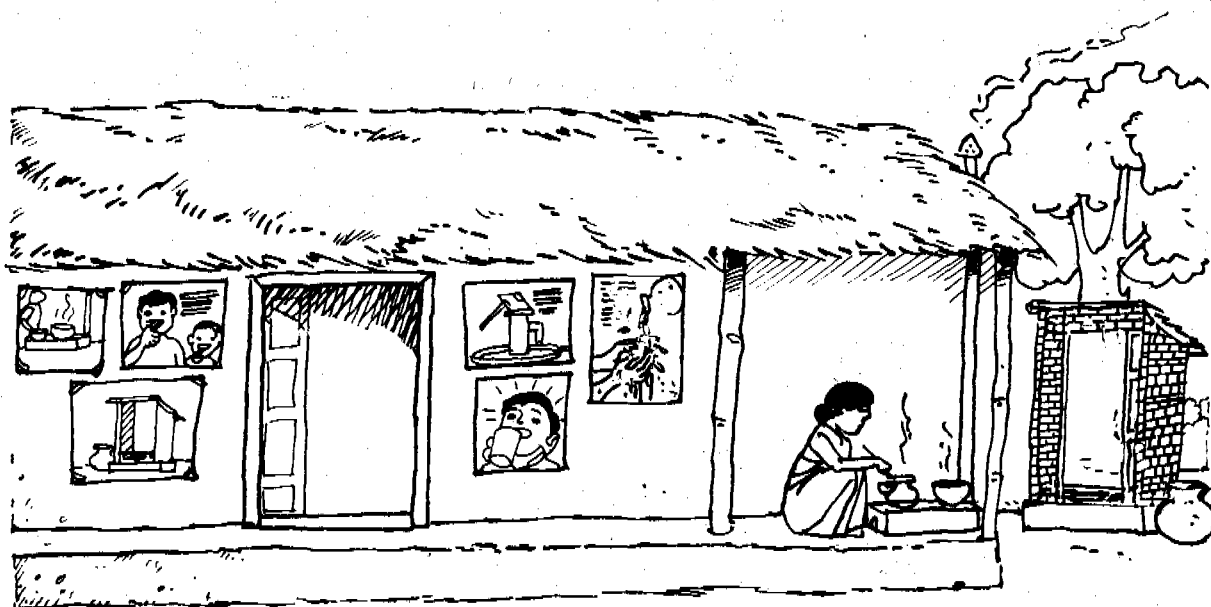


HEALTH.IN.2

# ANGANWADI SANITATION



unicef 

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## SPREAD THE WORD

A virtual "revolution" in child survival and development is now possible IF countries and peoples of the world commit themselves to a series of opportunities that could save the lives of half of the 40,000 small children—who now die every day from readily preventable causes—and could slow down population growth as well.

There is an immediate opportunity for low-cost priority action in primary health care for child survival as a result of advances in technology and broad social progress in mass communications and community-based services.

These actions include:

1. Growth monitoring through the use of such measuring devices as growth charts to enable the mother to detect early signs of malnutrition and deal with it.
2. Oral Rehydration Therapy consisting of a simple treatment with salts and glucose in water for a child suffering from diarrhoeal dehydration the number one child killer.
3. Breastfeeding to nourish and protect the young infant from infection and good weaning practices during the transition to family food, a period of high risk from malnutrition.
4. Immunization against tetanus, measles, polio, whooping cough, diphtheria and tuberculosis which cripple and kill millions of children every year.

Join the Child Survival Revolution by spreading the word.

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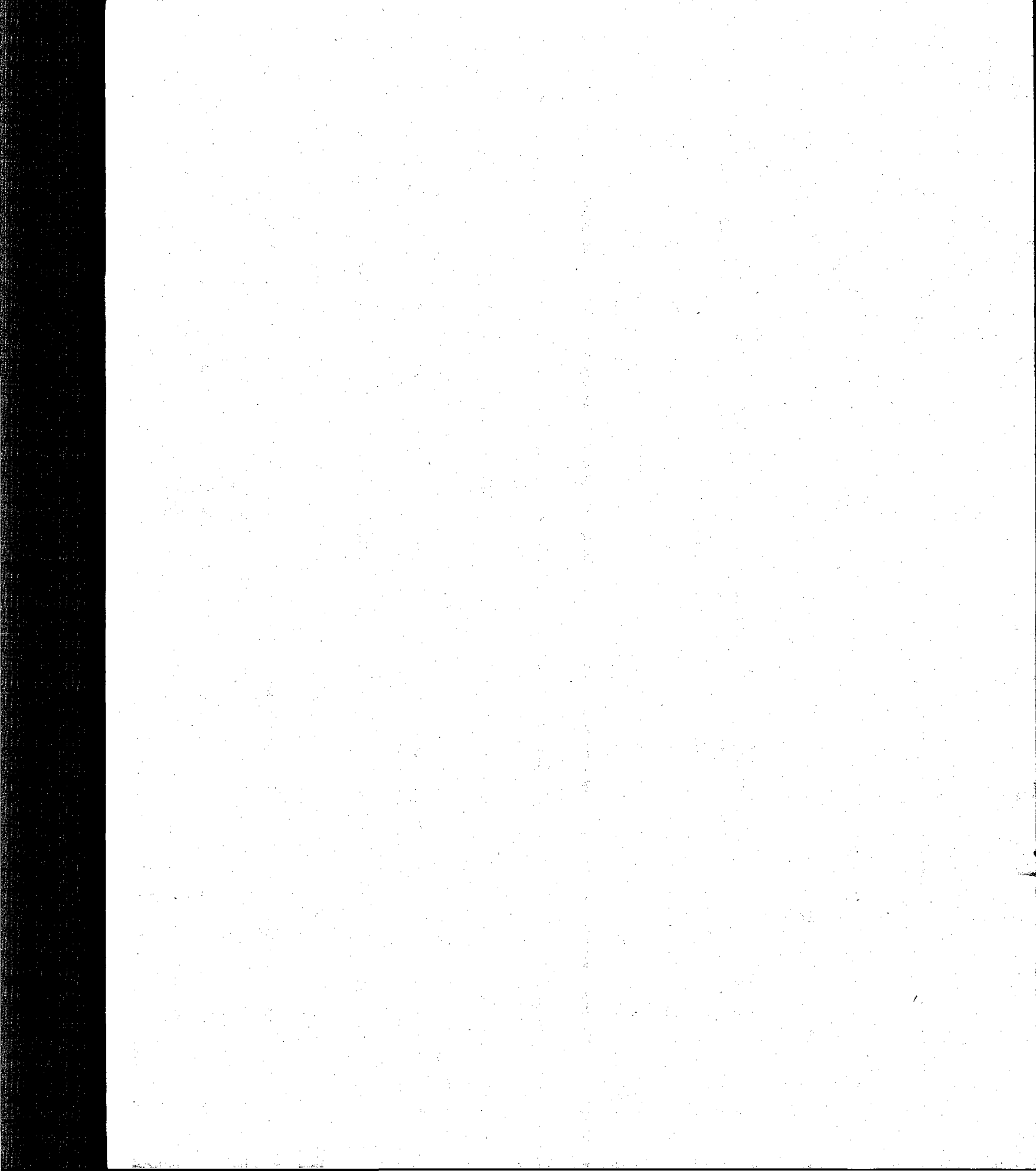
The texts of this booklet are available in English, Hindi, Telugu, Oriya, Marathi, Bengali Urdu and Gujarati.

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## INTRODUCTION

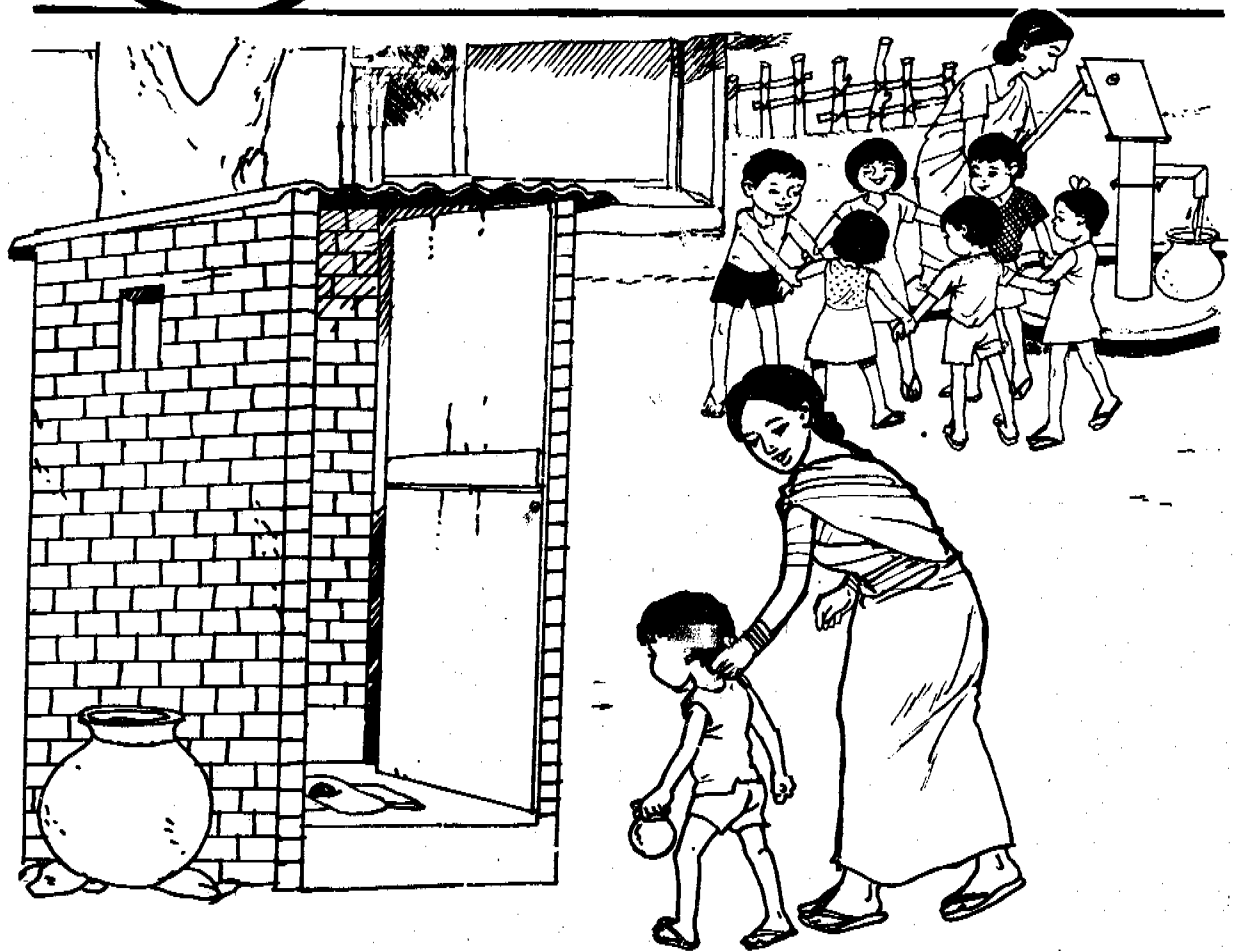
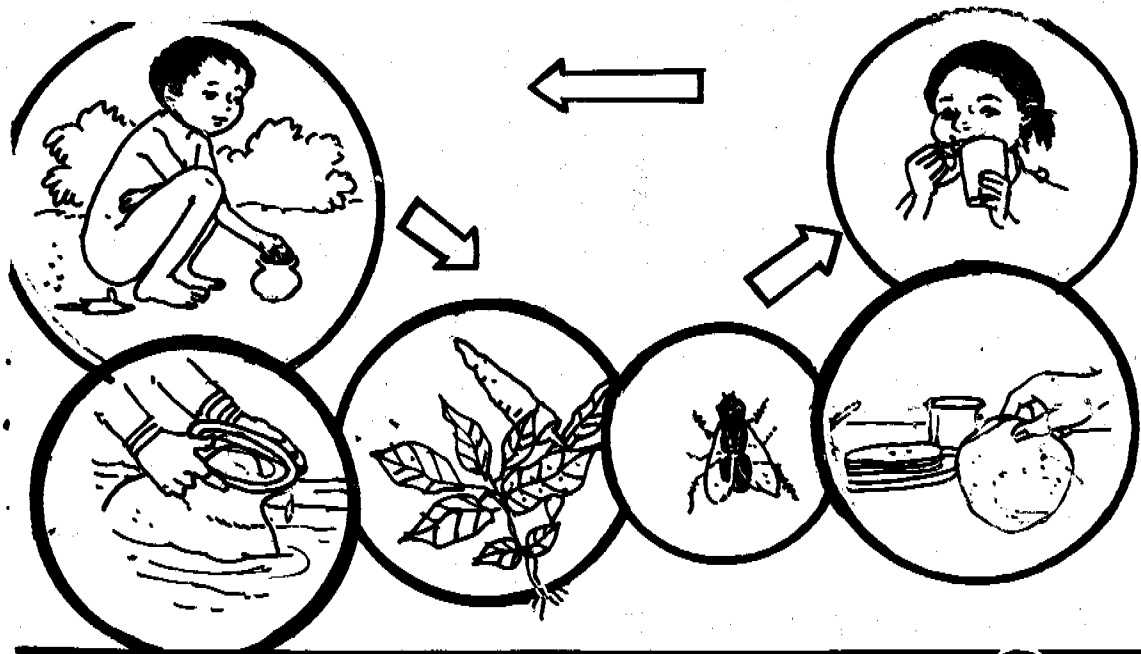
The high incidence of mortality and morbidity rate among infants and children is attributed largely to unsafe water supply, poor hygienic practice and insanitary environment.

As part of the UNICEF strategies to promote Environmental Sanitation within the context of Water and Sanitation Decade (1981-1990) and the Health for All by year 2000 programmes, UNICEF is collaborating with the Ministry of Social Welfare from various states in conducting orientation courses for Child Development Project Officers (CDPOs), Supervisors and Anganwadi Workers on improved sanitation and personal hygiene practices. This educational programme is also being reinforced by the provision of sanitary latrine in anganwadi centres with the aim of inculcating good habits for children from an early age.

This booklet has been written with the purpose of providing some basic sanitation education materials for anganwadi workers. It is divided into three parts. Part I describes sanitation and diseases as well as the roles anganwadi workers can play to promote sanitation. Part II deals with the major sanitation aspects that anganwadi workers can impart to the children and help them practise these healthy habits. Part III focusses on the practical measures that can create a sanitary and healthy environment for the community through education of mothers by the anganwadi workers. It concludes with a section aimed at reminding anganwadi workers and mothers on the well-tested and low cost measures for child survival, namely Growth Chart monitoring, Oral Rehydration Therapy, Breast Feeding and Immunization.

A set of flash cards on six sanitation topics has also been produced by UNICEF for use as educational tools for the anganwadi workers. The titles are as follows:

- (1) Sanitation and Diseases
- (2) Disposal of Human Excreta—Sanitary Latrine
- (3) Vector Control
- (4) Personal Hygiene
- (5) Home Sanitation
- (6) Wastewater and Cattle/Garbage Disposal.



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## **PART I : A. SANITATION AND DISEASES**

### **1. Why Sanitation?**

POOR SANITATION encourages the spread of diseases. As a result, many people, particularly children, easily get sick or even die.

IMPROVED SANITATION will reduce the incidence of these diseases and lead to better health.

### **2. Diseases—Sources and Transmission**

#### **a) Source:**

The main source of diseases is filth, of which HUMAN EXCRETA is a major contributor.

#### **b) Common Human Excreta-Related Diseases:**

Diarrhoea  
Dysentery  
Cholera  
Hepatitis  
Typhoid  
Worm Infestation

#### **c) Mode of transmission:**

Healthy people can get sick by ingesting the pathogens (diseases causing organisms) from the faeces of sick people. The route by which faeces find its way to another person's mouth, directly or indirectly, are:

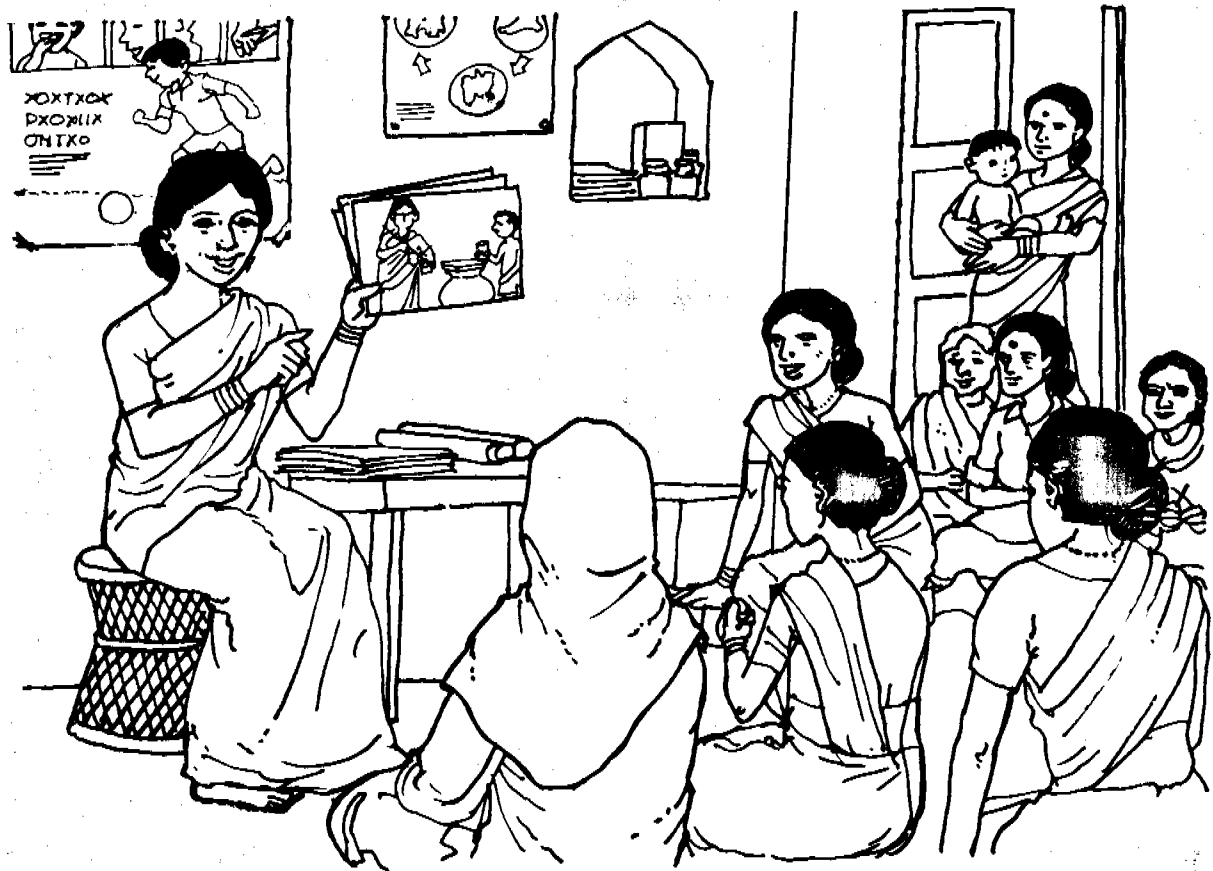
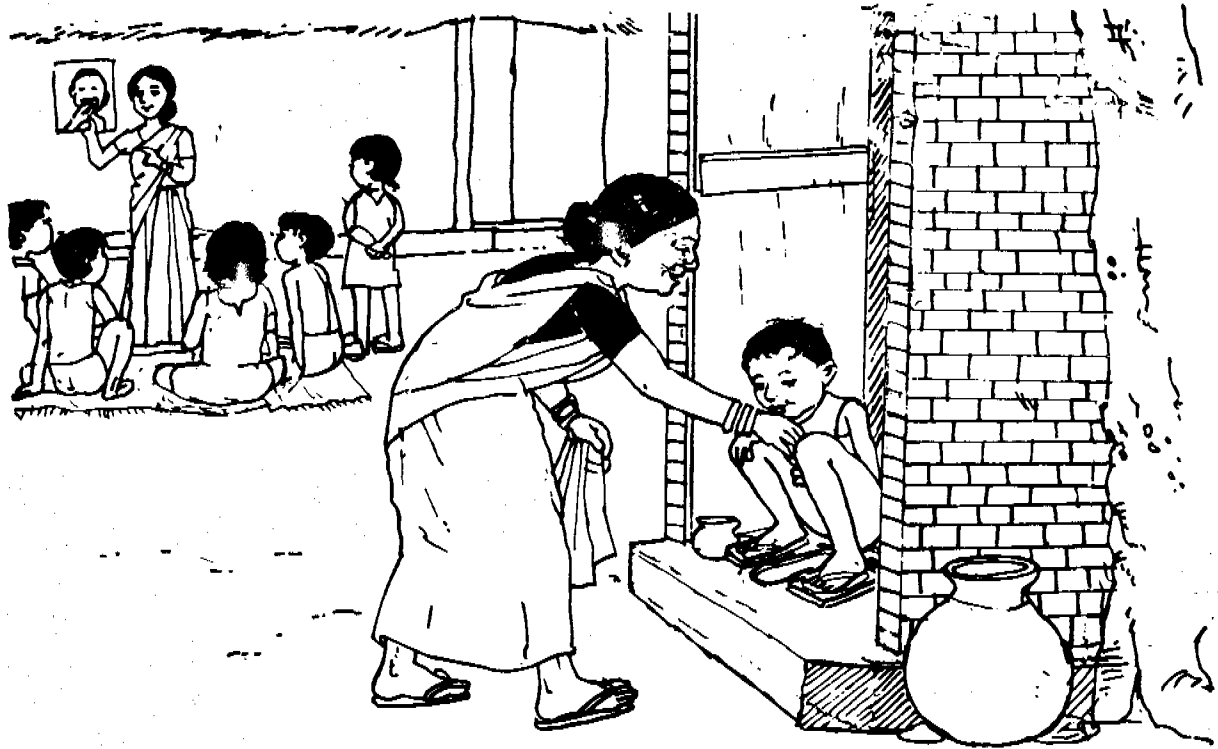
- i) water
- ii) vegetables and food
- iii) insects
- iv) hands.

### **3. How to break the diseases transmission routes**

1. Stop open defecation—Use sanitary latrines.

If a latrine is yet to be constructed, dig a small hole in the ground for defecation and cover the excreta with soil afterwards.

2. Protect drinking water sources.
3. Practice personal hygiene.
4. Control disease carriers like flies and mosquitoes.
5. Practice good food and home sanitation.

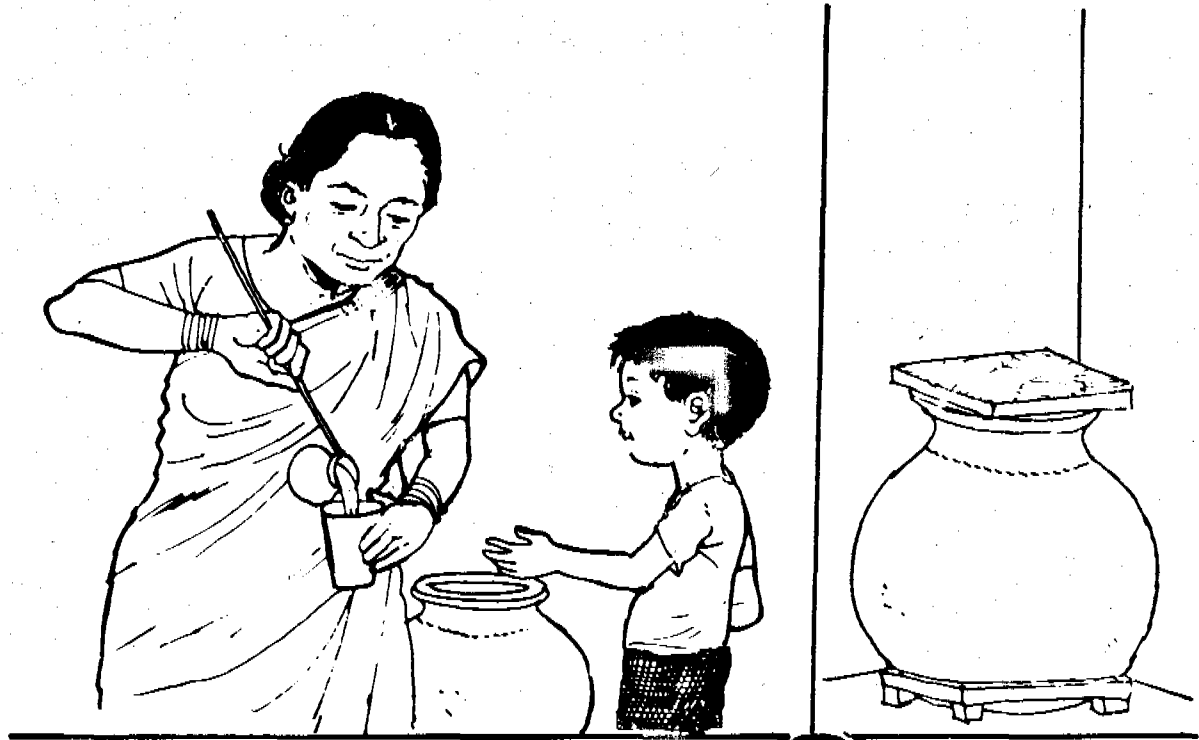




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## **PART I: B. ROLE OF ANGANWADI WORKERS**

1. Teach and supervise young children to cultivate and practice personal hygiene; check the children's cleanliness in the morning.
2. Educate the mothers on the importance and benefits of improved sanitation and encourage them to put their knowledge into practice.
3. Explain to mothers the benefits of using a latrine and having one at home; encourage mothers to contact the Block Level Engineer, Sanitary Inspector or the Block Development Officer (BDO) for advice.
4. When your centre has a latrine
  - a) Teach the children how to use the latrine.
  - b) Check the latrine every day to ensure that it is kept clean and there is enough water for personal usage and flushing of the latrine. A dirty latrine always gets dirtier and, finally, no one wants to use it.
  - c) Contact the Child Development Project Officer (CDPO) for any necessary repairs.
5. Maintain the anganwadi centre and its immediate surroundings clean.



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## **PART II: SANITATION PRACTICES**

### **1. Protection of Drinking Water**

#### **1.1 Why is it important?**

Drinking contaminated water can lead to diseases.

#### **1.2 How can it be done?**

- Always provide a cover for the drinking water pitcher.
- Do not dip hands or glasses into the pitcher.
- Always pour water from the pitcher into a glass or use a ladle.
- Children and adults should wash their hands before they cup them to drink water from a tap/handpump.

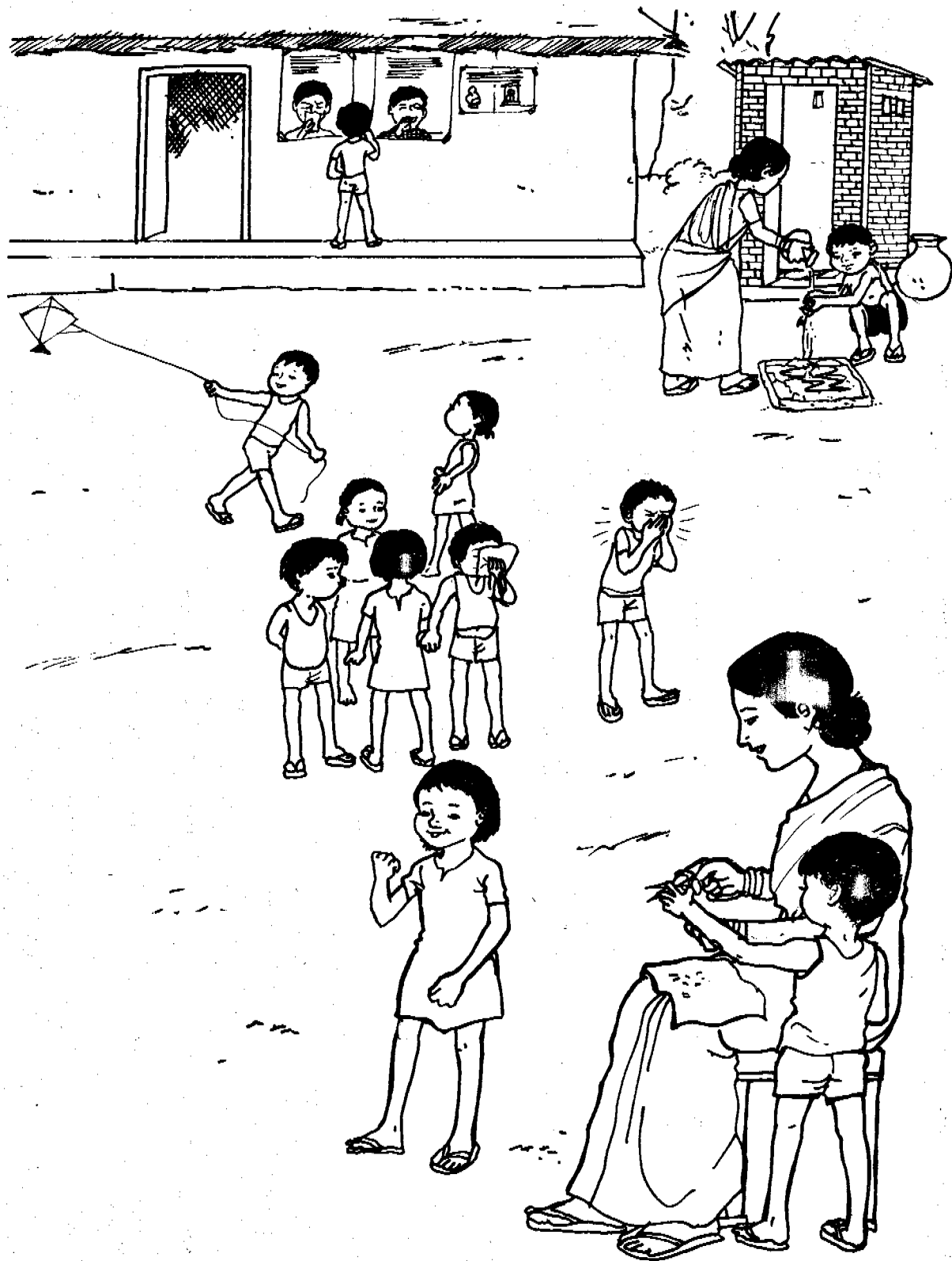
### **2. Protection of Food**

#### **2.1 Why is it important?**

Eating contaminated food can lead to diseases.

#### **2.2 How can it be done?**

- Wash hands with soap before handling food.
- Keep food covered and in a clean place.
- Clean plates and glasses before use.
- Keep flies away from all foods.



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### **3. Personal Hygiene**

#### **3.1 Why is it important?**

Personal cleanliness helps to prevent the contracting of diseases.

#### **3.2 How can it be done?**

##### **a. Hands**

- Ensure that hands are washed with soap after defecation and before eating.
- Always keep fingernails clean and well trimmed. Long and dirty nails harbour filth and germs. (It is advisable to keep a nail cutter or a pair of scissors in the centre for use).

##### **b. Body**

- Bathe every day.
- Wash and change clothes daily.
- Wash hair regularly.

##### **c. Eyes**

- Do not allow flies to sit or crawl on the eyes.
- Wash eyes with clean water.
- Use clean cloth for wiping the eyes.

##### **d. Teeth and Gums**

- Clean teeth well every morning and before bedtime.

##### **e. Use of handkerchief**

- Do not spit and blow nose on the ground. Sputum and mucus can spread diseases. Use a handkerchief.
- Cover the mouth and nose with the hand or a handkerchief when coughing and sneezing.

##### **f. Pathogens from Dirt**

- Do not encourage children to play in dirt and muddy water to avoid catching of pathogens and worms from human excreta as a result of open defecation.
- Wear chappals to prevent contact of bare feet with soils infected with worm from human excreta.



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## **4. Sanitary Latrine**

### **4.1 Why should an Anganwadi Centre have a latrine?**

- It inculcates children with good sanitary habits at an early age. They no longer need to defecate and urinate in or around the anganwadi compound.
- It can be used as a model to demonstrate to the visiting mothers about good sanitation habits and the convenience of having a latrine at home.

## **5. Cleanliness of Anganwadi Centre**

### **5.1 Why it is important?**

- Dirt attracts flies, rats, cockroaches and other insects. They spread infectious diseases.
- A dirty anganwadi centre may spread diseases. It also creates a bad impression on the anganwadi supervisors, workers and helpers. So keep the centre clean!

### **5.2 How can it be done?**

- The centre and its surroundings should be swept daily.
- A garbage bin with a cover should be available. The garbage bin need not be expensive. A cardboard box, a basket or a wooden box can be used.
- All garbage should be put into the garbage bin.
- The garbage bin should be emptied daily.





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## **PART III : REACHING OUT TO MOTHERS AND THE COMMUNITY**

The issues discussed below are some basic measures that can improve the environment and enhance the health and welfare of women and the community as a whole.

The aspects on personal hygiene and protection of drinking water and food, discussed in PART II are also relevant and will not be repeated here.

The anganwadi workers can convey these messages to the mothers who visit the centre for various activities and to the community through house visits and group meetings.

### **1. Protection of Water Sources**

The need for the protection of drinking water at home have been dealt with in PART II. The following measures will ensure that community water sources are protected.

- Teach the children not to throw rubbish into wells and around handpumps.
- Make sure that a clean bucket is used to draw water from open wells.
- Always use water from a handpump or a tap if it is available. These water sources are protected and give safe water.
- The platform around a well/handpump or tap should always be maintained clean and free from rubbish.

### **2. Sanitary Latrine**

#### **Why a sanitary latrine?**

Use of a sanitary latrine can stop the spread of diseases. A sanitary latrine also gives privacy and convenience for women, the old, the young, the sick and even men folk, particularly during the monsoon season and at night time.

### **3. Vector Control**

#### **3.1 Why is it important?**

- mosquitoes and flies are the two major disease carriers.
- mosquitoes transmit diseases like malaria and filariasis.
- flies transmit not only the excreta-related diseases but also trachoma— a disease that can cause blindness.



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### **3.2 How to control flies and mosquitoes?**

Every household can play an important role in reducing the fly and mosquito population by eliminating their breeding places, such as filth and stagnant water.

#### **a. Fly control**

- Proper disposal of human excreta by constructing and using a sanitary latrine.
- Efficient disposal of garbage/cattle dung in garbage pits.

#### **b. Mosquito Control**

- Get rid of unnecessary water-holding containers in and around the house, such as empty pots, broken bottles, coconut shells etc.
- Fill up all ground depressions, which would accumulate dirty water or rain water around the home, with earth, stones or broken bricks.
- Divert the wastewater from the kitchen to a plot of land where vegetables can be grown for family consumption.
- Build a soakage pit to drain away water from a bathing cubicle, which may contain soap.

## **4. Involving the Community**

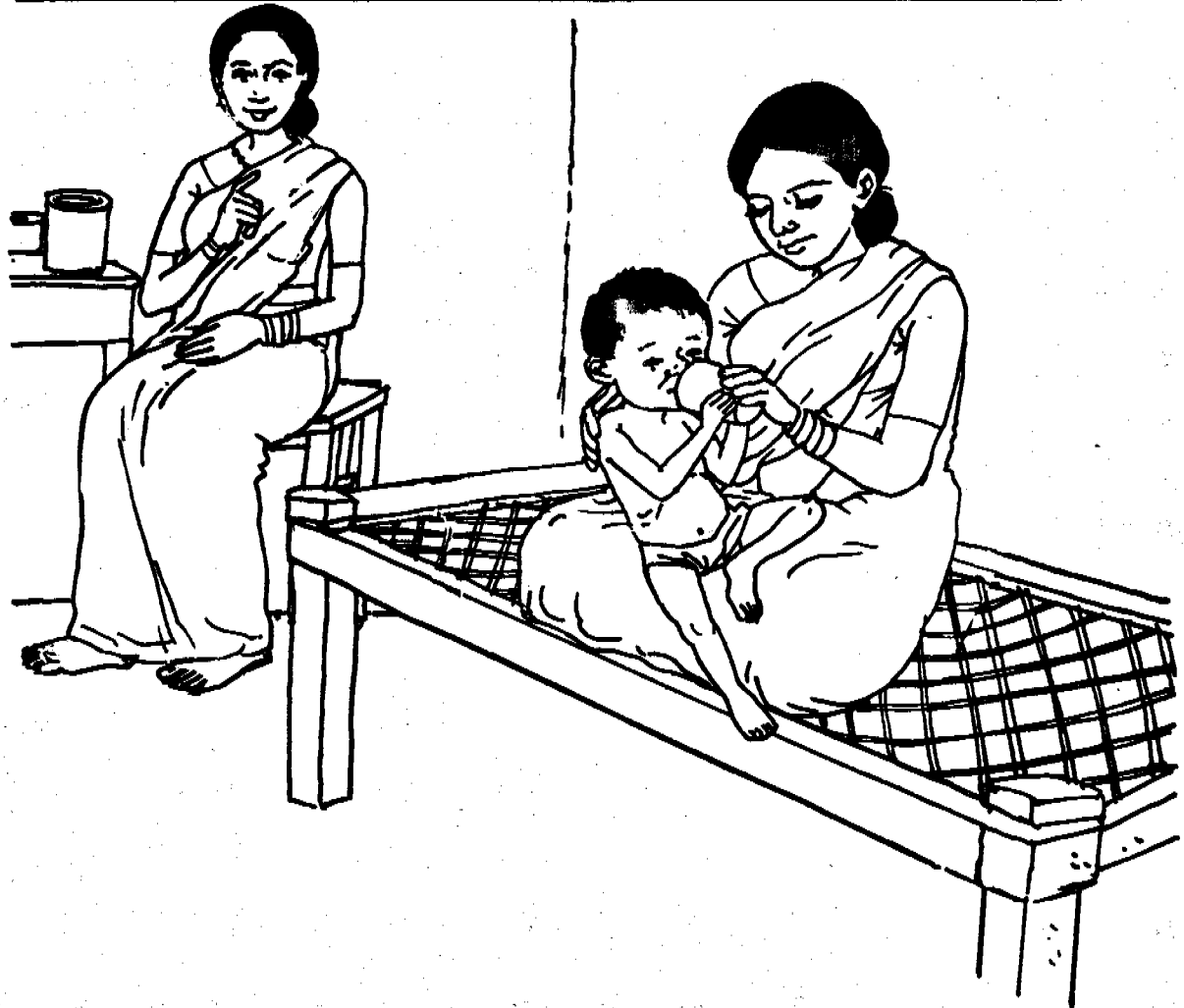
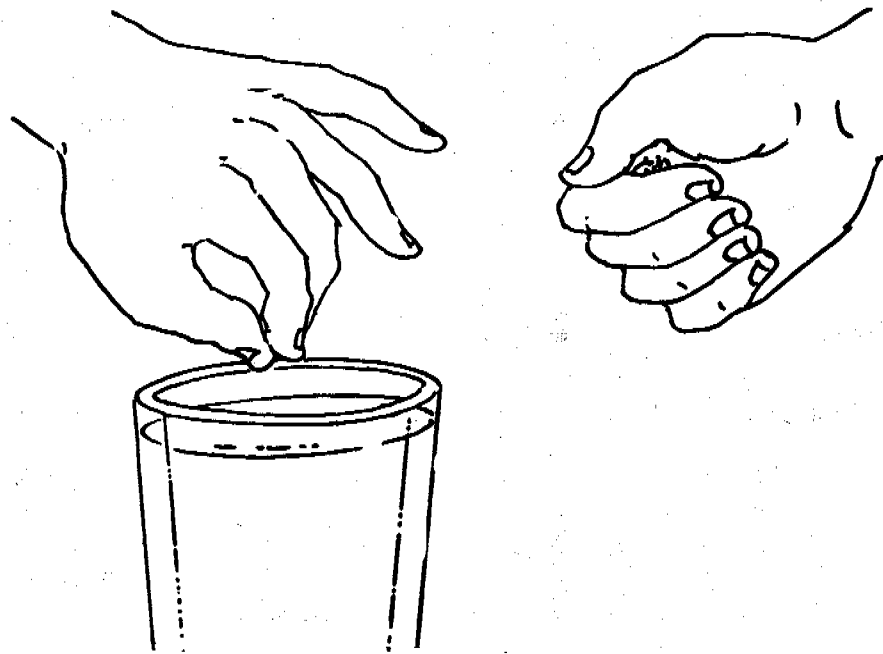
Given the close rapport between the anganwadi workers and the mothers, their efforts can be pooled together to improve the environmental conditions of the village. The cooperation of women's group eg. the Mahila Mandal as well as the men folk should be encouraged. Beside the interventions mentioned above, some further ideas for such involvements are given below. These can be adapted to suit the local needs and the interests of the community.

#### **a) Clean village week**

- During festivals like Dewali, the whole community can be organised to participate in uplifting the face of the village. Some of the activities could be the whitewashing/replastering of the walls of houses, the filling of pot holes on the roads and the removal of garbage.

#### **b) Healthy Child Competition**

- In order to bring the mothers together and to provide an opportunity of the participation of the Primary Health Care doctor, a competition can be organised to judge, for example, the child who has improved his or her health most significantly as a result of intervention and care by the mother.



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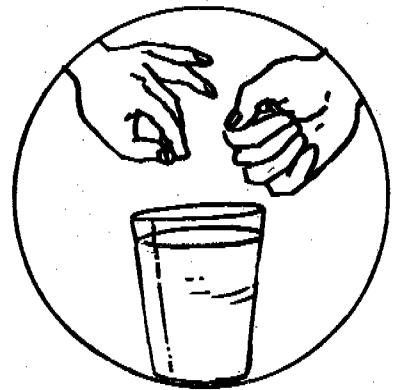
**c) Clean House Competition**

- During festivals like Holi and Dussehra and Mahatma Gandhi's birthday, clean house competition in the village can be organised to involve the women and men folks to participate in the improvement of home sanitation.

**5. Caring of Children during Diarrhoea**

(Extracted from "Better Care During Diarrhoea"; Voluntary Health Association of India (1983) )

- a. After every watery stool, give the child one glass (200 ml) of a special drink prepared as follows:**
- i) Take a pinch of salt.—A woman has small hands. She should take a three-finger pinch of salt. A man's hands are bigger. he should take a two-finger pinch of salt.
  - ii) Add the salt to the water and stir well.—Taste the drink. If it is saltier than tears, throw it away. Make the drink again, using less salt.
  - iii) Add a fistful of sugar — if there is no sugar in the house, add a piece of jaggery (gur) the size of a betel nut (supari).
- b. If no sugar or jaggery is available at home, you can also give the child a glass of fluid such as;**
- rice water with a pinch of salt.
  - water in which dal is boiled,
  - coconut water.
- c. The special drink and the other fluid will replace the water your child has lost through watery stool.**
- d. Feed the child as usual.**
- e. If the child does not get better in two days, the mother should take the child to the nearest health centre.**



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## 6. A Low Cost Resolution for Child Survival

It has been recognized that there are four relatively simple and inexpensive methods which can save the lives of millions of children. These are growth monitoring, oral rehydration, breast feeding and immunization. The anganwadi workers can play a major role in making these concepts a reality. Although these aspects formed part of the formal ICDS staff training programme, a few salient points are summarized as reminder.

### a) Growth monitoring

- Ensure that mothers who attend the centre understand and are fully involved in the use of the growth chart.
- Give mothers basic advice on weaning in order to maintain their children's healthy growth within their limited resources.

### b) Oral Rehydration

- As treated in Section 5, Part III.

### c) Breast feeding

- Ensure that lactating mothers know that their first milk, which is a bright yellow fluid called "colostrum" is not harmful. In fact, it protects the baby against diseases.
- Advise lactating mothers to clean the nipples when they have their daily bath.

### d) Immunization

- Ensure that mothers are aware of the importance of immunizing their young children as well as the necessity of completing the full immunization course.
- Inform and remind the mothers of the arrival of the immunization team.

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## List of UNICEF publications on the promotion of sanitation

S. No.	Title	Type	Language
1.	Promotion of sanitation in Primary School	Booklet	English
2.	Promotion of Sanitation in Anganwadis	Booklet	English
3.	School Sanitation	Booklet	English, Hindi, Telugu, Oriya, Marathi, Kanada and Bengali
4.	Anganwadi Sanitation	Booklet	English, Hindi, Telugu, Oriya, Bengali, Marathi, Urdu and Gujarati
5.	Use and Maintenance of Waterseal Latrine	Booklet	English, Hindi, Telugu, Tamil, Oriya, Marathi, Bengali, Gujarati, Kanada, Malayalam and Urdu
6.	<b>Towards Better Health Series</b>		
	i) Waterseal Latrine (for potential beneficiary)	Pamphlet	English
	ii) Waterseal Latrine (Technical Details)	Booklet	English
	iii) Smokeless Chulha	Booklet	English
	iv) Sanitation and Diseases	Flashcards	English, Hindi, Telugu, Tamil, Oriya, Marathi, Bengali, Gujarati, Kanada, Malayalam, and Urdu.
	v) Waste Water and Cattle Dung/Garbage disposal	"	"
	vi) Disposal of Human Excreta Sanitary Latrine	"	"
	vii) Personal Hygiene	"	"
	viii) Vector Control	"	"
	ix) Home Sanitation	"	"