undertaken. Where an existing toilet is to be rehabilitated, copies of the design drawings for the toilet will be included, if available.

Appraisal

Appraisal of the FMP will be undertaken by the same team that does the pre-selection. The main aim of the appraisal is to confirm the commitment of the school to ensure a sustainable management of the WASH facilities to be provided for the school. The FMP will be signed by the members of the School Management Committee and the Head Teacher.

Implementation

The implementation phase consists of:

- Construction and/or rehabilitation of existing WASH facilities, and
- Development and/or strengthening of hygiene education programmes by incorporating these activities into school curriculum and programmes.

Procurement of services for construction and/or rehabilitation will be done in accordance with the Public Procurement Act, Act 663. Design and construction will be done in accordance with the national standards of the Ghana Institution of Engineers and the Ghana Institution of Surveyors. Before construction commences, a meeting of all stakeholders will meet on the school premises to hand over the site to the contractor. The representative of the contracting authority responsible for the supervision of the contractor will be presented at the hand-over meeting.

The representatives of the school will be mandated to be part of all site meetings. Any anomalies or challenges the school would have during construction will be addressed to the contracting authority (District Assembly), and copied to the District SHEP office and representative of the contracting authority on the site. Training on operation and maintenance requirements of the toilet facility will be included in the contractors work.

Management, Operation and Maintenance

The management and the operation and maintenance of school WASH facilities are critical in ensuring the sustainable and hygienic use of the facilities provided for each school. School WASH facilities provided will be managed as agreed in the FMP. Funding for O&M is critical and schools will ensure that provision is made for all requirements especially soap and cleaning materials at the beginning of each term. Prescribed O&M activities will be done at the required time.

The school circuit supervisor, the district SHEP officer and the EHO at the District Assembly will include the monitoring of the WASH facilities provided by the school in their routine monitoring

exercises. The circuit supervisors will be required to check to ensure the appropriate hygiene messages are incorporated into curriculum and required messages are delivered as required at school assembly sessions.

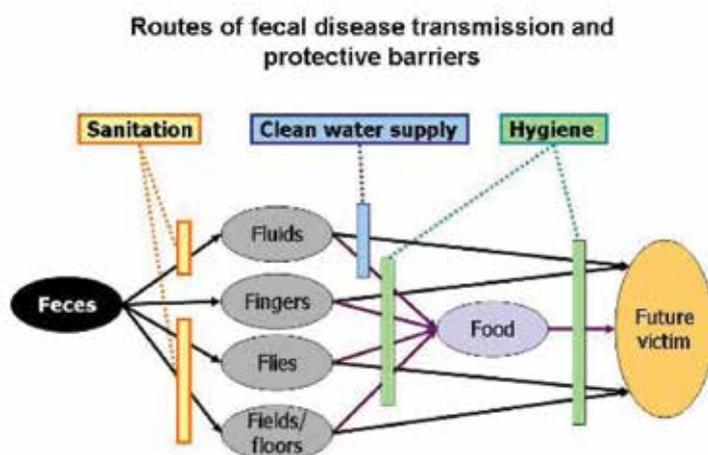
Existing management structures in schools will be adapted for the management of WASH facilities.

- The School is responsible for the overall management of School WASH.
- The SMC and PTA will provide support in the repair of components of school WASH facilities which will fall into disrepair. They will also facilitate the provision of soap, ensure availability of water from community water supplies and facilitate the provision of desludging services in conjunction with the Environmental Health Officers.
- The Head Teacher and the teacher responsible for hygiene education will have overall responsibility for the day-to-day management of WASH facilities.
- All teachers will be trained on the basic tenets of school WASH to enable them undertake proper supervision of the pupils when they are on duty.
- The District Assembly officials, especially the Environmental Health Officers, will include monitoring of school WASH facilities in their schedules as is required by law. They will facilitate the desludging of toilets when the pits/tanks get full. The District Works Department will ensure that school WASH facilities are constructed according to national standards as required by law.
- The District Coordinator of the School Health Education Programme (SHEP) will coordinate with the Environmental Health Officers in ensuring school WASH facilities are properly constructed and managed. They will also ensure appropriate hygiene materials are available for use in all schools in their district.
- Where there are Non-Governmental Organisations (NGOs) and Community Based Organisations working in WASH activities in the community, they may be included in the management of the school WASH facilities

(3.1) Education Guide WASH in Schools

Teaching hygiene is most successful when it targets just a few behaviours with the biggest overall impact. Too many priorities will diffuse the attention that can be given to each subject because too little time will be available for each subject.

The basis of hygiene education lays in prevention of diseases that are transmission due to inappropriate hygiene conditions and behaviour.



F-diagram: the major transmission routes of faecal-oral diseases²²

The most prevalent diseases, such as diarrhoea or worm infections are being spread by germs. Germs cause sickness. The path in which germs can spread from person to person is summarised in the, so-called, **F-diagram**²³:

- **Fingers:** Human faeces stick to hands, fingers and under nails
- **Flies:** Flies and other insects sit on faeces and move to the food for human consumption
- **Fields:** (Human) faeces are being used or disposed on the fields and eaten through not fully cooked food that grew on the fields
- **Fluids (water):** Faeces mix with drinking water

²² Drawing copied from: <http://scienceblogs.com/thepumphandle/2010/08/19/in-praise-of-toilets/>

²³ It is called F-diagram because all paths start with F.

Following the F-diagram, stopping the paths of contamination can be defined at the left site route of the diagram (stopping faecal contamination) and at the right site route of the diagram (stopping faecal-oral transmission).

- **Faecal contamination** can be stopped through: provision of safe toilets and the protection of water sources.
- **Faecal-oral transmission** can be stopped through: hand-washing with soap after toilet use, before eating, before preparing food and after cleaning babies, hygienic storage and preparation of food, protection of water between source and consumption.

Based on the F-diagram, the schools will focus on the five hygiene themes of which the first four derive from transmission routes in the, F-diagram and the last refer to overall improvement of hygienic conditions to stop potential health risks:

- Hand washing with soap at critical times
- Elimination of open defecation, safe excreta disposal and toilet hygiene (Basic Sanitation)
- Safe drinking water treatment, storage and handling
- Food Hygiene
- Treatment, storage and handling of refuse and waste water

The hygiene promotion/education activities for schools are using conventional class room teaching but also various participatory activities to develop skills and habits. Pupils but also their teachers, parents, family and community members will be engaged in the process through short, focussed and results oriented sensitisation sessions.

Below schedule gives an overview of the activities to be undertaken in every school on an annual basis.

| | Activity | Target Group | Duration | Frequency | Focus of activity |
|---|--|--|----------|---------------|---|
| 1 | Classroom activity to be led by class teacher (CA) | Classes (per age group- Nursery, Lower Primary, Upper Primary, and Junior High School) | 10 mins | 3x a week | Interactive activity teaching and testing knowledge |
| 2 | Main School Lesson during Worship Time (WT) | Entire School | 15 mins | Every 2 weeks | Teaching knowledge and motivating pupils for change of habits |
| 3 | Repeat (Reinforcing) sessions of main school lesson at Morning Assembly (MA) | Entire School | 3-5 mins | 3 x a week | Reinforcing/repeating key messages from Worship Time Sessions |
| 4 | WASH Notice "Talk" boards (NB) | Entire School Prepared by School health club and SBHC. | | Every 2 weeks | Reinforcing/repeating key messages from Worship Time Sessions |

| | Activity | Target Group | Duration | Frequency | Focus of activity |
|---|---------------------------------|--|----------|---------------|--|
| 5 | School health club | Selected students | 30 min | Every 2 weeks | Actively involved in advocacy for WASH in Schools through participatory activities under the guidance of the School Health based Coordinator. |
| 6 | Competitions | Competitions All Classes in a school and All Schools in a district | | termly | Activities focusing on testing knowledge dissemination to the entire school and indirectly parents and communities |
| 7 | WASH Session during PTA meeting | Parents and Teachers | 20 mins | once a term | Advocacy sessions on School WASH to get support to activities/actions as well as reports on progress. |
| 8 | WASH Session during SMC Meeting | School Management Committee (SMC) | 20 mins | once a term | Advocacy sessions on School WASH to get support to activities/actions as well as reports on progress. Also to enlist group support to school health club activities as well as individual support as club patrons. |

Details can be found in the education guide

(3.2) Guidelines for the implementation of school health clubs

The school health club is a voluntary grouping at the school level in which pupils meet, with the supervision of their teachers to learn, discuss and take action on issues related to their health and wellbeing whilst they are in school. The focus of the club is primarily on the health of the pupils with emphasis on Water, Sanitation and Hygiene (WASH). The WASH Club is a recognized school level grouping at the basic school level and all schools across the country are encouraged to form one in their school.

Children spend more than five (5) hours of each school day in school. This makes the school an important place through which their health can be influenced positively. The health of children whilst they are in school is important because they are in their formidable age and poor health will impact negatively on growth and development including the child's ability to learn. Poor health affects school attendance and completion rate. Good health enhances academic performance in school. The SHEP provides a framework for children's health issues to be addressed whilst they are in school. The concept of School health clubs is to provide children an avenue to organize themselves to learn about issues that affect their health which enables them make informed decisions.

The overall goal of the School health club is to promote effective learning in school through supporting pupils to increase their knowledge and understanding of health issues that affect them directly and guide them to adopt positive behaviours to prevent poor health.

The specific objectives of the Club are:

- to promote hygienic lifestyles amongst pupils
- to increase pupils knowledge and understanding of Water, Sanitation and Hygiene issues
- to promote a healthy school environment
- to encourage outreach to the home and community
- to challenge children to take up leadership roles and responsibilities

(3.3) Children's Role in CLTS Implementation

The national sanitation promotion model, Community-led Total Sanitation (CLTS), demands that all community members take an active part in the process and all its activities – from the decision to stop Open Defecation through the implementation of specific activities to the attainment of ODF. Children are the most affected by poor sanitary conditions of a community but children are also very knowledgeable about the sanitation situation of their community and school. They know what facilities exist in the community and where they are located.

In the case of the conduct of CLTS, children have a key role to play in all three (3) stages of the implementation process: 1) Pre-triggering, 2) Triggering and 3) Post-triggering.

The conduct of *Pre-triggering* is a critical initial activity that must be done in every CLTS facilitation process. It establishes the basis for determining the success of the CLTS implementation process. It covers the following specific activities:

- CLTS facilitators' entry into the community and schools
- Meeting with community and school leaders
- Interacting with community members and establishing key contacts
- Interactions with school teachers and pupils
- Developing a Sanitation Profile of the community
- Liaising with the community leaders to fix a date for a general community meeting

The Specific Role of Children in Pre-triggering Activities

The involvement of children is critical in this process since children are very knowledgeable about the community they live in as well as the school they attend. They can be involved through:

Step 1: After the first meeting with the community leadership, CLTS Facilitators should arrange and meet with children separately to brief them of planned Pre Triggering activities in the community.

- ✓ This meeting can be at the school or at the community level. Facilitators should seek the assistance of the School based Health Coordinator in organizing them.
- ✓ It is likely that a lot of children will be present in this first meeting including very young ones under the age of five. At this stage do not turn anybody away.
- ✓ In this meeting, explain clearly to the children how and why they should be involved in the planned activities.
- ✓ Facilitators should plan all activities children will be involved in carefully. Remember that activities involving children should always be fun and lively to sustain their interest.

Step 2: Identify the older children who show interest in the activities that CLTS Facilitators are engaged in. Write their names and identify where they live. These children will be working actively to support the process throughout.

- ✓ Facilitators should now ask the younger children and those not too keen to go and play. This leaves a smaller, more mature and more manageable group.
- ✓ Find out if any of them are Children/Youth Ambassadors. Make these children leaders.

Step 3: Divide the children into two or three groups and task each group to identify any facilities or places in the community that have a link with the water, sanitation and hygiene situation of the community.

- ✓ If facilitation is happening in a small community, children can be organized in one big group.
- ✓ Don't let the group work last for too long. Bring them together again and compile the list of things and places with them.

Step 4: Engage them on a Guided Walk of the community and school to identify the location of the facilities they have identified.

- ✓ In each community, children, especially the boys, move about the community daily and know their way around. Take advantage of this and let children show facilitators round the community and help identify defecation areas (including any existing toilet facilities).

(3.4) Children and Youth Ambassadors for WASH

The Children and Youth Ambassadors for WASH initiative is aimed at promoting WASH behaviour change using children and young people as the primary Change Agents. The formative and youthful years are the best period in life to learn, understand and form healthy habits. The Children and Youth Ambassadors initiative creates the opportunity for children's potential as Change Agents for WASH behaviour change to be unleashed. Children are elevated to positions of responsibility and through this build their capacity for problem solving and leadership. The initiative grooms the 'Ambassadors' to lead their fellow children and young people to take action on WASH issues affecting their lives. It also builds their capacity to become active citizens by engaging adults in advocacy for improved facilities and policy change.

The Children and Youth Ambassadors initiative is rooted at the community level with very close links to the School WASH Club which is expected to be operational at the school level. This ensures that children become hygiene and sanitation conscious right from their formative years through to early adulthood. The initiative is supported by various Development Partners and recognized by the GES. The CYAWASH initiative therefore develops a corps of children who are equipped to implement the WASHSPLASH and achieve results.

Children and Youth Ambassadors have specific roles to play. These are:

- Advocacy on WASH- specifically joining the campaign for eliminating Open Defecation (OD) in their communities and in their districts and regions.
- Becoming Champions for establishing the social norm of Open Defecation Free (ODF) schools and ODF communities
- Rallying school children to campaign for ODF schools and ODF communities using various activities
- Leading the monitoring and rating of WASH in schools based on the BEST Score Guide
- Play active roles in activities at their community/district levels to commemorate the three recognized international WASH Days i.e. World Toilet Day, World Water Day, Global Hand washing Day



3. WASH in Schools implementation

Overall implementation

Implementation to scale as well as strengthening and sustaining of existing efforts on WASH in schools is about (1) creating overall awareness on the importance of WASH in Schools, (2) stimulating a positive environment to advocate for improved WASH in Schools and more importantly about (3) changing social norms making unhealthy and unhygienic schools unacceptable.

Creating these changes can be done by focusing on the individual's behaviour but also requires a look at the pupil's environment at different levels, from the household and community to the school, health centre and institutions responsible for support and the policy framework. Each of these levels influences how an individual behaves. Experience in other parts of the world show that the most effective approach leading to change is a combination of efforts/communication using different communication approaches to cover all potential aspects to achieve a positive behaviour change.

The implementation of WASH in Schools focuses on three types of programming (to be implemented simultaneously)²⁴:

- a) Programming to create a positive policy and programme development and implementation environment,
- b) Programming to build capacity, promote facilities and hygiene behavioural change among pupils, within schools,
- c) Programming to ensure community/parents participation and ownership.

a) Programming to create a positive policy and programme development and implementation environment

A positive environment in which WASH in Schools activities can be implemented effectively can be stimulated through advocacy. Advocacy highlights the context and relevance of the cause. The activities planned/strengthened are:

At National Level:

- Strengthening of coordination mechanisms for WASH in Schools at National Level: for coordination, planning and monitoring of activities to ensure implementation with the required quality. The Water Supply and Sanitation Technical Working Group is coordination between government (different ministries and different levels) and (non-governmental) organisations involved in WASH. WASH in Schools can be addressed in the Working Group but also in a separate group lead by GES. Other coordination mechanisms are the National SHEP Steering Committee and the School Sanitation and Hygiene Committee which are being chaired by the National SHEP Coordinator.
- Advocacy with Development Partners for Coalition building: development partners will coordinate, cooperate and implement the National Standards on WASH in Schools and developed joint and complementary materials.
- Advocacy with policy makers: such as parliamentarians and ministers will be carried out through workshops, meetings and possible school visits to ensure that WASH in Schools is given importance and both policy and implementation issues are addressed.
- Advocacy through media: Workshops, media visits, awards and special radio and TV programmes to promote and advocate for WASH in Schools (this activity might also have a regional component).

- Advocacy through celebrities: Ghanaian celebrities (to be identified) to help to highlight the issue at various forums and give visibility and relevance to the cause to politicians as well as the population of Ghana through appeals, school visits etc.
- Establish coordination between scientific institutions and GES on WASH in Schools: to gather and disseminate best practices, stimulate technical research and recommendations on best approaches.

At Regional/district/municipal Level:

- Setting up or strengthening of coordination mechanisms for WASH in Schools at Regional/District Levels: for coordination, planning, capacity building and monitoring of WASH in Schools activities will be done to ensure implementation with the required quality. This is a coordination between government (different ministries and different levels) and non-governmental organizations involved. It will be led by GES. The Regional Interagency Coordinating Committee could take up this role
- Advocacy with District/Municipal Administration and relevant authorities responsible for WASH in schools: through meetings and workshops would address implementation bottlenecks and also help to give priority to WASH in Schools activities.
- Sensitisation and Training of Regional/Municipal staff: on roles and responsibilities in relation to WASH in Schools to ensure smooth rollout of the programme.

At School/community Level:

- Advocacy with community leaders/authorities/health centres/school vendor associations etc.: will be carried out so that they give priority to maintaining hygienic conditions at schools.

b) Programming to build capacity, promote facilities and hygiene behavioural change among pupils, within schools

In chapter 2, the scope of the interventions/components has been given with a focus on the contents of the interventions. Here a description has been given on the integrated approach and activities. These activities focus on using various means of communication to reach pupils, teachers and communities both directly through interpersonal/social contact and interaction and indirectly through mass and mid-media in order to help change knowledge, attitudes, beliefs, mind sets, perceptions and practices as well as through technical interventions and construction. The activities planned/strengthened are:

At National Level:

- Organise training workshop for policy makers and relevant national stakeholders on planning, prioritising and selection of areas for WASH in Schools activities with the aim to eventually cover all schools in Ghana.
- Enforce the teaching of appropriate hygiene in schools: through revision of curriculum and text books being used in KG, Primary School and Junior High Schools
- Radio / Television Spots: Radio and Television spots on appropriate hygiene behaviour (with special focus on schools) with a positive, motivational feel aiming to address both knowledge gaps as well enhance self-efficacy among listeners would be developed and aired.

At Regional/district/municipal Level:

- Organise training workshop for regional/district/municipal policy makers, Regional and District SHEP Coordinators and training teams on planning, prioritising and selection of schools for WASH in Schools activities with the aim to use objective, transparent criteria for school selection (see annex...).
- Working with Food and Water Vendors at schools: Since they form a critical link in the transmission of diarrhoea/ cholera they will be oriented and certified to maintain proper sanitation and hygiene.

- Communication through Health centres: Advice and materials will be provided to them to talk to school children about hygiene issues and advise teachers about creating a hygienic environment in schools.

At school level:

- Construction/improvement of WASH facilities in school following National Standards (see chapter 2).
- Development of O&M plans for WASH facilities in school with involvement of the (head) teachers and School Management Committee.
- Development of a plan on the provision of consumable WASH products with involvement of the (head) teachers and School management committee.
- Signs and wall paintings and IEC/BCC materials at schools: these will support interpersonal communication as well create an enabling environment.
- Communication through teachers: teachers will be trained and motivated to promote good hygiene habits among children as well as to teach the newly developed materials on hygiene.
- Working with Children: In addition to the regular hygiene education within the (revised) text books), a range of activities will be carried out with children such as School health clubs and special fun based activities to promote and inculcate positive hygiene behaviours among them (more on this in chapter 2).
- Training: The capacity of for School based Health Coordinators, Water and Sanitation Management Teams etc. will be strengthened on the use of the materials developed.

c) Programming to ensure community/parents participation and ownership

Just like the approach for CLTS for rural sanitation, for change of hygienic conditions in schools communities need to be involved and engaged to identify the problems as well as in finding the solutions. Only through ownership of the solutions sustainability can be achieved. Therefore it is critical to involve communities, and more specifically the SMCs and PTAs, from the start and ensure they actively participate in the WASH in Schools activities in their school. The activities planned with and for the communities/SMC/PTA are:

- Strengthening of the School Management Committee (SMC): In order to support the implementation, operation and maintenance of WASH in Schools, a committee comprising of community leaders and representatives from all sections of the community will be formed (it might be linked to an existing committee). At least 50% of the members of the committee will be women.
- Participatory needs assessment and development of Facilities Management Plan and workplan: using participatory techniques, such as school mapping, the SMC analyses and identifies the school needs related to hygiene and hygiene promotion. Jointly with the school a work plan will be developed specifying clearly identified tasks, timelines, responsibility, training, support required and risks, supported by an M&E system.
- Creating new social norms: jointly with the school, the SMC will monitor the hygienic conditions in school and undertake action when not enough changes take place or when there is a risk that the pupils revert back to their old behaviour.
- Working with Community Influencers, Natural and Religious leaders: They will be oriented to motivate and mobilise their communities/parents/schools around the importance of WASH in Schools.

Division of tasks and responsibilities

The government, and in particular the Ghana Education Service through the School Health Education Programme, will co-ordinate the WASH in Schools advocacy and implementation. More specifically the task and responsibilities are divided as follows:

| Stakeholder | Roles/responsibilities |
|---|--|
| Ministry of Education/ Ghana Education Services/ School Health Education Programme | <ul style="list-style-type: none"> • Strengthen hygiene promotion in schools through adaptation/ complementation of existing text books as well as the set-up of participatory School health clubs • Mainstream hygiene promotion messages in school curricula • Ensure all schools use environmental, gender, child and disability friendly water, sanitation and hygiene services and facilities (and monitor it) • Coordinate and implement activities for awareness raising and advocacy on WASH in Schools • Development of strategies for interventions as well as planning, prioritising, selection monitoring of geographic areas for WASH in Schools activities with the aim to cover all schools within a defined time frame. • Provide the requisite secretarial support for the smooth functioning of the National Steering Committee and Regional and District SHEP Committees. • Provide the requisite secretarial support for the national level planning and budgeting for SHEP. • Initiate Research, Documentation and Knowledge Management and gathering and disseminate best practices • Technology research and standardisation • Financial support and external fund raising • Chair the WASH in School Coordination Group |
| MLGRD / Environmental Health and Sanitation Directorate | <ul style="list-style-type: none"> • Review existing national policies and ensure that there is a national policy framework that is supportive of improved conditions in schools • Ensuring the provision and maintenance of safe school structures and other health-promoting facilities, including ventilation, lighting, toilets, safe water, safe play and recreational grounds and security; • Enacting relevant bye-laws to promote safety and health standards for schools; • Inspecting regularly to ensure compliance of facilities with safety standards for schools; • Facilitating the certification of food vendors; • Liaising with GES to regulate and co-ordinate school health activities of NGOs and other organizations |

| Stakeholder | Roles/responsibilities |
|---|---|
| Ministry of Health / Ghana Health Service | <ul style="list-style-type: none"> • Provide guidance on the environmental health aspects of school design, construction and maintenance. • Monitor environmental health conditions, monitor child health. • Provide training and advice for teachers, schoolchildren and parents on water, sanitation and hygiene. • Provide technical assistance for the production of relevant hygiene education materials for the programme. • Participate in the monitoring, supervision and evaluation of school health programme. • Initiate, conduct and co-ordinate research in School Health. • Provide ethical clearance for all School Health research activities carried on school children. |
| Ministry of Water Resources, Works and Housing / Community Water and Sanitation Agency | <ul style="list-style-type: none"> • Facilitate the provision of water and sanitation facilities in schools which should be environmental, gender, child and disability friendly; • Collaborate with GES and other stakeholders to train teachers in the integration of Hygiene Education into school activities. • Assist the development and dissemination of relevant hygiene education materials |
| Regional & District Directorates of Education | <ul style="list-style-type: none"> • Stimulate and support WASH activities in schools • Planning, prioritise and select schools for WASH in Schools activities with the aim to use objective, transparent criteria for school selection. • Assess and support capacity building activities to support implementation of WASH in Schools in region/district/municipality/school. • Ensure effective implementation of relevant policies and decisions emanating from the National SHEP Secretariat; • Ensure effective dissemination of relevant information within the region; • Monitor school activities and provide technical backstopping and feedback to the districts; • Undertake budgeting for SHEP activities as appropriate; |
| Development Partners | <ul style="list-style-type: none"> • Support activities for awareness raising and advocacy on WASH in Schools, such as development of advocacy packages for different target groups. • Coordinate and involve the government (national, regional, district) and apply the National Standards on WASH in Schools in programs, projects and other interventions in schools. • Provide technical assistance and training on capacity building activities to support implementation of WASH in Schools. • Provide funds to support implementation of WASH in Schools |
| Private Sector | <ul style="list-style-type: none"> • Provide products and services to schools (e.g. soaps, cleaning materials and facilities) which are affordable and sustainable |

| Stakeholder | Roles/responsibilities |
|----------------------------|--|
| School Community (SMC/PTA) | <ul style="list-style-type: none"> • Through strengthened SMC and PTA support the implementation, management, operation and maintenance (resource mobilisation and periodic repairs) of WASH in Schools. |
| Schools | <ul style="list-style-type: none"> • Create new social norms making unhealthy and unhygienic schools unacceptable. • Implement and sustain on a day-to-day basis WASH in Schools including facilities, hygiene education, school health clubs, monitoring etc. • Responsible for O&M of facilities (period repairs and major maintenance) and O&M schedules. • Provide for consumables (soaps, cleaning materials) • Communicate with district/municipal coordinator if assistance is needed. |
| Pupils | <ul style="list-style-type: none"> • Accepting and applying new social norms making unhealthy and unhygienic schools unacceptable and carrying this information towards the households they live. • Support the cleanliness of the school through cleaning of facilities and compound (if no separate cleaner has been employed). |

More details on tasks and responsibilities can be found in *GES WASH in Schools Facilities Planning & Management guide*.



4. Monitoring and Evaluation

The progress of the implementation of the National Standards on WASH in Schools will be tracked and carefully checked at all levels because a system for monitoring of hygiene promotion is critical to:

- Analyse the current situation,
- Identify problems, find solutions and take corrective measures during implementation,
- Discover trends and patterns,
- Keep planned activities on schedule,
- Measure progress towards intermediate goals and revise action in order to achieve these goals,
- Make decisions about human, financial and material resources.

And evaluation helps to:

- Determine how effective an intervention has been,
- Determine the extent to which goals have been achieved,
- Learn how efficiently the interventions have been implemented,
- Develop “lessons learned” for future interventions.

The below M&E Framework gives an overview on the expected objectives, outcomes, and outputs as well as objective verifiable indicators and means of verification.

| M&E Framework | | |
|---|---|---|
| Results | Objective Verifiable Indicators | Means of verification |
| OBJECTIVES | | |
| Increase number of pupils and teachers (girls and boys, teachers) who use toilets and urinals regularly in their schools. | Number/percentage of schools having toilets or urinals. Number/percentage of girls/ boys/teachers reporting regular use of toilets and urinals. | EMIS School self-monitoring reports Base line, mid line and end line survey reports. Progress reports |
| Increased number of girls/boys/teachers who wash their hands with soap (ash or sand) in school, after defecation or after having contact with faeces, before eating food. | Number/percentage of girls/boys/teachers who wash hands with soap at critical times. Number/percentage of girls/ boys/teachers who understand the need for handwashing with soap and can articulate benefits of handwashing at critical times. | School self-monitoring reports Base line, mid line and end line survey reports Amount of soaps bought by the school |
| Increased proportion of girls/boys/teachers safely storing and handling drinking water | Number of/percentage of girls/ boys/teachers who understand the need and practice safely storing and handling drinking water and use of separate cups for drinking | School self-monitoring reports Baseline, midterm and end term evaluation survey reports KAP reports |

| M&E Framework | | |
|--|---|---|
| Results | Objective Verifiable Indicators | Means of verification |
| Increased proportion of girls/boys/teachers practicing personal hygiene | Number of/percentage of girls/boys/teachers who understand and practice personal hygiene | School self-monitoring reports Baseline, midterm and end term evaluation survey reports KAP reports |
| Increased proportion of schools/School management committees who organise regular clean-up activities and organize safe solid waste collection and disposal. | Number of/percentage of schools that organise solid waste management | School self-monitoring reports Baseline, midterm and end term evaluation survey reports KAP reports |
| OUTCOMES | | |
| Increased levels of knowledge and awareness regarding the importance of hand washing with soap. | School surveys conducted. Availability of soap close to toilets or class rooms in schools. | Activity progress reports |
| Increase in the number of girls/boys/teachers who are able to make linkages between hand washing with soap and diarrhoea. | Number of girls/boys/teachers who are able to articulate the linkage between handwashing and diarrhoea. Number/percentage of girls/boys/teachers able to explain at least two critical times for hand washing. | School self-monitoring reports KAP studies and reports Hygiene surveys |
| Increased number of girls/boys/teachers who stated perceived risk of not washing hands with soap at critical times. | Number/percentage of girls/boys/teachers able to explain the risks of not washing hands with soap at critical times. | Base line, mid line and end line survey reports |
| Increased number of girls/boys/teachers who can identify the benefits of regular use of toilets/urinals | Number of schools having toilets/urinals. Number of schools where everyone uses the toilet/urinal regularly. | Self-monitoring system in schools Base line, mid line and end line survey reports |
| Increased number of parents, who can identify the benefits of regular use of toilets | Number of children who use a household toilet at home. | Self-monitoring system in schools Base line, mid line and end line survey reports |
| Increased number of parliamentarians and other politicians who stated the importance of WASH in Schools | Number of quotes in newspapers, radio/TV performances | Survey reports |

| M&E Framework | | |
|---|---|--|
| Results | Objective Verifiable Indicators | Means of verification |
| OUTCOMES | | |
| Sensitisation of policy makers and stakeholders | Number of questions raised in parliament and assemblies Number of times the issue of WASH in Schools is brought up in public speeches | Monitoring of parliamentary and assembly debates Media reports on public engagement of concerned public figures |
| Media sensitised and motivated to report on WASH in Schools | Number of news stories and their prominence in National, Regional and Local media | Media monitoring and analysis |
| Elected representatives are engaged and motivated to spread messages and coordinate and monitor programs. | No. of public and coordination meetings held by elected representatives in which issues concerning WASH in Schools are discussed | Local media reports, minutes of meetings of MMDAs |
| Community Hygiene Committees, PTAs and school teachers with the knowledge and skills to promote, maintain and monitor WASH in Schools | Number of community/PTA volunteers, school teachers, trained in organisation, planning, implementation maintenance and monitoring. Number of schools covered | Assessment reports Training reports List of participants |
| School health clubs with the knowledge and skills to promote, maintain and monitor WASH in Schools | Number of School health clubs trained. Number of schools with School health clubs. | Self-monitoring system in schools Assessment reports |

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