

Call to Action for WASH in Schools



Action Point 4: Demonstrate Quality WASH in Schools Programs

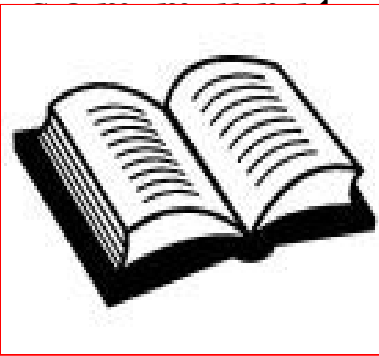
Results and Lessons from over 10 years of
School Health and Nutrition programs

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World Water Week 9 September 2010



School health policies and



Water and Sanitation



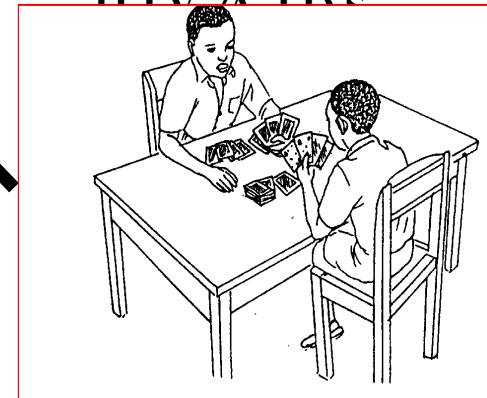
What is SHN?



School based delivery of health & nutrition services



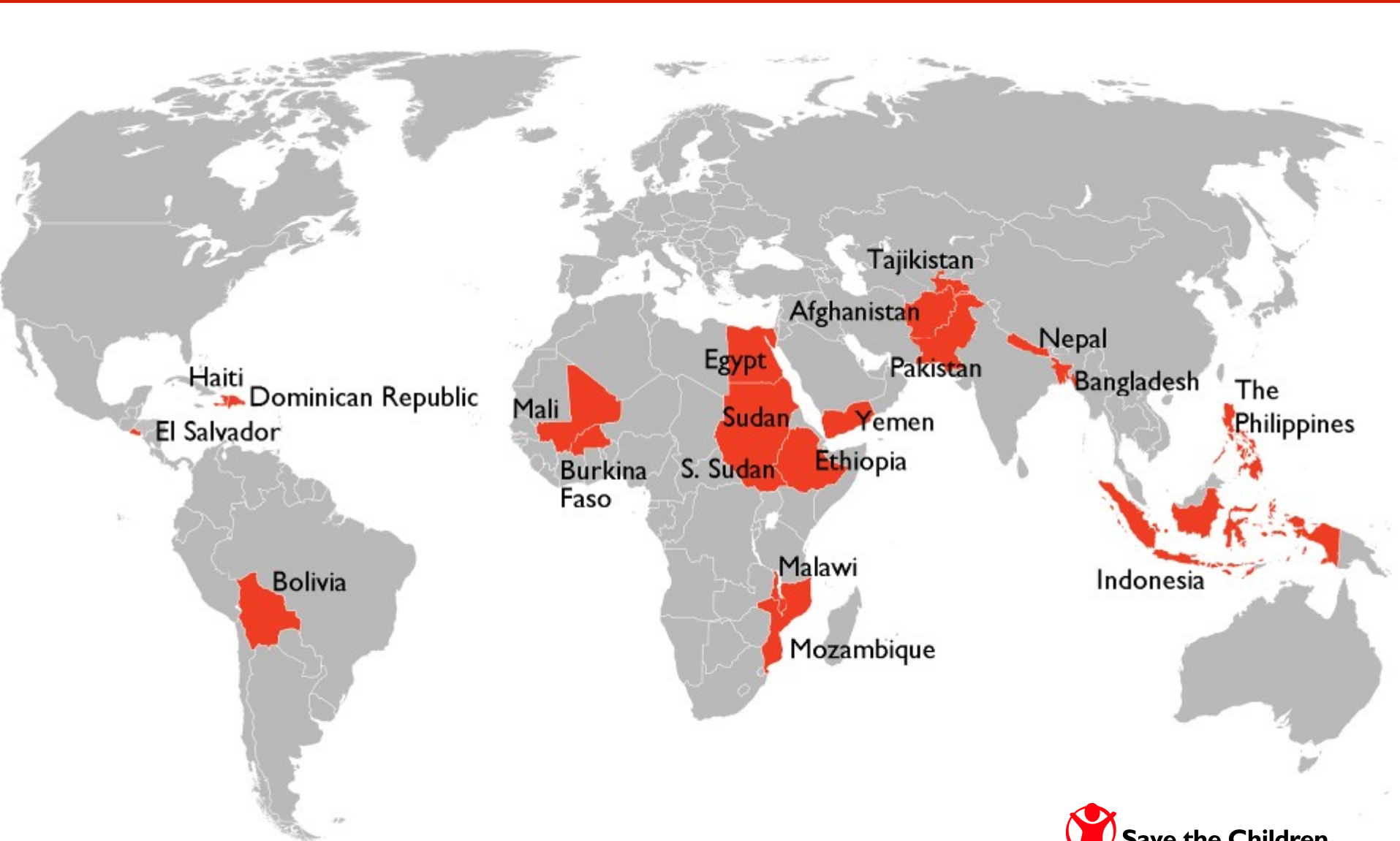
Skills based health, hygiene, nutrition & HIV/AIDS



To be healthy to learn and to learn to be healthy

SHN = WinS

Where we work in SHN/WASH in Schools



Theory of Change : how we work to create greater impact for children

We will...

... be the voice

advocate and campaign for better programs and policies to fulfil children's rights at national, regional and global level; promote child participation and ensure that children's voices are heard – particularly those children most marginalised or living in poverty

... be the innovator

develop and prove new, evidence-based and replicable breakthrough solutions to problems facing children, through policy, research and program activity

build partnerships

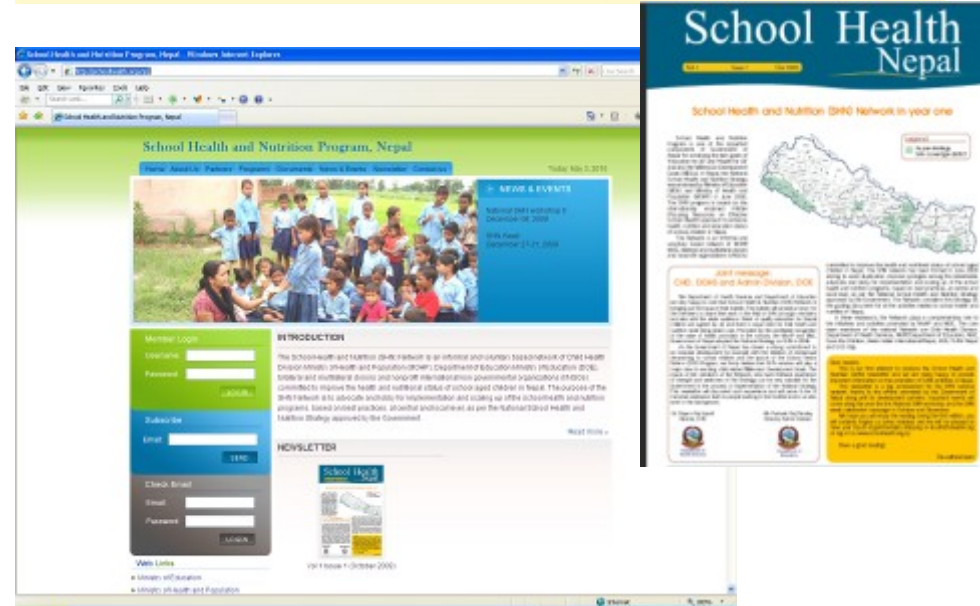
coordinate and collaborate with children, civil society organizations, communities, governments and the private sector to share knowledge, influence others and build capacity to ensure children's rights are met

... achieve results at scale

support effective implementation of best practices, programs and policies for children, leveraging our knowledge and working to ensure sustainable impact at scale through advocacy, direct support and capacity-building

National SHN program in Nepal

- Started with pilot with sponsorship funding in 1999
- Used evidence to increase funding
- Partnership with other NGOs
- 2006 National Strategy developed
- 2009 SHN Network developed (<http://schoolhealth.org.npa> and national SHN newsletter)



SHN program in Mangochi, Malawi

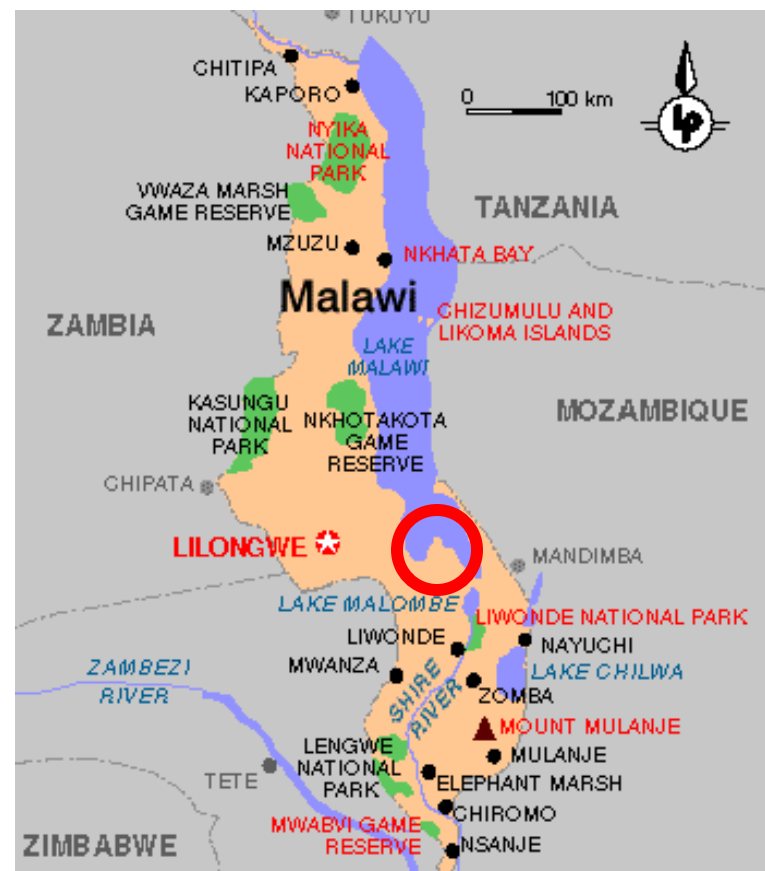
Malawi statistics	
HDI index	160/182
Life expectancy	52y
Adult literacy rate	72%
Gross enrolment	62%
National SHN program launched in 2007	

District: Mangochi and Balaka

of schools: 171

of children: 125,000

Program years: 1998-2008



SHN interventions in Mangochi

School-based health services

- Deworming
- Vitamin A (and iron) supplementation
- Vision and hearing screening
- Presumptive malaria treatment

Safe school environment

- Safe drinking water
- Latrines for girls and boys
- Hand-washing facilities

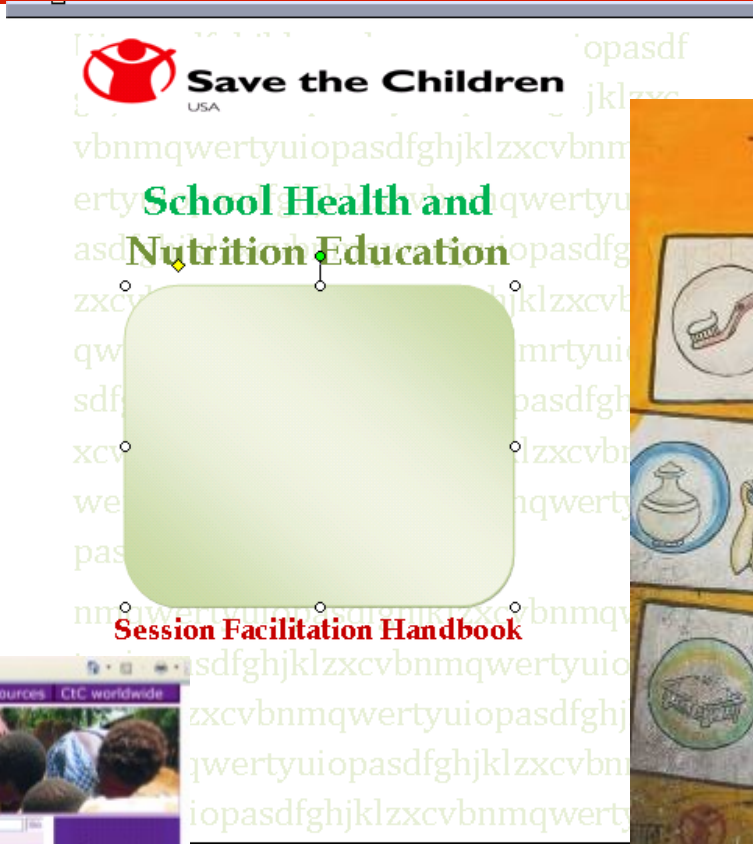
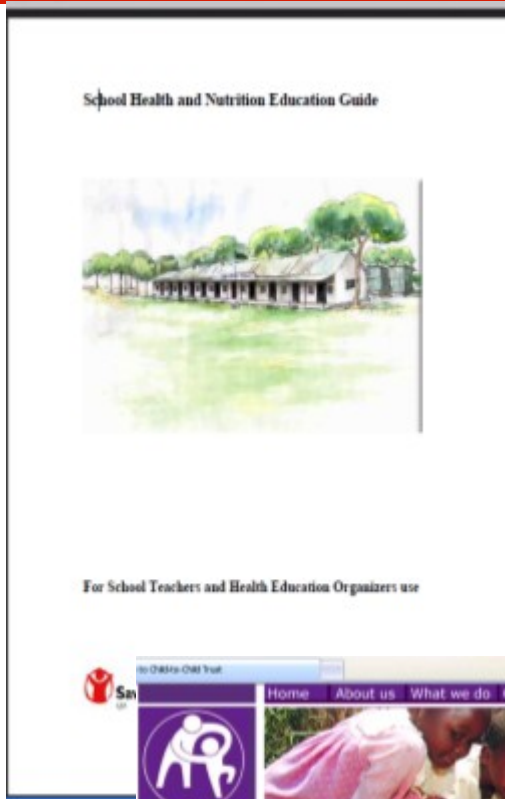
Promotion of healthy behaviors

- ◇ *Co-s parent guides*
- ◇ *Teacher peer counseling*
- ◇ *Teacher led health education*
- ◇ *Extra curricula behavior centered communication*

Community support

- ◇ *Capacity building of school and community committees to support these activities*

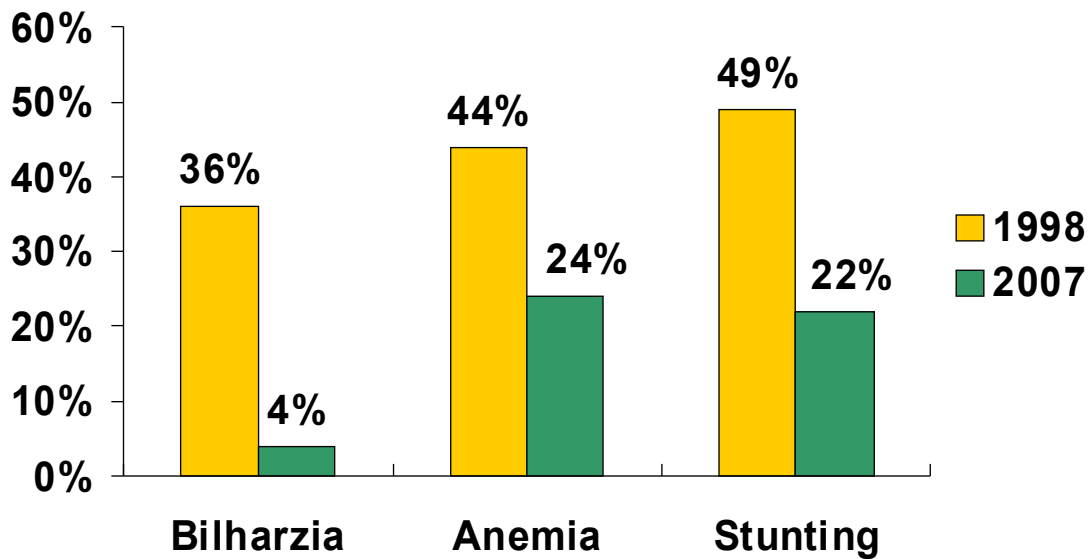
Health Education = Quality SHN



Evaluation design in Mangochi

	Baseline (1998)	End line (2007)
Sample	n=1200	n=1200
# schools	12 (5 upland and 7 coastal)	Same as baseline
# children	100 children/school: 50 from standard 3 50 from standard 6/7	Same as baseline
Indicators	Hemoglobin, heights, weights, schisto, KAP, school observation	Same as baseline (same questionnaires and methods)
Qualitative	Yes	Yes

Improved health status



“Children no longer have blood stains on their pants” - community member

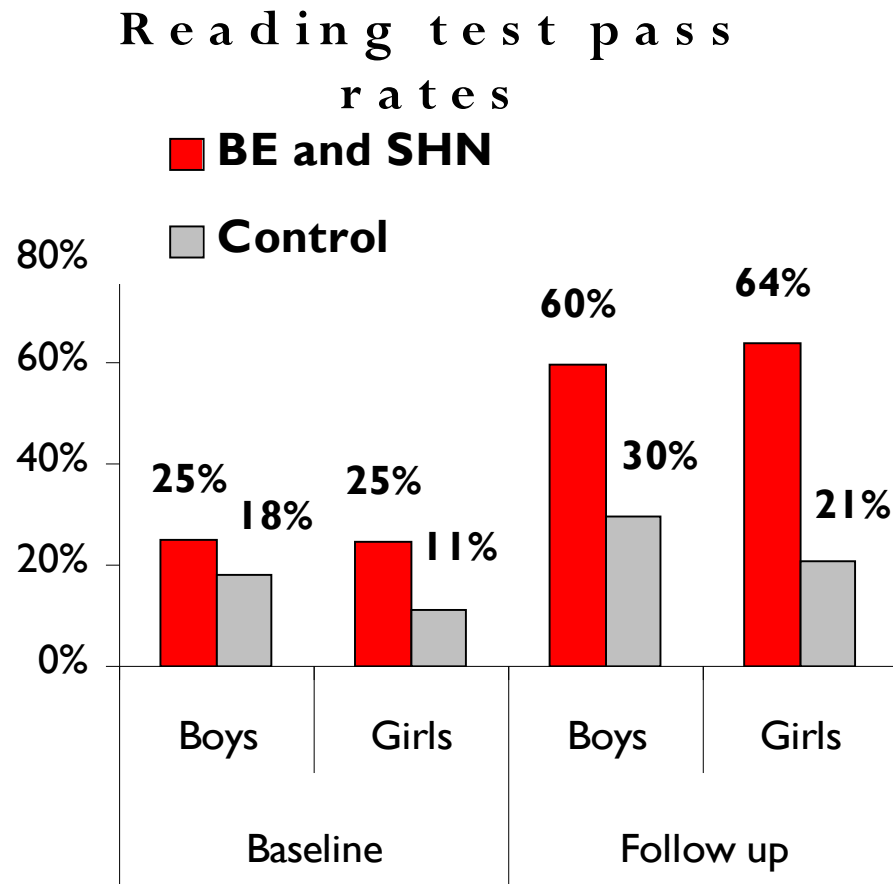
“Treatment of bilharzia has boosted pupils’ zeal to be in school” - Teacher from Mpale school

Improved school performance

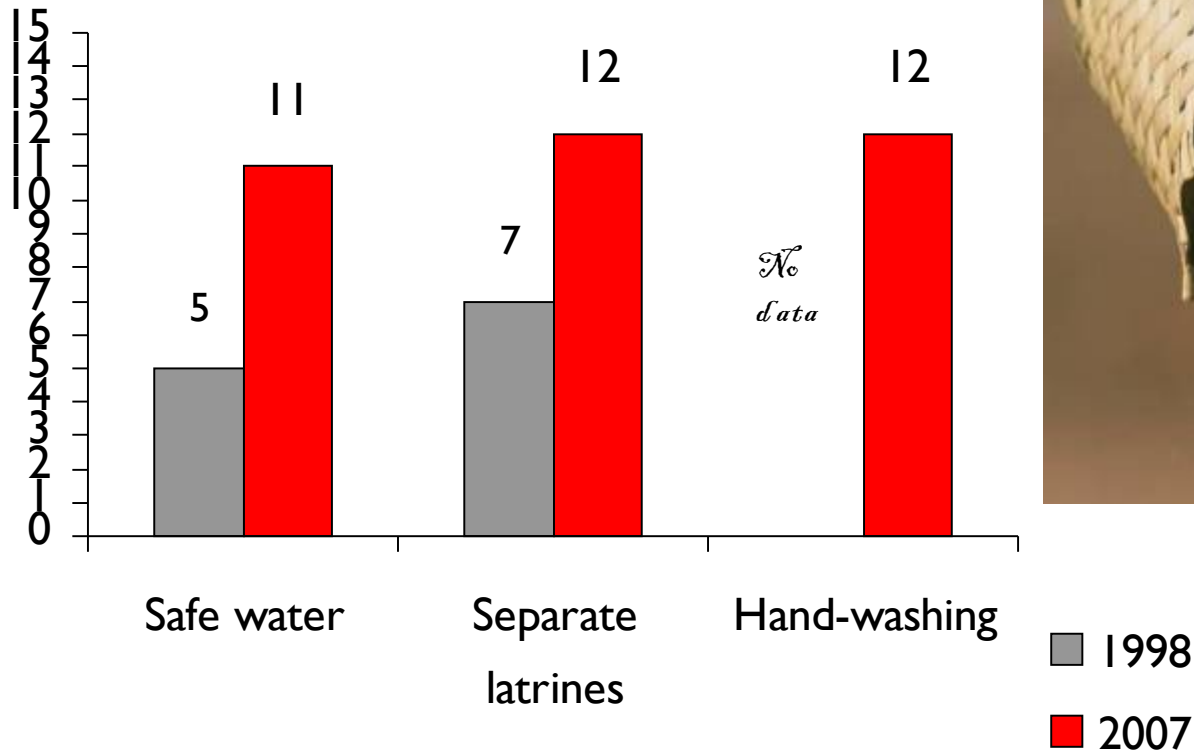
Student achievement data from 39 Sponsorship schools versus 63 non sponsorship schools suggests

Positive impact from BE and SHN on school performance.

Similar findings for drop out and repetition but less obvious



Increased access to water and sanitation facilities, but...

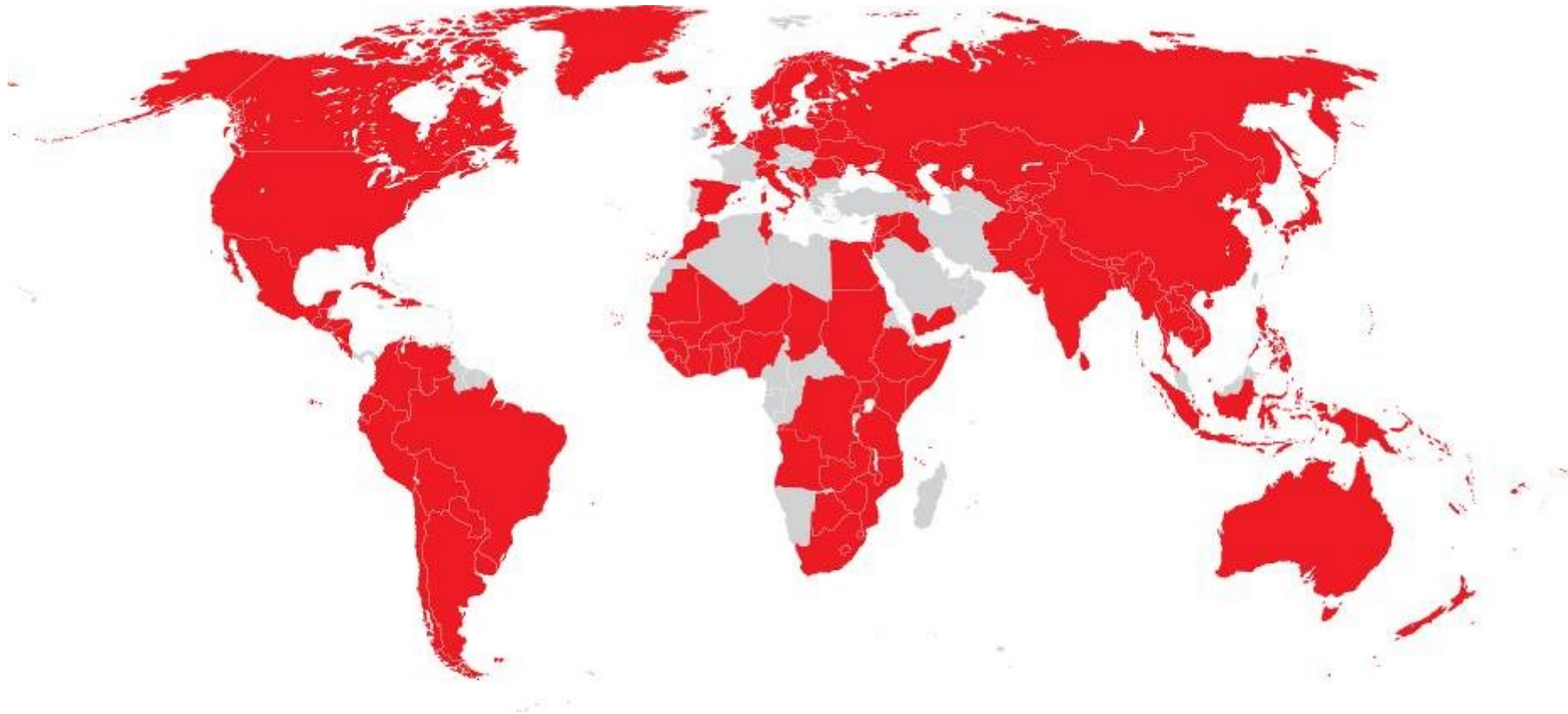


But only 4 of hand-washing facilities were functional and none had soap or ash

Only 41% of children report washing hands after using the toilet

Save the Children

Where we work globally



Lasting positive change for children in need
27 SC members in 110+ countries