WASH in schools –
Strengthen the evidence

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Intervention

- Daily supervised handwashing with soap prior to recess
- Daily supervised toothbrushing with F-toothpaste
- Bi-annual de-worming of all children
Fit for School – putting policy into action

- Intersectoral collaboration – health, education, nutrition, water and sanitation
- Sustained funding by local government units (LGUs)
- Advocacy & supportive policies at all levels
- WASH facilities as pre-condition for program participation and daily group activities
- Effective scale-up
But – do we really know…

.... how many children are covered?
.... the full impact of the program?
.... how children benefit from the program?
.... how well the program is implemented?
.... what the challenges are?
.... if the program’s goals are reached?

We need evidence!
Providing evidence – what do we measure, when and where?

(modified from Rose, 1992)
Monitoring & Evaluation concept

- **Impact M&E**: Longitudinal clinical trial measuring health and education indicators in selected intervention schools compared to a control group.

- **Process M&E**: Measuring implementation quality in all schools, involving parents and the community.
Impact M&E in a community demonstration site

- Baseline data:
  - Prevalence of underweight children: 28%
  - Prevalence of children with worm infestation: 45%
  - Prevalence of heavy intensity worm infestation: 17%
  - Caries prevalence: 97%
  - Oral infections: 75%
  - Children experiencing pain: 15%
  - School attendance: no baseline data
  - School performance: School Readiness Test
Community demonstrations – preparing for large-scale implementation

- Identify prerequisites, enhancing and constraining factors
  - Practical implementation model
  - Clear guidelines
  - IEC materials

- Prepare for scale-up
  - Clarification of roles and responsibilities among different stakeholders and written agreements
  - Supportive school health policies at all administrative levels
  - Incorporation into performance assessment of education system
Providing evidence – what do we measure, when and where?

(modified from Rose, 1992)
Large-scale implementation – Process M&E

- Measuring implementation quality at school level
  - Availability, functionality and use of washing facilities
  - Availability of program supplies (soap, toothpaste, toothbrushes, de-worming pills)
  - Assessing level of awareness / orientation of teachers
  - Scoring actual washing skills and institutionalization within schools

- Making implementation quality transparent at divisional level
  - Percentage of schools participating and average score
  - Identifying weak and strong areas
Incentives, quality and scale-up – using Process M&E creatively

- Process M&E motivates and involves stakeholders at local level
  - Ensures ownership and collaboration
  - Guides program implementation and management
  - Identifies room for improvement at school level

- Process M&E creates transparency and accountability
  - Through inclusion into performance assessment system of DepEd
  - Through creating a healthy competition to win Fit for School Award
Fit for School - Best features

- Simplicity of program design
- Ownership and participation
- Affordability and scalability
- Institutionalization
- Small investment – high impact with the potential of benefitting every Filipino Child

www.fitforschool.ph