



School sanitation and hygiene education indicators

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What is monitoring?

Monitoring should be an ongoing activity in school sanitation and hygiene programmes. Monitoring is far more than collecting information to 'see how things are going'. It is meant to improve programmes and activities over the short term. Monitoring involves checking, analysing and acting to improve a situation. In itself, school sanitation and hygiene education (SSHE) monitoring is meant to improve the effectiveness and sustainability of SSHE programmes. Therefore SSHE monitoring seeks to help teachers and student to improve and maintain their practices for better water supply, sanitation and hygiene conditions

Monitoring can have many definitions. Within this article it is defined as the *checking, collecting and analysing of information about the current situation to bring about improvement in the short-term*. In essence, it means comparing the actual situation with the expected (or planned) situation and then taking action to bring reality and expectations together. Seen from this perspective, good monitoring and good management are similar. Thus SSHE monitoring is not merely the upward flow of information about implementation and finance. It is therefore not primarily about periodic reporting.

This paper starts off with a focus on monitoring within the context of SSHE. This is followed with a section on monitoring indicators. Finally, some concluding remarks are given regarding the role of monitoring in SSHE projects.

Why is monitoring important in the context of SSHE?

SSHE programmes do not end when the water and sanitation facilities have been constructed. In fact construction marks a new beginning as children participate in water/sanitation related education activities and start to use the facilities. One main purpose of an SSHE programme is for children to use the facilities and through this, develop consistent hygiene behaviours. Thus, all children should be able to:

- drink clean water in the school
- use latrines for urination and defecation
- wash hands with soap and water after using the latrine and before eating

In order for children to use the facilities as intended, there must, of course, be enabling factors and materials. It is, for

example, counterproductive to tell children to wash their hands with water and soap if there is no soap available for them to use. Enabling factors are the materials and actions that help children perform particular behaviours. Some enabling factors to help children use the facilities as intended are:

- Allow sufficient time for the children to use the latrine.
- Fill water storage containers in the morning and refill them at mid-day or when needed.
- Provide each latrine with a bucket, mug and a cleaning bush.
- Provide each hand washing facility with a bucket, mug and soap.

Allow drinking water to be stored in containers with covers and have at least one ladle and two tumblers. It is useful to have a platform to raise the containers off the ground and to have soap for washing the vessels and tumblers¹.

Monitoring indicators

The action of monitoring, as reflected in this paper, should be taken at the lowest possible level, with cross checks to make sure that the situation has in fact improved. SSHE programmes that are serious about monitoring, should try to develop a small set of indicators that describe the minimum necessary conditions for programme success. It is very useful for those involved in projects or those working in a particular place to develop a mutually-agreed list of basic indicators. An indicator shows a standard that you want to reach. It can be written as a sentence or a question, or in any way as long as people understand its meaning in the same way.

The following indicators have been developed by the authors and revised by different individuals involved in SSHE ranging from teachers to administrator involved in SSHE. The following table is an example of a draft list of indicators which may be useful for teachers and other directly involved in SSHE. It should be cited that the following list is quite extensive and may be shortened. In terms of frequency, it should be used throughout the different project stages. As this is a draft list the authors would appreciate anyone reading this paper who is directly or indirectly involved in the SSHE sector to send their comments to snel@irc.nl.

Table 1: Key Indicators of SSHE

1. School- physical environment/ health learning environment	<ul style="list-style-type: none"> • Compound and classrooms are kept clean and free of waste and faecal matter • Toilets are designed for children (boys and girls) • There is convenient handwashing facilities • Soap or substitute is present and reliable (available when needed) for children • There is safe drinking water. • There is appropriate school lighting within the classrooms • There is appropriate ventilation (e.g. warm enough in the winter months) within the classrooms. • There is basic furniture available for the children.
2. Active and organised children	<ul style="list-style-type: none"> • Clean and convenient use of facilities are used by all children and teachers • There is consistent and organised cleaning and maintenance of toilets, handwashing and drinking water facilities by all children • The role of the older children to help and monitor younger children in using facilities and maintaining school cleanliness is being done.
3. Trained and committed school personnel	<ul style="list-style-type: none"> • The head teacher and key teachers have been trained/oriented on both hardware and software aspects of SSHE. • The learning in the class room is child-centred • Educators are making and carrying out a plan for organising children in use, monitoring and maintaining of facilities and in personal hygiene. • There are planned programmes which exist for hygiene education which involve school health clubs.
4. People/ parent participate in decision-making	<ul style="list-style-type: none"> • Local organisations (school health committees, school health clubs) are formed and operational. • Men and women, rich/poor, members of all communities are ALL informed, attend meetings, make plans and decisions regarding developments at the school. • Participation is gender and poverty sensitive and equitable. • Maps or baseline information are easily available, used and understood. • Strong CBOs, formal and informal groups plus PTA in community understand the developments at the school. • Operation, maintenance and financing are planned together and upfront.
5. PTA (Parent/Teacher Association) functioning well	<ul style="list-style-type: none"> • PTA represents ALL parents/people in community. • Have clear rules, meet, decide and act on own decisions. • PTA knows what the school does as well as what is happening in the committees. PTA is linked clearly to the local committee and other committees.
6. School and nursery programmes	<ul style="list-style-type: none"> • Teachers/parents are informed before construction, support and influence technology/design before construction of latrines at school. • Latrines, drinking and handwashing facilities function. Latrine design is simple but strong with enough facilities for children. Separate facilities available for boys/ girls. • School children, boys and girls consistently use latrine, handwashing and drinking facilities. • Hygiene education is given in class by trained teachers and can be practised (facilities available and can be used) • Health education addresses local risky practices such as fertilising home gardens with night solid. • Low cost participatory materials/methods present and in use (and can be demonstrated by teachers). • Documentation and sharing of lessons include successes and failures, and analysis of reasons between teachers in and outside the district.
7. SSHE practitioners	<ul style="list-style-type: none"> • All SSHE practitioners (educational and technical) are trained in participatory approaches. • Curricula, task descriptions and training of teachers include participatory SSHE. • SSHE practitioners document & share lessons and build networks for exchange and influence. • Documentation and sharing of lessons include successes and failures, and analysis of reasons.

8. Hygiene behaviour	<ul style="list-style-type: none"> • There is water and soap available near the latrines for children to use. • The pupils can demonstrate hand washing with clean water and soap/explain proper handwashing methods (with soap or otherwise) & times. • Latrines are used hygienically; students as well as teachers • No open defecation is visible in the environment around the school (e.g. in the field, nearby caves, etc.)
9. Links to home and community	<ul style="list-style-type: none"> • Some of the key health and hygiene information and behaviour are flowing to the home. • The school is used for special activities related to health and hygiene by children and parents. • Families and communities provide finance and other support for maintenance and repair of school facilities.
10. Institutional aspects	<ul style="list-style-type: none"> • A range of actors solve problems together by pooling their interest areas, mandates and resource • Funds and decision making are sufficiently decentralised for local planning and implementation • No parallel (separate) infrastructure projects exist. Joint decisions, education and teamwork are included in the SSHE project. • Monitoring is developed to know, adjust and account for inputs, results, impacts & costs • Monitoring checks and takes action on conditions and practices, not just knowledge
11. Policy aspects	<ul style="list-style-type: none"> • Presence of policies on SSHE in schools and districts/countries • School/government policies/programs for SSHE reflect growing numbers of school going children

Final points regarding monitoring

As stated earlier, the action of monitoring should of course be taken at the lowest possible level, with cross checks to make sure that the situation has in fact improved. It is very useful for those involved in projects or those working in a particular place to develop a mutually agreed list of basic indicators. An indicator as reflected earlier shows a standard that you want to reach. If some specific indicators which you believe are important are not represented in the table then these should be added. The modifications of this table can be done by anyone involved in a SSHE project ranging from the teachers, PTA and/or other stakeholders involved in SSHE. Finally the reader should be aware that the above-cited table has been revised in July 2003 in the

UNICEF-IRC SSHE India project at the National SSHE workshop held in Trichy, Tamil Nadu (India). After revisions have been made staff will use this SSHE indicator table to see how effective it is and what they have learned from it. The follow-up of these developments will be published in a forthcoming article in *Waterlines*.

(Footnotes)

¹In some schools the cups, buckets and soap are taken to a safe storage place at the end of the school day.

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