





School Community Manual

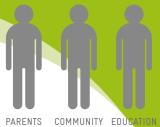
Lao PDR // Implementing Hygiene Activities in Early Childhood Education







MAKING CHILDREN FIT FOR SCHOOL TRANSFORMING SCHOOLS INTO HEALTHY PLACES



OFFICE

INTERVENTIONS

STAKEHOLDERS

MONITORING

SCHOOL MANAGEMENT



ROUTINE



PLANNING & BUDGETING



HANDWASHING





BRINGING DRINKING WATER TO SCHOOL



TOOTHBRUSHING



MENSTRUAL HYGIENE MANAGEMENT MHM



DEWORMING



CLEANING & MAINTENANCE



SUPPLIES

WATER FACILITIES



GROUP WASHING **FACILITIES**



TOILETS



STAKEHOLDER INVOLVEMENT

INFRASTRUCTURE & MATERIALS

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Foreword

This manual for schools and communities was developed by the Department of Early Childhood Education (DECE) of the Ministry of Education and Sports (MoES) in collaboration with the Ministry of Health (MoH) and with technical support from Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH and SEAMEO INNOTECH.

At the end of 2011, Lao PDR began implementing the Fit for School programme in 4 districts within Vientiane Capital, covering 22 model schools (public primary schools) and benefitting 4,800 students. After the model phase, the programme has been expanded to various other primary schools, both public and private, and started expansion to kindergarten schools at the end of 2017. As of 2019, the programme has reached 500 kindergarten schools.

Fit for School aims to improve the health and education of school children, in both public and private schools, from early childhood education up to secondary school level by making schools and communities healthy places and by introducing hygienic and healthy habits through daily group practice. Therefore, the programme supports the implementation of the National School Health Policy and is also in line with the "Schools of Quality" framework, which promotes safe and healthy learning environments in all schools through strong school and community partnerships. To successfully expand the programme to early childhood education on the national level, DECE has integrated the programme into the Early Childhood Education Sub-Sector Plan to ensure the sustainable implementation of activities.

This manual and video were developed based on the lessons learnt from programme implementation in primary and kindergarten schools. The contents have been adjusted to fit the local context for early childhood education in different areas and can be used as a reference for schools and communities when implementing Fit for School activities focusing on preventing communicable diseases among school-age children such as: diseases related to the lack of hygiene, dental caries and intestinal parasites. Schools that implement these activities will have a healthy school environment, reduce student absences and promote healthy child development.

DECE greatly appreciates all comments and feedback from readers and implementers of this manual, which will be used to make further improvements in the future.

The Department of Early Childhood 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 Ministry of Education

Dr. Phankham VIPHAVANH

Vientiane Capital, date: .2.1 MAY 2010

Minister of Ministry of Health

Dr. Ponmek DALALOY

Decree 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:

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

Infections, tooth decay, intestinal worms, and malnutrition – these are common diseases of young children in many parts of Lao PDR and beyond. These avoidable ailments affect not only their physical and mental development, but also their wellbeing and ability to learn and thrive with other children in pre-school settings. Children of pre-school age are particularly vulnerable since they are exposed to a variety of external influences - but they are also naturally curious and eager to learn! Healthy children have higher chances to benefit from education and better education increases socio-economic status and long-term health gains.

The sustainable development goals highlight the importance of providing access to quality early childhood education with SDG 4.2.1 focused on "the proportion of children under 5 who are developmentally on track in health, learning and psychosocial well-being". Accordingly, pre-schools have become more important across the countries of Southeast Asia and they are ideal places to enhance health and general development of children by introducing healthy learning environments, which includes access to water, sanitation and hygiene. Pre-school teachers can actively take part by organizing and supervising daily group hygiene activities, like handwashing with soap and toothbrushing with little additional effort. School heads are important drivers for sustained improvement of the pre-school environment and in mobilizing the support from the community. A close interplay between the pre-school, parents and the community is essential in this process.

To strengthen and promote the health and wellbeing of children in Lao PDR, as well as to establish the role of pre-schools, educational personnel and the community in this process, GIZ and SEAMEO INNOTECH have supported the Ministry of Education and Sports to adapt the successful School Community Manual of the Fit for School programme to the pre-school context as part of early childhood education. It considers that children attending pre-schools are at a different developmental stage, placing specific requirements on the teachers.

We invite you to study this manual and apply the outlined steps to your school setting. The manual provides practical support in implementing school health activities based on the Fit for School Approach and explains how pre-schools can be transformed into enabling learning environments to improve the education and health of our children.

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

K. - Q. Kini Jule Moule

Dr. Ramon C. Bacani. Director SEAMEO INNOTECH Dr. Bella Monse. Principal Advisor Regional Fit for School Programme GIZ



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 programme and its interventions must be based on best possible evidence, should be cost-effective 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 programme effects.

Aligned with these principles, the interventions comprise hand washing with soap and toothbrushing with fluoride toothpaste as daily group activities; complemented by bi-annual 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 programme 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 for schools in Laos. The Fit for School Programme 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' on www.fitforschool.international: https://bit.ly/3l9nIHD

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

The results of a recent Facts 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 is safe and its height is suitable for the kids no matter whether concrete or light materials are used.

Ensure regular cleaning of the facility.

Use the experiences that others have made. Watch the video on the DVD or on YouTube GIZ Fit for School: https://bit.ly/2HGALme

Check the Fit for School 'Field Guide: Hardware for Group Handwashing in Schools° to learn more about technical details on www.fitforschool.international: https://bit.ly/3l9nIHD



Build the facility suitable for kindergarten kids and close to the classroom.



The facility should accommodate at least 10 to 15 students.



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



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



Inclining the facility lets water flow smoothly.



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



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



Facility for younger kids.



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.

Toothbrushes for small kids should be small.

Keep toothbrushes in a clean place.

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



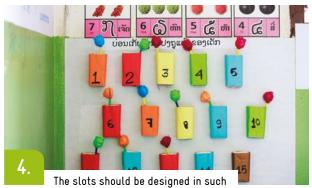
It should be easy for students to reach the toothbrush holder.



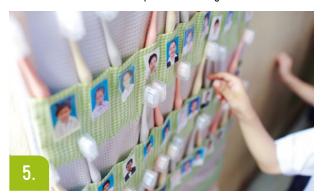
The toothbrush holder should be easy to clean.



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



a way that the head of the brush is exposed to the air. The cover has little holes to prevent molding.



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



Using a permanent marker, toothbrushes must be labeled individually according to student name or number.



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



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

Frequently Asked Questions

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

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. Only about 300ml of water are needed per child per day for the activities. Check the 'Facility Catalog' for more details on possible facilities for your school on YouTube GIZ Fit for School: https://bit.ly/3kUmkJI

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.

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

The success and the sustainability of the programme 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 programme implementation. The contributions of parents can be labor, materials or financial contributions. Parents can also help to advocate for water access and improved sanitation in schools.

How big should the facility be?

It is recommended to have one facility per classroom that can fit at least between 10 to 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 15 minutes a day for an entire class to conduct the activities.

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



Ms. Phokham Vilaichith // School Principal, Chompheth Kindergarten // Sisattanak District, Vientiane Capital

"I saw the activity in primary school and I want my students to practice this as well. I shared this wish to VEDC and they were supportive. We went to see the facility that was constructed in Chomphet Primary School and adapted the width and height so our small children can access it conveniently."

Ms. Khankap Louangsomphou // Chairman of the Education Development Committee of Chompheth Village // Sisattanak District, Vientiane Capital

"We have the experience of how to construct understand and support the programme."



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.





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 train and assign eldest grade students of kindergarten to help their classmates conduct the handwashing activity in an organized manner.

After about a week, students will get used to this procedure but the teacher still needs to supervise them closely.

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.

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.





Rub palms together.



Rub right hand over left and vice versa.



Rub the backs of fingers against the opposite palm.



Rinse hands with running water.



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



Dry hands in the air. Do not use a towel!

Towels become a source of infection after the first use.



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

Save water and don't let the water flow throughout the activity.

Frequently Asked Questions

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.

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.

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.

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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.

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 a little amount of water is needed for handwashing.

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 saves 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.

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. Chansamoth Inthalangsy // Teacher, who is responsible for School Health of Kasuangsatha Kindergarten // Sisattanak District, Vientiane Capital

"We group students to do the handwashing activity and start at 10:45 am after outdoor activities, before eating and after lunch. We ask students to line up to wash their hands together. I see that the kids are cleaner and that they like cleanliness. They wash their hands after touching dirt."

Namphon Vilayvong // Grade 3 Student, Saylom Kindergarten // Chanthabouly District, Vientiane Capital "The 7 steps of handwashing are fun. Our hands are clean and prevents diseases. We brush our teeth in school and also at home."



Toothbrushing



Tooth Decay

Tooth decay is the most common chronic childhood disease worldwide. Tooth decay does not heal by itself without treatment. In low-income 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. Based on the 2nd Lao National Facts 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 to 7 year old students have dental carries, with an average number of 7 to 8

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

affected teeth per child.5







Guidelines // Daily Toothbrushing

We should start our day with clean teeth and fresh breath.

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

The teacher trains and accompanies students from grade 3 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 close monitor and supervise.

All children should be part of the daily group toothbrushing activity.

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.



Squeeze a pea-sized amount onto the toothbrush.



Small size toothbrush for kindergarten kids.



No water is needed, only saliva. Brush all teeth, especially your molars, for 2 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.

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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. Kethkeo Thammavong // Grade 3 Teacher, Saylom Kindergarten // Chanthabouly District, Vientiane Capital

"Toothbrushing as a group activity is implemented after lunch everyday with the students forming rows to get their toothbush that their teacher prepared. The children's parents have informed us that their children used to dislike brushing their teeth. After this activity has been introduced into the school the children now like to brush their teeth at home too. I am very happy that the students like this activity."

Daokham Indavong // Kindergarten Grade 3 Student, Kasuangsatha Kindergarten // Sisattanak District, Vientiane Capital "I like the group toothbrushing activity at clean and healthy. At school we brush our teeth after lunch everyday and when I am

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





Deworming drugs are safe and can also be given to children who are not infected.

Guidelines // Mass Deworming

District health officer coordinates with the district education officer to collect the student's data.

District health officer makes a detailed plan and shares it with the education officer. They sign the plan together and the district education officer sends notification to the school about the deworming day.

School informs parents /child caretaker and VEDC about deworming in school. The parents of children who have taken the deworming tablet or who got sick on the day of deworming should inform teachers in order to avoid duplication.

On the day of deworming teachers help to arrange the children and take note students who have taken the tablet.

In case children have difficulty with taking medicine, parents should be present and help personnel.

Health personnel are responsible to monitor any side effects.

If some children are missing and get sick, the health personnel will leave the deworming tablet with teachers.

After completion of the deworming, the health personnel gives the report back to the district education and school.



The District School Health Task Force (MoES and MoH district staff) make a plan together.



School principal and teachers inform parents about the deworming.



Teachers help health personnel to give deworming tablets to each student.



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



Teacher records who received the deworming tablet.



Alternatively, the nurse dissolves the deworming tablet on a spoon with water and gives it to the child.



Teacher inspects the student's mouth.

Frequently Asked Questions

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.

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.

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.

Are deworming drugs safe?

Deworming drugs are generally safe and highly beneficial. These are safe for all children above two 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

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

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

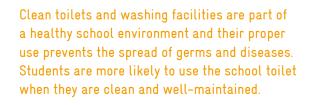
Most intestinal worms are so-called 'soil transmitted helminths,' which means that the infection is spread through soil. Soil is easily contaminated with human excreta or waste. Children play on the ground then put their fingers in their mouths and get infected. Thus, proper handwashing before eating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

Experiences



Ms. Manivone Athphasouk // Vice Director of Kasuangsatha Kindergarten School // Sisattanak District, Vientiane Capital

"Students receive deworming treatment at schools biannualy, with the treantment being administered by health personnel. We inform the student's parents about the treatment 3 days prior to adminstering it in order to ensure that all of the students receive the deworming tablet and to avoid duplication if their parents have given their kids a deworming tablet at home or in their community. Delivering the deworming tablet at school is a convenient option as enables the orderly implementation of the treatment procedure."



Operation & Maintenance



Clean Facilities. Healthy Habits

The school community needs to have a system for managing activities for clean and usable toilets and washing facilities, healthy habits, and a healthy school environment, e.g. in the 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:

- → Increased toilet use
- → Reduction of open defecation
- → 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. All teachers and students in the school use the same gender-segregated toilets.

Teachers show and remind the students to keep the toilet clean and to wash their hands with soap after 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?

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 and everybody in the school have to join forces to conduct the daily cleaning activities

Teachers organize the daily cleaning activities:

- > Teachers of every class contributes to the cleanliness of the toilets and washing facilities.
- → Make cleaning a group activity according to school weeky plan.
- > Involve the community such as women's and youth organizations for the cleaning and maintenance of the school.





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

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

Students can help with small cleaning tasks such as throwing trash into designated bins, monitor and report on tap water usage.

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 cleaning 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 classroom, that it is nice to use."					
Maintain it "I help to ensure that our classroom stays usable.ww					

Contact List				
	Name	Contact Number / Address		
Village Head	<u>A</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

- Sit down properly.
- Clean yourself.
- Dispose cleansing material in trashbin.
- Flush sufficiently to remove urine/feces with a bigger dipper or bucket.
- Check to ensure that there are no remains in the toilet.
- → Wash your hands with soap.

2 Clean it

Toilet bowl/pan:

- Distribute liquid detergent or washing powder across the toilet bowl/pan on the 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.
 - Wipe the sink with wet cleaning cloth.
- → Wash your hands with soap.

Maintain it

Refill when empty: Water and soap.

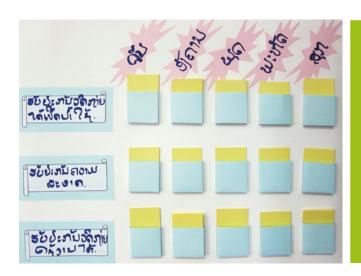
- Check and reports: Leaking pipes or faucets.
- Broken doors.
- Missing door lock, dipper, bucket,
- Cleaning materials.



Cost per School Year Soap for handwashing 9 /month /month Operation Dipper /month /month Rubbish bin Big bucket /month /month washing powder Cleaning Floor brush with stick /month Toilet brush /month Tools (spanners, screw /month driver, pincers, etc.) Water pipe spare parts /month Renair and /month Maintenance Teflon / tape /month Door locks /month

Type of Problem	Date of Repair	Responsible Persons	Cost
•			

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 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.



The school principal and teachers plan the weekly cleaning schedule for the toilets and handwashing facilities and divide the tasks and responsibilities for easy monitoring.

Frequently Asked Questions

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.

What can we do if the toilet is cloqued?

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.

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.

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.

How can we reduce our water bill?

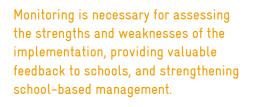
Immediately repair the damaged or linking water system. Use a pail and a water dipper for watering plants. For group handwashing facilities punched pipes with 1.5 mm holes work well and consume less water. Water should be turned off during lathering of hands and brushing teeth. Children should be regularly reminded to save resources.

Experiences



Ms. Angkham Boutsadee // Deputy Director of Sathit Kindergarten School // Saythatny District, Vientiane Capital. "Our school gives importance to orderliness and cleanliness on school playgrounds, classrooms, shower rooms, toilets and wash basins everyday with responsibilities being shared with the homeroom teacher. In addition, we also regularly monitor and maintain the water pipes and taps to ensure that water can be accessed all the time."

Ms. Theevan Cheungmeexay // Teacher at Chomphet Kindergarten School // Sisattanak District, Vientiane Capital hygiene. We have allocated cleaning duties for the classrooms, the school playground and washing facilities on a weekly basis. Apart from this, we also train children to be active participants in cleaning activities, such as: throwing trash into designated bins, monitor and report on tapwater usage."



Monitoring



Monitoring

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 programme.

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 programme implementation.

Improving Programme 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:

- → Introduction and Orientation
- → Supplies
- → Deworming and Vitamin A
- → Water Access
- → Group Facility and 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 the representative of the District School Health Task Force and the representative from the School Health Task Force on school level, (representative of the Village Education Development Committee (VEDC) or Village Health Volunteers).

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 materials (soap, toothpaste, toothbrushes).



Check deworming and Vitamin A distribution records and coverage for the entire school.



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.



District Education team encode the data and send to provincial level.

Frequently Asked Questions

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.

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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.

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 Programme as well as possible. The school should not focus on showcase classrooms.

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.

Why should all implementing schools be monitored?

There are schools without proper orientation and/or programme materials yet, but they may have taken an initiative to start implementing the Fit for School programme 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. Pailorh Sangthong // Vice chief of the Early Childhood Education Section // Department of Education and Sports, Vientiane Capital "As the vice chief of the Early Childhood Education Section, I monitored and supervised the District School Health team. During the supervision visit, there were discussions on reporting and further improvements on the plan. In addition, the results from the observations contribute to the Early Childhood Education Sector Development plan which I report to my director."

Ms. Moukda Sengmanivong // Pedagogical Advisor, District Education and Sports Bureau // Sisattanak District "In our district, schools have received regular monitoring and support in technical and implementation aspects of health promotion activities based on district plans. In the past, many schools do not place importance on keeping bathrooms and toilets clean, but after receiving monitoring and support, there have been improvements."

The Fit For School approach is based on multi-stakeholder 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

- → Line up and join group activities
- → Keep their toothbrush in place.
- → Remind siblings and other family members to wash their hands at critical moments after using the toilet, before eating, and remind them to brush their teeth, especially before going to bed.

The Role of the Teachers

- → Facilitate and supervise the daily group activities
- → Organize 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 step by step.
- → Check the availability of toothpaste, soap, and water for the hygiene activities.
- → Coordinate with related stakeholders to organize daily health promotion
- → Record and report the implementation of school health promotion.





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 basic school health activities.
- → 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 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 programme monitoring 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 programme implementation.

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

- → Support the construction of group handwashing 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 programme implementation.
- → 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 and Vitamin A.
- → Distribuite deworming and Vitamin A in school.
- → Monitoring and health and nutrition of children.
- → Provide basic first aid knowlegde to teachers.
- → 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 programme and ensure monitoring of the programme at least once a year in all schools.
- → Ensure the availability of soap, toothpaste and toothbrushes.
- → Include compliance with school health programmes 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 Programmes.
- → 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 programme implementation.
- → Ensure monitoring and evaluation of school health programmes and distribute and use the results for programme 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 programmes 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 programme.
- → Promote and strengthen global partnerships, alignment and coordination among stakeholders and prevent programme duplication and overlapping.
- → The support should be align with the government development plan.





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.
- → 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.
- → 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.



Frequently Asked Questions

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 build self-esteem for character development and provides energy for participating in sports and social activities.

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.

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.

What is the role of health personnel if teachers are 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 programmes within the school. In early childhood education settings, staff from the district health center will administer the deworming of children with the support of the classroom teacher to ensure a smooth process.

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

Community organizations (alumni associations, local foundations, youth or women's union etc.) and religious organizations can strengthen the programme 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



Mr. Khamphon Sayapheth // Vice Director of District Education and Sports // Sisattanak District, Vientiane Capital "We consider school health promotion as an important learning and teaching subject. Thus we divide tasks to our team and monitor them. The team reports back to us regularly. We adjust It is crucial to make our team and school doing. Support and guidance are important as well as the incentive of certificates of appreciation."

Mr. Khamsen Phouangpheth // Chief of Early Childhood Education Unit // Chanthabouly District, Vientiane Capital "The Early Childhood Education team monitors and supervises each school twice a year on technical and health promotion, to supervise and encourage school performance. School health is an important topic raised during monthly meetings between the District Education and Sports Bureau and used to discuss, exchange experiences and lessons learned. We also record good practices and claim certificates of appreciation as appropriate."



Checklist for Teachers // Phase II: Implementation

Daily Handwashing with Soap

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).

Keep the soap dish or liquid soap bottle in a dry place in the health corner.

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 dry their hands by shaking them in the air (do NOT use a towel).

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 save water!

Daily Toothbrushing with Fluoride Toothpaste

Put the holder in an area where children can easily reach for their toothbrushes.

Request toothbrushes, toothpaste bottles and soap from the principal.

Label the toothbrushes individually according to student name or number using a permanent marker, or have the children personalize their toothbrushes for easy identification.

Squeeze a pea-sized amount onto the toothbrush.

Train a student leader to help his/her classmates conduct the toothbrushing activity in an organized manner.

Perform the activity daily and include it in the daily class schedule.

Make sure students brush their teeth properly for at least 2 minutes.

Close the water in between while students brush their teeth for 2 minutes. Don't let the water run all the time!

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

Encourage students to keep the group facilities and toilets clean.

Check drainage system and remove blockages if the drainage is not working.

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.

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 classroom, that it is nice to use."					
Maintain it "I help to ensure that our classroom stays usable."					

Contact List

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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.

2. Clean it

Toilet bowl/pan:
Distribute liquid detergent or washing powder across the toilet bowl/pan on the 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.

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, dipper, bucket,

Cleaning materials.



Clarification of Budget and Responsibilites

Activities	Product	Price	Cost per School Year	Responsible Level (Classroom – School Barangay)
	Soap for handwashing	/month		
	Water	/month		
Operation	Dipper	/month		
	Rubbish bin	/month		
	Big bucket	/month		
Cleaning	Liquid detergent or washing powder	/month		
	Floor brush with stick	/month		
	Toilet brush	/month		
Repair and Maintenance	Tools (spanners, screw driver, pincers, etc.)	/month		
	Water pipe spare parts	/month		
	Faucet	/month		
	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
<u>U</u>			

References

- 1 Education Management Information System EMIS (2011).
 Department of Planning. Ministry of Education and Sports
- Curtis V and Cairneross S (2003). Effect of Washing Hands with Soap on Diarrhoea Risk in the Community: A Systematic Review. Lancet Infect Dis 3 pp 275-281.
- 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:

 www.who.int/oral_health/events/oral%20healthc.pdf
 (accessed July 2014)
- Second Lao National Dental Health Survey (2010).
 Ministry of Public Health, Lao PDR
- MoES, MoH and GIZ (2012): Health Outcome Study Lao PDR. Results of the Baseline Study – Report. Page 16
- 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. www.whocollab.od.mah.se/ searo/indonesia/afford/whoafford.html
- 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 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 American Dental Association (ADA): Statement on Toothbrush Care: Cleaning, Storage and Replacement. Available at: www.ada. org/1887.aspx (accessed August 2013)
- 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
- Ministry of Health Lao PDR (2008). Policy and Strategy of Parasite Prevention and Control.
- WHO (2011). Helminth Control in School Age Children: A Guide for Managers of Control Programmes. 2nd ed p 32

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