Role of school health clubs in promotion of better health in Wakiso, Central Uganda

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Poor sanitation is a national problem and every body's responsibility. It has effects on health status, education, trade and development. Despite the National policies by Ministry of Education that all schools should have school health programmes, sanitation in schools is still presenting a big challenge to several actors in the Health, Education, Water and Sanitation sectors among others (MoES and UNICEF 2006). The rapid increase in primary schools’ classrooms and enrolment in response to Universal Primary Education (UPE) in Uganda has resulted into increased pressure on the limited sanitation facilities available. More than one third of the global population some 2.5 billion people do not use an improved sanitation facility, and of these 1 billion people still practice open defecation (UNICEF, 2014) Like other Civil Society Organizations under the umbrella Uganda Water and Sanitation NGO Network (UWASNET) which networks or coordinates all Organizations under the water sector in Uganda, Voluntary Action for Development (VAD) has made a remarkable improvement in communities and schools where the integrated community managed water, hygiene and sanitation improvement has been implemented with funding from various partners from Canada, UK, and Ireland. This presentation highlights various avenues used by the trained School Health Clubs to spearhead the process of hygiene and sanitation improvement in an effort to reduce the occurrence of communicable diseases and improve on the general health of pupils in schools.

Established and registered in 1996, Voluntary Action for Development (VAD) is a non-profit making indigenous, Non-governmental organization registered by the Ministry of Internal Affairs RE: No:S.1594/1709. VAD is focused exclusively on improving livelihoods of rural poor and disadvantaged communities through Water, Hygiene and Sanitation improvement, Sustainable Agriculture promotion, Child Protection and Development initiatives and Family Economic Empowerment (www.vaduganda.org).

Introduction

Over the last 18 years, VAD has worked with a total of 75 primary schools implementing clean water and safe sanitation for schools. In these schools, physical outputs have been built including: gender segregated VIP latrines in schools with 20,000 liters ferro cement water tanks each school, and hand washing tanks to promote hand washing good practice (refer to the photograph; a constructed VIP gender sensitive latrine in photo 1 and in photo 2, a newly constructed water tank of 20,000 liters). Equally, VAD has also increased hygiene and sanitation awareness among the pupils through sensitization, hygiene and sanitation demonstration trainings demonstrating recommended hygiene and sanitation facilities like: tippy tap for hand washing at critical moments (see photo 5 while Irene 10 years washing her hands using locally made tippy tap), dish rack for proper storage of utensils, and using safe latrines, in addition to formation and training of School Health Clubs to spearhead the process of school WASH promotion. The intention is to reduce water, hygiene and sanitation related illness among the children in the targeted schools, increase access to hygiene and sanitation information for improved sanitation awareness and build the capacity of school children to advocate for sanitation improvement both in schools and community.
VAD’s intervention approach
Before intervention in schools VAD engages local leaders, parents and teachers in planning dialogues giving their views and opinions on how best the project will be implemented. School Situation Analysis is conducted while analyzing the current poor sanitation specifically unsafe latrines which are not gender sensitive and absence of water facilities. During Implementation process local leaders, Parents Teachers Association (PTA), Teachers and pupils actively participate in the implementation of activities including sensitization awareness of hygiene and sanitation good practices and empowering of SHCs, and teachers to effectively manage and monitor the progress of activities.

VAD School Health Club (SHC) approach
VAD uses participatory methods, which have a potential to reach family members and the wider community. Participatory approaches like; child to child friendly approach of training, hygiene and sanitation inter-school competitions with various targeted schools, Development of Information Education Communication (IEC) materials, outreach programmes through music and drama where pupils make performances related to water, hygiene and sanitation improvement, media particularly local radio stations where performances are conducted in line with water and sanitation and reaches a wider coverage. Use of Participatory Hygiene and Sanitation Tools (PHAST), simple monitoring and evaluation tools are also applied.

Such activities are conducted to create a friendly learning environment and for children to adopt easily since they are the change agents for project sustainability even in future.

These are established to spearhead the process of hygiene and sanitation promotion as well as ensuring that the constructed water and sanitation facilities are properly managed. VAD encourages the formation of SHC of 20 members (10 boys and 10 girls) from each school mainly from lower to upper classes and equip them with different trainings for children to enable them build their confidence and skills in training their fellow children as well as adults.

The School Health Club members are trained to take on responsibility for Operation and Maintenance of the school-based water and sanitation facilities; dissemination of good hygiene and sanitation messages through school and wider community; and monitoring of peer hygiene behavior. In addition, the SHCs carry out hygiene and sanitation out-reach activities where hygiene and sanitation demonstration trainings are conducted in homes of vulnerable groups of people including elderly, People with disabilities and people affected with HIV/AIDS, participate in all sanitation activities at school, encourage self-inspection of the pupils during health parades, come up with a school work plan which involves all pupils in sanitation activities, encourage availability of safe water for drinking and availability of anal cleansing materials in the latrine; and Documentation of success stories and story for change.

The SHCs are trained with School hygiene and sanitation promotion where key aspects like roles and responsibilities, promoting personal hygiene, approaches to sanitation including child to child approach, use of drama and quizzes are emphasized. In addition, the SHCs are trained and provided with monitoring tools by the Monitoring Evaluation and Learning (MEL) department in VAD which specify the thematic areas including a school cleaning rota, weekly inspection by School Health Club members, number of parents contributing to Water/Sanitation (WATSAN) services to mention but a few. Such parameters/indicators are agreed upon together with the schools stakeholders.
NAKIIJOBA

Case studies

Nakazzi Irene 10 years, a trained SHC member of Bugimba primary school narrates her story,

“When you are elected on the SHC you become a model, you must be an example to other pupils, you have to keep yourself clean and always smart such that other pupils can copy from you. It is a challenging task to be on the SHC but it is a learning experience. As a leader in the school you have to perform your duty while other pupils must see you working for them also to work (exemplary). So sometimes I have to take a broom and clean our classroom and then other pupils also follow. In so doing our school has now become very clean and tidy than it used to be before we had a School Health Club.”

A success story: our life changed with a new gender friendly latrine facility.
A case study of Health club members in Malangaata Primary school
(Refer to the photo 4 of the latrine where 3 members of SHC (2 girls and 1 boy) in Malangaata primary school share successes)

- Because, they only had one latrine with three stances shared between girls and boys, over 16 girls adolescent missed classes during their menstrual period.
- The existing latrines before did not observe privacy and they had no wash rooms and so, girls had to miss classes for a number of days every month and this affected their performance
- Now, with a new child friendly and gender sensitive latrine at school girls’ attendance is more regular.
- Now, only about 5-6 adolescent girls miss class not because of lack of access to a sanitation facility but for other reasons
- This has boosted the girls self esteem

VAD has learnt key lessons when working with School Health Clubs in schools
VAD has realized that it is very important to work with children while at an impressionable age because what they learn in regard with hygiene and sanitation promotion can be easily adopted both at home and in schools and pass on to their own children even in future and this has enhanced project sustainability.

VAD has successfully implemented the SHC approach in schools and these children have shown capability of change agents in regard to manage and monitor progress. These SHC members have played their roles and results of health improvement particularly personal hygiene among the pupils and the general cleanliness of the school environment have been evidenced.

Still, the SHC members have reached even to the wider area while sensitizing hygiene and sanitation good practices in their targeted communities where VAD operates. These children have replicated hygiene and sanitation facilities like tippy taps for hand washing (see photo 5), dish racks for proper storage of utensils mainly in homes of elderly people and people with disabilities in their respective communities.

VAD’s SHC approach has been implemented inform of fun and entertainment. VAD uses participatory approaches in school sanitation promotion including child to child friendly approach, Music, dance and drama where performances related to hygiene and sanitation are made, presentations on media (local radio stations), exchange learning visits, inter-school hygiene and sanitation competitions among others. These participatory approaches have equipped practical knowledge and skills in hygiene and sanitation and such knowledge is being carried on by the SHC members even in future for project sustainability.

Results of VAD’s SHC approach
- Increased awareness about hygiene and sanitation among the SHC members and the pupils at large.
- Realization of pupils, teachers and support staff right to living in a health environment since SHC members have been role models in school sanitation promotion.
- SHC members have improved their schools to model schools with recommended hygiene and sanitation structures where other schools come and learn different approaches to sanitation improvement.
- Pupils’ health has improved since SHC conduct personal hygiene inspection during health parades on a weekly basis.
Challenges

- Transfer of teachers trained in hygiene and sanitation improvement in these schools has led to reduced commitment of school health clubs.
- Some parents are reluctant to contribute local materials because they believe Government should provide everything mainly with Universal Primary Education schools.

Recommendations and conclusions

In Schools, water and sanitation needs to be given priority regarding allocation of school funds putting much emphasis on good hygiene practices and life skills.

The school and community need to work together to remedy sanitation problems and to ensure the child adopts good hygiene/sanitation practices during childhood. This will build their commitment to the project and in turn leading to sustainability and behavioral change.

Empowering young children has led to improved health conditions in schools and communities at large.

VAD has encouraged the establishment of SHC members in over 75 primary schools where VAD has implemented Clean Water for Schools. In addition, most of other partners in Wakiso Central Uganda have adopted the same approach to enhance School Hygiene Education Promotion (SHEP) in Uganda.

Photos showing water and sanitation new facilities constructed by VAD

Photograph 1. Pupils of Namusera Umea Primary School (P/S) in Wakiso district celebrating after completion of their new VIP Gender Sensitive latrine

Photograph 2. Trained SHC members of Kavumba P/S in Wakiso District with their constructed rain harvesting tank of 20,000 litres

Photograph 3. Trained health club members demonstrating hand washing after latrine use, at Bugimba P/S in Namayumba, Wakiso District

Photograph 4. Trained SHC members of Malangaata Primary School sharing successes of project intervention (see case study in the text)
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References

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