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“Scaling up with Quality”

Report of SSHE Workshop
Bhopal, Madhya Pradesh

School Sanitation and Hygiene Education: Scaling up with Quality

**Report of Regional Workshop
Bhopal, Madhya Pradesh
9-12 December, 2003**

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TABLE OF CONTENTS

Executive Summary	I
Preface	III
1. Background to the workshop	1-8
1.1 Context	
1.2 Workshop objectives and concepts	
1.3 Participants	
1.4 The workshop programme	
2. Summary of the main presentations	9-12
3. The main outputs of the workshop	13-16
3.1 Lesson Learned	
3.2 Indicative plans	
APPENDIX 1 State presentation from Madhya Pradesh	17
APPENDIX 2 State presentation from Uttar Pradesh	19
APPENDIX 3: Example of training institution plan	22
APPENDIX 4 School Sanitation and Hygiene Education in Madhya Pradesh	23
APPENDIX 5 Workshop Schedule	29
APPENDIX 6 List of participants	33

Executive Summary

The regional workshop on '*School Sanitation and Hygiene Education: Scaling up with quality*' was held from 9 to 12 December 2003 in Bhopal, Madhya Pradesh. The focus was on enhancing the implementation and capacity development aspects of the SWASTHH/SSHE programmes in two neighboring states, namely Madhya Pradesh and Uttar Pradesh. The 131 participants came from 22 districts in M.P. and 12 districts in U. P. The group represented a mix of professionals from the sectors of education (schools, teacher training and the SSA programme), public health engineering, planning and rural development, women and child development as well as UNICEF district staff. State level participants were drawn from the Total Sanitation Programme, training institutions, public health engineering and the UNICEF water and sanitation programmes. In addition, there were resource persons supporting the workshop from the Rajiv Gandhi National Drinking Water Mission and UNICEF as well as from four national resource centres, training and rural development institutes. Professionals in the latter group came from five states other than U.P. and M.P.

This report reflects the main themes covered in the workshop and provides full copies of the indicative State plans from the two states, as well as the Hindi-language booklets on hygiene and management of SSHE/SWASTHH programmes. District implementation and capacity development plans were also prepared by the participants during the workshop and have been shared with the State governments and UNICEF state offices for subsequent follow-up.

One of the recurring themes in the workshop was that SSHE/SWASTHH is more than a construction programme. It requires a *balance between hardware and software inputs, between construction and education and community participation*. It focuses on sustained changes in hygiene behaviours that will be carried out consistently in the school and can be reflected in the household.

A second theme was the synergy between SSHE/SWASTHH and the Total Sanitation Campaign.

Thirdly, the workshop focused on capacity development—and planning for capacity development—which is an essential element in SSHE/SWASTHH programming.

The fourth theme was convergence, that is, the integration or cooperation among different sectors at all levels, state, district, block and community. Coordinated inputs from education, public health engineering, early childhood care and education, teacher training, local government are required for the success of the SSHE/SWASTHH effort.

In summary, special attention was given to ***scaling up with quality*** which is the greatest challenge for the programme. To achieve this, SSHE/SWASTHH programmes must prioritize and balance hardware with software including attention to management and supervision, monitoring, effective capacity building, and especially convergent and coordination at all levels. This prioritization is the only way to ensure that facilities will be used and maintained, new habits will be formed and important practices and messages will be carried to the household and community. Clearly the above issues require a great amount of effort for all stakeholders that are directly or indirectly involved in the programme. It was agreed that in order for a project to scale up it needs a number of factors, namely:

- A consistent and shared vision: agreed objectives and advocacy.
- Political commitment and an understanding of the programme among leaders at all levels.
- Effective inter-sectoral cooperation and integration into on-going programmes.
- Motors: a responsible and committed core group including full-time staff.
- Planning which provides agreed roles for all key stakeholders;
- A timeline and ensures that the programme will be carried out in the correct sequence at the district, block and school levels.
- Greater emphasis on capacity development, including, but not exclusively training.
- Great attention to efficient but flexible management, supervision and monitoring.
- Decisions are needed early in each programme about certain common questions, related, for example to technology, design and norms.

The proceedings of this workshop were organized through participatory activities and presentations that focused on:

- Learning about the main feature of the SWASTTH/SSHE programme in the two different states.
- Identifying main lessons learned in SWASTHH and SSHE programming of quality.
- Determining key processes for scaling up and how these can be supported and facilitated.
- Prepare an indicative State and various district plans for scaling up SWASTHH/SSHE with quality for the two states.

By the end of the workshop, participants worked in small groups at the State and district level, and made one operational plan for SSHE plus a number of district plans for each State that they intend to carry out. Examples of these which are contained in the body of the text include:

- A state and district SSHE plans for each State.
- A plan for co-ordination among institutions involved in training.

It is hoped that this report will be useful to the participants of the national workshop and their colleagues.

Special thanks are due to the Government of Madhya Pradesh, Department of Public Health Engineering, and, in particular, Mrs. Alka Upadhyaya, Project Director of the Total Sanitation Programme whose initiative in organizing the workshop and hard work was instrumental to the success of the programme. The UNICEF Office in Bhopal deserves recognition for their thoughtful support and inputs in the conduct of the workshop. The Madhya Pradesh Academy for Administration - RCVP Noronha Academy of Administration & Management provided the venue, accommodation and accorded the workshop group diligent support throughout.

The workshop concluded with a plenary session in which the Secretaries to the Government of Madhya Pradesh (Department of Women & Child Development, Elementary Education, Public Health Engineering, Tribal Welfare) and the Director General of the Academy of Administration gave constructive feedback to the participants. This was a signal example of convergence among the sectors whose cooperation is essential for the success of SSHE/SWASTHH.

From the participants....

"The workshop opened our eyes. When I return (to the district), I will call together all the departments so that we can plan SSHE together."

"The resource persons have really made us focus on all the aspects of capacity building (which are useful for developing an SSHE programme)"

Preface

Throughout the nation, programmes are developing rapidly for water, sanitation and hygiene education in schools and anganwadis with the prime objective of reaching the young and the vulnerable. The Government of India is providing significant support for this effort, known as SSHE (School Sanitation and Hygiene Education) through, for example, the Total Sanitation Campaign (TSC) which has approved programmes in 400 districts to provide toilets and urinals for rural schools. Under the *Swajaldhara* programme, the Department of Drinking Water Supply in the Ministry of Rural Development enables the provision of drinking water facilities to rural schools. Each State also provides considerable resources, in the form of funding, manpower for programme implementation and for construction.

One related group of programmes are SWASTHH (School Water and Sanitation through Health and Hygiene). From 1999 to 2002, SWASTHH has represented an integrated programme of Water, sanitation and Hygiene in primary schools with UNICEF's assistance. For the period 2003-2007, 14 of the UNICEF-supported State programmes plan for scaling up. As part of its effort within the Child's Environment Programme, this workshop had initially been planned as part of UNICEF's continuing support for the development of school sanitation and hygiene education.

The initial structure of the workshop was first conceived by Mr. Kumar Alok, Deputy Secretary, Department of Drinking Water Supply, Government of India, together with Mrs. Alka Upadhyaya, Project Director of the Total Sanitation Programme, Madhya Pradesh and Mr. A. K. Singh, Deputy Director of the Panchayati Raj in Uttar Pradesh during their discussions at the international SSHE workshop held in Delft, Netherlands in October 2003. The focus of the workshop was on enhancing implementation with emphasis on capacity development and the development of state and district training cadres in Madhya Pradesh and Uttar Pradesh.

The Total Sanitation Programme in Madhya Pradesh organized the workshop from 9 to 12 December 2003 in Bhopal, with the support and substantive inputs from the Unicef-Bhopal and Unicef-Delhi offices.

The outputs of the workshop were:

- Greater understanding of the components of SSHE with an emphasis on capacity building;
- District plans, with many of the participants dedicating themselves to carrying out the first steps of their plans in districts of both M.P. and U.P.;
- Capacity development at the State level to coordinate inputs in support of the related activity plans of SSHE in districts;

- Reinforced linkages among the departments and institutions involved at the state and district levels.

Of course, the real test of the effectiveness of the workshop will lie in the follow-up activities which are carried out at the various levels. It is hoped that these activities will be monitored and that support will be given to ensure their quality.

The IRC International Water and Sanitation Centre helped facilitate the workshop and provided some background/training resource booklets which it hopes will be adapted, or may provide basic inputs to support training and orientation programmes at state, district/block and community levels. IRC wishes to take this opportunity to thank colleagues from the Governments of Madhya Pradesh and Uttar Pradesh, together with UNICEF-Bhopal and UNICEF-Delhi for their dedication and hard work in the conduct of the workshop. The support of the Rajiv Gandhi National Drinking Water Mission was instrumental in this effort.

In particular, thanks are due to Mrs. Alka Upadhyaya, Project Director of the Total Sanitation Programme for her exceptional and continuous support during the workshop together with her team from the Public Health Engineering Department in Madhya Pradesh.

Mr. A. K. Singh and the team from Uttar Pradesh worked hard to realize the capacity development strategies which will be developed at State and district levels.

From the UNICEF Bhopal office, Mr. Nigel Ede, State Representative, Mr. Dauda Wurie, Ms. Astrid van Agthoven and Ms. Nidhi Joshi provided consistent and patient inputs throughout.

From UNICEF Delhi office, Mrs. Sumita Ganguly deserves appreciation for her inspiration and strategic support in realizing this, and other intersectoral and inter-departmental efforts within SWASTHH/SSHE.

Mr. Prabhakar Sinha and Ms. Nidhi Joshi translated and facilitated many of the sessions of the workshops with skill and perseverance.

Lastly, the resource persons brought a wealth of "hands-on" experience to the workshop. Without their inputs the quality and richness of the sessions could not have been realized. They were: Mr. Ishwar Bhai Patel of the Environmental Sanitation Institute in Gujarat, Dr. S. Ponnuraj of Gandhigram Rural University in Tamil Nadu, Mr. C. C. Dey of the Ramakrishna Mission in West Bengal, Mr. S.K. Chattopadhyaya of the SIPRD in West Bengal and Ms. Veena Sehgal of the State Community Development Training Centre in Haryana.



1

Chapter

Background to the workshop

1.1 Context

It would hardly be an exaggeration to say that programmes for school water, sanitation and hygiene behavioural change are sweeping the nation, in large parts stimulated by the national Total Sanitation Programme (TSC) as well as the sector reform for drinking water, also known as *Swajaldhara*. The programme for children is known as SSHE (School Sanitation and Hygiene Education), in general. It sometimes is also given other names such as School Hygiene & Sanitation Programme, SHSP. UNICEF initiated *SWASTHH*, a project to demonstrate the results of convergence with measurable outputs to remind us of its links to health, behaviour and learning outcome. And, indeed, SSHE works to support consistent, hygienic behaviours among children. To do this requires convergent inputs among many sectors such as the ministries and departments related to Public Health Engineering, Education, Women and Child Development, Rural Development and Panchayati Raj.

The programme also holds a strong potential for reaching from the school into the home and community, to introduce or reinforce basic motivation for improved hygiene and sanitation. It is this potential which leads many districts to programme SSHE “up front” in the Total Sanitation Programme. This means that school sanitation is often one of the first community activities in the TSC effort to inform and stimulate demand for sanitation facilities and their use among parents and people in communities.

SSHE in itself is primarily an education effort supported by the construction or rehabilitation of

school facilities for sanitation, personal hygiene and drinking water. As an educational programme, SSHE is also intimately connected to an interesting and ambitious national effort for reform. This is the SSA, the *Sarva Shiksha Abhiyan* programme which is an effort to universalize quality elementary education by community ownership of the school system. Within the community there can be a basic synergy— a mutual reinforcement —where SSHE and SSA activities are mutually supportive and integrated.

Considerable work is still needed to realize the potential of these efforts – SSHE, TSC and SSA – and the convergence among all three. This potential has, however, generated considerable enthusiasm among those involved. The focus of this enthusiasm is not merely on management changes or departmental linkages, but on the promise it holds for supporting children and their parents in the home, the school and the community for healthy and productive lives.

In addition, many noteworthy School Sanitation and Hygiene Education (SSHE) programmes are supported by State Departments of Education, NGOs and other institutions. Many SSHE and SWASTHH programmes remain, however, relatively small in scale, compared to the needs of the more than 100 million children in elementary school and their 3 million teachers. In addition, we may not be able to take it for granted that the current smaller-scale programmes will be completely replicable on a large scale. It would be useful to identify those elements, including management roles and positions that need particular attention. *Scaling up while ensuring quality is therefore a principle challenge for SSHE/SWASTHH programmes to achieve their goals.*

Furthermore, in these programmes, a significant challenge is making behavioural change among children a priority, rather than on focusing mainly on construction of facilities. Behaviours and related rights and responsibilities of the child are at the heart of the SSHE and SWASTHH programme. Firstly, the child's right to:

- Drink safe water in school;
- Have convenient water and sanitation facilities;
- Learn in a clean school environment;
- Learn about hygiene and reasons underlying hygienic behaviours.

The child's responsibilities, on the other hand, are to:

- Use facilities correctly and consistently;
- Help maintain the facilities;
- Develop consistent hygiene behaviours;
- Share information about these hygiene behaviours with other children, with their families and their community.

The State programmes: Madhya Pradesh and Uttar Pradesh.

It was in the context described above that two of the largest States in India, Madhya Pradesh and Uttar Pradesh, have initiated their SSHE programmes.

Madhya Pradesh

Madhya Pradesh has already been working for the improvement of infrastructure in government schools through Rajiv Gandhi Shiksha Mission; and overall enrolment has improved considerably over the years to a level of 88.1%. In addition, the Government of Madhya Pradesh has initiated the SSHE programme within the framework of the Total Sanitation Campaign.

With respect to water and sanitation infrastructure, according to state data, 64% of the primary schools have drinking water supply and 34% have toilets or urinals. Surveys and field experience show, however, that school facilities are often not functioning. In many cases there is only one urinal available without separate facilities for boys and girls. Cleanliness and maintenance tend to be neglected to the extent that the school toilets become unusable. Poor construction quality can also be a factor which makes it difficult to keep the toilets clean.

For primary schools, one systemic challenge which needs to be kept in mind are the teacher-student ratios which tend to be high, ranging from 1:45 to 1:60 or more. This implies that hygiene education methods suggested to teachers must be very simple and practical.

Integrated Child Development Services

A large number of Anganwadis are also without toilet facilities. Many Anganwadis do not make use of Government buildings, but are placed in private houses. Covering these Anganwadis under the TSC or other government programmes is challenging as policy states that water and sanitation services can be given only to the anganwadis sited on public land.

Presently the Government of India has approved the construction of toilets in a total of 55,533 school buildings and 6,923 anganwadis across the State.

Further background information is contained in Appendix 3, prepared by Uncief-Bhopal.

Uttar Pradesh

The same major programmes, mentioned above for Madhya Pradesh – the TSC, SSA and *Swajaldhara* – are also active in Uttar Pradesh. There are a total of 87,063 primary and junior schools in Uttar Pradesh; and, more than half, about 53%, have water and sanitation facilities. It is in this context that proposals have been put forward for water and sanitation facilities in 40,660 schools.

However, U.P. faces similar challenges to those noted in M.P., namely, inadequate operation, maintenance, and use of facilities. The high teacher-child ratios and issue of privately-situated anganwadis also poses challenges. Thus far, the SSHE programme, which had emphasized construction is integrating capacity development and community mobilization into its efforts. A comprehensive SSHE pilot has been carried out in Lalitpur district, along with girls education initiatives.

It was with these considerations in mind that a Regional Workshop for this year was organized by UNICEF from 9 to 12 December 2003 in Bhopal, Madhya Pradesh.

Scaling up SSHE/SWASTHH:

1.2 Workshop objectives and concepts:

The workshop aimed to enhance the operational effectiveness of school sanitation and hygiene education within the TSC (Total Sanitation Programme) and SSA/DPEP. To do this the workshop facilitated participants to:

- Improve implementation of SSHE;
- Provide/contribute inputs into management and training related to district and state wide implementation of school sanitation;
- Increase collaboration and ownership of the SSHE programme by participating departments;
- Improve linkages, collaboration among network training and resource institutions.

By the end of the workshop, participants, working in small groups, made an operational plan for SSHE that they intended to carry out. Examples of these were:

- a state or district SSHE plan.
- a state or district capacity development plan for SSHE.
- a plan for co-ordination among institutions involved in training.

During the workshop, several concepts were discussed. Some of these key concepts are briefly described below.

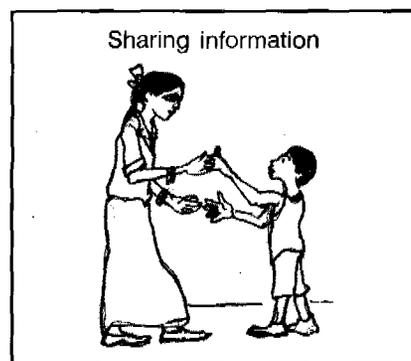
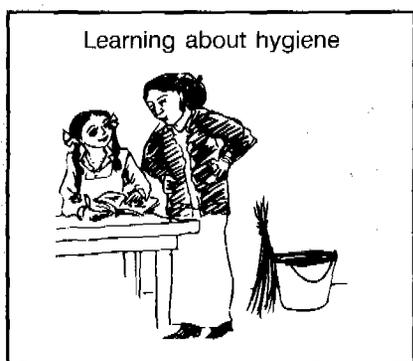
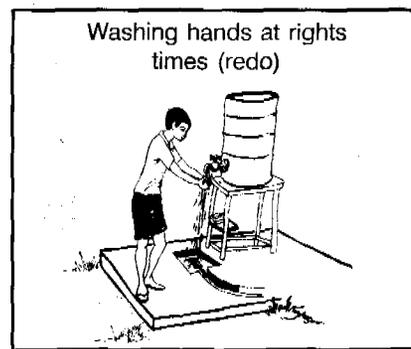
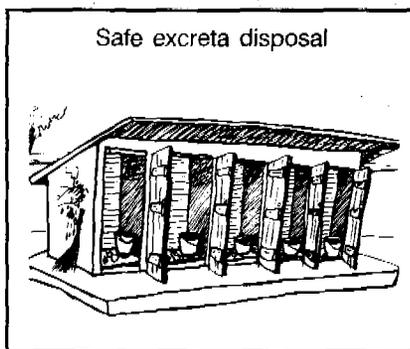
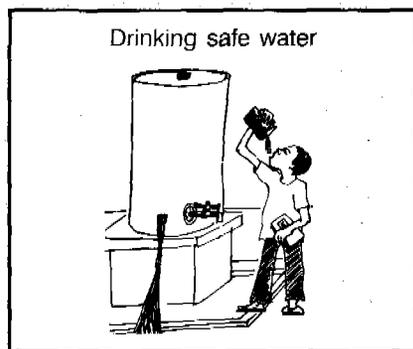
School Sanitation and Hygiene Education (SSHE/SWASTHH)

School Sanitation and Hygiene Education (SSHE) works to improve the health, the hygiene behaviours and understanding of children. It also aims to support hygiene practices in the home and community. It sometimes is known by other names such as SWASTHH or SHSP. A successful School sanitation and hygiene education programme should have these elements:

- Facilities that are used and maintained for:
 - Drinking safe water
 - Safe excreta disposal. Boys and girls use the toilets and urinals.
 - Washing hands with soap or ash before eating and after using the toilet.
 - Boys and girls (of all castes and classes) share work equally for cleaning school, collecting water, cleaning water points and toilets.
- Learning about hygiene in the classroom. Hygiene education, with participatory activities focuses on life skills.
- Sharing information. Teachers, children and school management groups have activities for parents and the community.

School sanitation and hygiene programmes can bring many benefits which include:

- Reduce diarrhoea, intestinal worms, eye infections and, possibly, reduce malaria and colds /flu.
- Improve the attendance of girls in school because girls can have privacy when they use the toilets/urinals.
- Form healthy habits that continue in the future generation of adults.
- Help to improve sanitation and hygiene in the home and community.



Who is usually involved in SSHE in the community?

The SSHE programme needs to involve most or all of these groups in order to succeed:

- Teachers
 - Community groups such as: Village Education Committees, School Management Committees, and Parent Teacher Associations
 - Non-governmental organizations and community-based organizations
 - Panchayati Raj Institutions
 - Special groups of children such as school health clubs, hygiene scouts, children's parliaments
- And, all children in the school and their parents.

SSHE is more than construction. It works to build safe hygiene practices and have clean, well-used toilets and water points, with children and teachers working together.

Capacity building is needed for SSHE

We usually think of training as a formal activity in a classroom. But there are other types of capacity building that can be equally or more useful. The concept was defined simply in terms of three variables:

- Motivation and attitude = *We want to do it*
 Enabling environment = *Everything is in place so that we can do it*
 Skills and knowledge = *We are able to do it*

Tools for capacity building include, but go beyond training. For example, building capacities can be done by these activities, among others:

- study visits
- training and orientation

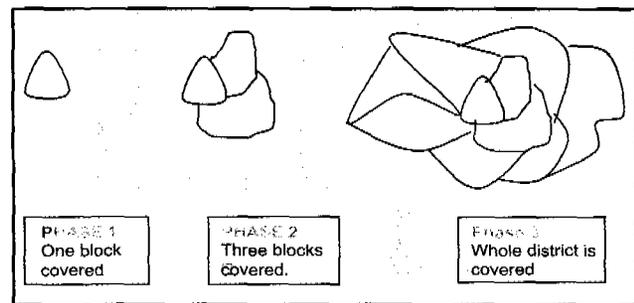
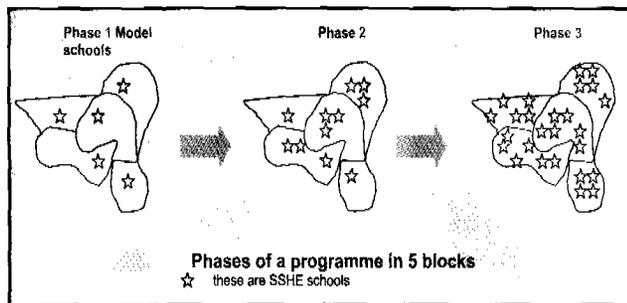
- pilots and experiments
- joint planning activities
- cluster and block review meetings

To be successful and build ownership, the following people should be included in the capacity building programme:

- Teachers - Training should be repeated at least once each year.
- Parent groups such as SMC, SHG or PTA should be oriented.
- Panchayat, block and district officials should be oriented and prepare agreed work plans.

SCALING UP means high coverage in an area

SCALING UP also means expansion to other area



I.E.C. means INFORMATION, EDUCATION AND COMMUNICATION

The purpose of I.E.C. is to inform, advocate or convince people about something. The importance of personal communication in changing behaviour or increasing demand for something can hardly be over-emphasized. Research shows that behavioural change needs person-to-person communication such as in hygiene classes, small groups meetings or discussions with influential people, relatives or neighbours. IEC should not only focus on mass communication through posters, parades and so on.

1.3 Participants

The participants came from interesting and diverse programmes throughout the two states. This workshop provided an unusual opportunity for such a varied group to share their experiences.

The following table below summarizes the professional profile of participants. There were a large portion of PHED and SSA engineering staff from Madhya Pradesh, which was followed by professionals from the educational sector, particularly trainers. From the Uttar Pradesh group there was a stronger focus on Panchayati Raj, followed by staff from the educational sector. This meant that there was a somewhat different profile in the M.P. group as compared to the U.P. group.

Professional profiles

Profession or sector	M.P.	U.P.	Total	Percentage of the total number of participants at the workshop
Rural Development	4	1	5	4%
PHED and Engineers	39		39	28%
District Coordinators, SSHE, TSC	6	3	9	7%
Education	13	8	21	15%
UNICEF- Education and WES staff	6		6	4%
NGO's		1	1	1%
PRI- Panchayati Raj	1	15	16	12%
Women and child development	6	7	13	9%
Others	2	1	3	2%
Resource persons			24	18%
TOTAL	77	36	137	100%

Resource people and Steering Committee of workshop

Madhya Pradesh	Uttar Pradesh
Ms. Alka Upadhyaya, I.A.S, Director, Sanitation, M.P.	Dr. Ishwar Bhai Patel, ESI, Gujarat
Mr. D.Rajasekhar, RGNDWM	Mr. Shakti Kumar Chattopadhyaya, SIPRD, WB
Dr. S. Ponnuraj, Gandhigram Rural University	Dr. Durga Prasad, APARD
Mr. C.C. Dey, RKMLSP	Ms. Veena Sehgal, SCDTC, Haryana
Prof. H.M. Mishra, M.P. Academy of Administration	Ms. Sumita Ganguly, Unicef-Delhi
Ms. Astrid van Agthoven, Unicef-Bhopal	Ms. Marielle Snel, IRC, Netherlands
Mr. Dauda Wurie, Unicef-Bhopal	Ms. Prabhakar Sinha, Unicef-Bhopal
Ms. Kathleen Shordt, IRC, Netherlands	
Ms. Nidhi Joshi, Unicef-Bhopal	

A total of 21 districts from Madhya Pradesh were represented in the workshop which included: Balaghat, Betul, Bhind, Bhopal, Chhatapur, Chhindwara, Guna, Gwalior Indore, Jabalpur, Jhabua Dn, Khanwa, Khargone, Mandsaur Mungaoli, Rajgarh, Rewa, Seoni, Shivpuri, Tikamgarh, and Ujjain. From Uttar Pradesh there were a total of 12 districts which included: Aligarh, Bahraich, Balrampur, Bijnor, Faizabad, Ghazipur, Khiri, Lalitpur, Lucknow, Mirzapur, Sultanpur and Varanasi.

Resource persons provided exceptionally valuable inputs to the programme. They also formed the steering committee. In addition, the resource persons from training institutions had the opportunity to meet and discuss their activities and possible future collaboration. *(The report of these groups is shown in Appendix 3.)*

1.4 The workshop programme

In the workshop, each of these themes was explored through presentations and group exercises.

THE WORKSHOP DAY-BY-DAY

Day 1	Lessons learnt for successful SSHE implementation; Learning about TSC rules and concepts of SSHE
Day 2	Field trip for selected persons from the district and State visiting a number of schools in the area of Bhopal; Learning about different technical options and criteria for selection; Improving micro-planning of school and cluster activities; Identify roles and responsibilities in the local SSHE programme.
Day 3	Developing common knowledge base on SSHE for hygiene education & IEC; Developing common basis for planning macro-activities in the SSHE programme cycle; Examine concept and application of capacity development in SSHE.
Day 4	Application: making practical plans for capacity development/implementation in the District, State and Institutional teams. (Select groups from Institutions)

The workshop consisted of a number of plenary sessions in addition to State specific sessions which were held in different rooms. In order to make the workshop run more effectively a number of selected resource persons were placed to assist in each of the State group.

Methodology used in the workshop

In this workshop a number of methods were used to explore the theme of scaling up with quality:

Sharing information through presentations and discussions

The participants were asked to reflect on the lessons learnt based on the workshop in Jharkhand and Tamil Nadu. Each of the two States was asked to make a presentation based on the current situation in their own SWASTHH/SSHE programme. There was also a State presentation from West Bengal as some of the M.P. staff had visited the state the previous month on a study tour. Other presentations focused on issues related to: hygiene education, technology options and convergence.

Field trip

A field trip was undertaken for a selected group of participants who visited a number of schools in the morning of Day 2. The selected teams who visited the schools included: two participants from each State, one participant each from the districts and one participant from each training institute. While on the field trip they had the chance to reflect on the 'lessons learnt' list which was discussed on Day 1.

Indicative micro level plans for the school and cluster level

On Day 2, each of the two States divided into their respective State and district groups and focused on developing micro plans.

Indicative macro level plans for the district and block level

On Day 3, once again each of the States divided into their respective State and districts groups focused on developing their macro plans.

Indicative plans for the two States or Districts

On the final day of the workshop (Day 4) each of the States and each district prepared an indicative capacity development plan for either their state or district. This participatory exercise allowed participants to focus on the application of basic principles that they had focused on throughout the workshop (Refer to Appendix 1&2)



2

Chapter

Summary of the in presentations

Two types of presentations were made in the workshop:

- Each State made a presentation describing the key features and challenges in their programme. Madhya Pradesh made a power point presentation while Uttar Pradesh group gave a verbal presentation. (Refer Appendices 1 & 2). There was also an electronic presentation from West Bengal.
- Secondly, there were a small number of substantive presentations such as on hygiene education, technology options and convergence. These are summarized below.

Presentation: Design & technology for sanitation facilities

Mr. Ishwar Bhai Patel, Environmental Sanitation Institute, Gujarat

Mr. Patel gave an overview of sanitation designs. There was also a special emphasis on the needs of disabled children at schools. Issues such as low-level hand rails in toilets, ramps, in case the toilet is at a higher level were discussed with various pictures to illustrate these points.

Ten points towards child-friendly hygiene and sanitation facilities

1. Are 'interactive' spaces that stimulate learning and the development of children.
2. Are designed with involvement of children, teachers, parents and communities.
3. Offer lowest-cost solutions with no compromises towards quality.
4. Have operation and maintenance plans.

5. Address the special needs of girls and boys, women and men.
6. Do not harm the environment.
7. Accommodate hygienic behaviour.
8. Offer enough capacity and minimal waiting time.
9. Have appropriate dimensions for children.
10. Have well considered locations.

Presentation: Design & technology of UNICEF facilities

Mr. Dauda Wurie, Programme Officer, UNICEF-Bhopal

Mr. Wurie gave a descriptive overview of the various types of design and technical facilities that UNICEF, Bhopal had developed based on discussions with the school teachers, children and surrounding communities. The following is an overview of each stage of the process towards finding the 'right' type of sanitation facilities for the schools in M.P.

Pre-design preparation:

1. Baseline/KAP survey to establish:

- a) Client needs
 - Aesthetics & structural concerns
 - Gender concerns
- b) Address O&M
 - ease of cleaning
- c) Enhance hygiene practice
 - handwashing

2. Survey outcome

Overwhelming desire for:

- a) Separate unit for boys/girls
- b) Roof over urinals especially for girls
- c) Proper ventilations and adequate light
- d) Attractive colours

3. Key features

- a) Adequate provision of water storage
- b) Rainwater harvesting technology
- c) Arrangement for permanent water supply through conversion kit, HP is connected to the storage tank (force lift arrangement); and Ceramic finish especially in urinals.

4. School sanitary toilet design principles: Lessons/ experiences

1. Inadequate provision in terms of school strength
2. Insensitive to gender concerns
3. Improper use
4. Inadequate water supply arrangements
5. Designs usually not maintenance friendly
6. Lack of community participation
7. Inadequate maintenance arrangements
8. Fall into disrepair and quickly out of use.

Convergence Issues in SSHE

Mr. Rajiva Sinha, Education Consultant, UNICEF-West Bengal

Slide 1

The big problem: Multi stakeholders

The big issue: Convergence

The big dilemma: How?

The big question: Who does what?

The big challenge: Integrated planning

The big paradox: Sanitation in a school not having proper building or enough teachers?

Slide 2

The big issue: Convergence

- Sanitation and DW provisioning: PHE, Panchayat Deptt., Panchayati Raj, Tribal development deptt. and also SSA
- SSHE: Education Deptt. (SSA, SCERT), PHE (TSC, Swajaldhara), NGOs, Training institutions
- School Health: Health deptt., Education Deptt. (SSA), NGOs, Panchayats

Slide 3

The big dilemma: How?

- A neutral player required to bring all the state level stakeholders on a common platform
- Assam and West Bengal experience: UNICEF (CE and Education together) plays this role
- MP and UP can have their own strategy e.g. State WATSAN Committee headed by the Chief Secretary

Slide 4

- The state level convergence arrangement will guide similar arrangement at the district and block levels
- Convergence at the district level (e.g. Through collectors) not possible in the absence of a formal convergence at the State level
- SSA Committees exist at these levels. Incorporation of the key players (e.g. EE and PHR) in these committees will provide the required convergent platform without creating one more committee.

Slide 5

The big question: Who does what?

Departmental Autonomy and Schematic Guidelines have to be Honoured

- Convergence does not mean merger
- Coming together for planning and monitoring: joint planning, joint monitoring
- Implementation as per the departmental structure
- All converging at school committee/ village committee as the implementing body
- All bound by a common plan and a set of commonly developed ground rules

Slide 6

The Challenge: Integrated Planning Operational Strategy and Role Clarity: Coded and Issued as G.O.

On provisioning hardware: Fund pooling at the level of VEC under a common district infrastructure plan supported by the state's master plan

Slide 7

On Provisioning Software

- IEC Materials: Should be developed by a Resource Group comprising of resource persons from education, PHE, NGOs, health, communication experts. Multiplication by respective departments/agencies as per requirement
- Curriculum/Textbooks: SCERT/SSA with technical inputs from PHE, health, NGOs

- Classroom based/ school based activities: SSA/ Education Directorate
- Training/capacity building:
 - Teachers: SSA
 - VEC/Parents: SSA with modules developed jointly
 - Technical Persons: PHE with Resource organizations + NGOs

Slide 8

Convergence: Overcoming the Paradox

- Sequencing under the common plan
- Building to precede Watsan
- Water to precede Toilet
- Hardware to precede Software
- IEC all along.

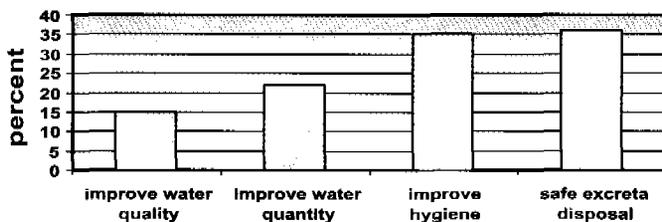
Presentation- Hygiene Education in SSHE

Kathleen Shordt, Senior Programme Officer, IRC

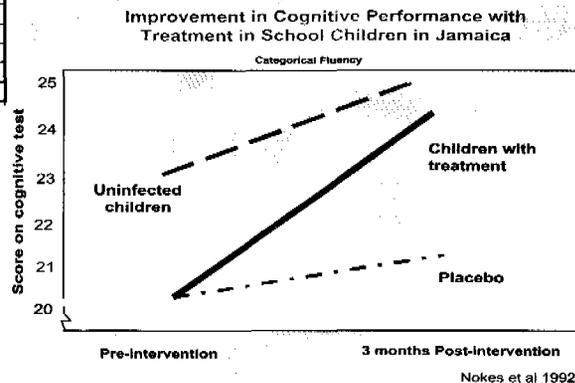
Four slides are shown from this presentation. These slides deal with basic research information about hygiene and challenges facing the SSHE programme.

Results of research from 144 studies show the following

% reduction in diarrhoea by intervention



Ereay, 1994



Nokes et al 1992

Estimate of infection with intestinal worms in India (data from 1990)

Worm	Number of people infected (crores)	% of the population infected
Round worm (Ascaris)	19.8	23%
Whip worm (Trichuris)	13.7	16%
Hookworm	31.9	38%

Adapted from M.S. Chan et al . (1994)

SSHE: the gender perspective

The lack of adequate and private sanitary facilities in schools can prevent girls from attending school.

- Example: In Bangladesh, a school sanitation programme increased girls' enrolment by 11%.

Source: Cairncross, 1998

3

Chapter

The main outputs of the workshop

In plenary and in the separate State groups, the participants developed or revised some key documents which formed the main outputs of this workshop. These were:

- A minimum list of lessons learned which are requirements for the success of an SSHE programme.
- District or state implementation or capacity development plans for SSHE/SWASTHH.

Each of these key outputs of the national workshop are shown below and on the following pages.

3.1 Lesson Learned

On the first day participants identified 'lessons learned', that is, programme elements needed in order to have a successful SSHE/SWASTHH programme. The purpose of this activity was to build a common understanding about the key issues (and indicators) that are essential in planning and implementing successful SSHE/SWASTHH programmes. This interesting list is based on the Hindi-language conclusions from the two State groups.



Lessons Learned

MADHYA PRADESH	UTTAR PRADESH
<p><i>Within the school</i></p> <ul style="list-style-type: none"> ● Use is a problem: Emphasize awareness and education as much as physical targets. Children need to be trained in how to use the facilities. ● Materials: IEC and educational materials are required. ● Maintenance and cleaning facilities: What is the role of the school and community in maintaining and cleaning facilities? ● Improve O&M, cleaning of facilities. Students and teachers need to be responsible for cleaning their own water points and toilets. ● Active school health clubs are needed. 	<p><i>Within the school</i></p> <ul style="list-style-type: none"> ● Motivated, trained and aware teachers. Teachers to be made more aware of SSHE ● Institutional building (strengthening school health clubs, PTA, etc.) ● Hygiene education in schools ● Participation approach in teaching ● Effective and creative use of IEC
<p><i>Capacity development</i></p> <ul style="list-style-type: none"> ● Training is needed for the teachers and programme managers in all departments, good quality and at the right time. 	<p><i>Capacity development</i></p> <ul style="list-style-type: none"> ● Training, monitoring, evaluating staff working on SSHE. This includes encourage staff working on SSHE. ● Capacity building of stakeholders ● Effective IEC strategy ● Training and capacity building in place
<p><i>Management within the community and school</i></p> <ul style="list-style-type: none"> ● Improve participation. ● Community ownership and involvement is essential. Joint participation is needed from community, parents, teachers, local government. Too much responsibility falls on the Sarpanch. ● PTAs need to be effective. PTAs and children need to share information with home and community. 	<p><i>Management within the community and school</i></p> <ul style="list-style-type: none"> ● Involve CBO's in SSHE

MADHYA PRADESH	UTTAR PRADESH
<p>Facilities</p> <ul style="list-style-type: none"> • Coordinate construction. Water and sanitation facilities should be implemented together in the school. One without the other is not sufficient. • Improve quality of construction. Ensure diversity of designs. • Ensure norms. The ratio of students to toilets/urinals is not correct. 	<p>Facilities</p> <ul style="list-style-type: none"> • Water and sanitation facilities in place • Availability of water and sanitation facilities maintained
<p>Programme management</p> <ul style="list-style-type: none"> • Coordination is needed among the departments of Public Health Engineering, Education, Panchayati Raj & Women and Child Development. • Demonstration schools and facilities are needed to motivate panchayats and communities. • Prepare resource and management teams at block and district levels. Keep the team members in place or re-train frequently. • Role of the NGOs is very important; however that role needs clarity. • Monitoring is needed. Reports are made, but are they acted on? 	<p>Programme management</p> <ul style="list-style-type: none"> • Convergence and co-ordination between departments. Interdepartmental co-ordination Committee in the chairmanship of CDO (from 3 groups of participants). • Co-ordination between departments • Action plan developed and implemented • Effective MIS in place

It should be noted that the list of lessons learnt for success in programming from the M.P. and U.P. groups are remarkably similar to the results of such exercises held at the National SWASTHH/SSHE workshop in July 2003 in Tiruchirapally (Tamil Nadu) and the Jharkhand state workshop held in 2001. Thus, the same issues and needs appear again and again in the SSHE. It was pointed out to participants that these issues should be focal points in planning and monitoring activities.



3.2 Indicative plans

On the last day of the workshop, participants were asked to form groups and develop a state or district plan. They were divided into district or state groups and asked to prepare plans for the next one-year period in their SSHE/SWASTHH programmes. The choices were:

Activity 1: Make a state or district plan of implementation for SSHE, having an emphasis on capacity development.

Activity 2: Make at state or district plan only for capacity development in SSHE/SWASTHH.

Activity 3: Make plan for future actions among the training institutions involved in the SSHE/SWASTHH programme.

The participants had only the morning hours on the final day of the workshop to prepare their plans. Even though there was a limited time for this activity, a good start was made. It is hoped that many participants will, in fact, undertake at least the first activities identified in their plans. Furthermore it is expected that they will use their new skills in planning the programme in full with the other stakeholders in their districts and states. The district plans have been copied for the states and UNICEF offices in India.

Some of the resource persons from the Uttar Pradesh State group prepared an example of a training institution capacity development plan under the leadership of Dr. Durga Prasad from APARD, Hyderabad. *(This is shown in appendix 3.)* The resource persons who worked with the M.P. group met separately with Mr. Rajasekhar from the RGNDWM to discuss aspects of capacity development in a problem solving mode for the staff of their institutes who will be participating in the SSHE programme. It was noted, among other things, that some briefing about the tools and best strategies for capacity building are needed for selected government and UNICEF officials, linking training activities while ensuring capacity development activities continue within the districts.

(The state plans for M.P. and U.P. are shown in appendices 1 and 2.)

APPENDIX 1

State presentation from Madhya Pradesh

Why School Sanitation and Hygiene Education?

The learning perspective

- Learning outcomes of healthy children are much higher than children affected by helminths or other diseases.
- Children are eager to learn and schools can stimulate and support children to develop skills and knowledge to face daily challenges now and in the future.

The child's perspective

- Teachers are their logical source of information and role models.
- Children are the future parents.

The health perspective

- About 400 million school-aged children infected by helminth infections (globally).
- About 4,000 million episodes of diarrhoea each year (globally).
- All helminth infections and many diarrhoeal infections can be prevented by improved sanitation and hygiene. If not, schools become risky places.

The Gender perspective

- Lack of facilities and poor hygiene affect both boys and girls, but have a stronger negative impact on girls.
- Girls need to have access to safe, clean, and private sanitation facilities in schools, especially the adolescent girls.
- Children, in particular girls, miss out time at school because they have to fetch water.
- When family members fall sick, girls are more likely to be kept at home to help.

Why SSHE?

The education sector's perspective SSHE substantially contributes to :

- Access to education
 - a neat & clean school attracts children and their parents.
 - without private facilities, especially girls, may not be allowed to go to school.
- Retention
 - drop-out of older girls because of lack of facilities.
 - relevant curriculum motivates parents to keep their children in school.
- Quality of education
 - better health of children improves their educational achievements.
 - activities relating to skills & attitudes (beyond only knowledge) for children's all-round development.

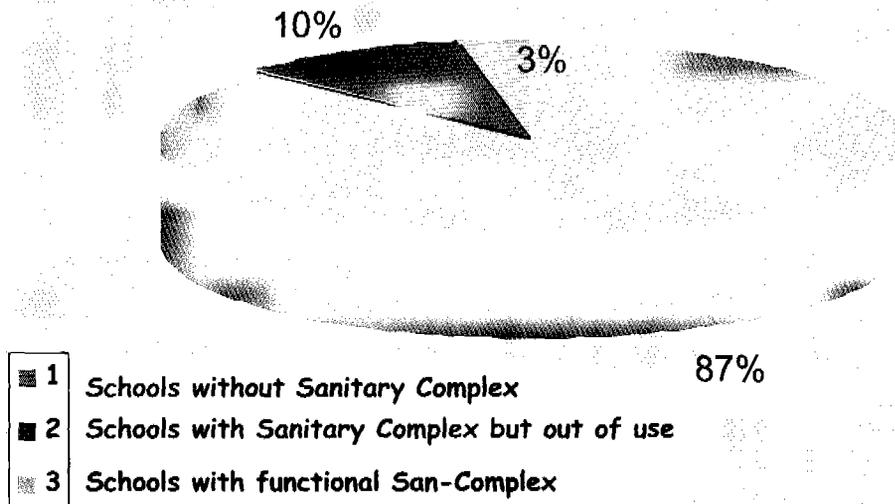
So what do SSHE programmes need to focus on?

- Provision of water, sanitation and hand washing facilities in schools.
- Hygiene education (participatory/ life skills based) to achieve behavioural change.
- Outreach to families and communities.
- Creating an "enabling environment" through advocacy, supporting the development of policies etc.

SITUATION IN M.P. SCHOOLS

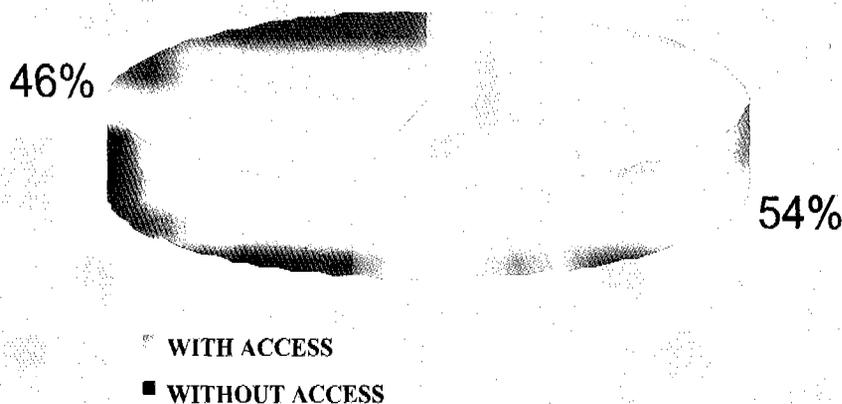
School Sanitation

SCHOOL SANITARY COMPLEX



Water in Schools & AWC

COVERAGE IN PRIMARY SCHOOLS & ANGANWADI CENTRES



APPENDIX 2

State presentation from Uttar Pradesh

Capacity Development Plan & Guidelines for SSHE

It was requested that participants limit themselves to preparing a one-year plan, given the time constraints of the workshop. The draft capacity development plan shown below is derived from the powerpoint presentation given by the Uttar Pradesh state team at the end of the workshop. The plan was developed in context of the Total Sanitation Campaign and the *Sarva Shiksha Abhiyan* programmes currently operating in Uttar Pradesh.

Objectives of the capacity development component

The objectives for the capacity development activities in the SSHE programme are to:

- Sensitize & orient the line Department on SSHE.
- Development of Resource Base at State & District Level.
- Operationalize Guidelines

Strategy: Capacity Development Issues

- Sanitation & hygiene education
- Construction Technology
- Operation & maintenance
- Management of WATSAN facilities through Community Institutions & GP
- IEC & Hygiene Education Activities
- Inclusion of HE in school curriculum
- Develop common understanding on SSHE and role clarity
- Community monitoring & MIS

Guidelines for SSHE in U.P.

- The Inter- Sectoral Coordination of Line Departments should be ensured at the Core Group on SSHE under the State and District Water, Sanitation Mission.
- The selection of district for SSHE should be assessed on the basis of DAP & PIP and consultation with DSM. The Implementation Strategy for SSHE should be district- specific viz. Coverage of selected blocks & all schools/Coverage of all blocks & selected schools/ Pilot in few schools & then replication.
- The SSHE Strategy should focus on identification of local-specific Construction Technology, Design & Cost Estimate etc. in the light of resources available with community in terms of O&M/Replacement Cost. The conglomerrated efforts of concerned department for the conduct of school level activities for SSHE viz. Health Checks, Competitions etc. should be undertaken by Resource Pooling / Fund generation.

- The O&M of School WATSAN facilities be undertaken by Community Institutions & GPs (may be with initial support from the government department).
- The SSHE in district would focus on Community Monitoring of Hygiene Behaviour & maintain MIS for Bottom-Top Information flow.

State Plan for Capacity Development

Month	Activity	For Whom	Number	Who Leads	Number of Trainers
Jan-Feb '04	Development of Training Modules (Five)	<ul style="list-style-type: none"> ● Master Trainers ● Distt. Level Trainers 	<ul style="list-style-type: none"> ● 68 ● 280 	PRD	15 RPs
Jan-Feb '04		<ul style="list-style-type: none"> ● Master Trainers ● Distt. Level Trainers 	<ul style="list-style-type: none"> ● 68 ● 280 	PRD	15 RPs
March '04	Multiplication of Training Material	<ul style="list-style-type: none"> ● Master Trainers Trg. ● Distt. Level Trainers Trgs. 	<ul style="list-style-type: none"> ● 300 ● 500 	PRD	15 RPs
Jan '04	Identification of State /Distt. Trg. Instt.	<ul style="list-style-type: none"> ● Master Trainers Trg. ● Distt. Level Trainers Trgs 	<ul style="list-style-type: none"> ● 4 ● 35 	PRD	15 RPs
Jan '04	Identification of RPs/ MTs/ DLTs	<ul style="list-style-type: none"> ● Master Trainers ● Distt. Level Trainers 	<ul style="list-style-type: none"> ● 68 ● 280 	PRD	15 RPs
Feb-March '04	Prep. of Trg. Calender	<ul style="list-style-type: none"> ● Master Trainers Trg. ● Distt. Level Trainers Trgs. ● Block/ GP level Trg. 	<ul style="list-style-type: none"> ● 300 ● 500 	PRD	15 RPs 10 MTs
April-Dec '04	Implementation of Trg. Calender ● TOT ● Trg at Distt.	<ul style="list-style-type: none"> ● Master Trainers Trg. ● Distt/ Block. Level Trainers Trgs 	<ul style="list-style-type: none"> ● 68 ● 280 ● 5000 	PRD	15 RPs 68 280
April-Dec '04	Monitoring of Trgs.	<ul style="list-style-type: none"> ● Master Trainers ● Distt./ Block Level Trainers 	<ul style="list-style-type: none"> ● 68 ● 280 ● 5000 	PRD	20

APPENDIX 3

Example of Training Institution Plan



Trainee Clientele

- District Resource Trainers
- District and Block officials
- Teachers
- Engineers
- Panchayat Members
- Anganwadi supervisors & workers

..... Trainee Clientele

- NGOS
- Motivators
- ANMs
- Mason/Master masons
- Community (SMC/PTA/VEC)
- School going students (School Health Clubs)

Assumptions

- By April, 2004, 30 District Resource trainers will be in place
- DRT will operate in 6 teams of 5 members
- Concurrent training programmes at a given time

..... Assumptions

- Trainers/experts other than DRT will also be used in specific training programmes

Indicative Capacity Development Plan

Phase	Training Activity	For Whom
Pre-construction (April..2004)	Orientation and sensitivation	District, block, community & school level
Construction (Aug..2004)	Health and Hygiene ...etc...	Teachers, students, SMC/SHC/PTA

..Indicative Capacity Development Plan

Phase	Training activities	For Whom
Post construction (Feb. 2005....)	Refresher Training, monitoring, O&M	Teachers, students, engineers....

- Training and capacity development should be ensured at all stages of an SSHE programme!

APPENDIX 4

School Sanitation and Hygiene Education in Madhya Pradesh

An overview prepared for the workshop (9-12 December 2003) by UNICEF-Bhopal

Introduction

To understand key issues in School Sanitation and Hygiene Education/ Promotion (SSHE) in the Madhya Pradesh context, it may be helpful to briefly summarize the current situation in the state from a broader development perspective.

Madhya Pradesh is the fourth poorest Indian State in terms of per capita income. Out of an estimated population of 60 million (6% of the total population of India), 75% are rural with 37% of the rural population living below the poverty line. M.P. has a large population of Scheduled Tribes (20%) and Scheduled Castes (16%), who are among the most marginalized and vulnerable.

Social development indicators for women and children are extremely poor in Madhya Pradesh. The IMR stands at 86.1 per 1,000 live births and under-5 mortality rates showed only modest decline from 138 (NFHS-I, 1988-1992) to 130 (NFHS II, 1994-1998). Malnutrition is a very serious problem. 51% of the children under 3 are stunted and 55% (65% for ST) are underweight, the worst in India with practically no improvement in the last 10 years (NFHS-II). The situation is particularly bad for children of ST population, for whom these figures are 60% and 65% respectively. Anaemia is very high in all age groups with more than 70% of children under 4 years being anaemic.

Reasons include low birth weight, nutrient deficiency, lack of proper hygiene, feeding and caring practices and insufficient access to and use of health services. Incidence of diarrhoea among children is high (23% of < 3 on two weeks recall).

Recent surveys in urban Guna showed over 70% of adolescent girls to be anaemic. Differential treatment of the girl child in household food distribution and nutrition, immunization and access to medical care often results in poorer physical and mental development. The juvenile sex ratio (0 to 6 age group) of 927 females for 1000 males (Census 2001) is alarming.

The establishment of the Rajiv Gandhi Shiksha Mission, which through its structure of Shiksha Kendras looks after all academic issues, has given a booster to the education sector. Overall enrolment has improved considerably over the years to a level of 88.1%. However a huge gender gap exists with girls' enrolment standing at only 78.2%. Also, drop-out rates for girls are much higher than for boys. Although the overall gain in enrolment figures is encouraging, poor quality education is an

area of concern. The main reasons for the poor quality are the inability of teachers to deal with multi-grade systems, logistical problems with regard to getting textbooks on time and teacher absenteeism.

Lack of (easy) access to safe water and good hygiene practices remain a major determinant of the poor health situation. Although access to safe drinking water in the State greatly improved during the last decade with 89% (PHED) of the habitations covered, surveys indicate that significantly less people (see table) use safe water sources due to various constrains like distance, time, social or operation and maintenance (O&M) problems. Sanitation remains an enormous problem, with less than 10% (9% PHED) of rural households using sanitary toilets.

Source	Drinking water		Sanitation	
	Rural	Urban	Rural	Urban
Census 1991	8	67	-	53
NFHS I ('92/'93)	47	84	5	73
NFHS II ('98/'99)	54	91	8	65
MICS 2000	58	88	6	64
Census 2001	62	89	9	68

Current situation in schools

The number of schools in the state has increased under the Rajiv Gandhi Shiksha Mission and the Education Guarantee Programmes. At present there are around 56,000 primary level schools, although 40% of these do not have their exclusive building but share their premises with the Middle Schools. According to Rajiv Gandhi Shiksha Mission-M.P., 64% of the primary schools have drinking water supply and 34% have toilets, which are often only urinals. At the middle level, 56% of the schools have drinking water facility whereas toilet facility is available to 43% only. However, surveys and field experiences show that school facilities are often not functional, sometimes only a urinal is available and separate facilities for boys and girls are frequently missing. Cleanliness and maintenance are often neglected to an extent that the toilets become unusable. In some cases this may be related to lack of water for cleaning of the toilets, but more likely the lack of proper operation and maintenance mechanisms is the key. Poor construction quality is contributing to difficulties in keeping the toilets clean. Also the fact that many students do not have facilities at home may exacerbate the poor usage, especially when no extra efforts are made to construct attractive toilets.

Hygiene and health issues are covered in the existing curriculum as part of environmental studies. The challenge is to turn theory into practice. The lessons could be made more practical and focused on changing hygiene behaviours, using joyful learning/ interactive methods. However, it has to be kept in mind that an irrational distribution of teachers leads to teacher-student ratios ranging from 1:45 to 1:60 plus (the standard aimed at is 1:40).

Health check-ups should be conducted annually in each school, but the system is weak. These health check-ups include checking of vaccination status, nutritional levels and eye checks, amongst others. Last year an extensive physical disability check-up was done in all schools. Children with handicaps were identified and some aides were made available accordingly.

Additionally, a large number of Anganwadis are also without toilet facilities. The number of

Anganwadi's uncovered is estimated at 35571. Many Anganwadis do not make use of Government buildings, but are placed in private houses. Covering these Anganwadis under the TSC or other government programmes is challenging.

School Sanitation under Total Sanitation Campaign

Children are more receptive to new ideas and the school is an appropriate institution for changing the behaviour, mindset and habits of children from open defecation to the use of lavatory through motivation and education. The experience gained by children through use of toilets in school and sanitation education imparted by teachers would reach home and influence parents to adopt good sanitary habits. School Sanitation, therefore, forms an integral part of every TSC Project, as per the guidelines of the Government of India.

Assuming a total unit cost Rs. 20,000 in the Gol guidelines, funding for School Sanitation under the TSC is provided by the Central Government, State Government and Parent Teachers in the ratio of 60:30:10. Gram Panchayats can also contribute to 10% indicated in the share of Parent-Teachers. However, State/UT Governments, parent-Teachers and Panchayats can contribute from their own resources over and above the prescribed amount.

School Sanitation in Madhya Pradesh

Madhya Pradesh has already been working for the improvement of overall infrastructure facilities in government school, especially primary & secondary through Rajiv Gandhi Shiksha Mission. In addition to the ongoing efforts, Government of Madhya Pradesh has issued a set of guidelines for the districts to ensure proper coverage of schools & anganwadis under Total Sanitation Campaign.

- (i) Each anganwadi should have a toilet unit of Rs.5,000/= only.
- (ii) All the EGS, primary, middle, high schools & higher secondary schools functional in a government building should have a toilet facility.
- (iii) Schools with strength of up to 50 children should not have a toilet unit (1 toilet + 1 urinal + water storage tank) of more than Rs.10,000/=.
- (iv) Schools with strength of 50-250 children should have the toilet unit with 1 toilet + 2 urinals + water storage tank.
- (v) Schools with strength of more than 250 children should have 2 toilet units. Number of urinals in such schools can be increased.
- (vi) Separate toilet units should be constructed for boys and girls in high schools and higher secondary schools.

Government of Madhya Pradesh has worked a plan to cover all the government schools & anganwadi by March 2005 in a phased manner. Tentative two-year plan is mentioned below:

S.No.	Type of School	Year 2003-2004		Year 2004-2005		Total Coverage	
		Number	Amt. Req.	Number	Amt. Req.	Number	Amt. Req.
1	EGS Units	9918	495.90	39672	1983.60	49590	2479.50
2	Middle School	2787	278.70	11148	1114.80	13935	1393.50
3	High School	228	45.60	912	182.40	1140	228.00
4	Higher Secondary	177	35.40	708	141.60	885	177.00
5	Anganwadi	7113	355.65	28452	1422.60	35565	1778.25
6	Total	20223	1211.25	80892	4845.00	101115	6056.25

Presently Government of India has approved the construction of toilets in a total of 55,533 school buildings and 6923 anganwadis across the State.

School Sanitation in Sector Reforms Districts

Five districts in Madhya Pradesh, viz, Gwalior, Hoshangabad, Narsinghpur, Raisen & Sehore, were the Sector Reforms districts where TSC was also sanctioned in 2000. These five districts have made a substantial progress in the field of school sanitation. Toilet complexes have been built in 60% to 80% (Gwalior-80% & Sehore-85%) of the government schools having buildings of their own. Except in Sehore, where the money for construction of school sanitary complexes was given to Village Health Committees, in the other 4 districts Gram Panchayats were the execution agencies. The PHED design (1 toilet, 2 urinals & 1 grounded water tank) was mainly used across the State, except in Sehore, where mainly Unicef designs of sanitary complexes (3 designs depending upon the strength of the school) were used for construction of school toilets.

Though these 5 districts have made considerable progress on the hardware front, the software component has not been given due attention. Whatever efforts were made in the districts (mainly Gwalior & Sehore) were not able to leave the desired impact in absence of more structured & consistent interventions. Sehore conducted a structured orientation for the primary school teachers on School Sanitation & Hygiene Education (SSHE) with the active involvement of DIET & RGSM. Sehore also developed some reading material and activity booklet for the students.

But no assessment was done to gauge the impact of the inputs. Gwalior has also developed some material that was distributed in the schools. Apart from this the district also organized some orientation camps for the school teachers and cluster level functionaries.

Regarding anganwadi sanitation there is so far little experience in the state.

School Sanitation in the context of the People's Education Act and Sarva Shiksha Abhiyan

The People's Education Act (2002) has been shaped by the vision of education as a collaborative process of the teachers, learners and the local community and the role of the government as a facilitator. A crucial role is assigned to the Parent Teachers Association. Responsibilities of the PTA relevant for SSHE are:

- Assist in the development of the school and school assets
- Assist the teachers in the discharge of their duties to impart quality education
- Raise funds for the development of the school (Shiksha Kosh)

In the mean time most schools have PTAs, but these are in different stages of development and their strengths and functionality varies widely. The current paradox is that good schools with motivated teachers tend to have stronger, more involved PTAs, whereas the need for strong PTAs really exists for the weaker schools.

The *Sarva Shiksha Abhiyan* (Education for All), a programme throughout India and covering all district of Madhya Pradesh, aims to provide useful and quality elementary education to all children in the age group 6-14 years by 2010. The SSA also subscribes to the idea of community ownership. To be eligible for funds from the SSA the districts have to develop District Elementary Education Plans. Maximum 33% of the budget can be allocated to improvement of school facilities, which can include water and sanitation facilities. In addition the SSA makes annually Rs.2,000 per school available as a grant to the *Shiksha Kosh* for replacement of school equipment. This money could be used for O&M costs of the water and sanitation facilities.

Other Issues

Physically challenged children

Another issue raised in the TSC guidelines of the Government of India is that the needs of physically challenged children have also to be taken into consideration, an issue also raised. About 5% of Madhya Pradesh's children are disabled and only 20% of them go to school. For girls this percentage is even lower. Accessibility of schools for physically challenged children includes giving them access to the sanitary facilities. In the designs of the school toilets some standard features (e.g. no steps) can be incorporated, while more specific requirements can be worked out on a case to case basis.

Gender dimension

Madhya Pradesh has a considerable gender gap in schools. Lack of facilities and poor hygiene affect both girls and boys, although poor sanitation conditions at schools have a stronger negative impact on girls. All girls should have access to safe, clean, separate and private sanitation facilities in their schools. This will contribute in getting girls to school (enrolment), as well as keeping them in school (retention) when they grow older. Care needs to be taken that no gender (or other) discrimination takes place while assigning tasks to the school children, like collecting water or cleaning the compound or toilets.

Operation and Maintenance

Based on the ground realities of poor conditions of existing school sanitary complexes, O&M aspects are a true and major concern. An intensive process is required to make the use and maintenance of facilities successful. Involvement and motivation of school children, teachers, parents and the wider community is crucial. Care needs to be taken that in the process of taking the TSC to scale and eagerness of reaching quick results, no short cuts will be taken at the expense of proper, sustainable mechanisms for O&M. UNICEF has developed child-friendly toilet blocks that are easy in maintenance thanks to the use of ceramic tiles and the waste water from the hand washing facility automatically flushing the urinals. The attractive looking facility encourages children to keep the facilities clean. The higher price needs to be balanced against the greater likelihood of facilities to be used and maintained.

**All children have a right to clean water and a safe and hygienic environment
at home and in their school**

Outreach to communities

Especially in a state like Madhya Pradesh where coverage of household toilets is relatively low, the SSHE programme can be used as an entry point to improve the sanitary conditions of the community at large. The children themselves can play an active role in this. Under the UNICEF supported programme in Betul and Chhindwara, School Hygiene Clubs have been established. These clubs monitor and report on the toilet coverage in the village, as well as hygiene behaviours of their fellow students and family members. In addition to this they are active in organizing rallies and beautification of the school compound.

Learning from other states

In July 2003 a National workshop was held on the issue of SSHE. The learning shared from states across the country has been summarized in the box below.

Merits	Challenges
<ul style="list-style-type: none"> ◆ Improved hygiene practices of the school children ◆ Fall in open defecation instances ◆ Fall in drop out rate of children, especially girls ◆ Enhanced knowledge level of teachers and children on hygiene & sanitation ◆ Fall in diarrhoea incidences ◆ Increased inter-agency co-operation ◆ Enhanced convergence at community level amongst the community based groups ◆ School Health Clubs providing structured child leadership ◆ Improved quality of construction due to third party monitoring ◆ Better performance in SSHE thanks to permanent SSHE unit at -state/district level 	<ul style="list-style-type: none"> ◆ Balance between hardware and software inputs ◆ Funding and quality of software and hardware ◆ Access, use and maintenance of school toilets (Who uses? Who cleans? Hand washing?) ◆ Percentage of subsidies for construction of school toilets ◆ Vandalism at community level/ misuse by villagers ◆ Community contribution and ownership ◆ Capacity development of stakeholders (state/ district/block/school/village)

Human resources at the village level

The key players at the village level in SSHE are the school teachers. However, they will need to get support and their message need to be reinforced by other front line functionaries, like the *Padna Badna Preraks*, AWWs, SHG Animators, ANMs, Library Prerak etc. The SSHE programme can not be treated in isolation of the other interventions under the TSC, in which the above mentioned functionaries will have a role to play. Co-ordination and consistent messages, together with creating a team spirit to improve sanitation, need to be taken care of.

Tribal hostels

There is a need to look into the considerable presence of tribal hostels in tribal blocks of the state. Although these have been provided with toilet facilities, the state of maintenance is poor. In these hostels the school and "home" environment go hand in hand and a clear approach needs to be developed.

Drought

Madhya Pradesh is a drought-prone state. During droughts, like after the poor monsoons of 2000, 2001 and 2002, water is scarce, which affects the use of toilets, at home and in schools. However, this threat can be turned in an opportunity, if schools are being used to instil practices like water conservation and environmental protection from a young age. Since children are more open to new ideas than adults, schools can also be used to demonstrate toilet options that require less water, like VIP toilets and ecological sanitation.

APPENDIX 5

Workshop Schedule

**Tuesday
9 December
Day 1**

Objectives of the day

- Develop agreed 'lessons learned' (criteria) for successful SSHE implementation;
- Learn about TSC rules and concept and how SSHE can support it.

Time	ACTIVITY
PLENARY 10:00 AM	Opening session: Ms. Alka Upadhyaya- GOMP (presents objectives) Mr. Dauda Wurie, UNICEF Mr. Raj Shekhar - RGNDWM (GOI) Mrs. Kiran Vijay Singh, Director General, M.P. Academy of Administration
	After tea break, participants go to separate rooms.
10:45 AM	Tea break
In separate rooms 11:00 AM	Introduction of participants
11:30 AM	Exercise on: Exchange of experience. Purpose: share lessons learned among participants
1:00 PM	Lunch
2:00 PM	State level presentations. SSHE and TSC/SSA
3:30 PM	Tea break
3:45 PM	Exercise on: Lessons learned in SSHE: 20 min
4:15 PM	Micro planning: the project cycle at the school and cluster level.
Evening	Preparation for field trip

**Wednesday
10 December
Day 2**

Objectives of the day:

- Learn about different technical options and criteria for selection.
- Improve micro-planning of school and cluster activities by examining conditions in schools during a field trip.
- Identify roles and responsibilities in the local SSHE programme.

Day/Time	ACTIVITY
Departure 8:30	Field trip- 25 selected people from the district and state will visit a number of schools.
9:00 AM	The rest of the participants will focus on: Presentations from the training resource institutions
10:00 AM	Discussions on construction and technology issues.
11:00 AM	Tea break
12:00 PM	Construction and technology issues (continued) Some issues related to : Use and O&M and repair of facilities.
1:00 PM	Lunch
2:00 PM	Debriefing between field trip and the morning workshop
3:00 PM	Tea break During the break, participants should look, once again at the "micro-planning" activity done on Monday afternoon (last session).
3:20 PM	Return to micro planning of day before: key actor analysis

**Thursday
11 December
Day 3**

Objectives of the day:

- Develop common knowledge base on SSHE for hygiene, education, IEC
- Develop common basis for planning macro-activities in the SSHE programme cycle
- Examine concept and application of capacity development in SSHE

Day/Time	ACTIVITY
9:00 AM	Review of previous 2 days
9:30 AM	Hygiene background. Powerpoint with demonstrations.
10:30 AM	Hygiene education in the school: methods and approaches
11:40 AM	Tea break
12:00 PM	IEC. What does SSHE have to do with IEC?
1:00 PM	Lunch
2:00 PM	Macro-planning at District and State levels: preparation of activity sequence
3:30 PM	Tea break
3:45 PM	Capacity development and training strategies.
5:15 PM	Review of roles of institutions : Preparation for making plans the next day.

**Friday
12 December
Day 4**

Objectives of the day:

Make practical plans for capacity development/implementation in the District, State and institutional teams.
Participants will dedicate themselves to carrying out these plans.

Day/Time	ACTIVITY
9:00 AM	Reporting from previous day
10:00 AM	<p>Preparation of joint plans. Different plans that can be developed:</p> <p>For District teams</p> <ul style="list-style-type: none"> ● Capacity development plan for SSHE under TSC and SSA ● District SSHE plan in steps. <p>For State teams</p> <ul style="list-style-type: none"> ● State plans for capacity development in context of TSC and SSA/DPEP. ● State guidelines for SSHE <p>For capacity development institutions</p> <ul style="list-style-type: none"> ● Planning linkages, co-ordination among training institutions. ● Detailed CD/training plans for a key target group using participatory methodologies.
11:00 AM	Tea break
11:20 AM	Continuation of joint planning activity
1:00 PM	Lunch
2:00 PM	Preparation of posters
2:30 PM	Group debriefing Presentations
4:00 PM	Assessment and Closing

APPENDIX 6

List of participants

SCHOOL SANITATION & HYGIENE EDUCATION (9-12 December 2003)

S.N	Name	Designation	Office Address	City	State	Tel No.			Signature
						Code	O	R	
1	A K Dwivedi	Chief Engineer	PHE Dept Satpura Bhawan	Bhopal	MP	0755	2551594	2421593	
2	S K Verma	E N C PHE	E N C PHE Satpura Bhawan	Bhopal	MP	0755	2572995		
3	M K Mudgal	Asstt. Engineer	O/o Eng. In Chief, PHED Satpura Bhawan	Bhopal	MP	0755	2551598	2557840	
4	Anwar Khan	Asstt. Engineer	O/o Engineer in Chief PHED	Bhopal	MP	0755	2552116	2576859	
5	R S Nema	Asstt. Engineer	O/o Engineer in Chief PHED	Bhopal	MP	0755	2551712	2430740	
6	A U Syed	Sub Engineer	Swajal Dhara, ENC Office	Bhopal	MP	0755	2556990	5251389	
7	K K Varghese	Sr Gr Sub Engineer	E in C, PHED	Bhopal	MP	0755		2583213	
8	S S Sharma	Sr. Sub Engineer	O/o E in C, PHED	Bhopal	MP	0755		2644032	
9	K S N Naidu	Asstt Engineer	Sub Divisional Officer, Rural Engineer Services, Sub Dn., Ghoradongari	Betul	MP				
10	R K Vishwakarma	Sub Engineer	RGSM, Jila Shiksha Kendra RGSM	Seoni	MP	07692	222066 220584	227087	
11	V K Sehgal	Asstt. Engineer	Rajiv Gandhi Jila Shiksha Kendra Behind PSM Building	Jabalpur	MP	0761	2628774	5018550	
12	S K Joshi	Sub Engineer	Jila Shiksha Kendra, RGSM BTI Campus	Khargone	MP	07282	235802	243219	
13	D K Dhanotia	Asstt. Engineer	O/o Distt. Coordinator, Rajiv Gandhi Shiksha Mission	Mandsour	MP	07422	222452	221428	
14	S K Soni	Manager (Civil Work)	Rajiv Gandhi Jila Shiksha Mission Pustak Bhawan, 'B' Wing, Arera Hills	Bhopal	MP	0755	2768395	2422554	
15	A K Sharma	Disstt. Project Coordinator	Rajiv Gandhi Jila Shiksha Mission	Rajgarh	MP	07372	54694	254844	

S.N	Name	Designation	Office Address	City	State	Tel No.		Signature
						Code	O R	
16	Deepak Agarwal	Sub Engineer	RGSM	Bhind	MP	07534	23051	233482
17	Fakharuddin Saifi	Distt. Adult Edu. Officer	O/o Distt. Education Officer	Guna	MP		255386	225102
18	S S Bhadoria	BRC Coordinator (SSA)	BRC Building, Purani Kotwani, Narsinghgarh	Rajgarh	MP	07375	245471	254702
19	B S Bisorai	Asstt. Director	Dist. Education Officer,	Rajgarh	MP	07372	255051	233668
20	G P Patel	Asst. Coordinator	Tribal Area Dev. Planning	Bhopal	MP	0755	2551590	2414177
21	Neeraj Vyas	Asstt. Engineer	SSA	Rajgarh	MP	07372	254694	246092
22	S S Meravi	Principal DIET	O/o the Principal DIET Keolari	Seoni	MP	07694	235322	235372
23	Shobha Sharma	Lecturer	State Institute of Science Education, Jabalpur, Model School Road, PSM Campus	Jabalpur	MP	0761	2625776	2622822
24	N K Sonkar	Lecturer	Govt. College of Education, PSM	Jabalpur	MP	0761	2624883	9425157639
25	A K Srivastava		Govt. College of Education	Chhatarpur	MP	07682	241650	241124 9826263839
26	Sadhana Bharwar	Lecturer	Govt. College of Education	Khandwa	MP	95733	2248101	2248884
27	R K Jharia	Lecturer	Govt. College of Education	Bhopal	MP	0755	2735228	2416483
28	G P Sharma	Lecturer	Govt. College of Education, Tansen Road,	Gwalior	MP	0751	2423191	2420015
29	D K Agarwal	Child Dev. Project Officer	ICDS	Mungaoli	MP	07548	272451	272878
30	L K Deharia	Project Officer	ICAS Chhapara	Seoni	MP	07691	290428	
31	S K Nagoshe	Asst. Engineer	PHED, Sub. Dn. Bhainsdehi	Betui	MP	07141		231240
32	Leeladhar Karne	SDO PHE	SDO PHE Sub Dn Maheshwar	Khargone	MP	07282	231402	
33	S K Shukla	EE PHE	EE PHE AB Road	Guna	MP	7542	252358	252391
34	Y K Harit	EE	EE PHED	Mandsaur	MP	07422	256284	223336
35	R V Joshi	EE PHED	EE PHED	Balaghat	MP	07632	241151	241332
36	S P Tiwari	EE	O/o EE PHED Damoh Naka	Jabalpur	MP		2344814	2315426
37	Bhawna Vajpai	Dist. Coordinator Officer	PHED	Betui	MP		9826445009	0135- 761930

S.N	Name	Designation	Office Address	City	State	Tel No.		Signature
						Code	O R	
38	D B Klurie	Project Officer WES	Unicef, E-7/650, Arera Colony,	Bhopal	MP	0755	2467736	2469164
39	Ashrid Agthoven	Project Officer	UNICEF, E-7/650, Arera Colony,	Bhopal	MP	0755	2461410	
40	Prabhakar Sinha	State Liaison Officer (SRP&TSC)	UNICEF E-7/650, Arera Colony	Bhopal	MP	0755	2467736	2461410
41	Nidhi Joshi	Asst. Project Officer	E-7/650, Arera Colony,	Bhopal	MP	0755	2466568	5295146
42	N K Sharma	Faculty Member	Regional Rural Dev Training Centre,	Gwalior	MP	0751	2232370	2455443
43	Sanjay Rajput	Faculty Member	MG State Ins. Of Rural Dev. Adhartal	Jabalpur	MP	0761	2481929	2481762
44	A K Singh	Director	MGSIRD Adhartal	Jabalpur	MP	0761	2481924	2481929
45	Bhawana Luthra	D&O	UNICEF E-7/650, Arera Colony,	Bhopal	MP	0751	5082489	
46	Sunil Upadhyaya	DLO	UNICEF E-7/650, Arera Colony,	Bhopal	MP		9425026453	
47	Rekha Sharma	Deputy Directory	Director of Women & Child Dev Paryavaran Bhawan 4th Floor 2nd Block	Bhopal	MP	0755	2553318	2553855
48	R K Sharma	Project Officer ICDS	O/o Project Officer, ICDS, Amla	Betul	MP	07147	285621	
49	S K Srivastava	Asstt. Engineer	AE PHED Sub Dn Narsinghgarh	Rajgarh	MP	07375		245164
50	S C Shukla	Joint Director (Admin)	RCVFN AA&MC	Bhopal	MP	0755	527967	2532156
51	Sadana Shukla	Secy. NGO Prakhar	68/6, Shahjahanabad	Bhopal	MP	0755	7559710	2532186
52	Chandrakant Singh	EE	PHE Exn. Gore Ghat	Ujjain	MP	0734	2551567	2513875
53	Gopal Dabkara	Asstt. Engineer	PHE Deptt Sub Dn. Keolari	Seoni	MP	07694		235478
54	Abull Gaffar	CDPO	CDPO, Bamagar	Ujjain	MP	957367	223466	
55	V P Rathore	CDPO	ICDS Mhow	Indore	MP			
56	S K Saxena	BRC Coordinator RGSM	RGSM Jila Shiksha Kendra, Rajgarh (Biaora)	Rajgarh (Biaora)	MP	07372	255256 254639	255256
57	A S Tomar	Sub Engineer	EE RES	Ujjain	MP	0734	2510826	2520275
58	A B Kumar	APO	DRDA Chhindwara	Chhindwara	MP	07162	246826	246826
59	Aruneshwari Gautam	Lecturer	College of Education	Ujjain	MP	0734	2519873	2517277

S.N	Name	Designation	Office Address	City	State	Tef No.			Signature
						Code	O	R	
60	H S Gond	EE	PHED	Tikamgarh	MP	07683	242406	245176	
61	L C Thawani	EE	EE Swaja Dhara		MP	0755	2551712		
62	S K Srivastava	Asstt. Engineer	PHED Sub Dn. Palasiya	Indore	MP	0731	249045	271050	
63	P C Chouhan	CDPO	Women & Child Dev.	Mandsaur	MP	07422	242543	222214	
64	Ravi Khare	SE SSA	Dist. Project Office, SSA	Rajgarh	MP	07372	254694	254662	
65	S N Birthare	Sub Eng. (WRD)	Dist. Project Coordinator Jila Siksha Kendra	Guna	MP	07542	252148		
66	Y K Agrawal	Asstt. Engineer.	EE PHED	Bhopal	MP	0755	2556859	2420177	
67	Shail Srivastava	Deputy Director	Women & Child Dev.	Bhopal	MP	0755	3133018	2764100	
68	Champa Swamkar	Incharge Principal	Dist. Institute of Education & Training	Bhind	MP	07534	240264		
69	K M Dwivedi	Coordinator	Govt. College of Education	Rewa	MP	07662	258860	221377	
70	R L Maurya	EE	PHED	Shivpuri	MP	07492	223269	222698	
71	V V Rajwade	EE	PHED	Jhabua Dn	MP		244306		
72	S N Choudhary	APC	RGPSM	Seoni	MP	07692	220584	2220651	
73	P C Jain	Asstt. Engineer	PHE	Bhind	MP		244636		
74	S K Agnihotri	Asstt. Engineer	Deputy Dy. Fisheries	Balaghat	MP		241173		
75	V K Rawat	AE	Jila Shiksha Kendra	Tikamgarh	MP	07683	243022	240611	
76	S M Khan	Asstt. Engineer	RGSM	Bhopal	MP	0755	5283393	9826441991	
77	N K Bajaj	Asstt. Engineer	ENC Office PHE	Bhopal	MP	0755	2552117	2666918	
78	Sanjay Saxena	Asstt. Engineer.	PHE Sub Dn.	Bhopal	MP	0755	2556859	2556859	
79	Upadhyay R A	Head Master	Jr. High School Palhiur	Sultanpur	U.P.	955362	220336		
80	Sharma D P	Asstt. Dist. Panchayatraj Officer (T)	Ambedkar Vikas Bhawan	Bijnor	U.P.	0121	2769530		
81	Goel Neeta	Women's Dev Specialist	3, Fawn Brake Mall Avenu Road, Sorojini Naidu Marge	Lucknow	UP	0517	2471640		
82	Pandey C M	Depty Director (PR)	425, Jawahar Bhawan	Lucknow	UP	0522	2286677	2343886	

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83	Tripathi R M	Consultant (WES)	Unicef, Field Office, 1/4, Vipul Khand, Gomti Nagar	Lucknow	UP	0522	2303151	2393108
84	Dwivedi Ramjaha	Consultant (MIS)	Panchayat Raj Directorate UP, 6th Floor, Jawahar Bhawan, AshokNagar	Lucknow	UP	0522	2286646	2445857 M-9415067455
85	Seema Singh	Consultant	Panchayat Raj Directorate UP, 6th Floor, Jawahar Bhawan, AshokNagar	Lucknow	UP	0522	2286646	2309169
86	P C Chakarvarty	Head Teacher	Distt. Basic Education Officer,	Bijnor	UP	03142	262592	260766
87	Dhirendra Kumar	Asstt. Teacher	Distt. Basic Education Officer,	Bijnor	UP	03142	262592	265832
88	K K Singh	Dist Panchayatraj Officer	Dist Panchayat Office, Near Varni Jain Inter College,	Lalitpur	UP	05176	274208	272252
89	Dr. P K Agarwal	Distt. Training Officer	Distt. Institute of Rural Deve., Dhanipur,	Aligarh	UP		09412397660	
90	S N Singh	DPRO	O/o DPRO, Vikas Bhawan	Aligarh	UP	0571	2742546	2742137
91	G R Singh	Asstt. Basic Siksha Adhikari	O/o Zila Basic Shiksha Adhikari, Jila Panchayat Campus, Anoopshahar Road	Aligarh	UP	0571	2503917	09412172359
92	A S Singh	Programme Coordinator	15, Vikas Bhawan,	Bairampur	UP	05263	235100	
93	Jagannath Prasad	DPRO		Balrampur	UP	05263	235100	234946
94	H S Srivastava	Asstt. Basic Shiksha Adhikari		Balrampur	UP	05263	234360	
95	S C Srivastava	Asstt. Basic Education Officer	Asstt. Basic Education Officer	Lalitpur	UP	05176	273504	273574 09415064493
96	Shivanand Pandey	Asst Dist Panchayat Raj Officer	O/o Chief Development Officer	Varanasi	UP	05422506963		
97	R D Singh	D D Panchayat	D D Panchayat, Faizabad Dn.	Faizabad	UP	05278220024		
98	Parvez Kirmani	Manager RSM	Rural Sanitation Mart Civil Lines	Bahraieh	UP	05252	232748	233016
99	R K Verma	Dist Basic Education Officer	Dist. Basic Education Office, Lakhimpur	Khiri	UP	05872	259713	
100	Yogendra Katiyar	Dist Panchayat Raj Officer	DPRO Vikas Bhawan	Khiri	UP	05872	253004	258178
101	S L Srivastava	Asst Basic Shiksha Adhikari	Zila Basic Shiksha Adhikari	Ghazipur	UP	0548	2224447	2224215
102	C P Ojha	Dist Coordinator Training	O/o Basic Shiksha Adhikari Bariya Ghat Welleselly Ganj	Mirzapur	UP	05442	256155	257137
103	D S Pathak	ADPRO	Dist Panchayat Raj Officer, Vikas Bhawan,	Ghazipur	UP	0548	224087	

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						Code	0	R	
104	S R Dja	Asst. Basic Shiksha Adhikari	Zila Basic Shiksha Adhikari	Gazipur	UP	0548	2224447		
105	A K Srivastava	DPRO	DPRO Office,	Varanasi	UP		2506963		
106	R R S Yadava	DPRO	DPRO Office,	Mirzapur	UP	05442	252883	268115	
107	R C Upadhyaya	ADO	Dist Panchayat Raj Office, Kutchetery Road,	Mirzapur	UP	05442	252883	257570	
108	Singh Sarvesh	Dist Cordinator (CEP)	O/o DPRO Panchayat Bhawan,	Lalitpur	UP	05176	274208	2706290	
109	R S Chaudhary	DPRO Bahraich	O/o OPRO Vikas Bhawan	Bahraich	UP	05257	232748	237704	
110	A K Gupta	TSC (A)	Vikas Bhawan	Bahraich	UP	05252	231448		
111	A K Shahi	DPRO	Bikas Bhawan,	Sultanpur	UP		22015		
112	P K Srivastava	DDO	DDO Office, Vikas Bhawan	Sultanpur	UP	05362	222201		
113	Subhash Gupa	ABSA	ASA Office,	Varanasi	UP	05412	242421	9839313728	
114	Kathleen Shorot	Sr Programme Officer	International Water & Sanitation Centre, P.O.Box. 2869, 2601 CW, Delft, The Netherlands	Netherlands	31	152192939			
115	Mariëlle Snel	Programme Officer	International Water & Sanitation Centre, P.O.Box. 2869, 2601 CW, Delft, The Netherlands	Netherlands	31	152192946	152190955		
116	Shipra Saxena	Consultant	Paryavaran Bhawan, CGO Complex,	Lodhi Road	New Delhi	011	24361052	9811458685	
117	Manu Prakash	Consultant	Sci Sanitaion DDWS, Gol 9th Floor,	Lodhi Road	New Delhi	011	24361052	9818133265	
118	Rajshekhar Dharmaji	AA (CRSP)	8th Floor, Paryavaran Bhawan, CGO Complex		New Delhi	011	24361052	26016281	
119	Dr. S. Ponnuraj	HOD, FRHS	Gandhigarm Rural University,	Gandhinagar	Tamil Nadu	0451	2451256	2452272	
120	K R Shelat	Training Faculty	Environmental Sanitation INST, Gandhi Ashram Complex, Ashram Road, Sabarmati	Ahmedabad	Gujarat	079	6861887	6861887	
121	M M Patel	Coordinator	Environmental Sanitation INST, Gandhi Ashram Complex, Ashram Road, Sabarmati	Ahmedabad	Gujarat	079	7558052	3229209	
122	I J Patel	ESI Director	ESI Gandhi Ashram	Ahmedabad	Gujarat	079	7522515	7522515	
123	Satish Batra	Faculty Member Extension Education	State Community Dev Training Centre Nilokheri (Karnal)	Nilokheri (Karnal)	Haryana	01745	246229	2230249	

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						Code	O	R	
124	Veena Sahgal	Faculty Member	State Community Dev Training Centre Nilokheri (Karnal)	Nilokheri (Karnal)	Haryana	01745	246229	246129	
125	V L Prasad	Team Lead , SRWS	A P Academy Rural Deve	Rajendra Nagar,	Hyderabad	040	24008555	24008555	
126	Rajiva Sinha	EDN Officer UNICEF	Unicef 219/2 AJC Bose Road		Kolkata	033	22872477	24769999	
127	C C Dey	Coordinator, Water Sanitation	Ramakrishna Mission Lokasiksha Parishad,	Narendrapur	Kolkata	033	24772207	24773401	
128	P K Chatterjee	Asstt Coordinator	R K Mission, Lok Shiksha Parishad	Narendrapur	Kolkata	033	24772207	271701	
129	S K Chattopadhyaya	State Coordinator	SIPRD West Bengal B-18/204, Kalyani	Kalyani	West Bengal	033	25828161	25823005	
130	R C Das	Sanitation Activest	O/o RK Mission Ashrama Loka Siksha Parishad,	Narendrapur	West Bengal	033	2477	24342627	
131	Sadasium Pandiarajan	Health Inspector	Faculty of Rural Health & Sanitation Gandhigram, Rural Uni. Ambathural	Gandhigram	Tamil Nadu	0451	2451256	2562639	

Notes

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