

Hygiene Promotion

Children's Hygiene And Sanitation Training

Solomon Islands, June 2017



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Introduction

This document aims to share the Children's Hygiene and Sanitation Training (CHAST) approach implemented in the USAID-funded "Supporting Community Planning 3" project in the Solomon Islands by the Solomon Red Cross Society technically supported by the French Red Cross. This approach was developed following a successful experience in Vietnam. After the development of the CHAST kit adapted to the local context, the CHAST methodology was applied to a total of 12 classrooms in 4 schools of Honiara. The different elements included in this document are:

- A presentation of the CHAST methodology,
- The steps to set up and implement the methodology,
- A focus on Handwashing,
- The evaluation of the progress made by the students,
- The lessons learned of the 2016 pilot project and recommendations for future implementation,
- The measured impact of the 2016 pilot project on children's awareness regarding good hygiene and sanitation practices.

What is Children's Hygiene and Sanitation Training?

CHAST's approach aims to promote good hygiene practices amongst children; it was initially developed in rural areas of Somalia. It is based upon the PHAST approach. PHAST (Participatory Hygiene and Sanitation Transformation) is a participatory learning methodology that supports communities to improve their hygiene behaviors, reduce diarrheal disease and encourage effective community management of water and sanitation services. Because the PHAST approach was initially designed for adults, it has been carefully revised and adapted to suit the needs of young children. While children have less knowledge and experience, fewer responsibilities and a different conception of time and the future, they are also naturally inquisitive and eager to learn. CHAST uses a variety of exercises and educational games to teach children aged 5 to 12 about the links between personal hygiene and health.

CHAST encourages children to actively participate in open discussions and to share their experiences and ideas with their peers. In the CHAST exercises and games, children are encouraged to work independently in pairs or in small groups, to then present their thoughts and findings to the larger group. CHAST tools are meant to be fun — involving games, exercises and role-plays that prompt the children to discuss and genuinely understand the key issues related to personal cleanliness and hygiene.

The CHAST methodology is divided in 5 (for primary students) or 6 steps (for secondary students). Each step includes various activities that are done during sessions. The requirements in terms of handouts and stationery are specified for each activity. The steps and sessions are described in details in pages 4 and 5.



Students coloring drawings of good and bad hygiene behaviors



Student telling the story of Aldon who got sick after not washing his hands

Background

The French Red Cross (FRC) has been present in the Solomon Islands since 2010 building the capacity of the Solomon Islands Red Cross Society (SIRCS) in accordance with its mandate and strategy. From 2010 until now, both organizations have been implementing jointly Disaster Risk Reduction and WASH activities through the "Together Becoming Resilient" (TBR) program. Since May 2015, the FRC and the SIRCS have been running the "Supporting Community Planning 3" (SCP3) program funded by USAID/OFDA. This program complements the TBR intervention in facilitating the implementation of Village Risk Reduction Action Plans (VRRAP). This shall be done primarily by addressing the WASH and DRR needs identified by the communities as priority mitigation actions through an integrated WASH approach (targeting simultaneously environmental health, water supply, sanitation and hygiene).

FIRST STEP: IEC materials testing and development

In order to be effective, CHAST, as well as all the hygiene promotion methodologies and tools, need to take into consideration the context where it will be implemented and how to be adapted to it: the broad methodology needs to be tailored from a context to another, with a purpose of being culturally acceptable and relevant, in order to make sure it focuses on the aspects which, in that specific scenario, meet the needs of the target audience.

However, to define the needs in terms of visual materials to support the CHAST implementation, SIRCS/FRC has investigated the existence of materials already in use, locally; this to understand:

- If children-focused visual materials exist already,
- If those materials are in use,
- If those materials 'effectiveness has been tested prior to its diffusion,
- If any impact monitoring has been carried-out after some time regarding the materials 'use,
- If the existing materials are understood, accepted and relevant for the target audience.

Beginning of December 2015, 13 sessions were organized in 3 urban communities in Honiara and its outskirts, as well as in 3 other rural communities in Guadalcanal where a total of 168 children and youth have been interviewed. Open questions have been the chosen way to exchange ideas about the selected topics (sanitation, personal hygiene, fecal-oral transmission route). The objective was to collect qualitative data, rather than quantitative, and to record every statement, even if it did not seem “relevant” at first.



Sample of tested drawings



SIRC staff and volunteers test a drawing with youth in Kaibia community—Honiara

For visual aids, the main thematic areas investigated were:

- **Recognition:** level of understanding/misunderstanding associated with a single image
- **Acceptance:** are there any unacceptable or offensive elements in the materials?
- **Familiarity:** is the “problem” (in this case bad hygiene practices) known by children? Is there any correlation between what they see in the drawing and their current practices?
- **Relevance:** is the “problem” (in this case bad hygiene practices) relevant for children?
- **Appeal:** is the visual aid liked by the audience?
- **Details sensitivity:** what is capturing the attention of children and why?

To illustrate the IEC material testing process, if we refer to the samples of drawings presented above, it appeared that the children only saw a strong man standing in the water, without noticing the soap he's holding to wash himself. Similarly, most children didn't like the picture with two hands holding a piece of soap because it looked incomplete to them and they asked whose hands were they. They would have preferred to see the hands with a complete body. Hence, both drawings were considered not relevant for children and were therefore not selected to be part of the CHAST Kit, because they didn't meet the expectation which was: All children should understand clearly the key message of the importance to use soap for body hygiene and hand-washing.

The results of the sessions have been used to prepare the technical specifications for the production by a local artist of:

- 63 different colored cards (13,5*13,5 cm each) - sketched and colored by hand;
- 15 black and white drawings (13,5*13,5 cm each; designed among the colored cards) - sketched by hand;
- And 7 different colored posters (A3 size: 42*29,7 cm.) - sketched and colored by hand.

The CHAST kit has been then finalized and after the meeting held in April with IEC department of Ministry of Health, agreement to proceed with printing has been granted.

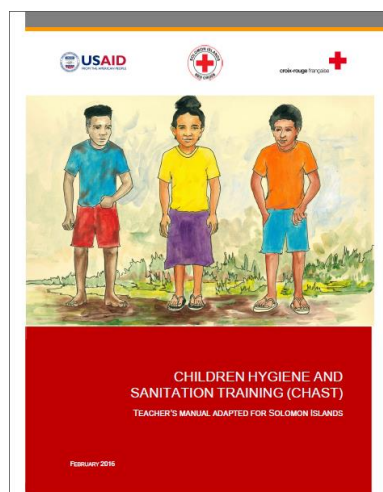


The timing to do IEC testing and development need to be taken into consideration when designing the project as this step is very important and should not be neglected. A minimum of 6 months is necessary for this phase. In addition, the different government bodies such as Ministry of Education and Ministry of Health need to be part of the process, as they often have dedicated department and/or policy for IEC development.

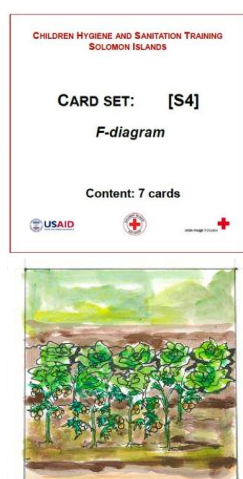
Composition of the CHAST kit

The CHAST kit in Solomon Islands is composed of:

- One manual;
- 7 different card sets:
 - o S1 Daily Hygiene Habit
 - o S2 Good and Bad Hygiene Behaviors
 - o S3 Opposite Hygiene Behaviors
 - o S4 F diagram
 - o S5 Aldon and David playing football
 - o S6 Blocking routes of transmission
 - o S7 Food hygiene



CHAST manual



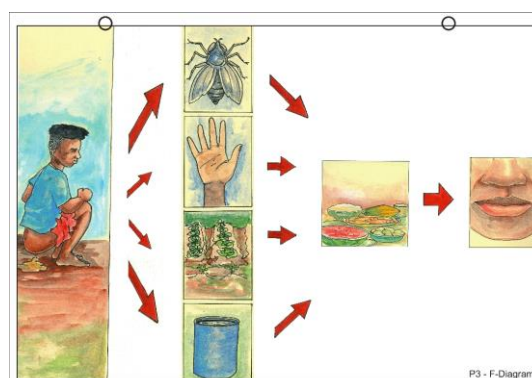
Example of one card set: Set 4 F diagram

- 9 different posters:
 - o P1 Aldon, Agatha and David
 - o P2 Germs and ladders game
 - o P3 F-Diagram
 - o P4 Kids playing football
 - o P5 Kids finishing football
 - o P6 Aldon and David going home
 - o P7 Handwashing
 - o P8 Using a pit toilet
 - o P9 Using a flush toilet
- Accessories:
 - o 1 puppet (named Ziggy)
 - o 4 color pencil boxes
 - o 2 dice
 - o Black and white drawings for the kids

The use of the puppets has proven to encourage full participation from the children, especially beneficial for shy children in group activities.



P2 Germs and ladders game



P3 F-Diagram



The kit includes a total of more than 250 cards in 7 different sets and some cards can be found in more than one set, it is important to number all the cards with their appropriate card set and to store them accordingly. It's then easier for the teachers and the facilitator to have the proper set for the activity.

The CHAST Manual is designed to support teachers or any other CHAST facilitator (i.e. NGOs, Ministry staff etc.) with a methodological framework as well as practical recommendations for Children's Hygiene and Sanitation Training (CHAST) implementation. Step-by-step instructions for facilitating each session are provided, together with tools, exercises and IEC materials needed for each lesson. When relevant and necessary, activities are divided into two distinct streams for both primary and secondary school pupils.

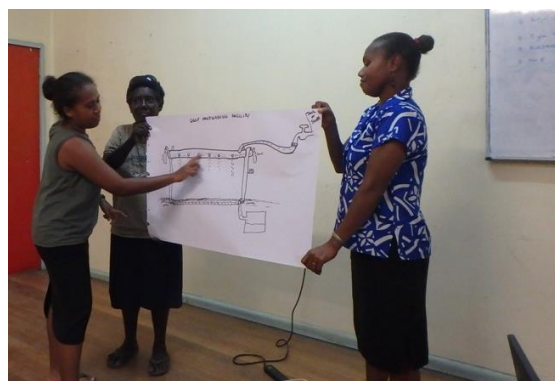
Training of facilitator: Another key step

One key point in the approach is the training of the facilitators. The project staff, Red Cross volunteers and teachers have received two "Training of Trainer" sessions lasting respectively 2 full days and 3 afternoons.

The content of the training was:

- Introduction to CHAST,
- Presentation of the CHAST kit,
- The different steps in CHAST,
- The different activities to implement CHAST,
- Singing the handwashing song,
- The facilitation techniques,
- The role play preparation,
- The integration of the infrastructure (group handwashing station, latrines)
- Reporting a session,
- Evaluations and feedback. (final day).

This training is crucial to ensure that teachers, principals and volunteers are aware of the methodologies and goals prior to implementation.



Teachers and Red Cross staff designing a group handwashing station during ToT

Implementation steps

The following table provides details about each step: the name of the session, the list of all activities per session and the objective of the step.

STEPS	SESSION	ACTIVITY	OBJECTIVE
1. Introduction	1. Introduction of the Children Hygiene and Sanitation Training	Making friends	This step helps pupils get familiar with the participatory method and tools such as Ziggy the puppet, coloring pictures, songs, etc. Children are also given opportunities to express stories about their daily life through pictures.
		Narrating daily routines	
		Learning to sing	
2. Problem identification	2. Good and bad hygiene behaviors	Classify good/bad hygiene behaviors	This step focuses on establishing and clarifying the links between hygiene behaviors and health problems that children often face, such as diarrhea. Children will also be able to develop their analytical and decision-making skills through exercises where they select pairs of pictures representing good hygiene behaviors bad hygiene behavior
		Play germs & ladders	
3. Problem analysis	3. Changing hygiene behaviors	Identify opposite hygiene behaviors	This helps pupils remember good and bad habits and their respectful consequences by repeating the causes of common diseases that children often suffer, and through the analysis of a story in which the main characters get sick (or not) according to their actions and behaviors. Pupil's capacity for problem identification will also be improved, as they have to determine the link between their knowledge of how diseases are transmitted and the respective methods of prevention, exemplified through good hygiene behaviors.
	4. Transmission of diseases	Story: Aldon and David playing football	
	5. Methods to prevent diseases' transmission	Blocking the routes of germs	

Sequence implementation (ctd)

STEPS	SESSION	ACTIVITY	OBJECTIVE
4. Practicing good hygiene behaviors	6. Washing hands with soap and clean water	Learning how and why to properly wash hands	This step instructs children how to go about practicing good hygiene behaviors that have been identified as important, through individual or small group practice. The main method applied for this step is role-play, together with some practical activities.
	7. Keeping food hygienic	Story-telling on food hygiene	
	8. Using hygienic latrines	How we want our latrines to be	
	9. Keeping our school and classrooms clean	A clean school is a better school	
5. Making operational plans	10. Initiatives for action	Choosing what we want to improve	This step helps pupils identify what is good hygiene behavior and what is bad hygiene behavior on their own. Creating an exciting environment in the classroom as children classify good and bad behaviors, thus helping them to be more committed when planning and implementing good hygiene behaviors they have identified for their future endeavors.
	11. Review	Hygiene quiz	
		Drawing contest	
6. Monitoring (for secondary only)	12. Planning for monitoring changes and implantation of monitoring	Together developing a monitoring plan Daily monitoring	Developing good hygiene habits is a long process that is not easy. Thus, it is advisable to monitor children closely in order to encourage them to change their habits. The two most important indicators of CHAST are: washing hands properly with soap and using hygienic toilets. These indicators are relatively easy to collect.

Testimonies from School teachers



"I have enjoyed the CHAST activities as the kids improve their practice. The handwashing station is very convenient for the practice and the kids look after each other. I wish the CHAST can be extended to do more school classes."

Cyreen Keni
Secondary Teacher
Tuvaruhu School

"I was directly involved in the activity for the sign translation. It's important to have same approach for kids with disabilities (mute and deaf) as they have same needs. With the project, I get more skills, knowledge and ideas to teach the students."

Nester Piko
Class teacher
SDC School



Importance of Handwashing

Make handwashing a habit: Group handwashing

The concept of washing hands in a group has practical advantages and potential long-term impacts. Doing activities in a group is a natural way of interaction in a school context, fostering inclusion, and general participation, thus reducing the need to encourage and ensure individual behavior. Observing others and being observed may create peer pressure and positively influence hygiene behavior norms. This might even be enhanced when children are able to use a facility from both sides thus facing each other while washing their hands. By conducting the activity in a group it becomes realistic for children of an entire school to wash their hands with soap and water within a minimal amount of time and disruption of lessons, thus making it easier to manage and integrate the activity into the daily schedule.

The Red Cross built **4 group handwashing stations** in the 4 schools where the CHAST methodology is piloted. For effective behavior change, it is essential that the infrastructure in place allows the students to put in practice what they learn.

Many designs can be imagined, from low-cost ones with locally available materials to fancy ones. After brainstorming with teachers and principals the chosen design has a **timber structure** with a simple **PVC pipe** with holes and a **ridge cap** as basin. The cost is approximately **6,600 SBD (around 830 US\$)**.



Group Handwashing Station
at SDC school Honiara



Students practicing handwashing
in Tuvaruhu School

Basic principles of Group handwashing facility⁽¹⁾

When planning a group handwashing facility, a few basic principles should be kept in mind to guide the planning process and to ensure successful implementation. Some of the basic principles include:

- **Simplicity of design**: Simplicity in design facilitates replication, reduces maintenance, repair, and costs, increases community involvement and ownership, and chances for scale-up.
- **Facility size & number**: Facility should accommodate at least ten children, the total number depends on the school size, the available space and the resources.
- **Water availability & consumption**: Facility must be appropriate in regards to water availability to ensure a steady water supply and minimize water consumption.
- **Functionality, maintenance & location**: Use locally available and affordable materials and ensure that the facility remains functional as long as possible. Choose a convenient and safe location. Clarification of roles and responsibilities for Operation & Maintenance in the school community will help to maintain functionality long-term.

In combination with the Global Handwashing Day celebration

The Red Cross organized the 2016 **Global Handwashing Day** with principals and teachers of 6 schools in Honiara and Western Guadalcanal. A total of 1208 person including 567 girls, 596 boys and 45 adults have participated to 21 sessions of handwashing. Organization of a session (20-30 min):

- Introduction the Global Handwashing Day theme: “**Making handwashing a habit**”
- Explanation of the importance of handwashing
- Demonstration of handwashing Steps
- Quiz about handwashing
- Group handwashing session and distribution of soaps
- Singing a handwashing song

(1): Scaling up group handwashing in schools – Fit for School International (August 2016)

LESSONS LEARNT from 2016 Implementation

The information in this section was collected from: 1) a continuous basis after each session of CHAST where a debriefing was done between SIRCS staff and the SIRCS volunteers; 2) a lesson learnt workshop schedules on the 29 and 30th of November with the participation of volunteers, school teachers, school principal and SIRCS staff. The goal was to gather their responses to these three key questions:

1. What worked well in the methodology?
2. What could have been improved in the methodology?
3. What should be done differently next time?

Successes:

- Authorities (Ministry of Health IEC department and Ministry of Education) approved the tools prior to its implementation
- Training of volunteers was good and very useful for the implementation of the CHAST activities
- Good collaboration between volunteers
- Teachers and students understood the content and were well involved and participating
- Teachers and schools took interest in the activity
- Participatory approach was liked by children and volunteers
- Students gained confidence in speaking publicly
- Children improved their hygiene practices (see below)
- High participation and interest in class with deaf and mute students
- Bigger participation of schools to the lessons learnt compared to ToT -> gained interest
- Teachers from both primary and secondary sectors were actually involved in CHAST training before the beginning of activities in schools. They were therefore already aware of what is CHAST and its goals
- Students were good advocates
- Teachers liked the approach and always voiced their positive comments to the volunteers
- Teachers, students and volunteers were overall interested in the CHAST activities and would like to pursue these activities.

Challenges:

- Difficulty to get attention from all the students in larger classes
- Some classes are overcrowded
- Keeping up a good communication between teachers and volunteers (especially to reschedule sessions when the teacher is absent)
- Except in SDC, the handwashing station is not used everyday
- In SDC school, the sessions had to be translated in sign language by teachers
- Secondary classes were more challenging and afternoon classes were more disturbed
- Each secondary class has several different teachers. Teachers are reluctant to lose 30 min per week for CHAST and prefer to concentrate on their program
- Role plays were not easily understood by the students
- Questionnaire for the test was also not easily understood by young students
- Some of the CHAST material quantities were too few sometimes (like color pencils and black & white drawings), which can reduce children's participation during the session and increases noise in class

Means of improvement

- Ensuring that CHAST can be added to the official curriculum from the Ministry of Education
- Focusing on primary school students only (one age range)
- Starting earlier in the semester in order to avoid rush at the end of the semester
- Organizing awareness sessions with all Red Cross volunteers and interviews with the interested children
- Adding at the beginning of the activities, an awareness session for all teachers, school staff, parents and class captains
- Providing more posters (like the handwashing one that can be left in each class), color pencils and black and white drawings
- Leaving posters in the class as reminders
- Having more cards during activities so that each kid can have one, at least
- Making the final test as a competition between schools, with prizes
- Improving communication between teachers and volunteers with a clear timetable
- Making some improvement in the manual: change role plays, include session number in the footer, new questionnaire for the test
- Developing better management of the soap in the group handwashing facilities



The review process is very crucial especially when dealing with a participatory approach. The feedback of the project staff, Red Cross volunteers, school teachers, school representatives, students and even students' parents is essential at each step of the implementation.

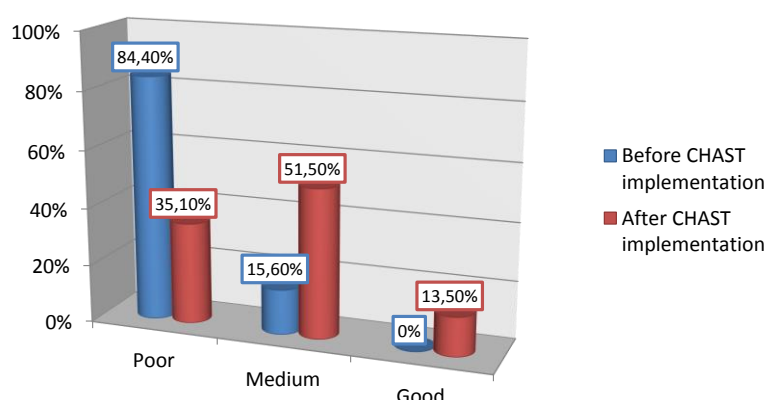
Results of the CHAST implementation

One questionnaire was developed before the implementation and concerned three main points:

- knowledge regarding diarrhea,
- safe drinking water,
- handwashing,
- and basic hygiene (body hygiene, safe food and house environment).

The questionnaire was designed with ten simple questions. The answers were provided and the students have 15 minutes to read and to tick the good answer to the question. They could choose more than one answer among several possible answers. The same questionnaire was asked after the CHAST implementation. The results for the primary students interviewed in St John and White River schools are given in the following table.

Test results from students



From the results of the tests, we can see an increase of nearly 50% of the student level after CHAST implementation. After implementation 64,9% are in the category medium/good against 15,6% before implementation. These results confirm the feedback given by volunteers and teachers during the implementation of the activities.

Conclusion

The implementation of the Children Hygiene and Sanitation Training in 4 schools of Honiara:

- Improved student's knowledge on water, sanitation and hygiene,
- Appropriate and effective in SDC school (with students deaf and mute),
- Appreciated by the teachers and school management who would like to continue the activity in the coming years,
- Appreciated by the volunteers who enjoyed the activity, believed they were sufficiently trained and agreed that the CHAST material was adapted to the context,
- Appreciated by students who have enjoyed participating in the activity and want it to continue as it is fun and interesting and has positive impacts in their daily hygiene practices.

Some improvements have been identified and have been done for 2017 implementation (list given in previous page). In 2017, the Solomon Islands Red Cross and the French Red Cross will continue CHAST implementation to more classes in the 4 targeted schools and will include 3 new schools in Guadalcanal province. Unicef in Solomon Islands has expressed its interest to work with Solomon Islands Red Cross and implement CHAST approach in 21 schools of Guadalcanal province.

To make it more effective, it would be interesting if the Ministry of Education, who was involved at different stages, could include in the national curriculum the CHAST methodology and dedicate time to teachers in the future. It is also important to ensure that all stakeholders at a school level (Principals, head teachers, class teachers, school prefects and class captains) continue to actively uphold and monitor students to make sure that concepts delivered through CHAST are put into practice in their schools even after the completion of the CHAST sessions.

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Disclaimer: "This support is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of French Red Cross and do not necessarily reflect the views of USAID or the United States Government."