



RAISING CLEAN HANDS IN LAO PDR

JOINT CALL TO ACTION



ACKNOWLEDGEMENTS

Thanks are due to all the WASH in Schools partners who participated in the development and publication of “Raising Clean Hands in Lao PDR”.

We wish to thank the following people for their technical contributions to this publication:

Thomas Norotte, Confluence; Nicole Siegmund, GIZ; Chantalangsy Sisouvanh, PADETC; John McGown, Plan International; Phetmany Cheuasongkham, Thea Bongertman, SNV; Carlos Vasquez, Christie Chatterley, Kittisak Khouhathong, Malikhone Morakoth, Nelson Rodrigues, Peter van Maanen, Shane Powell, Simon Nazer, Southalak Sisaleumsak, Thomas Meadley, UNICEF; Antonio Montresor, Jun Vicente Belisario, Thippavanh Chantapaseuth, WHO; Viengsamay Vongkhamsao, WSP-World Bank; Barbara Lewis, World Education; Sayasin Khongsavath, World Vision.

We would also like to express special thanks to the following for their continued support of the WASH in Schools programme and this publication: Mithong Souvanvisay, Ministry of Education and Sports; Soutsakhone Chanthapone, Centre for Environmental Health and Water Supply (NamSaat). UNICEF management: Hongwei Gao, Julia Rees, Bishnu Timilsina, Emmanuelle Abrioux.

This booklet is an adaptation of prior global publications. UNICEF Lao PDR would like to acknowledge the previous work by all contributors to the publications: Raising Clean Hands and Raising Even More Clean Hands.

A special note of thanks to Murat Sahin for inspiring the Lao PDR version into existence and DFAT, Australia for their generous contribution to support WASH in Schools in Lao PDR.

For more information about this publication, please contact Southalak Sisaleumsak, ssisaleumsak@unicef.org
For more information about the Joint Call to Action, please contact Murat Sahin, msahin@unicef.org

Design and Layout: Paul Bloxham

CONTENTS



INTRODUCTION	2
--------------	---



1 ABOUT WASH IN SCHOOLS	4
--------------------------------	---



2 WASH IN SCHOOLS IMPROVES CHILDREN'S HEALTH	8
---	---



3 WASH IN SCHOOLS BOOSTS SCHOOL ATTENDANCE AND ACHIEVEMENT	14
---	----



4 WASH IN SCHOOLS PROMOTES EQUITY	18
--	----



5 WASH IN SCHOOLS REACHES FAMILIES AND COMMUNITIES	22
---	----



6 MONITORING FOR RESULTS	26
---------------------------------	----



7 JOINT CALL TO ACTION FOR WASH IN SCHOOLS	30
---	----

Daily practice of group handwashing in school as part of a skills based hygiene education.
© GIZ Fit for School

INTRODUCTION

Water, sanitation and hygiene (WASH) in Schools helps fulfil every child's right to health, education and participation but remains a major challenge for many countries around the world. WASH in Schools is widely recognized as helping countries achieve the Millennium Development Goals – particularly those related to increasing access to primary education, reducing child mortality, improving water and sanitation and promoting gender equality.

WASH in Schools keeps children healthy. It keeps children in schools. And it keeps children learning. WASH in Schools helps children realize their basic rights and enables them to grow to their full potential into productive adults that help support and develop the society around them.

Lao PDR has made clear progress in recent years. In 2008 less than a third of all primary schools provided water and sanitation facilities. By 2014 this increased to almost half of all primary schools providing such facilities.¹ This demonstrates the real progress Lao PDR is making, but also shows there is still some way to go to fulfil every child's right to water, sanitation and skills-based hygiene education.

Many school days are lost each year due to diarrhoeal diseases and parasitic infections. Equipping schools with the right facilities, clean water and hygiene education not only reduces illnesses, it also promotes healthy behaviours for life.

Policymakers, government representatives, citizens and parents all have a role to play in ensuring every child receives the benefits of WASH in Schools. International and national organisations have come together with the Lao Government to create this publication to explain some of the work done to date in Lao PDR and to highlight key priorities, successes and challenges.

These organisations, both local and international, are sharing their experience and knowledge that bring long-lasting programmes to scale to improve health, advance learning and enable children to serve as agents of change for their siblings, their parents and their communities.

The organizations involved in this publication have joined together in Lao PDR to renew their commitments and create a more cohesive group to support and advocate for WASH in Schools. We call on decision makers and concerned stakeholders to join in this collaborative effort and support WASH in Schools – so that all children have the opportunity to go to a school with access to safe water, child-friendly sanitation facilities and skills based hygiene education.

1

ABOUT WASH IN SCHOOLS



© UNICEF/2013/Ari Vitikainen

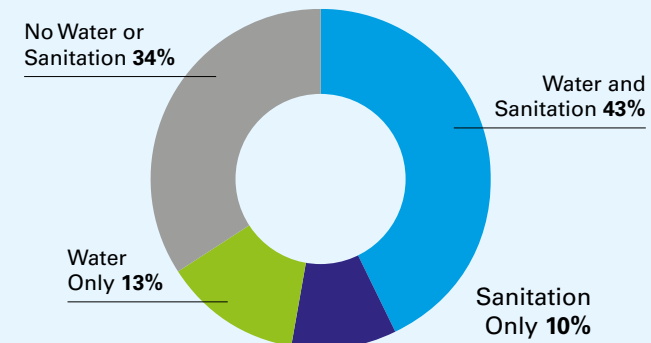
Children enjoy hygiene education activities in a school in Vientiane Province

For Lao children, the right to an education is secured by the United Nations Convention on the Rights of the Child. Primary school attendance is compulsory and almost all children – about 900,000 – are enrolled in primary schools.² However, many school days are lost each year due to diarrhoeal diseases and parasitic infections. Equipping schools with safe drinking water, improved sanitation facilities and skills-based hygiene education not only reduces the incidence of these illnesses but also promotes healthy behaviours for life.

Water, Sanitation and Hygiene Education in Schools (WASH) helps to fulfil children's universal right to health, education and participation. It is widely recognized for helping countries to achieve the Millennium Development Goals – particularly those related to increasing access to primary education, reducing child mortality, improving water and sanitation and promoting gender equality.³

Lao PDR has made steady progress in getting WASH into Schools. In 2008, less than one-third of all primary schools provided safe water and sanitation facilities. In 2014, the number had increased to almost half, according to the Education and Monitoring System (EMIS). That still leaves much to be done. The provision of sustainable supplies of safe water, child-friendly toilets, hand-washing stands, soap and cleaning materials is one vital component of WASH in Schools.

TYPE OF FACILITIES AVAILABLE AT PRIMARY EDUCATION SCHOOLS



Source: EMIS 2012/2013

The other is life skills-based education that focuses on key hygiene behaviours for children in school and outreach to their families and the wider community. These two components together create a virtuous cycle for schools, communities and the country as a whole.

WASH in Schools creates healthy and secure school environments that can protect children from illness, abuse and exclusion. Because children who are healthy and well nourished are better able to learn and participate, WASH in Schools helps ensure they receive a quality education. Quality education, in turn, leads to better health

Daily group hand washing practiced in Lao schools as part of MoES WASH program supported by GIZ and SEAMEO INNOTECH
© GIZ Fit for School



WASH IN SCHOOLS PROGRAMME: A NEW PARTNERSHIP KICKS OFF IN VIENTIANE

We all know that good health is an important factor in successful education. Children perform better when they are healthy and learn in a clean and safe environment. With better learning, they are more likely to complete their education. By completing their education, children will have the skills to take care of themselves and become more productive adults.

The WASH in Schools programme directly supports the education sector and contributes to the achievement of National Quality Standards for primary education. With support from Australian Aid, currently the biggest supporter of WASH in Schools in Lao PDR, the Ministry of Education and Sports (MOES) and UNICEF over the next three years aim to reach 400 schools in educationally disadvantaged districts in 12 provinces. Out of these 400 schools, 100 will be piloting the new approach, which will include daily group hand washing, safe drinking water and use of gender-sensitive, accessible toilets and their maintenance.

It is widely understood that the provision of facilities in and of themselves is not sufficient to ensure that students in schools use them. This programme therefore draws from the best practices of the Ministry of Education and Sports and other organizations in Lao PDR such as GiZ as well as UNICEF's global experience to demonstrate the impact of involving students and teachers in everyday key WASH practices. Learning from this initiative will be extremely important as a means of informing the ministry's investment in this area.

Dr. Mithong Souvanvixay, Director General, Department of Pre-school and Primary School, Ministry of Education and Sports

and nutrition outcomes, especially for girls. WASH in Schools fosters children's pride in their schools and communities. It enables children to become agents of change for improving water, sanitation and hygiene practices in their families and amongst their neighbours.

WASH in Schools is an investment in school children and the health of future generations. It helps children realize their full potential and prepares them for a healthy adult life.

WASH in Schools promotes equity. All children are equal in their right to access WASH facilities, and all children gain benefits through improved hygiene practices. With separate toilets for girls and boys, students are assured of privacy and dignity, a particularly important factor for keeping girls in school. With inclusive and accessible sanitation facilities, children with special needs are able to attend school and further contribute to the development of their society.

This edition of the 'Joint Call to Action – Raising Clean Hands in Lao PDR' aims to support local and global efforts in a common vision: a world where all children go to school and where all schools provide a safe, healthy and comfortable environment for children to grow, learn and thrive.

BLUE BOX: A SUCCESSFUL PARTNERSHIP TO PROMOTE HYGIENE IN SCHOOLS

Bringing hygiene education to every primary school in Lao PDR is no easy feat. Lao PDR has over 8,900 schools (and roughly 33,576 teachers). Around 80 per cent of the population lives in rural areas and the country is culturally diverse, with 47 recognized ethnic groups.

The Ministry of Education and Sports (MoES) and the Centre for Environmental Health and Water Supply within the Ministry of Health (MoH) have been implementing WASH in Schools for more than a decade. With UNICEF support, the two ministries developed the 'Learning with Joy' kit, commonly known as the 'Blue Box'. Inside are messages on hand washing, personal hygiene, environmental sanitation, and water and latrine use for better health. These messages are for students, who are both the beneficiaries of and agents for behavioural change. Every school is an entry point for spreading hygiene and sanitation information to families and communities through children. But first comes the training. The kit is handed over to a school only after the teachers have been coached on its use.

TRANSFORMING THE BLUE BOX INTO A HEALTH PROMOTION TOOL KIT

The Blue Box has continuously evolved since its introduction in 1996. The initial 'learning with joy' box was based on five different types of letter card games and three sets of colour story cards. With teacher feedback, more materials were gradually added, including additional games, cartoon books, textbooks and a teacher's guide/activity book.⁴

Like many teaching aids, it has to be regularly revised and updated to meet the needs and interests of its users. In 2003, the Blue Box underwent a major review for development into a more effective participatory tool kit aimed at creating child-friendly and health-promoting school environments. New materials were added and a comprehensive, standard educational resource took shape from the combined efforts of the MoES, the MoH, UNICEF and the World Health Organization (WHO), along with input from other partners.

The revamped Blue Box contains educational materials related to diarrhoea, malaria, intestinal parasites, and personal and environmental sanitation. It is promoted by the different organizations working in the education sector. By bringing in more partners, more schools now have access to a teaching aid that is attractive and popular with children. Since 1996, over 5,000 Blue Boxes have been distributed to schools. Introducing the Blue Box as a supplementary material but with links to the core curriculum has helped schools integrate it into the learning agenda.

The most recent evaluation in 2010 saw further improvements.⁵ The contents are now graded, provided in more numbers and are made of durable materials to last longer. The tool kit has come a long way from its early days. In the process of refinement, a synergy has been created, combining the strengths and experience of the partners in promoting good hygiene behaviours in schools. The

result is an approved standard tool kit recognized for promoting health and hygiene. While further efforts are still required to ensure optimal use of the Blue Box, as well as ensuring adequate facilities are in place to practice teachings, the partnership has without doubt enabled organizations to work together and achieve more than they could have done by working alone.

WASH in Schools creates a cycle of opportunity



Children use picture cards contained in the "Blue Box" to depict a story about the importance of using toilets.





Soap is fundamental when washing hands. Children must be taught that before and after eating or after using a toilet, they should always wash their hands.
© UNICEF/2013/Jeff Williams

2

WASH IN SCHOOLS IMPROVES CHILDREN'S HEALTH

"Children have the right to... safe water to drink, nutritious food, a clean and safe environment, and information to help them stay well"

In Lao PDR, children's rights are taken seriously. One of their fundamental rights is to live in a healthy and safe environment. WASH in Schools upholds this basic right, which also includes the rights to privacy, to play, to good education, and to be well cared for by adults. Though we all believe in the fundamental rights outlined in the Convention on the Rights of the Child, transforming these into reality poses many challenges for governments and countries. Lao PDR is no exception.

The country faces particular challenges in meeting the Millennium Development Goals to reduce extreme poverty and hunger (MDG 1) and cut child and maternal mortality rates (MDGs 4 and 5). Having access to safe toilets and drinking water at home and at school and hand washing with soap can bring improvements in these areas, as well as encourage more children to complete their primary education (MDG 2).

In Lao PDR, safe water and sanitation coverage in schools is lower than the global averages benchmarked at 71 per cent with adequate water access and 68 per cent with sanitation facilities.⁶ In Lao PDR, according to EMIS 2012/2013 around 53 per cent of schools have adequate sanitation facilities and 56 per cent have access to water – a situation which poses unnecessary health and safety risks to children. Illnesses related to poor sanitation reduce productivity in both children and adults. For school-aged children, such diseases affect their learning and can lead them to drop out of school altogether. The more remote and rural areas of Lao PDR are especially affected.

Even before starting school, children are at risk from poor sanitation in their villages and homes. In Lao PDR, diarrhoea is the second biggest killer of children under 5, causing an estimated 3,000 child deaths every year.⁷ Along with the detrimental effects of diarrhoea, recent research from the World Bank (Spears, 2013) suggests a significant link between open defecation and stunting. The most recent Lao Social Indicator Survey (LSIS, 2012) showed similar correlations in areas with high open defecation rates and stunting. While poverty and lack of income are key drivers of poor sanitation, rural areas suffer more than urban areas in part because of fewer government services, especially in education facilities.

The links between good hygiene and better health among children are well documented globally and the Lao government has taken note. Along with partner organizations working in the area of education, health and WASH, it is focusing more attention on WASH in



A child proudly shows her toothbrush in a primary school in Vientiane Capital.

© GIZ Fit for schools

Schools. Just a few years ago, hygiene promotion was rarely covered in Lao primary schools. These days it is not uncommon, even in remote regions. The hygiene promotion toolkit (Blue Box) is one valuable aid and other initiatives have also taken root. SNV Netherlands Development Organisation (SNV) has developed school-led total sanitation triggering and hand washing guides full of fun, action-oriented learning that links hygiene at school with households practising community-led total sanitation (CLTS). The MoES recently revised its National Quality Standards to include more robust standards for WASH facilities in schools, now being applied across the country.

UNICEF, with funding from Australian Aid, is improving



Studies show that dehydration can affect school performance. Availability of drinking water is an important part of WASH in Schools

© UNICEF/2004/Jim Holmes

WASH facilities in over 400 schools in Lao PDR, highlighting daily group activities around hand washing with soap, safe drinking water, maintaining toilets, and keeping the school environment clean.

Save the Children and World Vision are also supporting schools access improved water and toilets through the provision of facilities. Recently World Vision has added additional activities to be implemented in schools. This included health education campaigns, raising awareness activities, trainings on WASH and use and maintenance of WASH facilities.

Other partners, such as World Education, through their Reducing Childhood Diarrhoea program, and Confluence through their soap recycling initiative also support WASH in Schools in Lao PDR.

Plan International triggers sanitation and hygiene changes in schools and villages simultaneously. It works through village and school development committees and student clubs to plan and carry out interesting, peer-oriented activities and games. Plan and its government partners use the same key messages in both schools and communities, knowing just how important it is for the home environment to be conducive to healthy hygiene actions. Plan and Child Fund also provide locally produced water filters to schools, that when used with student water bottles in school entry kits, provide safe water to learners.

To broaden awareness of sanitation-related health issues in schools and villages, SNV and ChildFund have encouraged student monitoring of community-led total

sanitation initiatives. World Water Day, Global Hand-washing Day, World Toilet Day and Children's Day are regularly celebrated in Lao PDR, giving schools and their communities the opportunity to host friendly competitions, drama shows and other initiatives that relay key health messages to the public. Tangible gains have been made in national deworming campaigns led by the MoH, MoES and the World Health Organization. Meanwhile the MoES, working with GIZ and other partners, has been establishing low-cost school WASH facilities for daily group handwashing and tooth brushing in the Fit for School programme.

Even so, more evidence is needed in Lao PDR about how WASH in Schools can improve children's health and result in a higher number finishing primary and secondary education. Menstrual hygiene management, for example, has only recently come to the fore as a national issue in schools. SNV has led efforts to research this issue and how it affects school attendance and the health and safety ramifications for girls. UNICEF is currently undertaking a multi-year study on how improvements in school WASH can improve school attendance and completion rates.

GIZ is supporting the MoES and MoH to conduct a health outcome study, measuring health and education impacts of the Fit for School program in Lao PDR. The evidence gathered from these and other well-designed research initiatives will further strengthen Lao PDR's policy decisions to benefit future generations and ensure that the rights of all Lao children are realized.



A child receives a deworming pill when attending school. In Lao PDR national deworming campaigns are regularly carried out in primary schools.

© GIZ Fit for School



Health professionals inform teachers at a primary school about the distribution of de-worming tablets. © GIZ Fit for School

DEWORMING ACTIVITIES

Soil-transmitted helminths (STH) are a group of intestinal worms that cause the most common infections in tropical and subtropical areas, especially where sanitation is poor. STH infections can have many serious health consequences, such as undernutrition and iron deficiency anaemia, which are associated with poor cognitive functioning and educational achievement.⁸ Children are very frequently infected and, as a result, suffer from impaired physical and intellectual growth.

Both World Health Organization and UNICEF’s strategy for controlling the diseases caused by these worms is based on:

- Periodic deworming of the age groups at highest risk
- Health education
- Sanitation improvement

Periodic deworming involves the administration of a standard dose of anthelmintic medicines every year – or every six months if the prevalence of STH infections is very high.

The deworming medicines are:

- Effective in killing the worms
- Very safe (tablets are not absorbed by the intestines)
- Donated by manufacturers to WHO for distribution in endemic countries
- Simple to use: non-medical staff can administer them

Schools are an ideal setting to periodically deworm school-aged children (including non-enrolled children). To this end, the collaboration between the MoH and MoES is important and mutually beneficial. The MoH gains from the help of teachers distributing the medicines, while the MoES benefits from improved school attendance and school performance as a result of deworming. The MoH is normally responsible for estimating, ordering and receiving medicines from WHO, and for training health and school personnel to administer them.

The teachers are trained to:

- Inform the community about deworming
- Provide a tablet to each child
- Register treatments on a simple form

Teachers can also take advantage of deworming days to provide health education messages to stimulate favourable behaviours such as hand washing, use of toilets, wearing foot protection, and to promote improved sanitation standards in the village. In 2012 more than 118 million children worldwide were dewormed through school programmes with no major side effects reported.



A teacher demonstrates the 7 steps for handwashing with soap during the daily group handwashing activity. © GIZ Fit for School

FIT FOR SCHOOL – SIMPLE, SCALABLE, SUSTAINABLE

The Ministry of Education and Sports has been running the Fit for School programme, supported by GIZ and SEAMEO INNOTECH, since December 2011 in 22 public primary schools.⁹ To date the programme has benefited more than 5,000 students and plans are in the pipeline to scale it up.

Daily group hand washing with soap, daily group tooth brushing with fluoride toothpaste and deworming every six months (according to the national deworming programme) in primary schools are the core of this approach. In order to conduct daily hygiene activities and for the greatest impact, an enabling school environment is necessary. Thus the Fit for School approach strongly focuses on the construction of affordable group handwashing facilities as well as the cleaning and maintenance of toilets.¹⁰

Implementation is led by the MoES. School principals ensure implementation in their respective schools, and teachers supervise the daily activities. Parents and communities are involved in the construction of group handwashing facilities and monitoring.

The programme, developed in the Philippines by the Department of Education, reached about 2 million children in 2013. A Health Outcome Study showed that after just one year, children in intervention schools had better health outcomes compared to those in control schools. Notably, fewer children had dental infections, heavy worm infections and were underweight based on body mass index (BMI). There were also fewer absences. The same programme evaluation is currently under way in Lao PDR (for details see Chapter 6).

TYPE OF FACILITIES AVAILABLE AT PRIMARY EDUCATION SCHOOLS

Indicator	Intervention schools	Control schools%	Difference
Mean days of absence in 2009-2010 school year	3.2 ± 3.9 days	4.4 ± 4.8 days	27.3%
Children with below normal BMI prevalence	28.1%	35.3%	20.4%
Children with heavy worm infection prevalence	10.4%	19.7%	47.2%
Increase in dental infection	0.08 ± 0.33	0.13 ± 0.40	38.5%

Source: GIZ, Fit for School First Year Evaluation

WASH IN SCHOOLS BOOSTS SCHOOL ATTENDANCE AND ACHIEVEMENT

The Convention on the Rights of the Child urges us to do our utmost to protect and promote children's rights to thrive, to make their voices heard and to reach their full potential. WASH in Schools supports this commitment by creating a symbiotic relationship between health and education. By protecting children's health, WASH in Schools improves school attendance for all students, especially girls and children with disabilities. According to WHO, children worldwide could gain an estimated 443 million school days every year through improved water and sanitation facilities,¹¹ and reduced diarrhoeal illness and parasitic infections. By reducing illness-related absenteeism and protecting cognitive development, WASH in Schools can have a transformative effect on a child's life. For example:

In China, an expanded hand-washing programme in primary schools provided free soap and highlighted the selection of a 'student hand-washing champion'. This programme resulted in a 42 per cent drop in absenteeism, with students missing 54 per cent fewer days compared to those in schools without the intervention.¹²

In Egypt, an intensive campaign to promote hand hygiene in 30 primary schools reduced absenteeism caused by laboratory confirmed influenza by 50 per cent, diarrhoea by 30 per cent and conjunctivitis by 67 per cent.¹³ The programme included manuals, activities, posters, songs, games, drama and contests – all with the objective of having children wash their hands with soap at least twice a day while at school.

In Bogota (Colombia), children in primary schools who reported proper hand washing in school facilities were a fifth less likely to be absent than those in schools without good hygiene practices.¹⁴

In Kenya, an evaluation of a deworming programme revealed that the worm burden in children contributed to 25 per cent of overall school absenteeism.¹⁵ According to WHO, the average IQ loss per worm infection is 3.75 points. This represents 633 million virtual IQ points lost among people who live in low-income countries.

In Jamaica, 9-12 year olds with worm infections were absent more frequently and sometimes attended school only half as much as their uninfected peers. Treatment for schoolchildren with whipworm infections greatly improved their short and long-term memory. Nine weeks after treatment, those who were previously infected performed as well as the uninfected children.¹⁶



GLOBAL HANDWASHING DAY: MORE THAN A DAY

On 15 October each year, hundreds of millions of people around the world celebrate Global Handwashing Day, aimed at conveying the importance of hand washing with soap as an effective and affordable way to prevent disease. Over the past years, the event has grown from a one-day celebration in a few cities to a worldwide movement that has mobilized significant investment in and political support for hand washing with soap.

In Lao PDR, Global Handwashing Day is celebrated at schools and teacher training colleges throughout the country. Activities include school clean-ups, games, songs and performances promoting good hygiene with one overriding aim: getting children and adults to wash their hands with soap on a daily basis.

© UNICEF/2013

Students in a primary school help each other handwashing before receiving deworming tablet.
© WHO/2014

© UNICEF/2008/Tom Winkler



A teacher asks a student to read the a story from the Blue Box toolkit.

HYGIENE ACTION LED BY PUPILS IN SCHOOLS IN SARAVANE PROVINCE (HAPIS)

The evidence is clear that WASH in Schools can boost school attendance, the ratio of girls to boys attending school and educational achievement. By providing access to WASH facilities and encouraging behaviour change with student participation, the burden of disease can be lifted – and children’s opportunities expanded.

In Lao PDR’s southern Saravane province, people still commonly defecate in the open, at home and at school. This is partly because of the scarcity of clean water

supplies and low investment in sanitation, but also because there is little awareness of the benefits of good hygiene. An estimated 43.5 per cent of primary schools in Saravane province do not have water and sanitation on their premises. Washing hands with soap at critical times such as after defecation is not standard practice.

This scenario is beginning to change. Water supplies, gender-separated toilet blocks and hand washing stations are being built with the support of UNICEF in partnership with the MoES and MoH and funding from the Australian Government Department of Foreign Affairs and Trade (DFAT).

The construction of WASH facilities in schools in Saravane province is happening hand in hand with a hygiene education component known as Hygiene Action led by Pupils in Schools (HAPIS). HAPIS aims to embed good daily hygiene practices in primary schools. Students in 100 schools in Saravane province are being organized to oversee four important daily hygiene activities: group hand washing, group compound and toilet cleaning and water drinking in classrooms – with only minor supervision from teachers. Hygiene education and information are being provided through the Blue Box. The hope is that through HAPIS, hand washing with soap and other health-promoting actions will become ingrained, creating a pool of healthier pupils and school environments more conducive to learning.

Children sitting outside a newly built toilet in Vienkeo School

© UNICEF/2014/Simon Nazer



A girl washes her cup after brushing her teeth
© GIZ Fit for School

WASH IN SCHOOLS PROMOTES EQUITY

A school should be a place where children are motivated and able to learn. It should also be accessible to all, with provisions to guarantee that children's health and safety needs are met. This is not always the case. In developing countries discrimination is still common in schools, reflecting the need to more urgently address social inequities.

In many places, adolescent girls and children with disabilities are excluded from education because schools do not have the appropriate or adequate facilities for them and also because of stigma and discrimination. This is particularly the case with disability. Some children may also face discrimination in school because they are perceived as being unclean. On school premises, discrimination can take many forms, such as giving a child an unfair burden in shared tasks or ordering them to clean toilets and fetch water as a punishment.

Equal access to water and sanitation facilities can diminish discrimination, reduce exclusion and lead to more positive learning experiences, thereby lessening the risk of girls and boys dropping out of school. While there are many important dimensions of equal access, this chapter focuses specifically on gender and inclusion, which WinS can greatly contribute to.

EQUITY FROM THE GENDER DIMENSION

Girls in particular are vulnerable to dropping out of school if toilet and washing facilities are not private or safe, or are simply not available. When schools have gender-separated toilets that are clean and accessible, a big barrier against girls opting out of school is removed.

WASH in Schools supports girls' education by providing:

- Appropriate hygiene facilities. Girls who have reached puberty and female teachers who are menstruating need privacy. The provision of separate toilets for female students and teachers with safe facilities for menstrual hygiene management is a strong inducement for attending school. Quality WASH in Schools programmes empower girls and female teachers.
- Protection from harassment and violence in toilets. The location of sanitation facilities may contribute to high levels of sexual abuse and violence in schools in some areas. Findings from a survey conducted in South Africa showed that more than 30 per cent of schoolgirls reported having been raped while at school.¹⁷ Most often the rapes happened in toilets, particularly those

SCHOOLS ARE CRUCIAL FOR OPEN DISCUSSIONS ABOUT MENSTRUATION

Menstruation is still a taboo subject, not easy to talk about at home or at school. In rural villages in Lao PDR, a culture of shame surrounds the menstrual cycle. This was highlighted in research conducted on Menstrual Hygiene Management (MHM) by SNV Lao PDR in three districts of Savannakhet province.¹⁸

Most pupils do not have adequate access to toilets at school. Frequently, there are none or the existing ones are out of order and not girl-friendly. But even girls at primary schools that have flush toilets did not use them during their period. One girl said: "Even though we have toilets, we don't use them during menstruation. We feel the toilets are not clean and there is no privacy." Another girl said: "We learned about menstruation issues from our friends, not from our teachers and mothers. There is no subject (about it) in school and we are shy to tell when we had our first period."

Schools play a crucial role in enabling discussions where pupils feel free to talk about menstruation. Students, teachers and school administrators need access to information and training, to empower women and girls through improved menstrual hygiene management and to encourage girls to complete their education.

that were isolated from the protective environment of the school. WASH in Schools provides toilets and hand-washing facilities in safe and convenient locations to ensure a protective school environment where good hygiene practices are encouraged.

- Knowledge for students, teachers and school administrators about the physical changes adolescents experience. Eliminating the silence and shame around menstruation can be achieved by enabling open discussion among older children. Some children start school late, repeat grades and enter adolescence while still in lower primary school. Schools can play an important role in encouraging frank talk and equipping girls,¹⁹ teachers and school administrators with the knowledge and means to manage their menstruation hygienically.

- Equitable responsibilities. WASH in Schools promotes shared responsibilities among girls and boys for taking care of latrines and hand-washing stations. In Lao schools where WASH in Schools is implemented, class heads – selected on a rotating basis – are given the responsibility of ensuring that school sanitation and water-related chores are distributed equally among their peers. School WASH clubs are another way of encouraging students to support the use and maintenance of WASH facilities. Participation in these activities promotes pride and ownership and a better understanding that the shared tasks are not for women and girls alone.

EQUITY FROM THE INCLUSION DIMENSION

Children with disabilities – particularly girls – are also at risk of dropping out of school. Surveys of children aged 4-6 with disabilities in developing countries show they are more likely not to enroll in or attend school than their peers. Findings indicate that the vulnerability of children with disabilities gives rise to a cycle of low educational achievement and poverty in adulthood. Ensuring that children with disabilities go to school and complete their education is key to breaking this cycle.²⁰

Other factors hindering access to education include inadequate policies and standards that make no provision for the needs of children with disabilities, negative attitudes about disabilities and a lack of knowledge and skills among school staff and students. Better access to sanitation facilities for all children is thus essential for school attendance, especially for children with disabilities.

INCLUSIVE AND ACCESSIBLE DESIGNS FOR WASH FACILITIES

As part of WASH in Schools, UNICEF is working with the MoES on inclusive latrine designs to make facilities user-friendly and accessible by all, including adolescent girls, small children and children with disabilities. This means looking at problems in a holistic way and ensuring that the interests of children, especially in hard-to-reach areas, are paramount at every stage of the work. The latest designs address security issues by minimizing the front wall area and providing more open space for monitoring of the facilities by teachers.

Through simple design options, toilets can be made more inclusive. For example in Lao PDR, UNICEF and partners have agreed on a design that includes:

- Gender segregated toilets, with clear and distinct entrances for boys and girls.
- Urinals that are located at the rear and are accessible only from the boys' side of the facilities.
- A ramp with the appropriate slope providing access for children with disabilities and making entry easier for small children.
- Translucent roof sheathing, strategically located above



Children clean school toilets in order to establish a culture of cleanliness and maintenance

© GIZ Fit for School

each toilet, providing sufficient natural light inside the latrines. The heat transfer from the translucent roof and ventilation inside help keep the interiors dry, limiting mould and humidity.

- A stainless steel water storage tank is provided and connected to the roof gutter, creating a simple rainwater collection system making use of natural resources. The design includes separate hand-washing points for girls and boys.
- The plumbing is kept as simple as possible to minimize technical requirements for installation and maintenance. There is one water-feed point that serves every part of the sanitation infrastructure, making it easy to connect to any water source at the school.
- The water source used is based on the geographical location of the school. In mountainous areas a gravity fed system (GFS) is installed, and in flat lands a borehole with a hand pump is provided.

These WASH design options complement the work of other partners in Lao PDR active at school level. Water is an important component of school meal plans, hygiene promotion and school food gardens. Complementary and coordinated programmes for inclusive WASH facilities can further support the well-being and development of all children, especially in remote areas.

THE IMPORTANCE OF OPERATIONS & MAINTENANCE IN ACHIEVING SUSTAINABLE WINS

The operation and maintenance of water and sanitation facilities is important for all WASH in Schools programmes. Good operation and maintenance of WASH facilities will prolong their life. To ensure sustainable WASH facilities in schools, the Centre for Environmental Health and Water Supply together with the Ministry of Education and Sports have developed an operations and maintenance manual for schools.

The objective is to equip school administrators and community leaders with knowledge about management of the facilities so that they serve their purpose for a long time. This is a sustainable approach towards building a sense of ownership by schools and communities for the use, maintenance and repair of proper school WASH facilities.

Dr. Soutsakhone Chanthaphone, Director, Centre for Environmental Health and Water Supply.

© UNICEF/2004/ Jim Holmes



WASH IN SCHOOLS REACHES FAMILIES AND COMMUNITIES



A youth volunteer shares messages of good hygiene practices in his village.

© PADETC/RDA/Lamngeun Manivong

SCHOOL CHILDREN IN SAVANNAKHET TEACH THEIR PARENTS

Integrating water, sanitation and hygiene education into schools is one of the best ways to reach entire communities and put community-based WASH programmes and public health policies into action. Teachers are especially influential. They are often community leaders and help mentor students to become local role models.

If students have access to functioning toilets, safe drinking water, clean surroundings and basic information on hygiene, they not only learn better themselves, but can lead the community to adopt new behaviours and better health and sanitation practices. That way, everyone wins.

In Lao PDR this is beginning to happen through Community-Led Total Sanitation (CLTS). Adapted by SNV and the Water and Sanitation Program (WSP) of the World Bank to the Lao context, CLTS and sanitation marketing approaches mobilize communities to eliminate open defecation, still prevalent in most rural areas of the

country. This approach has now been adapted for use in schools and is referred to as School-Led Total Sanitation (SLTS).

SCHOOL KIDS KEEP A SHARP EYE ON THEIR PARENTS' TOILETS

SNV has worked with fourth-grade students to improve hygiene standards in several villages in Savannakhet province. In Nakaomin village, children monitor the cleanliness of toilets and compounds by using a scoring system. All houses carry a red, white or yellow flag, which reveals how well the family scored at the last check-up.

The scheme galvanizes adults to listen to their children. Students compete with each other to keep their houses and toilets clean. At the same time, kids can put into action what they learn from life skills-based hygiene education at school.

The students always work in teams of three. One team checks about 15 households in three different villages each Friday afternoon. The system is organized by the local school, which in turn receives a small income.

A Youth volunteer prepares for a hygiene education game in the community

© PADETC/RDA/Lamngeun Manivong

The households are assessed on nine criteria:

1. Having access to and using an improved toilet
2. Drinking treated water and storing it properly at home
3. Managing garbage disposal or having garbage bins at home
4. Managing waste water or putting in drainage around the house
5. Keeping livestock away from the house
6. Installing fences around the house to keep livestock away
7. Keeping the household toilet clean and equipped with water for flushing
8. Participating in WASH village meetings and on cleaning day
9. Having access to hand-washing facilities with soap in or near the toilet

Each household scores 10 points for each criterion it meets. A total of 75 points results in a red flag. Anything lower than this leads to a yellow or white flag and a fine has to be paid. A household that gets three white flags in a row has to pay a fine of 5,000 kip. For three yellow flags, the fine is 3,000 kip. The kids assess every household on the spot and change the flags accordingly.

The community has readily accepted the system. Mr Jamwang, a 60-year-old resident of Nakaomin village, said he enjoys having the children come around and score the households, even if he just got handed a yellow flag.



Students from Nakaomin village check if drinking water has been boiled.
© SNV/Bart Verweij

"People tend to forget about sanitation and hygiene. But now, the kids remind us of good practices. They are very engaged, while adults just stood around and lectured us in a dull way," he said. "They are excellent supervisors and flag without mercy."

Jita, who is 10 years old and in Grade 4 of Nakaomin primary school, says: "I like doing this because it makes the households clean and I like mathematics. At home, if I say something about our own house to my parents, they listen to me. The most difficult part is to check the drinking water. It is not easy to ask who boils it."

Students put up a yellow flag on a household, which did not reach the minimum needed for a red flag (everything in order).



SYNERGIES BETWEEN COMMUNITIES AND SCHOOLS

Jita is a good example of why working with schoolchildren has so much potential for WASH. Children are fast learners and adapt to new behaviours much quicker than adults. They carry what they learn outside of the classroom, and may question existing practices in their homes. What they learn in school, they pass on to their peers and siblings and to their own children if they become parents, sustaining sanitation gains. Students can also put other skills learned in school into practice: personal hygiene, cleaning the environment, mathematics, reading, writing, taking on responsibility and working in teams. Up until now, Nakaomin village has maintained Total Sanitation Village status as specified by the provincial government of Savannakhet province – and these nosey village kids will make sure it stays that way.

COMMUNITY DIALOGUE

Community Dialogue, well into its second decade, is a participatory process designed to get community members to assess local needs and capacity (human resources and local materials) to construct water supply systems funded by the government, UNICEF and other donors. In this process communities are provided with support options based on informed choices. Community Dialogue is also centred on raising awareness about good hygiene practices. As a result of the community dialogue, contributions are made in the shape of labour and materials for construction and cash for operation and maintenance.

Given the essential link between community and school WASH interventions, UNICEF has called for communities to play a bigger role in school WASH programmes and vice-versa. Revised in 2013, the Community Dialogue manual now includes a request that community members participate in school WASH efforts in order to gain support for local water supply and construction. Communities are thus asked to:

1. Provide sufficient soap for students to use throughout the year
2. Construct basic hand-washing facilities made of simple, locally available materials
3. Construct a fence around the school compound to prevent animals from damaging hand-washing facilities

The increase in investment by the communities aims to foster greater ownership and interest to support the WASH in School programmes. All those involved in the dialogue process are the facilitators, acting to support local decisions but communities are the decision makers.



YOUTH VOLUNTEERS SPUR VICTORY FOR COMMUNITY HYGIENE

Nongxong village in Borikhamxay province used to struggle with poor hygiene and sanitation behaviour, causing diarrhoeal and other diseases that negated the positive effects of good nutrition. Treatment and storage of household drinking water, including poor hygiene habits, were pinpointed in an analysis conducted by Participatory Development Training Centre (PADETC), Rural Development Agency (RDA) and Theun-Hinboun Power Company Limited (THPC).

These three partners decided to take action. Using a CLTS approach, they embarked on a project to integrate good sanitation, hygiene and nutrition, aiming ultimately to eliminate open defecation in the village. A group of 29 youth volunteers from local communities were recruited and trained to oversee village efforts. The volunteers authenticated data on sanitation provided by the communities as a form of quality control – all in the interests of achieving open defecation free (ODF) status.

The project built on previous knowledge, incorporating daily two-hour waste management activities coupled with Blue Box educational sessions on good hygiene and sanitation methods. Participation was broad-based. The volunteers were joined by village youth, principals, teachers and community members. Messages about personal hygiene were also spread through volunteer-led games, school competitions and films. Volunteers helped to design community action plans and were vigilant about sanitation monitoring and follow-up.

This project resulted in stronger collaboration between schools and communities, reinforcing the importance of WASH and nutrition to alter age-old habits. The success of the volunteer approach showed that although external help has a role to play, solutions identified by communities themselves are crucial. Involving children at an early age in CLTS is an excellent way to achieve long-term behaviour change. The news about Nongxong village? There is no more open defecation.



6

MONITORING FOR RESULTS

When implementing WASH in Schools initiatives, much like any other programme or project, it is fundamental to understand if, for example, activities are on track, whether or not results are being met and if we can use the opportunities for broader learning. To do so effectively, programmes and projects use monitoring, evaluation and research strategies and these are becoming ever more important in today's information based society.

WHY ARE MONITORING, EVALUATION AND RESEARCH IMPORTANT?

Good information on the situation of WASH in Schools, as well as the progress and achievements of projects is of paramount importance, both for Governments and development partners. As such, monitoring and evaluation (M&E) and research are a critical part of any successful water, sanitation and hygiene programme. A quality M&E framework and research design will assist stakeholders to:

- Track progress/implementation quality and increase accountability
- Assess whether the intended results have been achieved
- Detect obstacles early on and guide corrective action over time
- Discover if initiatives are making a positive contribution as intended
- Explain the reasons for success and failure to inform future action
- Indicate how to improve policy and future programmes to achieve results
- Provide evidence of successful programmes

In Lao PDR, UNICEF has used monitoring from the very early stages of programme implementation. Recently, under the WASH in Schools programme, UNICEF re-designed toilet facilities and monitored the construction of these new models. By closely following construction stages it was observed that contractors were not used to the new technology the construction required, and corrective action was needed based on these findings. Now, prior to any construction, UNICEF and contractors meet for a briefing session that provides clarification about designs and prevents potential obstacles.

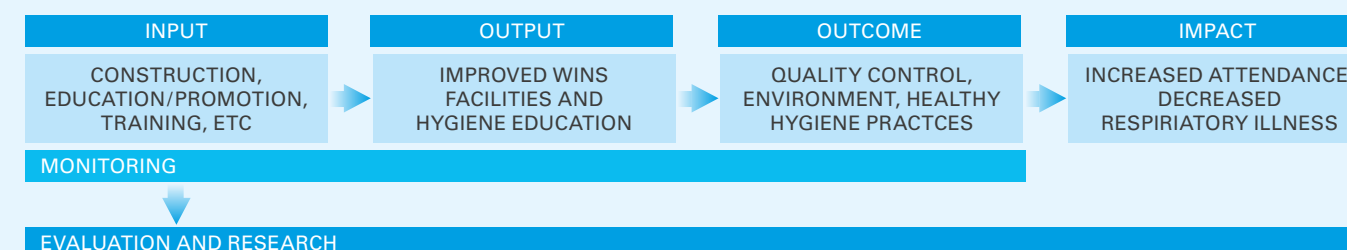
THE DYNAMICS BETWEEN PLANNING, MONITORING EVALUATION AND RESEARCH

Monitoring and evaluation always relate to results that have been mapped out. The diagram below provides an example, outlining a results framework for a fictional WASH in Schools programme, including inputs, outputs, outcomes and impact. Clear and measurable results are key to effective M&E. However, solid planning and design alone do not ensure that the intended results will be achieved. Likewise, even the best monitoring efforts do not rectify poor programme design. Planning and monitoring are interdependent, as monitoring results are used to inform decision making and corrective actions, as needed. Similarly, monitoring can support evaluation and research by generating questions to be answered through more in-depth evaluation and/or research.

COMMITMENTS TO QUALITY: MONITORING AND EVALUATION

Reliable, robust, and context-specific information is of paramount importance, both to Governments and development partners. UNICEF is committed to the development of policy and programmatic recommendations for improving and sustaining WASH in Schools impacts within Lao PDR, improving health and education of pupils, and contributing to the global evidence base on the impact of improving WASH in Schools conditions.

In collaboration with the Ministry of Education and Sports, UNICEF Lao PDR is implementing a large-scale WASH in Schools programme. Starting in 2014, researchers from Emory University, based in Atlanta, GA, will conduct a randomized control trial – the gold standard of epidemiological evidence – to assess the health and educational impact of the WASH in Schools programme in eight districts of Saravane Province. Data will be collected longitudinally from September 2014 until May 2016 in 100 schools randomly assigned to a group of WASH in Schools beneficiaries (intervention) or a group of non-beneficiary (comparison) schools. This study, as part of a collaborative and iterative monitoring and evaluation approach, will be used to better understand long-term outcomes of WASH in Schools programming, including





Students help each other to handwash while watering a small garden. Sustainability and efficiency are key in a WASH in Schools programme.

© UNICEF/2013/Jeff Williams

absence, attrition, enrollment, grade progression, diarrhoea, and soil-transmitted helminth infection. A robust monitoring framework will be used to track program performance, including maintenance and use of sanitation facilities, use and access to safe water supply, and hygiene behaviour change. Findings from this work will be used by UNICEF to refine WASH in Schools programming and generate best practices, influence WASH in Schools policy at the national and district level, and to raise the profile of WASH in Schools in Lao PDR.

The WASH in Schools Monitoring and Evaluation framework and research design will assist stakeholders to:

- Track the quality of programme progress and implementation
- Detect obstacles early on and guide corrective action over time
- Assess whether the intended results have been achieved
- Explain the reasons for success and failure to inform future action
- Provide evidence for policy and programme improvements
- Disseminate lessons learned within and outside of Lao PDR

As part of a new and innovative approach to monitoring and evaluation, data will be collected using smart phones, and will be uploaded to a server for a real-time access to information. This option reduces the time between data collection and the availability of

raw data, thus facilitating the ability to give timely updates to stakeholders on the progress of programme implementation, adherence, and outcomes, and inform adaptations to initiatives where indicated. Furthermore, by using mobile technologies to capture programme outputs, the research process becomes more cost efficient, timely, and less prone to some traditional challenges, such as lost data or data entry mistakes.

GAPS IN MONITORING AND EVALUATING WASH IN SCHOOLS

According to global WASH in Schools recommendations,²¹ based on outcomes of the December 2013 global WASH in Schools roundtable at UNICEF headquarters monitoring in particular needs to be strengthened. This includes monitoring of WASH in Schools facilities for functionality and student hygiene practices. The UNICEF WASH in Schools Monitoring Package²² provides guidance to support monitoring of inputs, outputs and outcomes. The national monitoring systems for WASH in Schools are generally weak in developing countries, and only about half of the programme countries are able to report on what percentage of schools have water and sanitation facilities. Lao PDR has taken some promising steps regarding outcome monitoring, including the insertion of WASH dedicated items in the national school census questionnaire (EMIS). By providing national information about WASH in schools on a regular basis, programmes are better guided and thus capable of having more impact in their interventions.

LAO PDR FIT FOR SCHOOL HEALTH OUTCOME STUDY

The Fit for School Programme, supported by GIZ and SEAMEO INNOTECH was launched by MoES in Lao PDR in December 2011. The program focuses on three interventions: hand-washing with soap and toothbrushing with fluoride toothpaste as a daily group activity in schools, and mass deworming twice a year.

To determine the impact of these interventions on the health and school attendance of children over a two-year period, a Health Outcome Study was conducted in 2012, prior to the start of intervention in schools, involving 44 public primary schools in Vientiane. Of these, 22 schools were participants (intervention schools) and another 22 followed the regular health education curriculum with annual deworming (control schools). The study followed the same protocol as an earlier impact evaluation conducted in the Philippines, which showed promising results one year after the programme was introduced.

In October and November 2012, baseline data on 675 children aged 6-7 were collected by two local research teams from the MoES and the Lao University of Health Sciences – Faculty of Dentistry. Researchers measured the following parameters: weight, height, presence of tooth decay and oral infection, problems with oral and abdominal pain, and socio-economic information. Stool examinations were done by the Center for Malaria, Parasitology and Entomology for detection of intestinal worm infections. Baseline information on absenteeism for the 2012--2013 school year was obtained through a review of class records. Data from the same children will be measured again 24 months after the initial cull, providing information on the effectiveness of the key programme interventions.

The study revealed the following baseline results:

Percentage of children with...	
Soil-transmitted intestinal worm infection	13%
Stunting to severe stunting	34%
Below normal body mass index	32%
Tooth decay	91%
Open pulp with infection or abscess	59%
Pain in the mouth	52%
Stomach pain	12%
Per child, the average number of teeth...	
Tooth decay	7.5
Open pulp and infection or abscess	2

The results indicated a persisting high burden of preventable diseases, underscoring the importance of establishing and expanding cost-effective and simple interventions to address these diseases.

MONITORING OF LATRINE USE AND FUNCTIONALITY

Ensuring that toilets are working properly is essential for their use. Hence the monitoring undertaken by the Sustainable Sanitation and Hygiene for All programme in three districts (Atsaphon, Phin and Xonnabouli districts) of Savannakhet.²³ As part of the programme, 25 schools with 2,970 students – around 40 per cent of schools in the three districts – were provided with sanitary toilets. Teachers at 17 of these schools were trained in good hygiene and sanitation practices critical to the school-led total sanitation approach, and the remaining eight schools will receive training after a programme revision. The training provided also included information about toilet management, such as keeping the toilets clean and functional. Through monitoring, it was found that in 2013, only 62 per cent of students at the 25 schools used the toilets because many of the toilets were not functioning properly – for example, they had no water for flushing or it was locked. When compared to the baseline data, the 2013 usage rate revealed a 50 per cent increase in students using the sanitation facilities since 2012. Through monitoring it was noticeable that in all schools where teachers received training, the latrines were functional. This suggests that toilet management training can improve functionality.

The programme also monitors progress in the number of schools that have hand-washing facilities with soap or soap substitutes in or near the toilet. Progress on this front was much better. The percentage of students who had access to hand-washing facilities rose from 12 per cent in 2012 to 67 per cent in 2013.

MONITORING SCHOOL HEALTH AND DEWORMING

In Lao PDR, a 2002 study showed that 96 per cent of school-aged children had soil-transmitted helminth infections, with up to half having moderate to heavy infections. The results led the ministries of health and education to launch, in 2005, the school deworming programme, initially in four provinces, expanded to nationwide in 2007.

An anthelmintic treatment campaign is now conducted once a year in nine southern provinces, and twice a year in the country's eight other provinces where prevalence reaches above 50 per cent.

The school deworming programme aims to cover at least three quarters of primary school-aged children (5-14 year olds). Over 95 per cent of treatment coverage has been reported annually. Between 2005 and 2012, the prevalence of STH infections in four sentinel schools fell from 96 per cent to 28 per cent with no moderate to heavy infections reported in 2012. This collaboration on deworming between the Ministry of Education and Sports and the Ministry of Health is a success story and has been used as a model for other STH infection-endemic countries.

JOINT CALL TO ACTION FOR WASH IN SCHOOLS

The goal of the Joint Call to Action is to ensure that all schools provide skills-based hygiene education, access to safe water and well-maintained, child-friendly sanitation facilities. We have proof of the impact of WASH in Schools. We have guidelines on the essential components and best practices. We know how to make WASH in Schools interventions more effective and sustainable. This is a call to immediate action, renewed commitment and increased investment in WASH in Schools.

The Joint Call to Action seeks to increase access to improved and sustainable services throughout the world. Urgent action is needed to protect the health of all children, to encourage them to fully participate in educational opportunities, and to support their abilities to contribute to the sustainable development of their countries. Because every child has the right to be in a school that provides safe water, sanitation and skills-based hygiene education, we call for renewed commitments to:

1. IMPLEMENT THE MINIMUM STANDARDS FOR WASH IN SCHOOLS

All partners are to adopt and implement programs based on the existent national, regional and local standards. These include the MoES Education Quality Standards, the Three Star Approach²⁴ and UNICEF-World Health Organization guidelines.²⁵ These standards set the grounds for harmonized approaches and should allow for gradual improvements to facilities and hygiene practices.

2. MONITOR WASH IN SCHOOLS COVERAGE THROUGH EDUCATION MANAGEMENT INFORMATION SYSTEMS (EMIS)

Advocate for the improvement of WASH in Schools indicators in EMIS. Analyse data annually and use the findings for advocacy and better resource allocation. Support the compilation of data on coverage and practices at the global level to attract attention and funding to WASH in Schools.

3. ENGAGE WITH AT SCALE WASH IN SCHOOLS PROGRAMMES

Contribute to the bigger picture by bringing individual or small-scale projects into cooperative initiatives that effectively reach more schools. Gradual improvements to facilities and hygiene practices require less investment in operation and maintenance and can be sustained with local resources. Steady progress is key to establishing sustainable, at scale programmes for WASH in Schools.

These programmes include budget lines for capital improvements, operation and maintenance of WASH facilities and recurrent costs such as purchases of soap and materials for personal cleansing.

4. INVOLVE MULTIPLE STAKEHOLDERS

Community members, civil society advocates, members of the media, students, school staff, local and regional authorities, non-governmental organizations, faith-based groups, public-private partnerships, and ministries of education, health and finance, as well as donors, can all support planning and action for WASH in Schools.

5. CONTRIBUTE EVIDENCE ON THE IMPACT OF WASH IN SCHOOLS PROGRAMMES

Local and global academic communities have expertise that can support the design of WASH in Schools programmes and chart their impact. Generating and sharing evidence will provide WASH in Schools advocates with a powerful tool to attract attention and funding to the sector.

6. RAISE THE PROFILE OF WASH IN SCHOOLS PROGRAMMES

Adapt global and regional publications, advocacy materials and knowledge for the local context and disseminate them widely. Use different media channels to engage with communities and trigger discussion on the importance of WASH in Schools. Support scaling up of local programmes that prove to be effective and sustainable.

REFERENCES

1

Education and Monitoring System (2014).

2

Lao PDR's Education and Monitoring System (EMIS).

3

UNICEF, Water, Sanitation and Hygiene (WASH) in Schools, 2012, availableat:http://www.unicef.org/publications/files/CFS_WASH_E_web.pdf.

4

UNICEF Lao PDR, 2004, School Sanitation in Lao PDR - Case Study, Unpublished.

5

UNICEF / MoES, 2010, Hygiene Education Toolkit Evaluation, unpublished.

6

From UNICEF, 2012, Country Office Annual Reports, available at: http://www.unicef.org/about/annualreport/index_69198.html.

7

Ministry of Health of Lao PDR, 2012, National Plan of Action for Rural Water Sanitation and Hygiene.

8

Bundy, D.; Silva, N. (1998) Can we deworm this wormy world?, British Medical Bulletin 1998:54 (No 2): pp. 421-432.

9

The programme was launched by the Lao Ministry of Education and Sports in partnership with the Southeast Asian Ministers of Education Organization Regional Center for Educational Innovation and Technology (SEAMEO INNOTECH) and the Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH (GIZ).

10

MoES, GIZ, SEAMEO INNOTECH (2014): Fit for School - School andCommunityManualLaoPDR.www.fitforschool.international.

11

Hutton, Guy, and Lawrence, Haller, 'Evaluation of the costs and benefits of Water and Sanitation improvements at the global level', World Health Organization, Geneva, 2004, p.29.

12

Bowen, Anna, et al., 'A Cluster-Randomized Controlled Trial Evaluating the Effect of a Handwashing-Promotion Program in Chinese Primary Schools', American Journal of Tropical Medicine and Hygiene, vol. 76, no. 6, 2007, pp. 1166-1173.

13

Talaat, Maha, et al., 'Effects of Hand Hygiene Campaigns on Incidence of Laboratory-Confirmed Influenza and Absenteeism in Schoolchildren, Cairo, Egypt', Emerging Infectious Diseases, vol. 17, no. 4, April 2011, pp. 1-16.

14

Lopez-Quintero, Catalina, Paul Freeman and Yehuda Neumark, 'Hand Washing Among School Children in Bogotá, Colombia', American Journal of Public Health, vol. 99, no. 1, January 2009, pp. 94-101.

15

Abdul Latif Jameel Poverty Action Lab, 'Mass Deworming: A best-buy for education and health', Policy Briefcase, no. 4, Massachusetts Institute of Technology Department of Economics, Cambridge, Mass., October 2007, p. 1.

16

World Health Organization, 'Prevention and Control of Schistosomiasis and Soil-Transmitted Helminthiasis', WHO Technical Report Series, no. 912,Geneva, 2002, pp. 8-9.

17

Prinsloo, Sakkie, 'Sexual Harassment and Violence in South African Schools', South African Journal of Education, vol. 26, no. 2, 2006, pp. 305-318.

18

In November 2013, SNV Lao PDR conducted research into menstrual hygiene management in rural communities in three districts (Atsaphon, Phin and Xonnabouri) in Savannakhet province. The study aimed to identify and understand the factors that affect MHM among women and adolescent girls. Some 284 females from nine different villages completed quantitative questionnaires and 17 group interviews were conducted involving 179 women. A number of pupils in nine primary schools were also interviewed.

19

WaterAid, 2012, Menstrual Hygiene Matters - A resource for improving menstrual hygiene around the world.

20

Filmer, Deon, 'Disability, Poverty, and Schooling in Developing Countries: Results from 14 household surveys', World Bank Economic Review, vol. 22, no. 1, 2008, pp. 141-163.

21

Based on outcomes of the December 2013 global WASH in Schools roundtable at UNICEF headquarters in New York where representatives of multiple organizations working in WASH in Schools met to discuss progress in the sector.

22

UNICEF, WASH in Schools Monitoring Package, 2011, available at: http://www.unicef.org/wash/files/WASH_in_Schools_Monitoring_Package_English.pdf.

23

This programme in Savannakhet province was initiated in 2010 by the Provincial Rural Development and Poverty Reduction Office, with support from SNV.

24

GiZ / UNICEF, 2013, Field Guide: The Three Star Approach for WASH in Schools.

25

United Nations Children's Fund and World Health Organization, Water, Sanitation and Hygiene standards for schools in low-cost settings, WHO Geneva 2009.

