

REPUBLIC OF RWANDA



MINISTRY OF HEALTH

THE TRAINING MANUAL FOR COMMUNITY-BASED ENVIRONMENTAL HEALTH PROMOTION PROGRAM



Revised March 2020



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REPUBLIC OF RWANDA



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FOREWORD

Millions of people around the world die every year from preventable diseases caused by unhealthy environments. Rwanda's 2015 Health Sector Policy reports that 90% of consultations at the rural health facilities include diarrhea, malaria, acute respiratory infections, skin diseases, tuberculosis, typhus, cholera, and intestinal parasites, diseases that can be prevented through improved hygiene at the personal, domestic, and community levels.

The Community-Based Environmental Health Promotion Program (CBEHPP) was established in 2009 and remains one of the Ministry of Health's key interventions to decrease the burden of diseases related to the environment. The goal of the program is to improve community health by reducing disease burden related to inadequate sanitation, poor hygiene practices, and drinking unclean water, through comprehensive participatory environmental health dialogues and actions in schools and communities.

Because of the many global and national changes that have occurred in the last decade, the original CBEHPP roadmap has been revised to reflect the current situation. Critical components in the review and revision of this roadmap include the Sustainable Development Goals (SDGs) targets such as target (3, 6, 11, 13, and 15), Rwanda's National Strategy for Transformation I (NSTI), Rwandan Vision 2050, and the adoption of cultural structures to support community governance.

The Ministry of Health would like to recognize and appreciate the following institutions and the team that worked tirelessly to review and improve the CBEHPP Roadmap, training manuals and dialogue kits, notably RBC/RHCC, USAID, WHO, CRS, SNV, UNICEF, Water Aid, Water for People, NECDP, Ministry of Environment, MINEMA, University of Rwanda, World Vision, and SFH. Special gratitude to USAID, CRS, and SNV for the financial support during this exercise.


Dr. NGAMIJE M. Daniel
Minister of Health



INTRODUCTION: STARTING UP A CHC

| | |
|--------------------|--|
| OBJECTIVE | To introduce the concept of the CHC |
| KEY MESSAGE | There is common-unity in “community” |
| TIME | 1 hour |
| HOMEWORK | Spread the word about the CHC and bring all your friends |

METHOD: Discussion and Brainstorming

- What is a CHC?
- A CHC is the combination of all CHDSs in a village.
- The CHC is a participatory approach made up of voluntary men and women who are committed to improving hygiene and sanitation practices of the group members.
- Every household in each Isibo should have at least one person as a CHC member.
- A CHDS is composed of household’s members from one Isibo.
- Members meet twice a month for one to two hours to learn about health and hygiene, with a goal of monitoring all public health issues of the community.
- Members are bound together by the recognition of hygiene standards, and the rights of men, women, and children to lead healthy, productive, and dignified lives.
- The CHC Executive Committee, in conjunction with all CHC members, should decide on the name and slogan for the CHC that represents a CHC.

REGISTRATION OF CHC MEMBERS

| | |
|------------------|--|
| OBJECTIVE | To register all members for the CHC |
| TIME | 1 hour |
| HOMEWORK | Spread the word about the CHC and bring all your friends |

REGISTRATION PROCESS

- Each CHC member should be registered in the registry book and be given a membership card.
- On the membership card, the training session and homework is listed.
- One member from each family is the primary member of the CHC (father/mother or adult family member).
- Each family should have a replacement CHC member who is older than 18.
- In urban and peri-urban areas, in case one of the couple is not present, housemaid aged 18 and above can attend the dialogue session.
- If the initial CHC member is unable to attend a CHDS, a secondary registered member can attend.
- Whenever a member or replacement attends a CHDS, his/her membership card is signed.
- Membership cards cannot be signed unless the member or replacement is there in person.
- CHC members must keep their membership cards safe and clean.
- Each CHDS Facilitator must visit the respective CHC households in his/her community to check and approve completed homework and sign membership cards accordingly.
- CHC members who have not completed some topics must complete missed sessions in the next round.
- The following year, a second round of CHDSs can be conducted for new CHC members.
- Training sessions will be done if 2/3 (at least 13) of the CHC members are present.

- The CHC Session Facilitator must keep in the register attendance records for his/her own members.

METHOD

- The CHDS Facilitator will give out completed membership cards to everyone who has been registered.
- The CHDS Facilitator will list all CHC members in the register book by name, gender, and age.
- The CHDS Facilitator will collaborate with CHC members to agree on a date, time, and place for bi-monthly CHDSs.

Electing a CHDS Facilitator and Treasurer

| | |
|--------------------|--|
| OBJECTIVE | To enable the CHC to have an effective facilitator |
| KEY MESSAGE | A good facilitator can promote voluntary, sustainable behavioral changes |
| TIME | 1 hour |
| HOMEWORK | NA |

METHOD: VOTING

- The Head of Village (CHC Coordinator), together with the CHW (CHC Supervisor) and the Village Social Affairs (Executive Secretary) will call for a village meeting and explain to the village members about CBEHPP implementation. The Head of Village will further ask each *Isibo* to vote for the CHDS Facilitator. The Head of Village, (CHC coordinator) together with the CHW (CHC supervisor), will facilitate the voting session. The CHC will nominate people who have at least completed primary school to compete for the position of CHDS Facilitator. Nominated people will stand in front, and members will be asked to stand behind their preferred person. The CHC Coordinator, together with the CHC Supervisor and Executive Secretary, will count votes and publicly announce the winner. The Head of Village will explain that the winner will undergo training and become a CHDS Facilitator in his/her *Isibo*. Subsequently, the same procedure will be repeated to elect the CHDS Treasurer.
- At the end of the voting session, the Head of Village, together with the CHW, will explain the functionality and composition of the CHC Executive Committee.

ROLES AND RESPONSIBILITIES OF CBEHPP IMPLEMENTERS FROM ISIBO TO CELL LEVEL

1. Cell Level

- Coordinate CBEHPP implementation in respective villages.
- Organize inter CHC competitions.
- Organize verification of CHC achievements.
- Report CHC activities to sector level.

2. CHC Coordinator (Head of Village)

- In collaboration with religious and opinion leaders, carry out mobilization of community to register in CHC and to attend CHDSs.
- Establish CHC in respective village.
- Organize voting session to elect CHDS Facilitators.
- Attend CHC Executive Committee meetings.
- Approve and sign CHC reports.
- Organize a quarterly meeting for CHC members.

3. CHC Executive Committee(Head of village, CHW, Treasurer and CHDS Facilitator)

- Manage overall implementation of CBEHPP in respective village.
- Organize verification visits of all CHC household members to certify completion of homework pertaining to package of topics.
- Approve CHC report prior to Head of Village signing it.

4. CHC Supervisor (CHW)

- Assist Head of Village in establishing CHC
- Supervise CHDS facilitators
- Support Dialogue Session Facilitators in conducting home visits, checking on homework implementation
- Advise CHC Coordinator
- Compile reports from CHC Session Facilitators

- Participate in CHC verification achievements
- Attend CHC Executive Committee meetings

5. CHDS Treasurer

- Ensure safety of CHC financial savings
- Report on financial status on monthly basis

6. CHDS Facilitator

- Facilitate CHDSs
- Follow up on homework, in collaboration with CHC Executive Committee
- Sign membership cards
- Prepare CHC reports

7. CHC Members

- Attend CHC sessions and actively participate
- Timely implement assigned homework
- Share acquired knowledge from CHC sessions with all family members
- Encourage other village members to join CHC sessions
- Participate in planned CHC competitions
- Cooperate in CHC performance evaluations
- Receive training

HOUSEHOLD INVENTORY

| | |
|-----------|--|
| OBJECTIVE | To enable the CHC to monitor the environmental health status |
| TOOLS | Household Inventory forms (Annex 1) |
| TIME | 2 hours per day |

METHOD

- The CHC Executive Committee completes the household inventory.
- All households should be observed before the training and before certification.
- No one from the CHC Executive Committee is to tell the chosen members that they will be visited (or they will clean up their houses and the data will not represent the true picture).

ISIBO CLUSTER MAPPING

| | |
|--------------------|--|
| OBJECTIVE | To establish the current environmental health status |
| KEY MESSAGE | Mapping can help monitor the environmental health status |
| TIME | 1-2 hours |
| HOMEWORK | No littering or garbage dumps around the <i>Isibo</i> catchment area |
| MATERIALS | Flip chart, markers, and sticks for banner |

METHOD

- The facilitator will arrange the meeting.
- The facilitator will divide all members into three or four groups—depending on the number of participants.
- Each group will map the existing sanitation facilities, households with or without latrines, open defecation sites, schools, churches, shops, health facilities, official buildings, water sources, public latrines, solid and liquid waste dumping sites, and CHC household members and non-members.
- After one to two hours, CHC members must meet to analyze the produced map and agree on a current environmental health status. Furthermore, they should discuss how to maintain the identified best practices.
- After six months, the CHC members will revise the *Isibo* maps and compare them with the baseline maps.

Topics per Membership Card

| No | Topic | Date | Signature | Homework | Signature |
|--|--|------|-----------|---|-----------|
| CLUSTER 1: DISEASES | | | | | |
| 1 | Prevalent diseases/ conditions | | | <ul style="list-style-type: none"> Identify preventable, prevalent diseases/ conditions in the Isibo catchment area | |
| 2 | Diarrheal disease transmission and prevention | | | <ul style="list-style-type: none"> Install handwashing facilities Provide soap and water at handwashing facilities | |
| 3 | Intestinal parasites/worms | | | <ul style="list-style-type: none"> Wear shoes to protect from hookworms | |
| 4 | Skin diseases | | | <ul style="list-style-type: none"> Keep body and clothes clean | |
| 5 | Respiratory tract infection | | | <ul style="list-style-type: none"> Ensure adequate ventilation and use of improved cook stoves | |
| 6 | Malaria | | | <ul style="list-style-type: none"> Clean bushes around homes Drain out stagnant water near homes Use treated mosquito nets | |
| CLUSTER 2: WATER AND SANITATION | | | | | |
| 7 | Waterpoint sources | | | <ul style="list-style-type: none"> Maintain waterpoint source | |
| 8 | Household treatment of drinking water, storage, and proper usage | | | <ul style="list-style-type: none"> Treat drinking water Store drinking water in clean and properly covered containers | |

| | | | | | |
|---------------------------|------------------------------------|--|--|--|--|
| 9 | Sanitation ladder | | | <ul style="list-style-type: none"> – Construct and improve household latrines – Identify and report any Open Defecation practice in the village | |
| 10 | Waste management | | | <ul style="list-style-type: none"> – Provide rubbish pits and ensure waste segregation – Provide controlled wastewater pits – Generate one liter of compost | |
| CLUSTER 3: HYGIENE | | | | | |
| 11 | Personal hygiene | | | <ul style="list-style-type: none"> – Construct a bathing shelter | |
| 12 | Handwashing | | | <ul style="list-style-type: none"> – Install handwashing facilities – Provide soap and water at handwashing facilities | |
| 13 | Menstrual Hygiene Management (MHM) | | | <ul style="list-style-type: none"> – Educate adolescents about MHM – Households make sanitary pads | |
| 14 | Baby WASH | | | <ul style="list-style-type: none"> – Use clean potty and diapers – Make clean mats for a child to play on | |
| 15 | Food safety | | | <ul style="list-style-type: none"> – Install a utensil drying rack | |

| CLUSTER 4: INCOME GENERATION FOR WASH ACTIVITIES | | | | | |
|--|----------------------------------|--|--|---|--|
| 16 | Income-generating activities | | | <ul style="list-style-type: none"> – Join and contribute to income-generating activities – Invest in sanitation and hygiene products and services | |
| CLUSTER 5: WASH INCLUSION | | | | | |
| 17 | WASH and disability | | | <ul style="list-style-type: none"> – Provide WASH facilities that accommodate People with Disabilities (PWDs) | |
| 18 | Role of gender in WASH promotion | | | <ul style="list-style-type: none"> – Involve men in CHC activities | |
| CLUSTER 6: ECOHEALTH | | | | | |
| 19 | Indoor air pollution | | | <ul style="list-style-type: none"> – Construct kitchens with ventilators – Use improved cooking stoves | |
| 20 | Emergencies and disasters | | | <ul style="list-style-type: none"> – Create a community resilient plan for emergencies and disasters | |

CLUSTER 1: DISEASES

Topic 1: PREVALENT DISEASES/CONDITIONS

| | | |
|---------------------|---|----------|
| OBJECTIVE | To show people that most of the diseases are preventable | 1 |
| KEY MESSAGE | Prevention is better than a cure | |
| CARD SET No. | 1 | |
| TIME | 1hour | |
| HOMEWORK | Identify preventable, prevalent diseases in the <i>Isibo</i> catchment area | |

METHOD

The facilitator will ask the CHC members (who shall henceforth be referred to as participants) to outline prevalent diseases in their *Isibo*.

- The facilitator will explain that the participants are going to do a role play to determine what diseases are prevalent in the community.
- The facilitator will give out Card Set 1: Prevalent Diseases.
- The facilitator will select one of the participants to be a doctor.
- The doctor must sit in a chair in the middle of the room, and all other participants should pretend to be at a clinic.
- Each person with a card must come up to the doctor, show his/her card to the doctor, and act like the person in the card, explaining his/her illness.
- The doctor must try to diagnose the disease and offer advice for next steps.
- Each time, the facilitator will ask everyone in the audience: *Do you think this disease is preventable?*
- If the disease can be prevented, the facilitator will ask the patient to sit down.
- If the disease is not preventable, the facilitator will ask the patient to remain in the clinic for admission.
- The facilitator will count how many patients remain in the clinic.

Note: *It is likely that only genetic or non-preventable conditions such as cancer, high blood pressure, mental disorders, epilepsy, and heart disease will require a visit to the clinic—if all preventative measures are taken as recommended.*

Conclude the activity by showing that most diseases are preventable, and that if everyone prevented these diseases, the clinics would be empty and people would save a lot of money.

ACTIVITY 2: CAUSE AND PREVENTION OF DISEASE

(To be done in the same session) Card Set: 1a and 1b

- The facilitator will give the disease cards to different participants and ask them to name the disease shown on their card.
- The facilitator will give different participants cards that show the cause of each disease depicted on the disease cards.
- The facilitator will ask each participant with a card to come forward and explain the card.
- The facilitator will ask each participant with a disease card to stand behind the person holding the card detailing the cause of their disease.
- The facilitator will ask each participant with a disease card to stand behind the person holding the card detailing the cure of their disease.

Card Set No. 1a: PREVALENT DISEASES/CONSIONS



1. Marasmas



2. Kwashiorkor



3. Dehydration



4. Diarrhea



5. Malaria



6. Bronchitis



7. Tuberculosis



8. Worms



9. Scabies



10. Ringworm



11. Lice



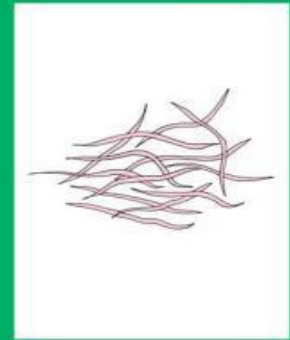
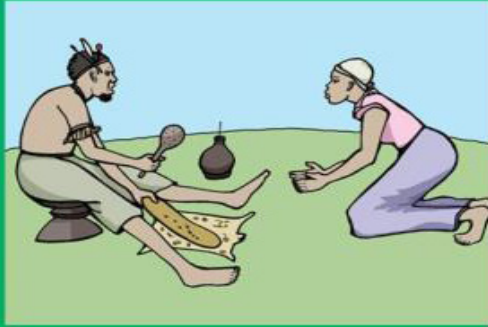
12. Meningitis



13. Accidents



14. Impaired



Topic 2: DIARRHEAL DISEASE TRANSMISSION AND PREVENTION

| | | |
|--------------|--|---|
| OBJECTIVE | To understand that diarrheal diseases have many causes | 2 |
| KEY MESSAGE | There are five ways to prevent diarrheal diseases | |
| CARD SET No. | 2 | |
| TIME | 1-2 hours | |
| HOMEWORK | Use soap and clean water for handwashing at home | |

METHOD

- The facilitator will ask two people to hold up the pictures showing open defecation and the mouth.
- The facilitator will ask what the participants already know about diarrheal diseases.

Facilitator's note

Diarrhea: The passage of three or more loose or liquid stools in one day (a 24-hour period), or more frequently than is normal for the individual.

Diarrhea may be classified by five general types based on the mechanism, and three types according to clinical syndromes. Based on mechanism diarrhea could be classified as inflammatory, which is caused by an intestinal infection (e.g., Salmonella, E. coli, etc.), and inflammatory bowel disease (ulcerative colitis). Secretory, which is caused by infections and enterotoxins (e.g., Cholera, E. coli, rotaviruses, etc.), humoral agents (e.g., Gastrin, etc.), and laxatives (e.g., commercial, altered bile salts, and fatty acids).

- Give out the Transmission pictures flies, fingers, food, fruit and fluid.
- The facilitator will ask the participants to place the feces and mouth cards on the floor,
- The facilitator will give out the transmission cards to the participants.
- The facilitator will ask the participants to identify transmission routes using the cards.
- The facilitator will give out the blocking cards and ask the participants to block the transmission routes.

- The facilitator will ask the participants to identify the most common diarrheal transmission practices in their *Isibo*.
- The facilitator will ask the participants to devise preventive measures for diarrheal diseases.

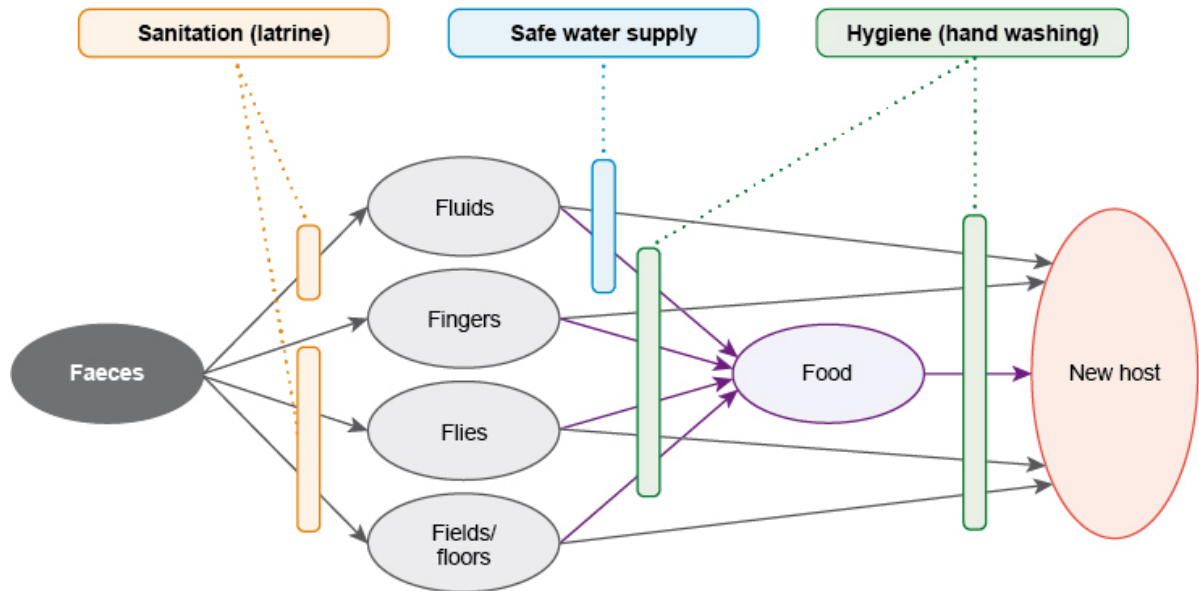


Figure: 5Fs-Diagram diarrhea transmission and prevention

RECOMMENDED PRACTICES

- Wash hands with soap before preparing and eating food, and breastfeeding.
- Wash hands with soap after visiting the toilet, cleaning a child's bottom, and touching animal waste.
- Cover food to protect it from flies.
- Ensure that flies have no access to fecal matter.
- Wash or peel all fruit before eating it.
- Keep field and yard free from human feces and animal waste.
- Treat and store drinking in safe containers.
- Ensure that drinking water is not contaminated by fecal matter.

Advise sick people to go to health facilities for early treatment

Card Set No. 2a: DIARRHEAL DISEASE TRANSMISSION



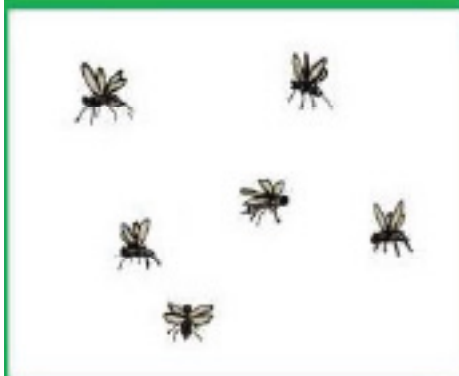
1. Feces



2. To mouth



3. By Fingers



4. Flies



5. Fruit



6. Liquids



7. Mother's dirty hands



8. Food preparation



9. Dirty hands while eating



21. Protect food from flies



22. Wash hands with soap



23. Children wash hands with soap



24. Father wash hands with soap



25. Eat in a clean place



26. Use a latrine



27. Wash plates after use



28. Reheat left over food



29. Eat hot food



30. Drink clean water



31. Store water safety



32. Wash fruit



33. Hand washing before eating



34. Peel fruit before



35. Hand washing



36. Cover utensils



37. Wash utensils after use

Topic 3: WORMS/INTESTINAL PARASITES

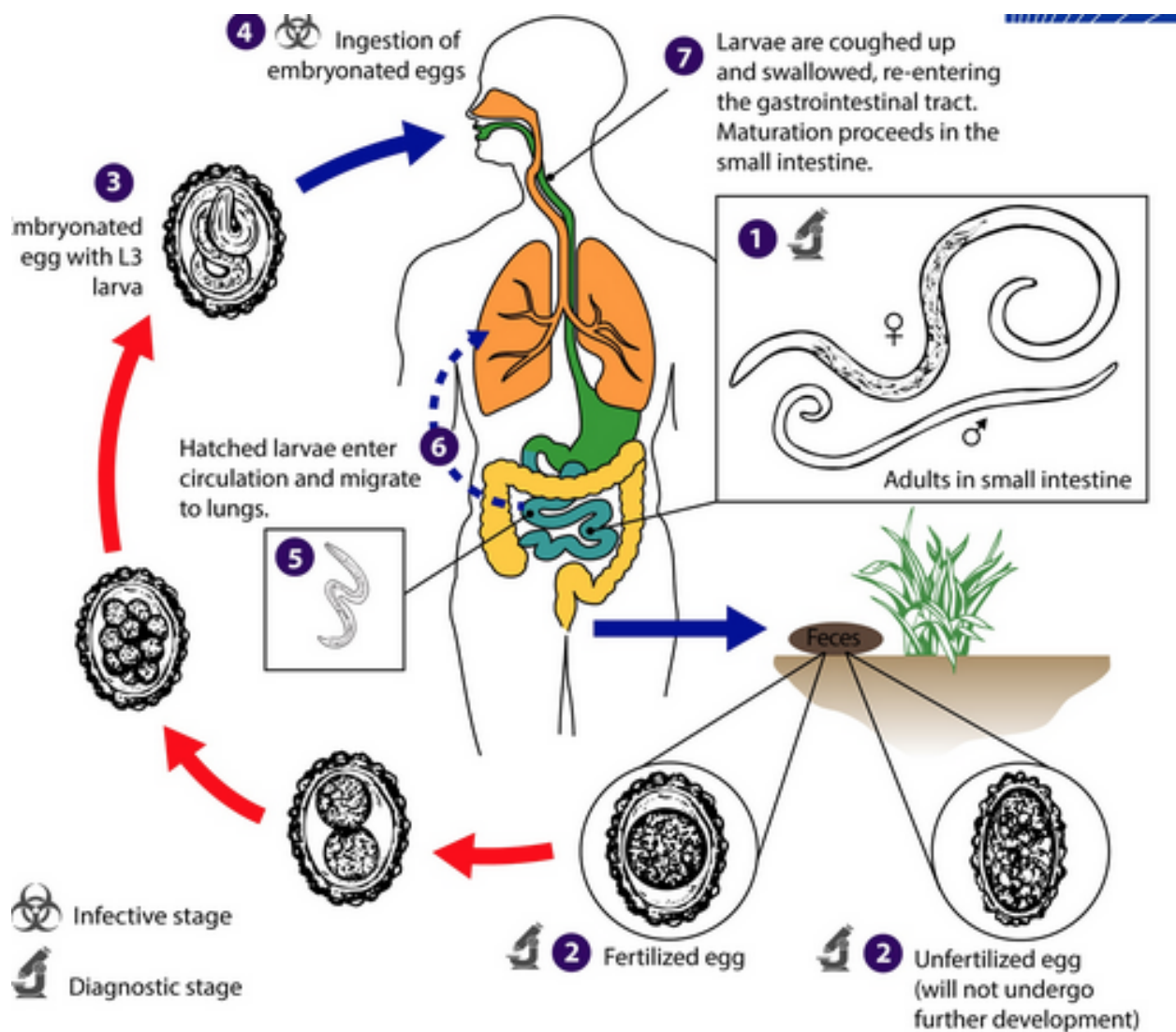
| | | |
|--------------|---|---|
| OBJECTIVE | To understand how parasitic worms affect human health | 3 |
| KEY MESSAGE | Intestinal parasites can be prevented | |
| CARD SET No. | 3 | |
| TIME | 1-2 hours | |
| HOMEWORK | Defecate into toilets Dispose children's feces into latrines | |

METHOD

- The facilitator will provide information to the participants regarding the life cycle of parasitic worms.

Facilitator's note

Ascariasis (an example of a parasitic worm): One of the most widespread nematode infections of the small intestine, related to poor hygiene and sanitation. Humans are infected by eating food contaminated with mature eggs. The usual vehicles are fruits and other raw foods. Common ways of getting infected include not washing hands before food preparation, eating contaminated food, using fresh human feces as manure, and the improper storage of food. Prevention includes the provision of clean water, an adequate water supply, and facilities for the proper disposal of feces, and the prevention of fecal contamination of food.



- The facilitator will discuss the life cycle of *Ascaris Lumbricoides*.
- The facilitator will give participants the cards showing intestinal parasites.
- The facilitator will ask each participant with a card to come forward and hold the cards in the right order to show how worm infestation happens.
- The facilitator will give out the blocking cards and ask the participants to discuss ways in which the worms can be blocked from continuing to breed or infest people.
- The facilitator will ask each participant with a blocking card to stand in front of the person with the corresponding intestinal parasite card, showing how the blocking card will prevent that transmission stage.
- The facilitator will discuss with the participants whether or not the means of prevention can be undertaken in their *Isibo*, and if so, how it will be done.

RECOMMENDED PRACTICES

- Do not defecate openly; keep environments free from human and animal feces.
- Everyone should have a hygienic latrine.
- Regularly wash hands with soap and water.
- Keep nails short.
- Do not eat unwashed or unpeeled fruit.
- Do not put fingers in the mouth.
- Do not allow children to suck dirty objects from the ground.
- Eat only well-cooked meat.
- Do not let domestic animals have access to kitchen utensils.
- De-worm all children every six months.

Card Set No. 3: WORMS/INTESTINAL



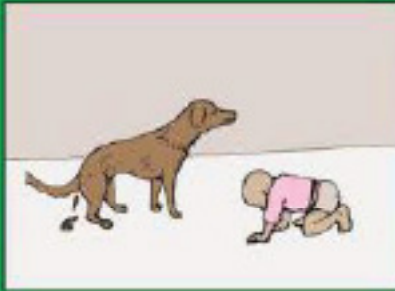
1. Roundworms



2. Distended stomach from worms



3. Itchy anus from worms



4. Worm eggs in dog's feces



5. Dirty fingers in mouth



6. Sweeping up feces



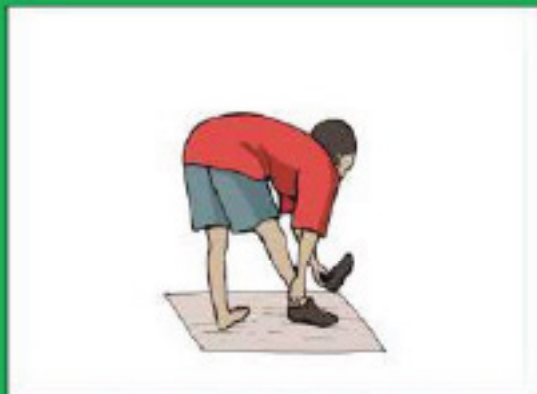
7. Dog licking child's face



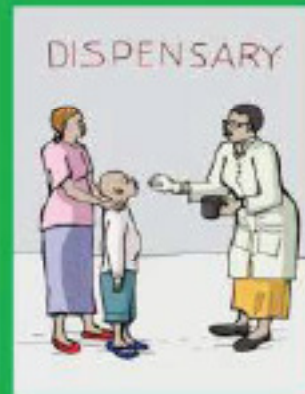
8. Dog licking plates



9. Barefoot child in latrine



10. Child putting on shoes



11. Taking worm medicine

Topic 4: SKIN DISEASES

| | | |
|---------------------|--|----------|
| OBJECTIVE | To learn how to prevent the spread of skin diseases | 4 |
| KEY MESSAGE | Good personal hygiene practices prevents skin diseases | |
| CARD SET No. | 4 | |
| TIME | 1 hour | |
| HOMEWORK | Keep the body and clothes clean | |

METHOD

- The facilitator will introduce the concept of skin diseases.
- The facilitator will explain how some diseases are caused by a lack of personal cleanliness.
- The facilitator will give a participant one card depicting a person who is infected with scabies, ringworm, or lice, and ask the participant to hold it up.
- The facilitator will give out all of the transmission cards and ask each participant to explain how each transmission method spreads disease.
- The facilitator will give out the blocking cards and ask each participant to explain their respective picture.
- The facilitator will ask the participants to stand in front of the person holding the opposite card (to block the transmission).
- The facilitator and participants will discuss all of the potential preventions and how some of them can be implemented.

RECOMMENDED PRACTICES

- Ensure personal body cleanliness.
- Wash all clothes and bedding regularly.
- Avoid touching/shaking hands with those suffering from diseases.

- Do not share clothes with anyone who has a skin disease.
- Do not share a bed or bedding with anyone who has a skin disease.
- Keep fingernails short and clean.
- Clean hair regularly.
- Apply skin lotion to everyone in the family at the same time.
- Apply skin lotion as directed by health center professionals.

Card Set No.4: SKIN DISEASES



1. A boy with 8 cabbies



2. A boy with ringworm



3. Sharing clothes



4. Separate wardrobe



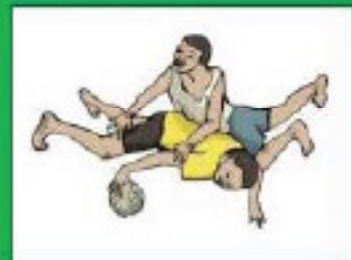
5. Sharing the same bed



6. Sleeping in 8 eparate beds



7. Shaking hands



8. Playing together



9. Sharing water



10. Pouring water for handwashing



11. Handwashing facility



12. Sharing a towel to dry hands



13. Shaking hands dry



14. Washing clothes



15. Airing out bedding



16. Applying lotion to child

Topic 5: RESPIRATORY TRACT INFECTION

| | | |
|--------------|---|---|
| OBJECTIVE | To understand and prevent RTI | 5 |
| KEY MESSAGE | Adequate ventilation prevents RTI | |
| CARD SET No. | 5 | |
| TIME | 1 hour | |
| HOMEWORK | Ensure the adequate ventilation and use of improved cook stoves | |

METHOD

Facilitator's note

RTI refers to any number of infectious diseases involving the respiratory tract. Lower respiratory infections, such as pneumonia, tend to be far more serious than upper respiratory infections, such as the common cold.

- The facilitator will explain to participants the different types of respiratory diseases (cold, flu, bronchitis, pneumonia, and Tuberculosis), showing pictures of both clear and infected lungs.
- The facilitator will give out all of the cards that depict how respiratory diseases are spread and prevented.
- The facilitator will ask each participant with a card to come forward and describe what is shown in their picture, and if it is a good or bad practice.
- The facilitator will ask all of the participants with “bad practice” cards to stand in a line and hold up their pictures.
- The facilitator will ask all of the participants with “good practice” cards to block the “bad practice” cards.
- The facilitator will explain how sneezing into the shoulder is important and how handwashing with soap helps to reduce Acute Respiratory Infection (ARI) by 50%.
- The facilitator will have the participant's role play to show how to prevent ARI.

RECOMMENDED PRACTICES

- Wash hands regularly with soap.
- Do not shake hands or have close contact with someone who is infected.
- Sneeze and cough into the shoulder or elbow, not the hand.
- Sneeze into a tissue, and safely dispose of the tissue in a closed bin.

Do not smoke inside and expose others to second-hand smoke.

- Have a well-ventilated kitchen with a smokeless stove or chimney.
- Take children early to get medical assistance if symptoms are serious.
- Infected people should not sleep in the same room as others.

Card Set No.5: RESPIRATORY TRACK INFECTIONS



1. Healthy lungs



2. Diseased lungs with spots



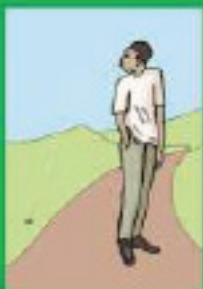
3. Coughing onto others



4. Smoking cigarettes



5. Blowing nose with fingers



6. Spitting on ground



7. Picking nose with fingers



8. Wiping child's nose



9. Sneezing into hand's



10. Sneezing into shoulder



11. Throwing tissues away



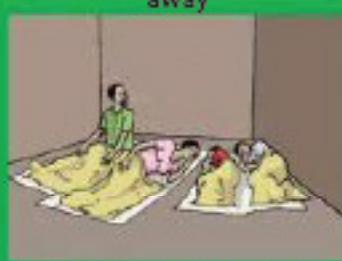
12. Washing hands properly



13. Shaking hands dry



14. Using same towel to dry fingers



15. Sleeping in unventilated rooms



16. Sleeping in ventilated rooms



17. Cooking in smoky kitchen



18. Using fuel-efficient stove

Topic 6: MALARIA

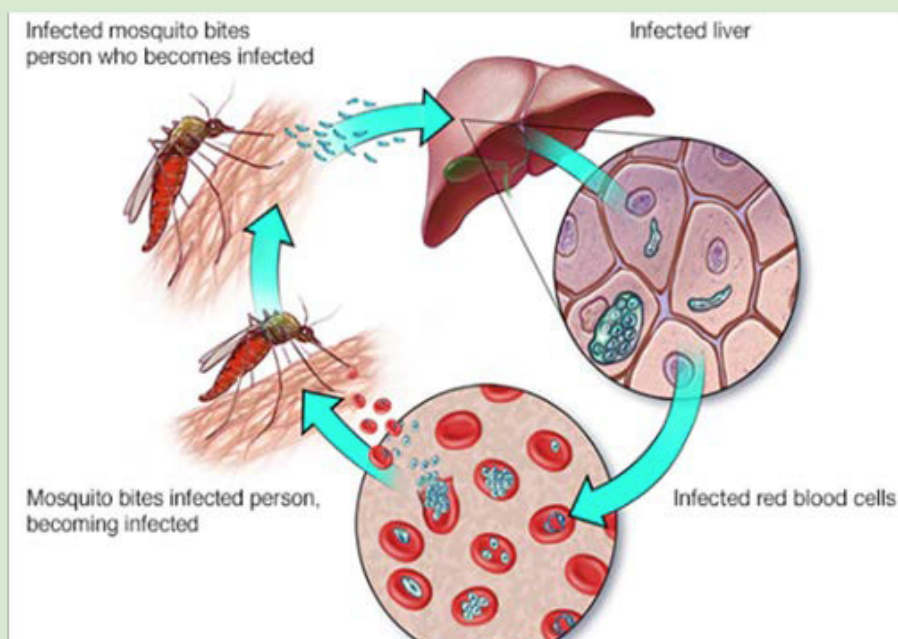
| | | |
|---------------------|--|----------|
| OBJECTIVE | To understand how to prevent malaria | 6 |
| KEY MESSAGE | Use mosquito nets and destroy mosquito breeding sites | |
| CARD SET No. | 6 | |
| TIME | 1 hour 30 minutes | |
| HOMEWORK | Clean bushes around homes Drain stagnant water near homes | |

METHOD

- The facilitator will provide the participants with information regarding the transmission of malaria.

Facilitator's note

Malaria spreads when a mosquito bites an infected person, becomes infected itself, and then bites a non-infected person. The malaria parasites enter the infected person's bloodstream and travel to the liver. When the parasites mature, they leave the liver and infect red blood cells.



- The facilitator will give the transmission cards to participants.
- The facilitator will ask the participants with the transmission cards to hold the cards in the right order to show how transmission happens.
- The facilitator will give the blocking cards to participants.
- The facilitator will ask the participants to discuss ways in which the mosquitoes can be blocked from continuing to breed and from infecting people.
- The facilitator will ask each participant with a blocking card to stand in front of the person with the corresponding transmission card, showing how the blocking method will prevent that stage in the mosquito's life cycle.
- The facilitator and the participants will discuss if the prevention methods can be undertaken by the community, and if so, how that will be done.
- The facilitator will ask participants to pledge certain behavioral changes to stop the transmission of mosquito-borne diseases (e.g., emptying tins, filling in potholes, and controlling breeding sites).
- The facilitator will make arrangements for all children under five to have insecticide-treated bed nets.
- The facilitator will discuss other activities that can be done as a group to prevent mosquito breeding.

RECOMMENDED PRACTICES

- Use a mosquito net when sleeping.
- Clean up around the home to ensure that no mosquitoes are breeding in empty containers.
- Fill in all potholes and stagnant water.
- Spray all ponds/dams with larvicide to prevent breeding.
- Cut all grass and shrubs around the home.
- Keep all doors and windows closed.

- Use wire mesh on windows.
- Burn a mosquito coil or use insecticide to ward off mosquitoes.
- Apply mosquito repellent to exposed skin.
- Go to the clinic immediately to seek treatment.
- If there is no response to the treatment within 12 hours, seek medical assistance again.

Card Set No. 6a: MALARIA TRANSMISSION



1. Mosquito



2. Rain collects in tins and holes



3. A mosquito bites someone with malaria



4. An infected mosquito



5. Person gets sick with malaria

Card Set 6b: MALARIA PREVENTION



6. Empty tins, fill potholes



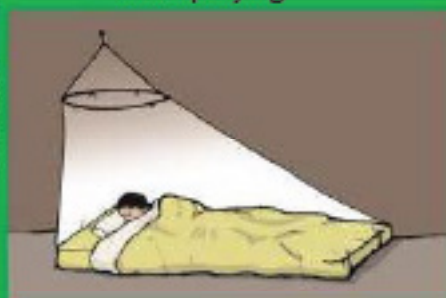
7. Mosquito windows, net, and spraying



8. Burn coil or spray room



9. Cut grass around home



10. Sleep under mosquito net



11. Cover body well if outside at night

CLUSTER 2: WATER AND SANITATION

Topic 7: WATERPOINT SOURCES

| | | |
|---------------------|---|---|
| OBJECTIVE | To analyze the difference between water sources | 7 |
| KEY MESSAGE | Maintain and manage water sources | |
| CARD SET No. | 7 | |
| TIME | 1 hour | |
| HOMEWORK | Maintain waterpoint sources | |

METHOD: Two-group Sorting

- The facilitator will introduce the concept of water.

Facilitator's note

Sources of drinking water:

- Natural springs
 - Lakes and rivers
 - The ocean
 - Streams
 - Wells
 - Rainwater
- The facilitator will give participants all of the cards that show different types of water sources.
 - The facilitator will ask each participant to come forward and describe the type of water source in their picture.
 - The facilitator will ask the remaining participants to decide which of the pictures show safe drinking water sources and which show unsafe drinking water sources.

- The participants will sort the pictures into two groups: safe and unsafe.
- The facilitator will ask the participants holding the cards to arrange themselves in a line from unsafe to safe.
- The facilitator will ask each participant without a card to stand behind the type of water source they commonly use for drinking water in their *Isibo*.
- If some pictures have no one behind them, discard them; they do not apply to this *Isibo* catchment area.
- The facilitator will note how many people use each type of water source.
- The facilitator and the participants will discuss the differences between each source and if there are any local options for safer drinking water.

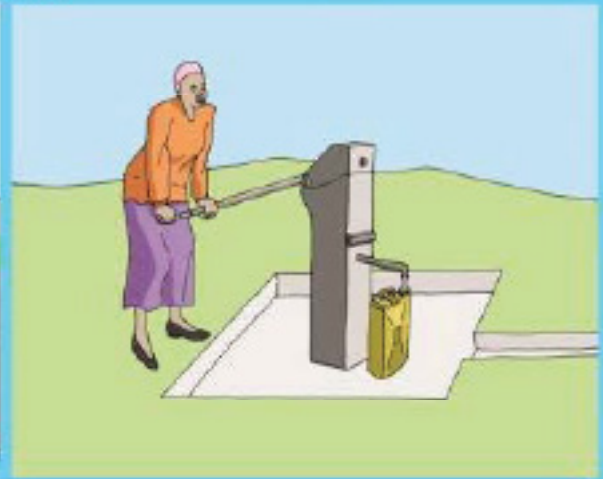
RECOMMENDED PRACTICES

- Create a committee to ensure the water sources are well maintained.
- Each household needs to have access to a source of clean water.
- Ensure the protection of each water source from contamination.
- Be careful to save clean water.

Card Set No.7: WATERPOINT SOURCES



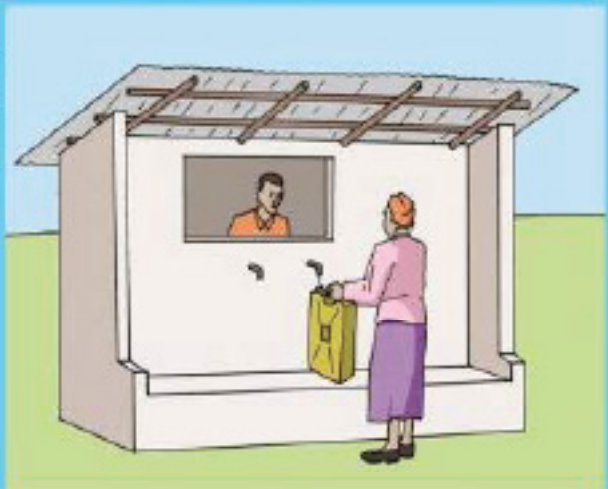
1. Unprotected open water source



2. Borehole with hand pump



3. Protected spring



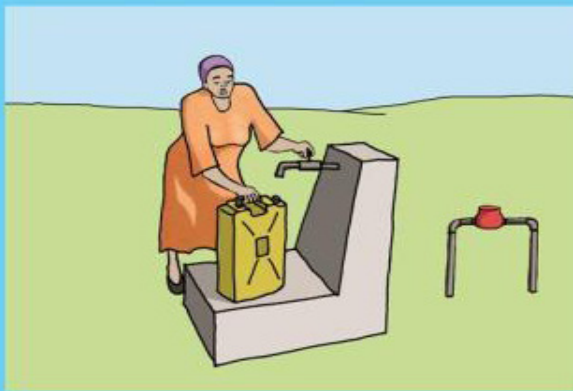
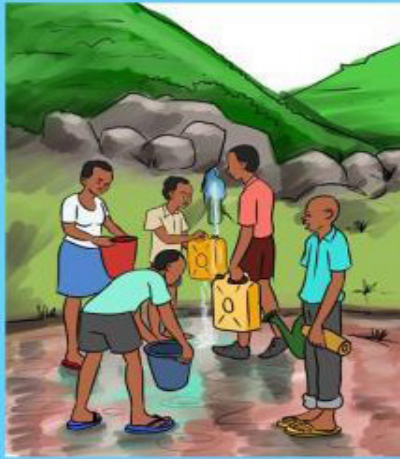
4. Water kiosk



5. Cement rainwater tank



6. Plastic rainwater tank



Topic 8: HOUSEHOLD DRINKING WATER TREATMENT, STORAGE, AND PROPER USAGE

| | | |
|---------------------|--|---|
| OBJECTIVE | To understand the safe water chain: treatment, storage, and proper usage | 8 |
| KEY MESSAGE | Ensure the safe storage and usage of drinking water | |
| CARD SET No. | 8 | |
| TIME | 1 hour | |
| HOMEWORK | Treat drinking water Ensure safe storage and usage of drinking water | |

METHOD

- The facilitator will give participants the cards belonging to the first stage of the safe water chain: water treatment.
- The facilitator will ask the participants with cards to come forward and describe their pictures.
- The participants will sort the pictures into three groups: safe, unsafe, and not sure.
- The facilitator will ask the participants to discuss the stages of the safe water chain.
- The facilitator will give participants the cards belonging to the second stage of the safe water chain: water storage.
- The participants will sort the pictures into three groups: safe, medium, and unsafe.
- The facilitator will give participants the cards belonging to the third stage of the safe water chain: water usage.
- The participants will sort the pictures into three groups: good, medium, and bad.
- The facilitator will ask the participants to discuss common methods of water treatment and storage they use in their *Isibo* catchment area and which are the safest.

- The facilitator will ask every participant holding a card to stand in front of the other participants, and ask one person from that group to choose a picture from each of the three stages in the safe water chain. The facilitator will then ask that person to explain if the water will be safe according to what is shown in their three cards.
- If the person has a safe water source picture, the facilitator will explain how water from a protected source can be made unsafe by poor water storage or usage.
- The facilitator and the participants will discuss what can be done to improve the safe water chain.

RECOMMENDED PRACTICES

For storage:

- Store all water in a clean, covered container.
- Pour water or take it with a ladle to prevent hands from touching the water.
- Teach children to drink water in a safe way.
- Do not share cups or glasses when drinking.
- Keep used drinking water cups in a safe place.

For usage:

- Take water from a clean, protected water source.
- Do not drink water that has not been boiled or treated.
- If the water is not transparent (e.g., after a flood or a drought), purify the water with a filter system before treating it.

For treatment:

- Filtering unsafe water is not enough; it must be boiled as well to kill all germs.
- Treat water by filtering, adding Sur Eau, and boiling it for six minutes; if it is unsafe, use water in a safe way to prevent contamination when you go to drink it.

Card Set No 8. HOUSEHOLD TREATMENT OF DRINKING WATER, STORAGE, AND PROPER USAGE



1. Uncovered jerrycan



2. Jerrycan covered with cloth



3. Jerrycan covered with



4. Jerrycan covered with pot



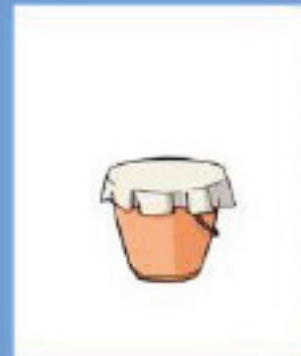
5. Jerrycan covered with two cups



6. Jerrycan covered with jug



8. Uncovered bucket



9. Bucket covered with cloth



10. Bucket covered with lid



11. Bucket with lid and cup



12. Bucket, cups, ladle



13. Closed jug



14. Filter with tap, cups



15. Woman taking water



16. Dog drinking from bucket



17. Boy drinking from stream



18. Boy drinking from hand



19. Drinking straight from jug



20. Putting hand in container



21. Giving water with jug



22. Boiling drinking water



23. Filtering water with cloth



24. Using Sur eau



25. Using water filter



26. Children sharing cups



27. Children with own cups

Topic 9: SANITATION LADDER

| | | |
|---------------------|--|---|
| OBJECTIVE | To understand how to improve sanitation facilities | 9 |
| KEY MESSAGE | Use hygienic sanitation facilities | |
| CARD SET No. | 9 | |
| TIME | 2 hours | |
| HOMEWORK | Construct and improve latrines Identify and report any Open Defecation (OD) practice in the village | |

METHOD

- The facilitator will introduce the sanitation ladder concept and process.

Facilitator's note

What is a sanitation ladder?

A sanitation ladder is a well-established concept in the water and sanitation sector and is extensively used to illustrate how people can move from simple to more advanced sanitation solutions by moving up a ladder rung by rung.

EcoSan toilet: A closed system that does not need water, making it an alternative to leach pit toilets in places where water is scarce or where the water table is high and the risk of groundwater contamination is therefore also high.

The EcoSan toilet is comprised of one or two chambers; a pit that does not exceed two meters in depth, which is sealed with concrete to prevent contact between excreta and soil; a separate pipe for urine; a vent pipe to trap flies and other insects; and lids on the side, front, or back to remove the composted matter.

Composting toilet: A toilet with flushing water, where earthworms are used to promote decomposition. A composting toilet does not require a connection to a septic tank or sewer system, unlike a flush toilet.

Twin-pit toilet: A toilet that consists of two alternating pits connected to a pour-flush toilet. Twin-pit for pour-flush toilets are improved pit latrines, which allow the onsite treatment and transformation of fecal sludge to a hygienic soil amendment.

Pit latrines collect human feces in a hole in the ground. The principle of a pit latrine is that all liquids that enter the pit in particular urine and water used for anal cleansing seep into the ground.

- The facilitator will give participants all of the cards depicting different latrine types.
- The participants will make a ladder of the different types of latrines from worst to best, including open defecation.
- The facilitator will ask the participants to choose the best type of latrine to be used in the *Isibo*.
- The facilitator will ask the participants to identify the most commonly used type of latrine in the *Isibo*.
- The facilitator will ask the participants to split into small groups, in relation to most commonly used latrine types in the *Isibo*, to determine how to attain and manage the desired latrine type.
- The facilitator will ask the participants to prepare a plan to improve sanitation facilities.

RECOMMENDED PRACTICES

- Start a habit of defecating in private latrines or public latrines.
- Clean latrines daily to prevent the smell, and put covers on latrines to keep out flies.
- Put ash around the squat holes to prevent odors that attract flies.
- Keep latrine doors closed so that animals cannot enter.
- Never allow feces around the outside of latrines or messes around squat holes.
- Use cleaning material (e.g., toilet paper, newspaper, leaves) after urinating or defecating.
- If the household wants to have Ventilated Improved Pit latrine (VIP), install a ventilation pipe to reduce the smell and to control the flies.
- Put a mesh wire with small holes at the top of the vent pipe to trap flies.
- To properly transform feces into fertilizer, use an EcoSan composting pit.
- Ensure at least a one-year period before using dried feces as compost

Card Set No 9. SANITATION LADDER



1. Open defecation



2. Cat sanitation



3. Open pit, wooden logs



4. Slab, tree branch walls, pit latrine



5. Slab, pole walls, pit latrine



6. Slab, pole walls, pit latrine



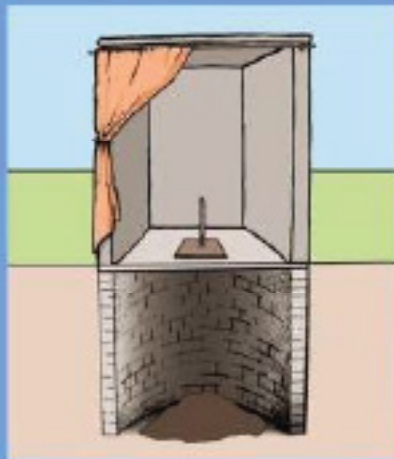
7. Un - plastered mud walls, pit latrine



8. Mud-plastered walls, pit latrine



9. Cement plastered walls



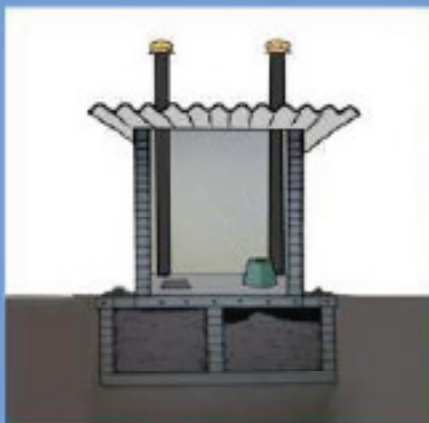
10. Brick latrine, brick-lined pit



11. Simple pit latrine



12. VIP latrine



13. Twin-pit composting latrine



14. Twin-pit latrine



15. EcoSan, urine separation



16. SAFI latrine



17. Power flush squatting latrine



18. Western-style sitting latrine

Topic 10: WASTE MANAGEMENT

| | | |
|---------------------|--|-----------|
| OBJECTIVE | To promote good waste disposal and recycling | 10 |
| KEY MESSAGE | Waste should be managed properly | |
| CARD SET No. | 10 | |
| TIME | 1 hour | |
| HOMEWORK | Use rubbish pit and ensure waste segregation | |

METHOD

- The facilitator will introduce the concept of solid waste management.
- The facilitator will ask the participants to list different types of waste, recycling, and disposal methods.
- The facilitator will ask the participants to form two groups.
- The facilitator will give participants the waste management cards.
- The facilitator will ask the participants to step forward, explain their pictures, and place them under biodegradable and non-biodegradable.
- The participants will discuss the existing methods of waste management in their *Isibo* catchment area.
- The facilitator will ask the participants to discuss how they will limit littering and poor waste disposal.
- The facilitator and the participants will discuss how to start a recycling system.
- The facilitator and the participants will make a plan to clean up their village.

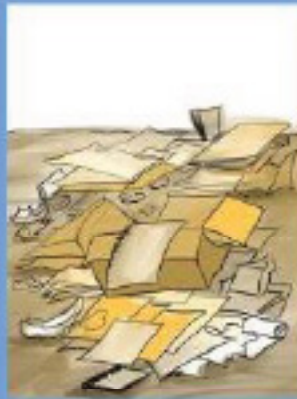
RECOMMENDED PRACTICES

- Sort wastes at the household level.
- Never throw waste in the street or on the ground.
- Store wastes in appropriate places.
- Recycle biodegradable wastes.
- Non-biodegradable wastes should be sold and recycled or buried.
- Regularly empty rubbish pits so that they do not pollute the environment.
- Every month on *Umuganda*, join your village to do communal work.
- Ensure that dead animals such as dogs, cats, and rats are buried immediately.
- Inform the nearest health office of any factory that is causing hazardous pollution.
- The committee should make regulations for the village to ensure that all households comply with safety standards.
- Start a recycling business in the CHC for income generation.

Card Set No. 10: SOLID WASTE MANAGEMENT



1. Leftover food



2. Paper



3. Plastic bottles



4. Use a bin for solid waste



5. Buckets and jerrycans



6. Glass bottles



7. Biodegradables



8. Non-biodegradables



9. Uncontrolled dumping

CLUSTER 3: HYGIENE

Topic 11: PERSONAL HYGIENE

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To identify good personal hygiene practices | 11 |
| KEY MESSAGE | Cleanliness is the best means of disease prevention | |
| CARD SET No. | 11 | |
| TIME | 1 Hour | |
| HOMEWORK | Build a body washing shelter | |

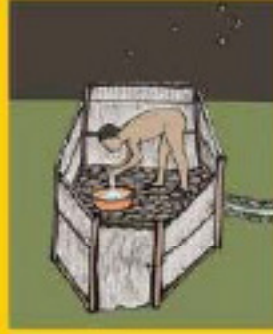
METHOD

- The facilitator will introduce the concept of personal hygiene.
- The facilitator will give participants pictures and ask each participant to describe their picture and say if it is good or bad for human health.
- The facilitator will separate the participants into two groups: one with good cards and one with bad cards.
- The facilitator will encourage all participants to discuss the issues pertaining hygiene practices.
- If the picture is neither good nor bad (or the participants are not sure in which category it belongs), the facilitator will encourage everyone to discuss the picture further until a consensus has been reached as to where it belongs.
- Those with good pictures will stand in a line holding up their picture.
- The rest of the participants will choose a good practice and stand behind it to show that this is the practice they will start to do.

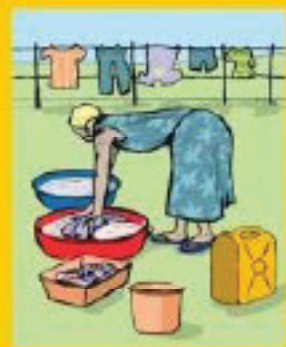
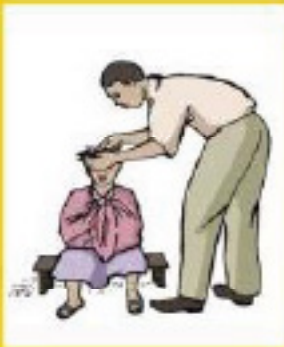
RECOMMENDED PRACTICES

- Wash the body regularly.
- Wash the face every morning after waking up.
- Brush the teeth twice each day, once in the morning and once in the evening after eating.
- Handwash with soap to rid all dirt from hands.
- Keep fingernails short and clean.
- Clean hair regularly.
- Wash clothes regularly.
- Wash underclothes and private parts every day.
- Do not share clothes or bedding with others.

Card Set No. 11: PERSONSAL HYGIENE



1. Wash face in the morning 2. Children wash at night 3. Clean teeth twice daily 4. Always wash hair



5. Cut hair or shave head 6. Mother washes body 7. Father washes body 8. Wash clothes



9. Cut and clean fingernails 10. Wash privates daily 11. Wash underwear regularly 12. Dispose of used Sanitary pads

Topic 12: HANDWASHING

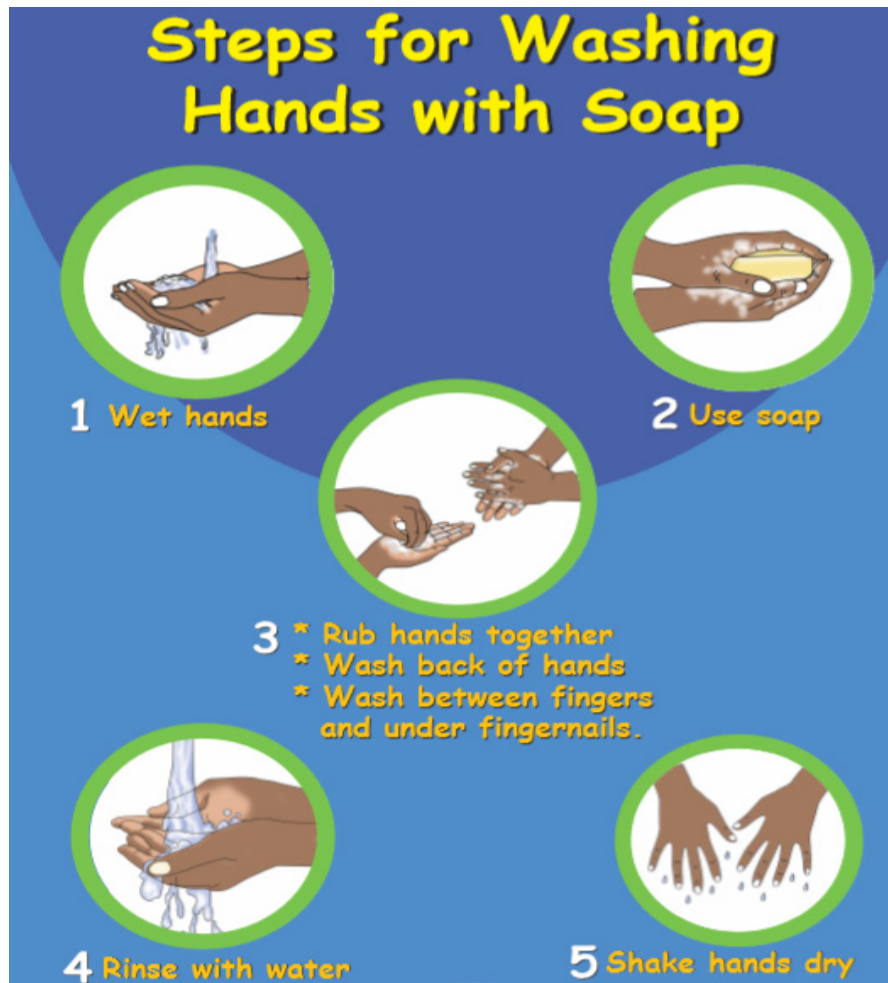
| | | |
|---------------------|--|-----------|
| OBJECTIVE | To spread the message of proper handwashing to the whole community | 12 |
| KEY MESSAGE | Handwashing with soap and clean water stops disease transmission | |
| CARD SET No. | 12 | |
| TIME | 1 hour | |
| HOMEWORK | Install handwashing facilities Use soap and clean water at handwashing facilities | |

METHOD

- The facilitator will ask participants to explain why handwashing with soap must be done properly to remove germs and to avoid disease transmission.
- The facilitator will give participants the handwashing method cards.
- The facilitator will ask participants to come forward and explain what the images on their cards.
- The participants will arrange the cards into three groups: good, fair, and bad practices.
- The participants will identify the best and worst handwashing practices in their *Isibo*.
- The facilitator will demonstrate how to make tippy tap at the household level.
- The participants will prepare a plan to install tippy tap facilities.

The facilitator will demonstrate practical handwashing using the following steps (see: Facilitator's note).

Steps for washing hands with clean water and soap



- Remove rings and other jewelry.
- Wet hands, lather palms, and rub hands together.
- Use fingers and palms to roll and twist every finger of each hand.
- Rub one palm over the back of other hand.
- Rub well between fingers.
- Bunch fingertips together to rub palms over each hand.
- Rinse hands under running water.
- Do not share towels; shake hands dry instead.
- The facilitator will summarize the critical times to wash hands.

RECOMMENDED PRACTICES

- Wash hands thoroughly with soap.
- Wash hands under running water (tap or pouring water).
- Do not use a common bowl of water to wash hands.
- Do not share a towel; shake hands dry instead.

CARD SET NO 12: HANDWASHING



1. Sharing a common bowl method soap



2. Pour to waste



3. After defecation



4. Pour to waste and



5. A Home -made Tippy Tap



6. Shop-made Tippy Tap



7. A common bowl and soap



8. Shop Tippy tap and soap



9. Jerry can with soap toilet



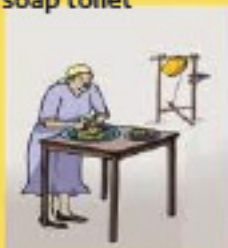
10. Squeezzy bottle and soap



11. Home Tippy tap with soap



12. After cleaning



13. Before preparing food



14. Before eating



15. After touching rubbish



16. After touching chemicals



17. After cleaning babies bottom



18. Before milking



19. Hand washing with water tap



20. With modern water tap

Topic 13: MENSTRUAL HYGIENE MANAGEMENT (MHM)

| | | |
|---------------------|---|-----------|
| OBJECTIVE | Explain why MHM is critical for girls and women | 13 |
| KEY MESSAGE | Good menstrual hygiene management at home improves girls and women's health | |
| CARD SET No. | 13 | |
| TIME | 1 hour | |
| HOMEWORK | Educate adolescents on MHM | |

METHOD

- The facilitator will introduce the concept of MHM.
- The facilitator will give participants the MHM set of pictures.
- The participants with pictures will come forward and describe their pictures.
- The participants will sort the pictures into two groups: good and bad practices.
- The facilitator will ask the participants if the practices depicted are common in their *Isibo*.
- The participants will remove the pictures that depict uncommon practices.
- The facilitator will ask the participants to discuss the lessons learned on the topic.
- The facilitator and the participants will devise a plan to manage used menstrual pads.

RECOMMENDED PRACTICES

- Always use clean menstrual pads.
- Change menstrual pads appropriately.
- Clean private parts from front to back.
- Wash hands before wearing and after changing menstrual pads, and after cleaning private parts.
- Mothers should talk to their daughters about menstruation.
- Safely store and dispose of menstrual pads.
- Make a budget for menstrual management at home

Card Set No. 13: MENSTRUAL HYGIENE



1. Active teenager



2. Weak teenager



3. Sanitary pad



4. Room where ladies put on pads



5. Safe disposal of pad



6. Unsafe disposal of pad



7. Burning pads



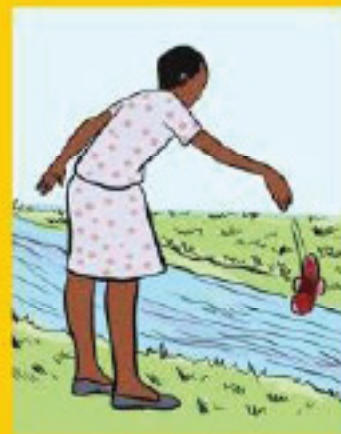
8. Throwing pad on open ground



9. Throwing pad into pit latrine



10. Throwing pad into flushing toilet



11. Throwing pad into body of water

Topic 14: BABY WASH

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To learn how WASH improves child health | 14 |
| KEY MESSAGE | Hygiene practices are good for growth of children. | |
| CARD SET No. | 14 | |
| TIME | 1 hour | |
| HOMEWORK | Use clean potty and diapers Create a clean environment for a child to play | |

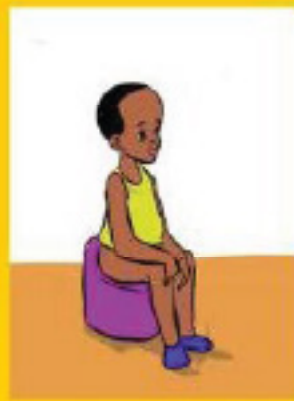
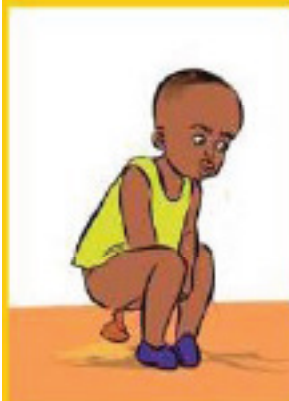
METHOD

- The facilitator will explain how infants are vulnerable and must be cared for.
- The facilitator will give participants all of the pictures.
- The facilitator will ask each participant to come forward, explain their card, and decide if it depicts a good or a bad practice.
- The facilitator will discuss how often nappies should be changed.
- The facilitator will discuss when an infant should start using a potty.
- The facilitator will discuss how an improvised potty can be made at home.
- The facilitator will discuss when a child can start using a toilet and how.
- The facilitator will discuss techniques to wash an infant, and how often an infant should be washed.
- The participants will discuss in groups the challenges related to baby WASH, and they will propose solutions to these problems.
- The groups will come together and report on their discussions and resolutions.

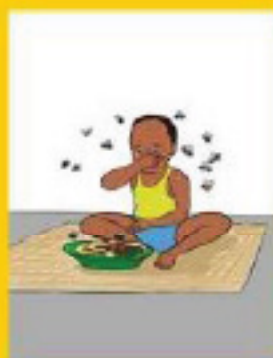
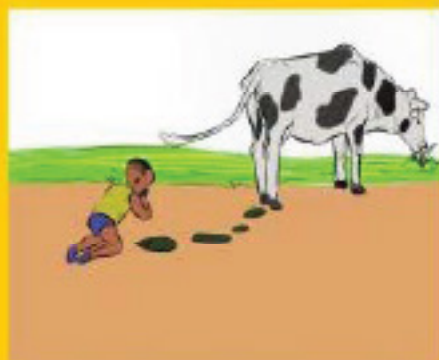
RECOMMENDED PRACTICES

- Always keep babies in clean clothes.
- Wash babies every day with soap, and change diapers when they are soiled.
- Ensure that babies are always wrapped in diapers.
- Ensure that babies always defecate into a potty or latrine and not on the ground.
- Ensure that children's feces are disposed of into a toilet.
- Always keep potties clean.
- Ensure that infants eat from clean surfaces to prevent them from getting dirt in their mouths.
- Plaster floors and playgrounds to prevent dirt from getting into babies' mouths.
- Ensure that infants do not share food with domestic animals.
- Always use clean utensils to feed babies.
- Provide safe water for children.
- Ensure that babies always wear clean clothes.
- Ensure that babies grow up in clean environments.
- All births should be facilitated by medical staff at a health center, not by traditional birth attendants at home.

CARD SET NO. 14: BABY WASH



1. Defecating on the floor 2. Defecating into the potty 3. Infant without nappies 4. Infant with nappies



5. Eating animal's dung 6. Eating food surrounded by flies 7. Eating in clean environment



8. Child playing with domestic animals 9. A sick infant vomiting and with diarrhea 10. Child's clean environment

Topic 15: FOOD HYGIENE AND SAFETY

| | | |
|--------------|--|----|
| OBJECTIVE | To understand good food hygiene practices | 15 |
| KEY MESSAGE | Do not contaminate food | |
| CARD SET No. | 15 | |
| TIME | 2 hours | |
| HOMEWORK | Keep kitchen clean and implement a utensil drying rack | |

METHOD

- The facilitator will introduce the concept of food safety.

Facilitator's note

Introduction: Food safety refers to the handling, preparation, and storage of food in a way that best reduces the risk of individuals becoming sick from foodborne illnesses. Food safety is a global concern that covers a variety of different areas of everyday life.

The principles of food safety: Preventing food from becoming contaminated and poisonous can be achieved through a variety of different methods, some of which are:

- Properly cleaning and sanitizing all surfaces, equipment, and utensils
- Maintaining a high level of personal hygiene, especially handwashing
- Storing, chilling, and heating food correctly with regards to temperature, environment, and equipment
- Implementing effective pest control
- Comprehending food allergies, food poisoning, and food intolerances

No matter where or why you are handling food, it is essential to always use proper food safety techniques. Numerous hazards exist in a food handling environment, many of which carry with them serious consequences.

The importance of food safety: Food safety helps protect consumers against contracting food borne illnesses and other health-related conditions such as allergies, and even death.

- The facilitator will give one participant a card depicting a fly and ask the participant to hold up the card.
- The facilitator will explain the importance of eliminating flies from food handling areas, and why homes that are dirty always have flies
- The facilitator will give other participants the other cards and ask them to come forward and explain their cards.
- Each participant with a card will explain if what is depicted is a good or bad way to control flies.
- The facilitator and the participants will discuss the various options for making food safe.
- The facilitator and the participants will make a food safety plan that can be undertaken by their *Isibo*.

METHOD: ROLE PLAY

- The facilitator will split the participants into two groups.
- The facilitator will ask both groups to make a 10-minute skit showing the different modes of food contamination.
- One group will act out how they practice good food hygiene, and another will act out how they practice bad food hygiene.
- Each group will present their skit, and then all of the participants will discuss what would happen to each group in real life.
- The participants will implement the food safety measures at home.

RECOMMENDED PRACTICES

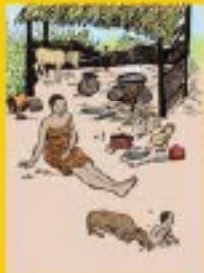
- Cook food at adequate temperatures and for adequate lengths of time.
- Decrease the time that the food is stored at room temperature.
- Reheat all food at adequate temperatures and for adequate lengths of time.
- Use clean utensils to avoid contamination.

- Properly wash or peel fruits before eating them.
- Properly wash and cook vegetables before eating them.
- Use food covers, cupboards, refrigerators, or larders with nets to properly store food.
- Clean the house, animal pens, and poultry cages frequently.
- Collect and treat waste regularly, and keep public places tidy.
- Do not mix raw and cooked food items.

Card Set No. 15: FOOD HYGIENE AND SAFETY



1. Poor disposal of garbage



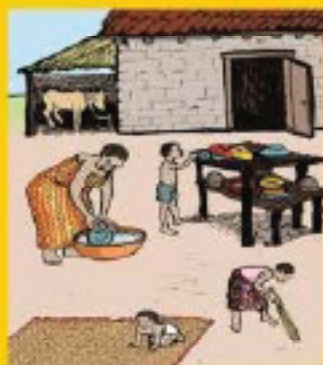
2. Dirty cooking area



3. Preparing food on ground



4. Using bin for solid



5. Drying utensils



6. Burning rubbish in pi



7. Using pot rack



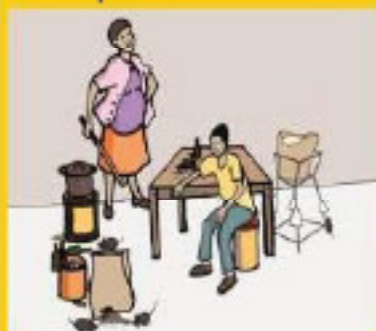
8. Putting food in cupboard



9. Covering all leftover food



10. Food microwave



11. Vermins control



12. Use a smokeless cooker



13. Fridge of food

CLUSTER 4: INCOME-GENERATING ACTIVITIES (IGAs) FOR WASH

Topic 16: IGAs FOR WASH

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To start and manage IGAs | 16 |
| KEY MESSAGE | To sustain CHC activities | |
| CARD SET No. | 16 | |
| TIME | 1 Hour | |
| HOMEWORK | Contribute to income-generating project | |

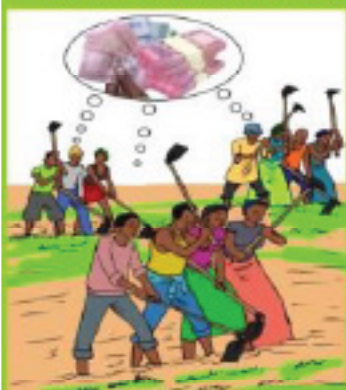
METHOD

- The facilitator will explain the importance of introducing IGAs in the CHCs
- The facilitator will give participants cards that show different types of IGAs (e.g., a group of people cultivating a farm, a group of people making baskets, a group of people contributing money, a group of people farming livestock, etc.).
- The facilitator will ask each participant with a card to come forward and explain the card.
- The participants will discuss the feasibility, economic and financial profitability, and the development of a business plan.
- The facilitator will ask the participants to divide into two groups to discuss the cards, and to devise a business plan template for income generating activities.
- The facilitator will assist the participants with reaching the conclusion of starting up IGAs.

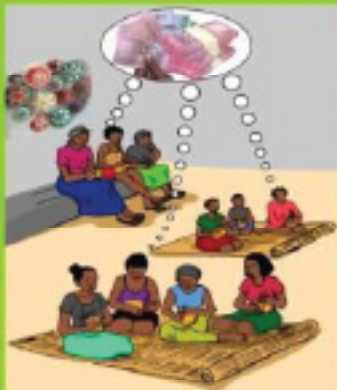
RECOMMENDED PRACTICES

- Become a member of IGAs.
- Plan on how to use IGA gains.
- Open an account for the CHC.
- Decide on the number of shares.

Card Set No. 16: INCOME GENERATING ACTIVITIES FOR WASH



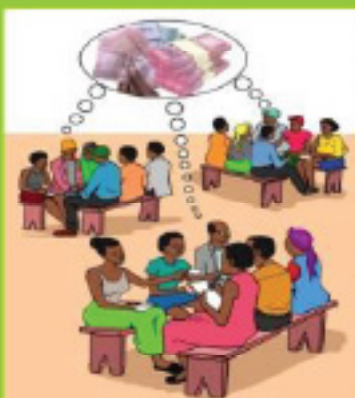
1. Agriculture farming



2. Handcrafts



3. Livestock farming



4. Contributing money



5. Selling public toilet access



6. Local liquid soap production

CLUSTER 5: WASH INCLUSION

Topic 17: WASH AND DISABILITY

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To understand the importance of disability inclusion in WASH | 17 |
| KEY MESSAGE | People with disabilities have the same rights as other people | |
| CARD SET No. | 17 | |
| TIME | 1 hour | |
| HOMEWORK | Use WASH facilities that are friendly to PWDs | |

METHOD

- The facilitator will give participants the set of pictures featuring the latrines and seating options: wooden, plastic, and earthenware.
- The facilitator will ask the participants to describe their pictures.
- The facilitator will ask the participants to group the pictures of latrines into two categories, in line with their special usage.
- The facilitator will ask the participants to identify issues that need to be considered in designing WASH facilities for PWDs.
- The facilitator and the participants will discuss how the latrines can be upgraded using affordable materials, and taking into consideration the type of disability.

RECOMMENDED PRACTICES

- Plan on how to improve sanitation facilities that are easily accessible by PWDs.
- Invite PWDs to attend CHC sessions.
- Support PWDs with constructing their sanitation facilities.

Card Set No. 17: WASH AND DISABILITY



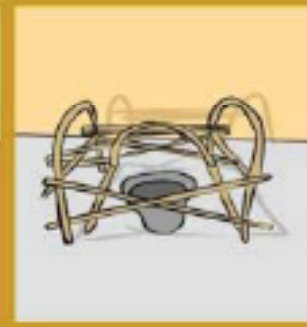
1. Wooden stool



2. Wooden chair



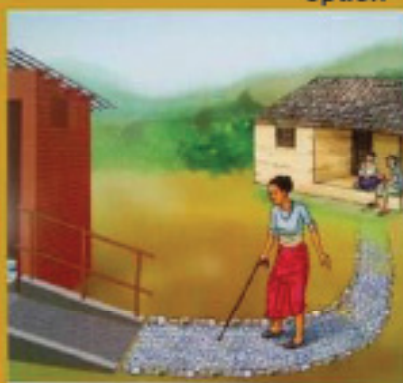
3. Earthenware seating option



4. Wooden seat



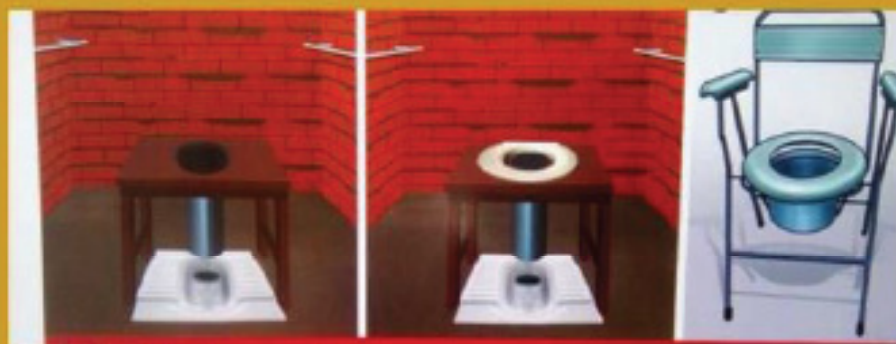
5. Metallic movable seat



6. Rope railing for visually impaired



7. Provision ramp at water source



7. Wooden stool affixed to PVC pipe

Topic 18: ROLE OF GENDER IN WASH PROMOTION

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To enhance the role of men and women in WASH activities | 18 |
| KEY MESSAGE | Involvement of men in WASH activities | |
| CARD SET No. | 18 | |
| TIME | 1 hour | |
| HOMEWORK | Men involvement in WASH activities | |

METHOD

- The facilitator will form groups 3-4 participants.
- The facilitator will give each group a card depicting a man or woman completing a different task.
- The facilitator will request that the participants use the cards to allocate tasks for each man and woman, and those that are done by both men and women.
- The facilitator will ask the participants to list other tasks that are not depicted on the cards.
- Each group will present their findings.
- The facilitator will orient a discussion regarding:
 - Who has a more strenuous workload?
 - How the difference in workload might affect hygiene behavior.
- The facilitator will ask the participants about the lessons they learned from the topic.
- The facilitator will make conclusive statements in line with the lessons learned.

RECOMMENDED PRACTICES

- Men should be involved in WASH activities.
- CHC members should encourage men to join CHCs.
- A man or a woman from each household should attend each session

CARD SET NO. 18: ROLE OF GENDER WASH PROMOTION



1. Woman



2. Man



3. Both



4. Man cleaning the house



5. Man constructing a house



8. Man cleaning baby



7. Woman constructing latrine



9. Woman milking



10. Cleaning utensils



11. Cleaning a baby



12. Sweeping yard



13. Man washing utensils



14. Man and woman touching cow dung

Topic 19: INDOOR AIR POLLUTION

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To open up a discussion on indoor air pollution | 19 |
| KEY MESSAGE | Clean air is good for human health | |
| CARD SET No. | 19 | |
| TIME | 1 hour | |
| HOMEWORK | Construct kitchens with ventilators Use improved cook stoves | |

METHOD

- The facilitator will give participants the set of pictures (card set no 19).
- The participants with the pictures will come forward and describe their pictures.
- When participants explain their pictures, they must say whether there is smoke in the kitchen or not.
- The participants will form two groups: those with pictures depicting smoke in the kitchen, and those with pictures showing no smoke.
- The facilitator will ask the participants if the practices depicted on the cards are common in the area.
- The facilitator will remove the cards that depict uncommon practices.
- The facilitator will ask each participant with a card depicting a smoky kitchen to find a partner with a card depicting a smokeless kitchen.
- Each pair will present their pictures together and explain how one picture provides a solution to indoor air pollution.
- The facilitator and the participants will discuss how to maintain clear air at home.

RECOMMENDED PRACTICES

- Ventilate kitchens and use improved cook stoves.

Topic 20: EMERGENCIES AND DISASTERS

| | | |
|---------------------|---|-----------|
| OBJECTIVE | To learn strategies for emergency and disaster management in relation to WASH | 20 |
| KEY MESSAGE | Always be prepared for disasters | |
| CARD SET No. | 20 | |
| TIME | 1 hour | |
| HOMEWORK | Make a community resilient plan for emergencies and disasters | |

METHOD

- The facilitator will give participants the emergencies and disasters card set.
- The participants with cards will come forward and describe their pictures.
- The facilitator will ask the participants to form small groups.
- The participants will discuss good and bad practices during a flood.
- The participants will discuss disease outbreaks resulting from floods.
- The participants will discuss how communities should respond to emergencies and disasters, as they relate to WASH.
- The participants will discuss how emergencies and disasters might affect WASH infrastructure.
- After all of the discussion, each group will present what they have learned and agreed in their respective groups.
- The facilitator will ask the participants about the lessons they learned on the topic and make a conclusive statement in line with the lessons learned.

RECOMMENDED PRACTICES

- Immediately move to higher ground during a flood.
- Do not walk through moving water.
- Do not ride or drive into flooded areas.
- Do not swim in flooding water.
- Stay away from areas that are prone to landslides.
- Do not use flooding water for domestic purposes.
- Keep away from flooding water.
- Do not defecate into surface water
- Seek medical treatment in case of diarrheal diseases

CARD SET NO. 20: DISASTERS AND EMERGENCIES



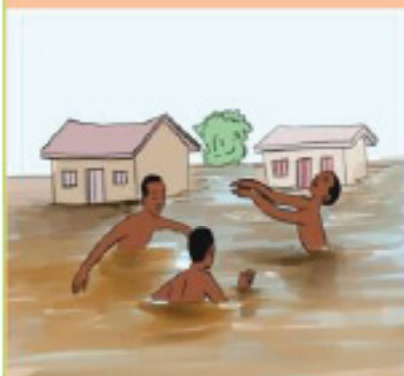
1. Flooded houses



2. Flooded latrine



3. Man fetching flooded



4. Children swimming in flooded water



5. Land slided



6. Slinded house and toilet



7. Man with fulminant vomiting and diarrhoea



8. Constructing latrine for disaster victims

MEMBERSHIP CARD FOR URBAN AND PERI-URBAN AREAS

| No | Topic | Date | Signature | Homework | Signature |
|--|---|------|-----------|---|-----------|
| CLUSTER 1: IGAs FOR WASH | | | | | |
| 1 | IGAs | | | <ul style="list-style-type: none"> – Join and contribute to IGAs – Invest in sanitation and hygiene products and services | |
| CLUSTER 2: DISEASES | | | | | |
| 2 | Prevalent diseases/ conditions | | | – List prevalent diseases in the Isibo catchment area | |
| 3 | Diarrheal disease transmission and prevention | | | <ul style="list-style-type: none"> – Install handwashing facilities – Use soap and water at handwashing facilities | |
| 4 | Intestinal parasites/ worms | | | – Wear shoes to protect from hookworms | |
| 5 | Skin diseases | | | – Keep body and clothes clean | |
| 6 | Respiratory tract infections | | | – Ensure adequate ventilation and use of improved cook stoves | |
| 7 | Malaria | | | <ul style="list-style-type: none"> – Clean bushes around homes – Drain stagnant water near homes – Use treated mosquito nets | |
| CLUSTER 3: WATER AND SANITATION | | | | | |
| 8 | Water point sources | | | – Maintain water point sources | |

| | | | | | |
|----------------------------------|--|--|--|--|--|
| 9 | Household treatment of drinking water, storage, and proper usage | | | <ul style="list-style-type: none"> – Treat drinking water – Store drinking water in clean and properly covered containers | |
| 10 | Sanitation ladder | | | <ul style="list-style-type: none"> – Construct and improve household latrines – Identify and report any OD practice in the village | |
| 11 | Waste management | | | <ul style="list-style-type: none"> – Use rubbish pits and ensure waste segregation – Use controlled wastewater pits | |
| CLUSTER 4: HYGIENE | | | | | |
| 12 | Personal hygiene | | | <ul style="list-style-type: none"> – Make a body washing shelter | |
| 13 | Handwashing | | | <ul style="list-style-type: none"> – Install handwashing facilities – Use soap and water at handwashing facilities | |
| 14 | MHM | | | <ul style="list-style-type: none"> – Educate adolescents about MHM – Households to make sanitary pads | |
| 15 | Baby WASH | | | <ul style="list-style-type: none"> – Use clean potty and diapers – Make clean mats for a child to play on | |
| CLUSTER 5: WASH INCLUSION | | | | | |
| 16 | WASH and disability | | | <ul style="list-style-type: none"> - Use PWD-friendly WASH facilities | |
| 17 | Role of gender in WASH promotion | | | <ul style="list-style-type: none"> - Involve men in CHC activities | |

CLUSTER 6: ECOHEALTH

| | | | | | |
|----|---------------------------|--|--|--|--|
| 18 | Indoor air pollution | | | <ul style="list-style-type: none">- Construct kitchens with ventilators- Use improved cook stoves | |
| 19 | Emergencies and disasters | | | <ul style="list-style-type: none">- Create a community resilient plan for emergencies and disasters | |

