





School Community Manual
Lao PDR

FIT FOR SCHOOL

Table of Contents

Foreword	1
National School Health Policy	2
Degree on Hygiene and Prevention	3
Foreword from SEAMEO INNOTECH and GIZ	5
Introduction	7
1. How to Create a Supportive Learning Environment	8
2. Handwashing	16
3. Toothbrushing	22
4. Deworming	28
5. Operation and Maintenance	34
6. Monitoring	42
7. Roles and Responsibilities	48
Checklist for Prinicipals and Teachers	58
Annexes	60

Foreword

This manual for schools and communities was developed by the School Health Task Force, which is part of the Department of Pre-school and Primary Education (DPPE) of the Ministry of Education and Sports (MoES) in partnership with Ministry of Public Health (MoH) with technical support from Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH and SEAMEO INNOTECH.

At the end of 2011, Lao PDR started with the implementation of the Fit For School program in 4 districts of Vientiane Capital covering 22 model schools (public primary schools) benefiting 4,800 students. After a model phase the MoES currently expands this program to other public and private primary schools. As part of the model phase this Fit for School 'School Community Manual' and a 'Basic Orientation Video' were developed based on the lessons learnt from the model schools in Laos and experience from the program implementation in the Philippines. These materials are now adjusted to the Lao context and can be used as guidelines for school and community level for further scale up to all primary schools throughout the country. To achieve this goal the government integrates this program into the educational development plan at each level to ensure the sustainable implementation of this activity.

This manual and video will help schools and communities with the preparation and implementation of the Fit For School program in their respective school. The program aims to improve

health and education of school children by making schools healthy places and by introducing hygienic and healthy habits through daily group practice. The Fit for School Program therefore supports the implementation of the National School Health Policy and guides stakeholders on district and school level on how to make their school a healthy and enabling learning environment. The program also is in line with the 'Schools of Quality ' framework, which promotes safe and healthy learning environments in all schools through strong school and community partnerships.

This manual and video serve as implementation guidelines for educational administrators at school level, in the community and for other agencies implementing programs based on the Fit For School approach. However, this compilation might have some shortcomings. Therefore, the School Health Task Force highly appreciates all comments and feedback from the readers and implementers on school and community level for further improvement.

Department of Kindergarten and Primary Education Dr. Mithong Souvanvixay

National School Health Policy

A Memorandum between Ministry of Education and Ministry of Health on School Health Program

Government of Lao People Democratic Republic (Lao PDR) has set visions for Education and Health till 2020 by setting objectives on achieving Millennium Development Goals, Education for All by 2015, and Good Health for All.

Since 1993, school health program activities have been implemented widely and continuously. In order to sustain nationwide school health activities, MOE and MOH signed agreement together in 2005.

This National School Health Policy has been developed in order to be a reference on consensus implementation of school health strategy for health program task forces from central to local levels; for school directors from preschool to secondary education; and also for line ministries, international organizations that whish to support school health program activities. The target groups are students from preschool to secondary schools.

This new National School Health Policy consists of 7 components: personal hygiene and life skills, physical school environment, psycho-social school environment, disease control and prevention, health care services, nutrition promotion, and cooperation between school and community.

Implementation of the National School Health Policy will be expanded through a training program.

Vientiane Capital, date: 21 MAY 2010

Minister of Minestry of Education

Dr. Phankham VIPHAVANH

Vientiane Capital, date: 2.1 MAY 2010

Minister of Ministry of Health

Or. Ponmek DALALOY

Degree on Hygiene and Prevention



LAO PEOPLE'S DEMOCRATIC REPUBLIC PEACE INDEPENDENCE DEMOCRACY UNITY PROSPERITY

President's Office

No. 13/PO

DECREE of the PRESIDENT of the LAO PEOPLE'S DEMOCRATIC REPUBLIC

On the Promulgation of the Law on Hygiene, Disease Prevention and Health Promotion

Pursuant to Chapter 5, Article 53, point 1 of the Constitution of the Lao People's Democratic Republic;

Pursuant to Resolution No. 04/NA, dated 10 April 2001, of the National Assembly of the Lao People's Democratic Republic on the adoption of the Law on Hygiene, Disease Prevention and Health Promotion; and

Pursuant to Proposal No. 04/NASC, dated 20 April 2001, of the National Assembly Standing Committee.

The President of the Lao People's Democratic Republic Decrees that:

The Law on Hygiene, Disease Prevention and Health Promotion is Article 1. hereby promulgated.

Article 2. This decree shall enter into force on the date it is signed.

> Vientiane, 25 April 2001 President of the Lao People's Democratic Republic

[Seal and Signature]

Khamtai SIPHANDON

Article 16. Hygiene of Schools and Educational Institutions

Hygiene in relation to schools and educational institutions refers to maintaining clean, beautiful and orderly schools and educational institutions.

Schools and educational institutions shall be established at safe locations from communicable diseases, accidents and hazards, and shall be equipped with sports grounds and resting-places.

The buildings of schools and educational institutions shall be provided with sufficient appropriate space for the number of students, and shall be equipped with sufficient light and air circulation and with tables and chairs adequate for students of that age.

Teachers, students and the relevant organisations shall guarantee that schools and educational institutions are maintained in constant cleanliness, and are supplied with drinking and clean water, with hygienic latrines and with other necessary facilities in accordance with the principles of hygiene. Moreover, health examinations shall be organised for students.

Childcare centres and kindergartens shall apply the said principles. Children under 5 years of age shall be fully immunised and given drops.



Foreword from SEAMEO INNOTECH and GIZ

"It is clear that without proper education, health suffers. And without proper health, good education is not possible."

Gro Harlem Brundtland, former President of Norway and WHO Director General

Infections, tooth decay, intestinal worms, and malnutrition - these are common diseases of school children in many parts of Southeast Asia and beyond. Such avoidable ailments affect not only their physical and mental development, but also their ability to attend and perform well in school. Even the best education system cannot achieve quality schooling when students are frequently ill or in pain. The link between health and education goes both ways: Healthy children have higher chances to benefit from education and better education increases socio-economic status and long-term health gains.

Learning in school is central to children's lives and schools are ideal places to extend this role to enhance health and general development of children. Teachers can take an active part through organising and supervising daily group activities with little additional effort, while the students themselves take over supportive tasks. School heads are important drivers for

continuous improvement of the school environment and in the mobilization of support. A close interplay between school, parents and the community is essential in this process.

To strengthen and promote school health in Southeast Asia, as well as to build on the vital role of schools, educational personnel and the community in this process, the Regional Fit for School Program of GIZ and SEAMEO INNOTECH have developed this School Community Manual together with the national partners in Cambodia, Indonesia and Lao PDR. The work was based on the model, which was developed by the Department of Education in the Philippines, supported by the NGO Fit for School Inc.

We invite you to study this manual and apply the outlined steps to your school. The manual provides practical support in implementing school health programs based on the Fit for School Approach and explains how schools can be transformed into enabling learning environments to improve the education and health of our children. We are convinced that schools, communities and children are key actors in this transformation.

Be part of this exciting movement, start now and help make your school a healthier place!

Dr. Ramon C. Bacani, Director SEAMEO INNOTECH

K. - a. Becari

Dr. Bella Monse, Principal Advisor Regional Fit for School Programe GIZ

Jule Moule



Introduction

Establishing schools as enabling places where children can thrive and learn - this is the objective of the Fit for School Approach, an innovative and integrated school health concept that was first developed in the Philippines and has also been introduced in other Southeast Asian countries, namely Cambodia, Indonesia and Laos.

The Fit for School Approach is based on three core principles: Simplicity, scalability and sustainability. A school health program and its interventions must be based on best possible evidence, should be costeffective and packaged to facilitate implementation in the school context with little extra effort. Capitalizing existing structures and resources as well as following a modular setup are essential elements for scalability. To ensure sustainability, long-term allocation of government manpower and financial resources is crucial. A close partnership with the parents and local community is imperative in maximizing the positive program effects.

Aligned with these principles, the interventions comprise hand washing with soap and tooth brushing with fluoride toothpaste as daily group activities; complemented by biannual deworming. Institutionalizing these interventions addresses some of the most prevalent diseases among school children. To provide a healthy environment, schools need functional washing facilities and toilets. These basic school infrastructures are prerequisites for positive hygiene behaviour and address key determinants of health.

Recognizing School-based Management (SBM) as an important cornerstone, the Fit for School Approach builds on the strength of schools as self-managing entities with the leadership and active involvement of education personnel, as well as the close collaboration with the larger school community and parents. Every member of the community can contribute in various ways to make the program successful including the construction of washing facilities, participation in monitoring or cleaning, repair and maintenance. In this way, even schools with limited resources can implement effective health interventions and improve their infrastructure little by little.

This manual outlines the practical steps for school heads, teachers, parents and community members on how to support and engage in activities based on the Fit for School Approach. It details the characteristics of a supportive school environment and describes the implementation of practical interventions. In addition, the manual provides guidance on cleaning, operation and maintenance, as well as regular and structured monitoring. Finally, roles and responsibilities of the different stakeholders are clarified.

Combining the strengths of schools and communities is a natural and logical process. Using a joint approach helps to ensure the best positive impact on health and education of school children. Furthermore, it is an enriching and satisfying experience for all involved to see children thrive, happy and better equipped for successful learning.

Handwashing with soap is the single most effective and inexpensive intervention to prevent the spread of diseases.

Supportive Learning Environment



Water, Sanitation and Hygiene in Schools

Providing access to safe water and sanitation remains a major challenge in schools in Laos. The Fit for School Program can serve as a starting point for making access to water and sanitation a priority in the School Development Plan. This chapter will guide schools and communities on how to improve the situation in their school starting with small steps and available resources.

In order to enable students to practice handwashing and toothbrushing on a daily basis functional group washing facilities have to be in place. Even if the school has no access to water yet, a simple group washing facility with a container system can be constructed.

In this chapter you will find the most important information on what to consider when constructing a group washing facility in your school. For more detailed and technical information on group washing facilities please check the Fit for School "Field Guide: Hardware for Group Handwashing in Schools".

> Functional group washing facilities are crucial for the program success. Without a functional facility students cannot practice the hygiene activities as a group!

Facts The results of a recent survey of elementary schools in Laos show that in 2011 only 42% of 8,940 primary schools have access to clean water and sanitation.1



Schools are the heart of the community, a place where our children learn and spend most of their day. By transforming your school into a healthy and supportive learning environment and by practicing healthy habits on a daily basis you can improve health and education of your students at the same time. In order to do that the active participation of students, teachers, the principal, parents, village authority and the wider community is needed. The school principal plays a crucial role in mobilizing these stakeholders and clarifying clear roles and responsibilities.

Guidelines // Design & Construction of Group Washing Facilities

Assess the water and sanitation conditions in your school, discuss needed improvements and seek support from parents, the community and other partners.

Think about immediate improvements and long-term improvement as part of the School Development Plan.

To facilitate handwashing and toothbrushing as daily school activities, each classroom should be equipped with its own group washing facility.

Most important is that the facility functions no matter whether concrete or light materials are used.

Ensure regular cleaning of the facility and be proud of your healthy school.

Use the experiences that others have made. Watch the video on the DVD or on the website and check the Fit for School "Field Guide: Hardware for Group Handwashing in Schools" to learn more about technical details.



Build the facility close to the classroom.



The facility should accommodate at least 10-15 students.



Use of indigenous or local materials is a low-cost option.



Consider water pressure and availability: use a self-contained system (container or Tippy-Tap) in case water pressure is low or water is not available all the time.



Punched water pipes reduce costs, water consumption and are more durable compared to faucets.



Tippy taps are immediate low cost solutions.



Inclining the facility lets water flow smoothly.



Make sure that students can comfortably reach the flowing water. Check the height and width of the basin.



Ensure proper drainage.

Guidelines // Toothbrush Holder

Each student will receive one toothbrush with a cover per year. These are to be stored in a toothbrush holder, ideally inside the classroom.

Never let the students bring the brushes home. A second brush is needed at home.



It should be easy for students to reach the toothbrush holder.



The toothbrush holder should be easy to clean.



There should be spaces between the brushes to avoid cross infection.



individually according to student name or number.



The slots should be designed in such a way that the head of the brush is exposed to the air. The cover has little holes to prevent molding.



As an alternative to labeling, have the students personalize their toothbrushes for easy identification.



Each space and each brush should be clearly labeled to avoid mixing up brushes.



The label must be wrapped with tape to prevent it from being erased over time.

Frequently Asked Questions

1. We have no water access at our school. Can we still implement the program?

Yes, you can. A self-contained system for your group facilities can be an option. This is a facility where a smaller container, usually a water jug or water bucket is elevated to service the facility. An even more compact system is the Tippy-Tap facility where each student has his or her own water bottle to perform the exercise. Only about 300ml of water are needed per child per day for the activities. Check the "Field Guide: Hardware for Group Handwashing in Schools" for more details on possible facilities for your school.

2. What kind of group washing facility is the best for our school?

When choosing a type of facility you should have the following things in mind: local materials available and resources available, access to water and water pressure, water consumption, number of students in school, as well as cleaning and maintenance of facilities. No matter what kind of facility you decide to build the most important thing is that it is functional. You can raise more funds later on, e.g. to beautify the facility or improve the basin.

3. Why should parents and community be involved in the construction of facilities?

The success and the sustainability of the program depend on the support and commitment of parents and the community. It's the role of the school principal to involve parents and community members. Parents and community members will feel more responsible if they are involved and have a clear role in the program implementation. The contributions of parents can be for example labor, materials or financial contributions. Parents can also help to advocate for water access and improved sanitation in schools.

4. How big should the facility be?

It is recommended to have one facility per classroom that can fit at least between 10-15 students at a time. Children love to conduct the activities as a group. In addition, with a big facility it is less time consuming to conduct the daily activities. With a big enough facility near the classroom it only takes about 10 minutes a day for an entire class to conduct the activities.

5. Should our facility have a roof?

A roof offers protection from rain or direct sunlight and makes the activities more convenient. Most important is that the facility is functional and students can practice activities on a daily basis. So first priority is a functional facility, even if it has no roof. If the school community prefers to have a roof funds can be raised and a roof can be built later on.

Experiences



Mr. Thaksin Phachalern // Chief of the Education Development Committee, Sithan Neua Village Cluster // Sikottabong District, Vientiane Capital

"Arkard Primary School is under the responsibility of 4 villages. Each Village Chief has encouraged, discussed and explained to their respective villagers the advantages of improving WASH in schools and mobilized funds from the villagers for the construction of the group washing facilities in school. It was important for us to be involved in the decision-making and we decided together to contribute to the construction of the group washing facilities. We all feel responsible and will make sure the program will be implemented in our school."

Ms. Leuanthong Xayavong // School Principal, Dongsavath Primary School // Sisattanak District, Vientiane Capital

"I was worried whether we could do it and if the village administration office would agree. But after discussing with them they agreed to support the program and the construction of group facilities. I were not familiar with the program. However, they quickly learned conducting the daily activities and using the facility correctly. We also discussed with the village administration authority how to ensure program sustainability. Without the support from the communities our school would not have been able to implement the program successfully."



Handwashing has been recognized as the most important step in avoiding infectious diseases and preventing the spread of germs to others.

Handwashing





Facts

Scientific research gathered in several studies showed that regular handwashing with soap can reduce the rate of diarrhea by 31% to 47% and respiratory illness by 30%. 2

Infectious Diseases

Infectious diseases are diseases that spread from one person to another. Worm infections, diarrhea, dysenteries, common colds, coughs, even bronchitis, eye and skin infections are the most common infectious diseases. Lack of hygiene is the root cause for the spread of these diseases. If we all take care to keep ourselves, our home and our school clean, we can guide students to cleanliness and stop most diseases before they start.



You should always wash your hands with soap after using the toilet, before handling food and before eating.

Guidelines // Daily Group Handwashing

All students will wash their hands with soap at least once a day in school as a group activity.

The best time to do this is before eating, e.g. at recess or at lunch time.

Make soap available at all washing facilities all the time. Soap can be put in a net bag or a stocking and tied to the facility.

The teacher will assign and train students to help their classmates conduct the handwashing activity in an organized manner.

Water is only needed at the beginning to wet hands and at the end to rinse hands. Close the water in between while students lather their hands.

After about a week, students get used to this procedure and the role of the teacher will be limited to supervision.

The teacher will remind the students to wash their hands with soap after using the toilet, before handling food and before eating.

Students are encouraged to be advocates for handwashing with soap and make it a routine in family life.



Apply soap, create lather and rub all surfaces for 20 seconds.



Rub right hand over left and vice versa.



Rub palms together with fingers interlaced.



Rub the backs of fingers against the opposite palm.



Grasp thumb and rub with a twisting motion. Repeat for other thumb.



Rub left palm against the back of the right hand and vice versa.



Rinse hands with running water.



Dry hands in the air. Do not use a towel! Towels become a source of infection after the first use.



Frequently Asked Questions

1. When washing hands, can I use any kind of soap?

Yes. With proper use, all soaps, even laundry and dishwashing soaps, are effective in cleaning our hands. However, laundry soaps have a stronger formula than other soaps. You can use any kind of soap for daily handwashing in your school.

2. Do we need to use antibacterial soap?

No. It is the act of rubbing and rinsing, not the type of soap that physically removes bacteria from the skin.

3. Can rainwater be used for handwashing?

Yes. If water is scarce, water from a well, rainwater can be used for handwashing, but it is of utmost importance that handwashing is always done with soap.

4. Why is it also important to trim fingernails?

The area under fingernails has the highest potential for harboring bacteria and viruses. Well-trimmed nails are easier to keep clean.

5. If water is scarce, can two or more children use the same water from a basin or bucket for handwashing?

Students should not use the same water from a basin or bucket when washing hands together as they will also share their germs. Students should rinse their hands individually and it is best to use flowing water. Only little amount of water is needed for handwashing.

6. Is the promotion of handwashing only being done in Laos?

No, this is part of a global initiative to promote handwashing. It is proven that handwashing with soap is the single most effective intervention in reducing the spread of infectious diseases and thus saving lives. Around the world, different stakeholders such as UNICEF, the World Bank, universities, industry partners and governments have joined forces to promote handwashing with soap on a mass scale. The Lao government is also part of this global movement.

7. Can I participate in the promotion of handwashing and how?

Yes, everyone is welcome to join the global movement for handwashing with soap. All you have to do is make it a habit in your own personal and professional life, talk about it among family members, friends and colleagues. If you participate in social activities encourage other people to practice handwashing with soap after using the toilet, before handling food and before eating. It feels good to be part of this important global initiative.

Experiences



Ms. Khambang Chanthavixay // Grade 5 Teacher, Tha-Ngon Primary School // Xaythany District, Vientiane Capital

"When we introduced the program in our school, the students did not know how to conduct the activities in an organized manner. They also did not wear their shoes during the activities. So I supervised the activities and practiced with the students. With this, students were able to improve step by step. Now the daily handwashing and toothbrushing is running smoothly, students put on shoes and they are very enthusiastic and motivated to conduct the activities. Once the bell rings, the students would rush to wash their hands."

Asia Xayabouly // Grade 4 Student, Tha-Ngon Primary School // Xaythany District, Vientiane Capital

"I feel happy and I enjoy brushing my teeth and washing my hands to be clean. I have also shared the 7 steps of handswashing with my parents and siblings at home. I wash my hands before and after eating meals as well as after using the toilet. I wash my hands for



Toothbrushing



Tooth Decay

Tooth decay is the most common chronic childhood disease worldwide. Tooth decay does not heal by itself without treatment. In lowincome countries, nearly all tooth decay remains untreated. Consequently, the decay will last a lifetime and will affect the general health and quality of life of a person.

Tooth decay hurts and deprives children of a good night's sleep, making it harder for them to pay attention in class. Ultimately, it may hinder them to engage in daily life and social development in general.

Facts Based on the 2nd Lao National Dental Health Survey in 2010 84% of children have tooth decay with an average number of 6 affected teeth per child.4

Our own research in Laos, conducted in 2011 in 44 schools in Vientiane Capital, shows that 91% of 6-7 year old students have dental carries, with an average number of 7-8 affected teeth per child.5

The effectiveness of fluoride in preventing tooth decay has been firmly established. Research has shown that school-based fluoride toothbrushing programs lead to a 40% to 50% reduction in new tooth decay.6,7



You should brush your teeth at least twice a day: once in the morning and always before going to sleep.



Guidelines // Daily Toothbrushing

Children should start their day with fresh breath and clean teeth.

All students will brush their teeth at least once a day in school as a group activity.

The teacher has to assign and train student leaders to help their classmates conduct the toothbrushing activity in an organized manner.

Children enjoy group activities. Daily toothbrushing will help make them even better at performing activities together. The role of the teacher is to supervise.

After some practice, the whole activity should not take longer than five minutes of each school day.

Students are encouraged to be champions of clean teeth and fresh breath, and to motivate their parents and siblings to make a daily habit of brushing teeth, especially before going to bed.





When using a dispenser, remove the two locks from the toothpaste dispenser and pump the plunger until the toothpaste comes out. Replace one lock before using. Press the dispenser once to apply a drop of toothpaste onto a dry toothbrush





If you are using a tube of toothpaste, squeeze a pea-sized amount onto the toothbrush. This can easily be done by applying the paste across the head of the toothbrush.



No water is needed, only saliva. Brush all teeth, especially your molars, for two minutes.



Feel with your tongue if all teeth are smooth and clean.



Spit the toothpaste out. Do not rinse your mouth because fluoride will be removed from your mouth.



Rinse your toothbrush with clean water.



Wipe your mouth with some water using clean hands.



Return your toothbrush to the toothbrush holder.

Frequently Asked Questions

Is bad breath caused by a lack of oral hygiene?

If teeth are not cleaned, bad breath will annoy the people around you. Some people have bad breath because they have bacteria in their mouths, which produce sulfur compounds. It is helpful to brush the tongue intensively because this is where these bacteria reside.

What can I do to keep my teeth healthy?

Cut down on sugary snacks and drinks. Get into the habit of eating fresh fruits as snacks, replace soft drinks with water and brush your teeth twice a day with fluoride toothpaste.

Why is it important to use fluoride toothpaste?

In many countries, the levels of tooth decay have fallen by over 50% in the last 20 years. Leading experts around the globe have agreed that this development is almost entirely due to the use of fluoride toothpaste. Fluoride helps to make teeth more resistant to decay.

Why is it important not to rinse the mouth after toothbrushing?

Rinsing will reduce the positive effect of the fluoride on your teeth. That applies for every kind of fluoride toothpaste, not only for Pollypaste. If you feel a need to rinse out the food particles, brush your teeth and rinse, then brush teeth again with fluoride toothpaste, this time without rinsing.⁸

Do I need to change toothbrush every three months?

No. Research has shown that there is no difference in cleaning effectiveness between an old and a new toothbrush in the hands of children.^{9,10}

Is toothpaste safe to swallow?

Toothpaste is not intended to be eaten and children are encouraged to spit out the toothpaste. However, it is known that children will always swallow some toothpaste, but even when they do so, it is harmless.

Experiences



Ms. Bouaphanh Keovannavong // Grade 3 Teacher, Chansavang Primary School // Sikotthabong District, Vientiane Capital

"When the program was introduced, we had some difficulties since the students were used to rinse their mouth after toothbrushing. They were afraid to swallow the toothpaste. After explaining the benefit of fluoride and why they should not rinse after brushing, students enjoy the daily tooth brushing. Every day students already ask the teacher if they can now brush their teeth. It has become a routine for them. I have observed that the teeth of students are cleaner and they do not complain about toothache compared to previous years."

Ms. Phimmasone Phommachanh // Mother of grade 4 student, Dongsavath Primary School // Sisattanak District, Vientiane Capital

"Since we have the daily toothbrushing and handwashing activity in our school, I am less child. My child likes to practice hygiene habits more often than before and I observe that she washes her hands more regularly before eating. When my child gets up in the morning, she brushes her teeth and before she goes to bed in the evening, she brushes her teeth once again."

Nowadays worm infections can be controlled through deworming with inexpensive, highly effective single-dose deworming tablets in combination with improved sanitation and hygiene.

Deworming



Common Worm Infection

Intestinal worm infections are very common among School-age children in many low- and middle-income countries. Untreated worm infections cause anemia and can lead to poor mental development. When infected, children lose energy and their ability to concentrate. As a result, they are always tired and cannot actively participate in class. Going to school becomes tiresome for infected children.

Heavily infected children will not grow as expected for their age. Malnourished children become even more malnourished.

An evaluation of the impact of school-based deworming revealed that deworming children in Kenya reduced absenteeism by 25%.11

Facts







Guidelines // Mass Deworming

The School Health Task Force on district level (MoES and MoH) orient and advise school principals on mass deworming in school.

The school principal informs parents in advance about the mass deworming activity in school.

The school principal informs parents in advance about the mass deworming activity in school.

On the day of deworming the teacher asks the students to line up and gives one deworming tablet to each student.

Upon receiving the tablet the student chews and swallows the tablet under direct observation of the teacher

This procedure will take place every 6 month or once a year, depending on the worm infection rates in your province.

The data of deworming and the names of all students dewormed will be documented in the teacher's record book and kept for further reference.



The District School Health Task Force (MoES and MoH district staff) orients and advises the school principal and teachers.



School Principal and teachers inform parents about the deworming.



Teacher asks the students to line up and gives one deworming tablet to each student.



Upon receiving the tablet, students must chew and swallow it immediately.



Teacher inspects the student's mouths.



Teacher takes record and documents the deworming of students.

Frequently Asked Questions

1. What are the symptoms of worm infection?

Worms and other parasites live in people's intestines and cause disease. Some worm types can be seen in the stool. Some worms lay their eggs outside the anus, which causes itching. An infected person may experience loss of appetite, abdominal pain and decline in energy levels. An infected person will also experience vitamin deficiencies and anemia (for hookworm cases). The body of an infected person cannot absorb food properly, which then leads to malnutrition and intestinal obstruction.

2. How to prevent the children from being infected?

Prevention of worm infection requires improvement of personal hygiene and sanitation facilities. First, use a toilet whenever possible. Second, always wash hands with soap after going to the toilet and before eating. Rubbing hands with soap will get rid of microscopic worm eggs you or the child may have picked up. Third, wash vegetables thoroughly with clean water. Fourth, keep fingernails and toenails short. Finally, always wear shoes or slippers to keep feet from direct contact with the soil.

3. Why should my child be dewormed again when he was dewormed last year?

Children will easily be re-infected. Therefore, deworming is needed every six months or once a year, depending on the infection rates in your province. It will prevent chronic infection and a heavy worm load.

4. Are deworming drugs safe?

Deworming drugs are generally safe and highly beneficial. These are safe for all children above 2 year of age12 and can also be given to non-infected children. Adverse events are uncommon and usually depend on the severity of the worm infection. When such events do happen, the effects will be minor (nausea, vomiting, fatigue, or diarrhea) and can be easily managed by allowing the child to rest for a few hours and giving water.13

5. Can we deworm without a lab result?

Yes, you can. The World Health Organization recommends the deworming of all children without prior laboratory testing if the infection rate in the area is higher than 20%. Deworming of all children is recommended in schools, as the drugs used are safe even for non-infected children. 13

6. Why do children have the highest risk of intestinal worm infection?

Most intestinal worms are so-called "soil transmitted helminths," which means that the infection is spread through soil. Soil is easily contaminated with human excreta or waste. Children play on the ground then put their fingers in their mouths and get infected. Thus, proper handwashing before eating is important.

7. Where can school principals get the deworming tablets for their school?

Every year prior to the dates for deworming in schools the deworming tablets are sent from national level (National School Health Task Force - MoES and MoH) to the Provincial Education and Sports Department. From there the tablets are distributed to the District Education and Sports Bureau. From there the tablets will be distributed to the schools or school principals can pick up the tablets at the District Education and Sports Bureau.14

Experiences



Ms. Phouvieng // Mother of grade 4 student, Tha Ngon Primary School // Xaythany District, Vientiane

"I am happy that my child is dewormed in school regularly. My son used to experience diarrhea and also itchiness at night. A few days after taking the deworming tablet these symptoms disappeared. My children also did not experience any side effects at all after taking the deworming tablet in school."

Clean toilets and washing facilities are part of a healthy school environment and their proper use prevents the spread of germs and diseases. Students are more likely to use the school toilet when they are clean and well-maintained.

Operation & Maintenance



Clean Facilities. Healthy Habits

The school community needs to have a system formanaging activities for clean and usable toilets andwashing facilities, healthy habits, and a healthy school environment, e.g. in form of cleaning and maintenance plans. In doing so, students also learn to take care of public facilities and the value of shared responsibility.

Three simple steps will help you deal with the challenge of dirty toilets and keep your school a healthy place.

1. Use it

It all starts with the right use of the toilets. Every student and teacher must know how to use the toilets correctly and regularly.

2. Clean it

Daily cleaning of toilets and facilities has to be part of every day school routine.

3. Maintain it

Maintenance will increase the lifetime of the toilets, keep them functional and prevent them from breakdown and expensive repairs.





The benefits of a clean toilet are:

Facts

- Increased toilet use
- Reduction of open defacation
- Fewer illness for children
- Fewer children missing school days
- A healthy and enabling learning environment

Guidelines // Three Steps to Keep Toilets and Washing Facilities Clean

Use it

Each person in the school community is able to use the toilet in the intended way and knows how to flush.

The school provides all necessary materials to use the toilet (water, pail, dipper) and wash hands afterwards (water and soap). The materials should be child friendly, so that children can easily use them.

Teachers remind the students to keep the toilet clean and to wash their hands with soap afterwards when they use the toilet.

Did you know that Facts the materials to properly clean and maintain a toilet are only about 3 USD per toilet per month?

2 Clean it

All toilets, urinals and washing facilities must be cleaned every day.

Create a simple schedule, which clarifies who is responsible for what and when it is time for cleaning and explains how the cleaning tasks can be done.

Teachers, students and everybody in the school have to join forces to conduct the daily cleaning activities.

Organize the daily cleaning activities:

- → Every class contributes to the cleanliness of the toilets and washing facilities.
- → Make cleaning a group activity.
- → Assign different students to different tasks for every day of the week according to the cleaning and maintenance plan.
- Involve students and the community for example women's and youth organizations, in fun activities like designing posters and cleaning and maintenance planners.





Make use of simple tools such as:

Poster: You can use drawing or pictures that remind students about hygiene habits, like washing hands with soap after toilet use.

Cleaning Schedule: A schedule is a great tool to plan activities and make it clear who is responsible for what. Build a schedule out of cardboard and pin the names of responsible persons on their task.

Cleaning Materials: Not much is needed to keep a toilet a clean and healthy place. Cleaning instruments with a stick or a spray will help to increase the distance from the toilet surfaces.

Maintain it

Simple tasks like refilling water and soap or check-ups can easily be performed by students.

Daily check-ups ensure cleaning quality and raises the awareness of the school community to have clean toilets and washing facilities.

Small repairs should be done immediately.

For heavy repairs and problems, which cannot be solved by school resources, the school needs to cooperate with officials and professionals.

Proper documentation ensures that responsibilities within the school community are defined and carried out, and that resources for cleaning and maintenance are available.

Conduct cleaning and maintenance of toilets and washing facilities together with other daily school cleaning activities

Print Materials

The following materials help to keep your school a healthy place. You can use them as well as examples for your schools own scleaning and maintenance schedules and hygiene and sanitation posters. Please find the facsimiles in the annex.

Cleaning Schedule for Each Classroom

Teacher:			Class		
	Sunday	Monday	Tuesday	Wednesday	Thursday
Use it "I assist to check if the toilet is open (unlocked)."	Name:				
Clean it "I help to clean our CR, that it is nice to use."					
Maintain it "I help to ensure that our CR stays usable."					

Contact List		
	Name	Contact Number / Address
Village Head	<u>#</u>	
Village Education Development Committee (VEDC)		
Village Health Volunteer		
Chair of Parents Association		
District Supervisor		
Health Staff responsible for School		
Carpenter		
Plumber		
Hardware Store		
Cleaning Material Supply Store		
Septic Tank Desludging Service		

Three Steps to Keep a Toilet Clean and Functioning

Use it Clean it Toilet Bowl/Pan: Refill when empty: Sit down properly. Distribute liquid detergent or washing Water and soap. powder across the toilet bowl/pan on the inside and outside. Scrub the inside of the bowl/pan with toilet brush. Check and Reports: Clean yourself. Wipe the outside of the bowl/pan Leaking pipes or faucets. with wet cleaning cloth. Broken doors. Missing door lock, tabo, bucket, Solid Waste: Dispose cleansing material in trashbin. Cleaning materials. Collect solid waste. Dispose it. Flush sufficiently to remove Sweep the floor with broom & dustpan urine/feces with a bigger tabo Distribute the liquid detergent on the floor or bucket. Scrub the floor with wet floor brush. Washing facility and sink: Check to ensure that there are Distribute the liquid detergent on the floor no remains in the toilet. Wipe the sink with wet cleaning cloth. 111111111111111 Wash your hands with soap. Wash your hands with soap.

Clarification of Budget and Responsibilities						
Activities	Product	Price	Cost per School Year	Responsible Level (Classroom - Schoo Barangay)		
	Soap for Hand washing	/month				
	Water	/month				
Operation	Tabo / Dipper	/month				
	Rubbish Bin	/month				
	Big Bucket	/month				
	Liquid detergent or Washing powder	/month				
Cleaning	Floor brush with stick	/month				
	Toilet brush	/month				
	Tools (spanners, screw driver, pincers, etc.)	/month				
	Water Pipe Spare Parts	/month				
Repair and Maintenance	Faucet	/month				
	Bowls, Pans, Urinals	/month				
	Teflon / tape	/month				
	Door locks	/month				

The table above lists the products needed for operation,					
cleaning and maintenance of toilets and washing facilities.					
For long-term planning and budgeting, it is helpful to have					
an overview on prices per item or month and the costs per $% \left(1\right) =\left(1\right) \left(1\right) \left($					
school year. You can also indicate who is responsible for					
buying the materials. Proper budgeting should be done to					
avoid that teachers pay out of their own pocket.					

Type of Problem	Date of Repair	
	_	



This picture shows a class which is organized in 5 groups to keep school toilets and washing facilities clean and well maintained. Once a week each of the 5 gorups has to clean and check the toilet and washing facilities. The teacher updates the schedule on a weekly basis. Once a group of students accomplished their tasks they hand the 'name card' over to the classroom or hygiene teacher. The teacher checks if the tasks were accomplished correctly.

In the planner 'Three Steps to Keep a Toilet Clean and Functioning' it is clearly defined what the tasks of students are to clean and maintain toilets.'

Frequently Asked Questions

1. What can we do immediately to promote daily cleaning activities?

First of all, clarify roles and responsibilities within the school (principals, students, teachers, staff) and the community (PTA, barangay officials). Attractive toilets are more likely to get cleaned. Child-friendly toilets with proper lighting, privacy, appropriate dimensions and even mirrors will raise the attractiveness.

2. What can we do, if the toilet is clogged?

You can clear most clogs yourself with these simple steps

- → A plunger is the most simple tool to unclog toilets
- Dishwashing soap and hot water: Add a little dishwashing soap and pour a bucket of hot-water (not boiling) from about waist level into the bowl.

If this does not work, it is possible that the septic tank is full and should be referred to professional.

3. How much does it cost to clean and maintain a toilet?

A properly maintained toilet will cost 3 USD a month to clean and maintain purchasing cleaning materials in bigger packages is cheaper and makes monitoring the supply easier.

4. How to involve the community:

It is important to keep parents and the community informed about the condition of the toilets and washing facilities in the school. The community can contribute voluntary labour and do small repair works and improvements (e.g. painting) of facilities. The community can also do fundraising to help financing operation and maintenance of sanitation facilities.

5. How can we reduce our water bill?

It's easy to save water and money. Use a pail and a water dipper for flushing the toilets, instead of a cistern flush system. You can also collect rainwater and reuse wastewater from handwashing to water plants, to wet dusty areas at the school ground or to flush the toilets.

For group handwashing facilities punched pipes with 1.5 mm holes work well and consume less water. Water should be turned off during lathering hands and brushing teeth. Children should be regularly reminded to save resources.

Experiences



Ms. Khaiphet Inthavong // School Principal, Arkard Primary School // Sikhottabong District,

"My role is to ensure orderliness and cleanliness in my school, especially the school grounds, classrooms and toilets. I assign the different tasks, like cleaning of school grounds and toilets, to my teachers. After an orientation the teacher takes on his or her role and also involves students in the cleaning tasks while supervising and guiding them. This is how we make sure that our toilets are clean and there is no bad smell. I am proud that my school provides clean toilets and a healthy learning environment that help everyone to stay healthy."

Mr. Thipmingmeuang Keovilay // Grade 4 student, Primary school // Sikhottabong District, Vientiane Capital

"My classmates and I assist our teacher in cleaning our classroom, toilets, and school grounds according to the daily tasks assigned by our teacher. I am very glad the toilets are clean and don't have a nasty smell. I don't like to use a dirty toilet and dirty toilets will spread diseases. Everyone in our school can use a clean toilet and we also like it that visitors always comment on our nice and clean toilets."



Monitoring



Monitoring Headline

Assessing Implementation

Regular monitoring and evaluation shows the status of implementation and whether handwashing and toothbrushing have become a routine in daily school life. It also helps to identify challenges and needs for additional support in managing the program.

Providing Feedback to Schools

The results from the monitoring should be discussed among the District School Health Task Force, the school principal and the classroom teacher. This will provide valuable feedback to the school and help to take immediate action to improve the school environment and program implementation.

Improving Program Management

After the monitoring, the District School Health Task Force encourages the school principal and the involved community members to jointly develop an Action Plan that addresses the findings of the monitoring activity. Responsibilities should clearly be assigned to the school, parents or the community.

Areas Monitoring:

- **Supplies**
- Introduction and Orientation
- **Deworming**
- Water Access
- **Group Facility**
- **Group Activities**
- Cleaning and Maintenance



School principals, teachers, community and ministry representatives can also use the monitoring form on their own throughout the school year.

Guidelines // Monitoring

Annual monitoring is carried out in every school in one randomly selected class.

The members of the monitoring team are 1 person from the District School Health Task Force and 2 representatives from the School Health Task Force on school level. consisting of 1 representative of the Village Education Development Committee (VEDC) and 1 Village Health Volunteers, who each represent a key stakeholder.

An advance copy of the School Monitoring Form is distributed to all members of the monitoring team. On the day of the actual school visit, the monitoring team will use this form as a guide in the monitoring process.

The Provincial or District School Health Task Force, especially the representatives of the education sector, are responsible to encode the collected data from the monitoring forms into a monitoring system.



Prepare for the visit and bring the needed materials.



Check the availability of Fit for School program materials (soap, toothpaste, toothbrushes).



Check deworming records and coverage for the entire school (ask the school principal for the records).



Randomly select the classroom and section to be monitored.



Compare answers and agree on a common score.



Check the class schedule for the group activity.



Discuss results with the school principal and create an Action Plan.



Observe and assess the group activities.



Encode the data.

Frequently Asked Questions

1. How do we ensure the involvement of parents and the community/village?

The local organization of parents and teachers and the community leaders (Village Education Development Committee, Village Authority) should be informed of the monitoring activity well in advance. Also, it is very important that the District School Health Task Force provides an excellent orientation about the monitoring process, they may use this manual and the monitoring tool for that purpose. Provinces may also consider translating the monitoring form to local dialects.

2. Why does the monitoring team consist of three to four people who all have to fill out a form?

Having each team member fill out an individual monitoring form shows the involvement of the key stakeholders and establishes accountability and transparency. Filling out the forms is only the first step of the entire monitoring process. The completed forms will be the basis for discussion of results among the stakeholders and their respective constituents, which is one of the most important aspects in monitoring.

3. How do we assure that the monitoring results are honest and correct?

First, it is the responsibility of the monitoring team to report honest and correct results. Only then can the school properly assess the implementation and improve where necessary. Second, the monitoring results are transparent and visible to education ministry staff and officials at all levels. They could always be verified in a follow-up visit or through peer-to-peer assessments.

4. Why do we randomly select one classroom?

It is impractical for the team to monitor all classrooms, so it is necessary to select one. Random selection is important because all classrooms should be implementing the Fit for School Program as well as possible. The school should not focus on showcase classrooms.

5. Why should the classroom teacher and school principal sign the forms?

Signing the completed monitoring forms emphasizes the significance of their roles in the implementation of the program and their participation in discussing findings, generating feedback, identifying challenges and finding solutions to improve the implementation of the program.

6. How should the Action Plan be developed?

The Action Plan should be based on the findings of the monitoring activity. The school principal and the members of the monitoring team (1 representative form the District School Health Task Force, 1 representative from the Village Education Development Committee, 1 Village Health Volunteer or 1 representative from the Health Center) should develop the Action Plan jointly. These stakeholders could decide to copy good practices observed during the monitoring school-wide or to address specific issues for improvement.

7. Why should all implementing schools be monitored?

There are schools without proper orientation and/or program materials yet, but they may have taken an initiative to start implementing the Fit for School program on their own. These efforts and best practices should be identified. Monitoring will also orient them about the possibilities and benefits they might have with additional support from the different stakeholders. This might increase their technical knowledge and motivate them at the same time.

Experiences



Ms. Chankham Inthala // Village Health Volunteer // Koumban Sithan Neua

"Monitoring of the Fit for School Program is one of my tasks as a Village Health Volunteer. I see the importance of this task, particularly for the health of school children. All government authorities should pay attention to health of children. Monitoring will help schools and teachers to improve the program implementation."

Ms. Somphet Sonsackda // Pedagogical Advisor, District Education and Sports Bureau // Xaithany

"Monitoring helps teachers and other stakeholders to implement the program properly. Frequent monitoring helps them to understand the program and encourages them to be more proactive. In addition, it is good for the District School Health Task Force to be involved in activities on school level and have the oppor-tunity to coordinate with teachers and exchange experiences."

The Fit For School approach is based on multi-stalkholder involvement and clearly identifies the different roles of these stakeholders to ensure a supportive learning environment and the smooth implementation of daily handwashing with soap and daily fluoride toothbrushing. Students are not only the beneficiaries but also the prime actors in making the school a healthy place.

Roles & Responsibilities







The Role of the Students

- Remind the teacher when it is time for handwashing and toothbrushing, and lead the formation of student lines during these activities.
- Maintain cleanliness of hygiene and sanitation facilities and the school grounds
- Assist the teacher in implementation and monitoring.
- Report difficulties to the teacher.
- Remind parents to buy and use soap and toothpaste at home.
- Remind siblings and other family members to wash their hands at critical moments (after using the toilet, before eating, and before preparing food) and remind them to brush their teeth, especially before going to bed.

The Role of the Teachers

- Orient the children on the activities.
- Facilitate and supervise the daily group activities
- Organize and supervise the regular cleaning of hygiene and sanitation facilities and school grounds.
- Facilitate participatory learning in addition to conducting lectures or lessons.
- Empower children to take leadership roles and responsibilities.
- Check the availability of toothpaste, soap, and water for the hygiene activities.
- Administer the deworming medicine after being oriented by school principal.





The Role of the School Principal

- Call for a meeting with parents, Village Education Development Committee (VEDC) representatives and teachers to orient and properly inform them about Fit for School.
- Seek close partnership with parents and the community in constructing the necessary washing facilities and in preparing toothbrush holders.
- Include group handwashing and toothbrushing activities in the daily class programs.
- Instruct all teachers in the school to implement the group activities on a daily basis and ensure strict compliance with the Fit for School guidelines.
- Link with the community, local authorities and other stakeholders on local level to provide clean water and a supportive environment in school.
- Ensure availability and proper distribution of supplies (soap, toothpaste, toothbrushes) within your school.
- Ensure the cleanliness of school grounds and that the water and sanitation facilities are functioning and well-maintained.
- Ensure program monitoring at least once a year and communicate the results with the teachers and the community.
- Recognize achievements of teachers in keeping a healthy school environment and motivate them to continue proper program implementation

The Role of Parents, Community and the Village Education Development Committee (VEDC)

- Support the construction of group washing facilities and provision of toothbrush holders.
- Advocate for access to water and sanitation in the school.
- Mobilize religious and community organizations (e.g. temples, school alumni networks, youth and women's unions) in supporting program implementation.
- Participate in annual monitoring (one representative of the VEDC).
- Participate in the parent meetings organized by the school principal.
- Be a good role model by washing your hands with soap at critical moments (after using the toilet, before eating, and before preparing food), brushing your teeth, and reminding your children to brush their teeth in the evening.
- Provide access to soap, toothbrushes and toothpaste at home, so that children can practice healthy habits and grow up healthy.





The Role of the District Health Center and Village Health Volunteer

- Provide teachers and parents with needed information and address their questions, concerns and misconceptions about deworming.
- Request the presence of the Village Health Volunteer during mass deworming day to support the teachers and help to record the deworming
- Participate in the annual monitoring as a member of the Monitoring Team.

The Role of the Provincial and District School Health Task Force (PSHTF and DSHTF)

- Conduct a basic orientation on Fit for School for school heads, teachers and parents, and establish linkage with the community.
- Oversee the overall implementation of the program and ensure monitoring of the program at least once a year in all schools.
- Ensure the availability of soap, toothpaste and toothbrushes
- Include compliance with school health programs in the performance evaluation system for teachers and principals.





The Role of the National School Health Task Force and the National School Health Committee

- Determine TOR of the School Health community
- Set school health policy direction.
- Provide implementation guidelines and specific implementation manuals for provincial, district and school level to facilitate the implementation of the National School Health Policy and School Health Programs.
- Appoint, capacitate and improve School Health Task Force at each level.
- Providing budget request plans and mobilize national and international financial and technical resources for the financing of school health program implementation.
- Ensure monitoring and evaluation of school health programs and distribute and use the results for program management on all levels.
- Promote intersectoral collaboration on all levels.





The Role of Local Chief Executives (Governors, Mayors, Village Leaders)

- Support institutionalization of Fit for School into local Socio-Economic Development Plans (SEDP).
- Support activities like Global Handwashing Day celebration.
- Take the lead in programs for behavior change and healthy habits.
- Encourage community involvement.
- Strengthen the schools and communities by creating incentives and appreciation mechanisms for outstanding performance.

The Role of NGOs, Development Agencies and other International Organizations (WHO, World Bank, Etc.)

- Promote and advocate healthy habits and healthy learning environments on a local, national and global level.
- Support communities and schools in their efforts to improve water and sanitation facilities.
- Provide technical assistance to government agencies and support government agencies' ownership of the program.
- Promote and strengthen global partnerships, alignment and coordination among stakeholders and prevent program duplication and overlapping.





The Role of Private Partners

- Offer affordable, mass market quality hygiene products or medicines (e.g. soap, toothpaste, deworming drugs).
- Provide financial support for pilot projects and support the scale-up process.
- Use mass media for health campaigns.
- Engage in global partnership for development.
- Assist the scientific community in research and development efforts.
- Engage in community partnerships.

The Role of Academe

- Conduct research to strengthen the evidence of the effectiveness of the interventions.
- Support government agencies with research.
- Use evidence from research to promote the benefits of simple and effective health habits and other affordable preventive health interventions.
- Disseminate information on scientific developments.
- Transfer technology and know-how to governments, private companies, and NGOs.
- Work closely with the various development agencies and departments in government to promote the general health, education and welfare of children.
- Take an active role in the advocacy process.



Frequently Asked Questions

1. Why should teachers be involved in training children to develop healthy habits?

Poor health causes poor school performance. By investing time to develop healthy habits among students, teachers give a better chance for poor performing students to catch up with their peers. Healthy children perform better and attend school more regularly. In addition good health and healthy habits builds selfesteem for character development and provides energy for participating in sports and social activities.

2. Can teachers instruct children in toothbrushing even if they are not dentists?

Yes. You do not need to be a dentist to teach proper toothbrushing. Parents around the globe familiarize children in toothbrushing without being dentists themselves. Toothbrushing is a simple life skill and children need to practice it daily in order to master it. Teachers are well prepared to teach life skills.

3. Are teachers allowed to perform deworming?

The World Health Organization recommends that school-based deworming should be done by well-oriented teachers. Teachers around the globe have been doing this successfully. Teachers are allowed to perform deworming. Teachers should be oriented on the deworming procedure. Village authority, parents and health center staff or a Village Health Volunteer should be present in the school during the deworming day. It is the task of the school principal to involve these stakeholders.

4. Can children be leaders in practicing personal hygiene and keeping the school environment clean?

Children are perfect leaders and have proven to be able to facilitate formation of their classmates' lines on many other occasions. Practicing personal hygiene as a group activity offers a good learning experience for each child, so that they can practice these habits at home and train parents and siblings. It is important that they do this EVERY day. Only a daily routine will lead to sustainable behavior change.

5. What is the role of health personnel if teachers are deworming and doing handwashing and toothbrushing with the children?

Health personnel, like health center staff or Village Health Volunteers deliver preventive and curative health services while functioning as a bridge between the school and the health system. They are experts who can give important advice or act on issues related to the health of students and the implementation of health-related programs within the school.

6. How can local authorities, religious bodies and other organizations participate in the Fit for School program?

Community organizations (alumni associations, local foundations, youth or women's union etc.) and religious organizations can strengthen the program on the local level. They participate by supporting the communities in obtaining access to water and improving washing facilities. In some areas, such organizations provide the funds for improving school grounds and supporting school health services.

Experiences



Taboly Keoninuan // Grade 5 students, Thaphalanxay Primary School // Sisattanak District, Vientiane Capital

"When the school bell rings, we run to pick up our toothbrushes and line up in front of our classroom. I distribute the toothbrushes and put a drop of toothpaste from the dispenser on the

Mr. Phousavanh Kaiyasith // School Principal, Nonsa-Ath Primary School // Saythani District, Vientiane Capital

"In our school, the classroom teacher is responsible for the daily activities (handwashing and toothbrushing). In addition I appointed a specific teacher to take the overall responsibility for the daily practice of these activities. This teacher was trained and was tasked to disseminate information about implementation to all other teachers in the school. The classroom teacher is responsible for proper implementation of the daily activities in his or her respective class. In the beginning the activities are led by the teacher, but later on the teacher only supervises students as they conduct the activities by themselves."

Checklist for Principal // Phase I: Preparation

		CONTRACTOR OF
2	Tasks	
	Primary assessment of water, sanitation and hygiene situation.	Ø
١	Read the manual.	
	Watch the videos provided with the manual.	
	Have the Fit for School "Field Guide: Hardware for Group Handwashing in Schools" at hand.	
	Organize a meeting with the Village Education Development Committee (VEDC), parents and teachers .	
	Inform the village authority of the meeting and encourage their participation.	
	Include health center staff or the Village Health Volunteer in the meeting.	
1	Discuss the program with the Village Education Development Committee, parents and village authority.	
	Show the manual, field guide and videos to the parents and community members	
	Discuss how the parents and community can contribute to the construction of the group washing facility and the toothbrush holder. Encourage strong collaboration between school and community.	
*	Supervise the construction of the group washing facility together with parent-volunteers or village officials and make sure they consider issues functionality addressed in the "Field Guide: Hardware for Group Handwashing in Schools"	
į	Instruct and guide teachers to implement handwashing and toothbrushing as a daily group activity with all students.	
	Assign a focal person for school health in your school (e.g. hygiene teacher) who can support to guide others with the implementation of activities.	
K		

Checklist for Teachers // Phase II: Implementation

۲	Daily Handwashing with Soap	
٦	Have at least two soap dishes ready or make soap available at the facility in another way (e.g. put them in nylon nets/stockings and tie them to the facility).	Ø
k	Keep the soap dish or liquid soap bottle in a dry place in the health corner	
Ų	Assign and train a student leader to help his/ her classmates conduct the handwashing activity in an organized manner	
	Perform the activity daily and include it in the daily class schedule	
	Make sure students follow the 7 steps of handwashing and try their hands by shaking them in the air (do NOT use a towel)	
A	Close the water or train a student to close the water in between while students lather their hands with soap (7 steps). Water is only needed to make the hands wet at the beginning and to rinse them at the end. Close water in between to safe water!	
	Daily Toothbrushing with Fluoride Toothpaste	
	Put the holder in an area where children can easily reach for their toothbrushes	Ø
-	Request toothbrushes, toothpaste bottles and soap from the principal	
600	Label the toothbrushes individually according to student name or number using a permanent marker, or have the children personalize their toothbrushes for easy identification	
	Remove ONLY one lock/stopper when using a dispenser. This will ensure that the correct amount of toothpaste will be distributed to each child.	
	Assign and train a student leader to help his/her classmates conduct the toothbrushing activity in an organized manner	
3	Perform the activity daily and include it in the daily class schedule	
A	Make sure students brush their teeth properly and for at least 2 minutes	
M	Close the water in between while students brush their teeth for 2 minutes. Don't let the water run all the time!	
k.	Time the whole activity; after a week of training, the combined group handwashing and toothbrushing activity should take less than seven minutes	
	Cleaning and maintenance of group washing facility	
N	Encourage students to keep the group facilities and toilets clean	<u>U</u>
	Check drainage system and remove blockages if the drainage is not working	
1	Others	
/	Encourage students to maintain general hygiene: e.g. wash hands after using the toilet and before eating, wearing shoes, regularly cut fingernails, wear a clean uniform, wash their hair	Ø
	Include skills-based health education in your teaching methods	
		ASSESSED IN

Annexes

Cleaning Schedule for Each Classrom

Teacher: Class:

	Sunday	Monday	Tuesday	Wednesday	Thursday
Use it "I assist to check if the toilet is open (unlocked)."	Name:				
Clean it "I help to clean our CR, that it is nice to use."					
Maintain it "I help to ensure that our CR stays usable."					

Contact List

	Name	Contact Number / Address
Village Head	Ø	
Village Education Development Committee (VEDC)		
Village Health Volunteer		
Chair of Parents Association		
District Supervisor		
Health Staff responsible for School		
Carpenter		
Plumber		
Hardware Store		
Cleaning Material Supply Store		
Septic Tank Desludging Service		

Three Steps to Keep a Toilet Clean and Functioning

Use it

Sit down properly.

Clean yourself.

Dispose cleansing material in trashbin.

Flush sufficiently to remove urine/feces with a bigger tabo or bucket.

Check to ensure that there are no remains in the toilet.

→ Wash your hands with soap.

Clean it

Toilet Bowl/Pan:

powder across the toilet bowl/pan on the Distribute Liquid detergent or washing inside and outside.

Scrub the inside of the bowl/pan with toilet brush. Wipe the outside of the bowl/pan with wet cleaning cloth

Solid Waste:

- Collect solid waste.
- Dispose it.

Floor:

- Sweep the floor with broom & dustpan.
- Distribute the liquid detergent on the floor.
 - Scrub the floor with wet floor brush.

Washing facility and sink:

- Distribute the liquid detergent on the floor Wipe the sink with wet cleaning cloth.
- → Wash your hands with soap.

3 Maintain it

Refill when empty:

Water and soap.

Check and Reports:

- Leaking pipes or faucets.
 - Broken doors.
- Missing door lock, tabo, bucket, → Cleaning materials.



Clarification of Budget and Responsibilites

Activities	Product	Price	Cost per School Year	Responsible Level (Classroom – School Barangay)
	Soap for Hand washing	/month		
	Water	/month		
Operation	Tabo / Dipper	/month		
	Rubbish bin	/month		
	Big bucket	/month		
	Liquid detergent or Washing powder	/month		
Cleaning	Floor brush with stick	/month		
	Toilet brush	/month		
	Tools (spanners, screw driver, pincers, etc.)	/month		
	Water pipe spare parts	/month		
Repair and	Faucet	/month		
Maintenance	Bowls, Pans, Urinals	/month		
	Teflon / tape	/month		
	Door locks	/month		
		In Total:		

History of Major Repairs

Type of Problem	Date of Repair	Responsible Persons	Cost
Ø			



References

- 1. 1 Education Management Information System -EMIS (2011). Department of Planning. Ministry of Education and Sports
- 2. 2 Curtis V and Cairncross S (2003). Effect of washing Hands with Soap on Diarrhoea in the Community: A Systematic Review. Lancet Infect Dis 3 pp 275-281.
- 3. 3 WHO and FDI (International Association for Dental Research) (2006): Call to action to promote dental health by using fluoride: Global Consultation on Oral Health through Fluorides: http://www.who.int/oral_health/events/oral%20 healthc.pdf (accessed July 2014)
- 4. 4 Second Lao National Dental Health Survey (2010). Ministry of Public Health, Lao PDR
- 5. 5 MoES, MoH and GIZ (2012): Health Outcome Study Lao PDR. Results of the Baseline Study – Report. Page 16
- 6. 6 Adyatmaka A et. al. School-Based Primary Preventive Programme for Children: Affordable Toothpaste as a Component in Primary Oral Health Care. Experiences from a Field Trial in Kalimantan Barat, Indonesia. http://www. who collab.od.mah.se/ searo/indonesia/afford/ whoafford.html>
- 7. 7 Curnow M M et al (2002). A Randomised Controlled Trial of the Efficacy of Supervised Toothbrushing in High-Caries-Risk Children. Caries Res vol 36 issue 4 pp 294-300.

- 8. 8 Chestnutt IG, Schafer F, Jacobson AP, Stephen KW. 1998. The influence of toothbrushing frequency and postbrushing rinsing on caries experience in a caries clinical trial. Community Dent Oral Epidemiol. 26(6): 406-411.
- 9 Palenstein Helderman WH van, Kyaing MM, Aung MT et al. Plaque Removal by Young Children Using Old and New Toothbrushes. J Dent Res 2006 85: 1138-1142.
- 10. 10 American Dental Association (ADA): Statement on Toothbrush Care: Cleaning, Storage and Replacement. Available at: http:// www.ada. org/1887.aspx (accessed August 2013)
- 11. 11 Miguel E and Kremer M (2004). Worms: Identifying Impacts on Education and Health in the Presence of Treatment Externalities. Econometrica Vol 72 No 1 pp 159-217.
- 12. Ministry of Health Lao PDR (2008). Policy and Strategy of Parasite Prevention and Control.
- 13. 13 WHO (2011). Helminth Control in School Age Children: A Guide for Managers of Control Programmes. 2nd ed p 32.
- 14. 14 MoES and MoH (updated 2014). Guidelines for School Deworming Implementation.

Imprint

© 2014 GIZ Fit for School Deutsche Gesellschaftfür International Zusammenarbeit (GIZ) GmbH

Fit for School

7/F PDCP Bank Centre cor. V.A. Rufino and L.P. Leviste Streets Salcedo Village, Makati City 1227 Philippines

,,,,,,,, ai, d

www.giz.de

© 2014 1st edition: VerlagshausMonsenstein und Vannerdat OHG, Münster, Germany

www.mv-verlag.de

Design by malzwei, Berlin, Germany

Layout: Piata Mendova, pankham jampa Co., LTD and insmai Creative Commnunication

Printed by insmai Creative Commnunication

GIZ implements programs and projects for sustainable development on behalf of the Federal Ministry for Economic Cooperation and Development (BMZ). The Regional Fit for School Program is realized in the Philippines, Indonesia, Cambodia and Lao PDR in partnership with the Southeast Asian Ministers of Education Organization Regional Centre for Educational Innovation and Technology (SEAMEO INNOTECH). Co-funded by the Australian and German governments, it is also implemented in the Autonomous Region in Muslim Mindanao in the Philippines.

Acknowledgements:

GIZ Fit for School is grateful to the Ministry of Education and Sports (MoES), especially the MoES School Health Task Force of the Department of Pre-school and Primary Education, the Ministry of Health (MoH), the Philippine NGO Fit for School Inc. and to the many people who contributed both content and their knowledge and insights to the final publication:

Nicole Siegmund, Juan Alfonso Leonardia, Dr. Bella Monse, Dr. Ramoni Bacani, Bouachanh Chansom (Lao PDR), Rigil Munajat (Indonesia), Ayphalla Te (Cambodia), Dr. Mithong Souvanhvisay, Dr. Phat Kingsaneth, Ms. Soutsaychai Douangsavanh, Ms. Phetsamone Sibounheuang, and all the teachers, students and parents of the schools visited.

Photos:

Ivan Sarenas, Dorothea Tuch, Dr. Bella Monse, Nicole Siegmund

For more Information on GIZ Fit for School and group washing facilities, please contact Dr. Bella Monse (bella.monse@giz.de)

October 2014

Disclaimer:

The publication is distributed free of charge and commercial reproduction is prohibited. GIZ encourages the distribution in the school health community; photocopying of the report and part of it for personal and educational purposes is allowed with recognition of the source. Requests for reprint and other inquiries should be directed to GIZ Fit for School, Manila, Philippines

ISBN 978-3-95645-246-8









www.fitforschool.international