



Water and Sanitation Program

An international partnership to help the poor gain sustained access to improved water supply and sanitation services

East and Southern Africa Region



NETWAS



United Nations Children's Fund

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FIELD NOTE School Sanitation and Hygiene Promotion in Uganda: the Challenge

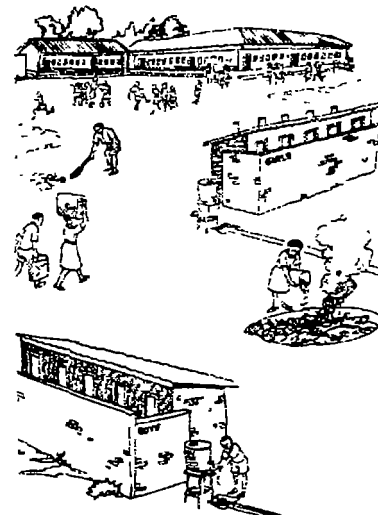
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This Field Note highlights the lessons learnt and recommendations for promotion of school sanitation and hygiene, using Uganda as a case study. The study was commissioned by the Water and Sanitation Program for East and Southern Africa (WSP-ESA) in partnership with Unicef and in collaboration with the Ministry of Health, and NETWAS in Uganda.

1. INTRODUCTION

The population in Ugandan schools, especially primary schools, has increased from 2.5 million in 1995 to 6.5 million in 1999, representing an increase of 62 percent, mainly due to the recent implementation of Universal Primary Education policy, which entitles all school age children to free primary education. While most schools are already lacking in basic sanitary facilities, this sudden increase has aggravated the situation further, causing the number of students per latrine stance to exceed 700 in some schools. Efforts are therefore being made by the Government, UNICEF, DANIDA and other partners to meet the high demands of these schools, through many school sanitation programs across the country.

The study aimed at putting together existing experiences and lessons learned on school sanitation programming and implementation in Uganda. The study was based mainly on the Water and Sanitation (WES) and the Rural Water and Sanitation (RUWASA) programs supported



by UNICEF and DANIDA respectively. The study attempted to:

- Create awareness on the need for use of public funds for school sanitation,;
- Review the institutional arrangements in place (policies, strategies, institutions and actors);
- Analyze the nature of the interventions, which have been put in place, and;
- Document the experiences, lessons learned/ recommendations in promoting school sanitation and hygiene.

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A. Study Methodology

This study focussed on the average rural primary school in Uganda. The study looked mainly at classes from primary one to primary seven; the age range covered can vary between 6-16 years old. To meet the objectives set by the study, both quantitative and qualitative data were required. The methods that were used to collect data included Structured interviews with key informants, i.e. government officials, donor and private sector representatives, district leaders, extension staff and school management;

- Focus group discussions led by children, teachers and parents;
- Field visits and observation checklists used in Hoima, Mpigi, Mbale, Masaka and Mbarara districts; and
- A review of secondary sources undertaken to confirm some of the information collected by the authors.

The main secondary sources used were surveys reports, policy document, supervision, monitoring and evaluation reports as well as written conference papers.

Workshops were also organized for key stakeholders to get an overview of school sanitation and to corroborate information obtained from other sources.

B. Justification for the use of Public Funds in School Sanitation and Hygiene

School sanitation and hygiene is a worthwhile investment in Uganda for many particular reasons They include:

Sanitation is a basic human right: The convention of the Rights of the Child (CRS), which has been ratified by most countries of the world, including Uganda, states that children have a right to a safe environment for enhanced learning, health and development of good citizens.

Schools provide an excellent opportunity to create life-long changes in behavior. In Uganda, the population of students (6.5 million of children, 1999) spends on average 180 days in schools, eight hours a day. Other than the family environment, schools are the most important places of learning for children. Childhood is also the best time for children to learn hygiene behaviors. What children learn in primary schools is likely to be applied for the rest of their lives.

Targeting children as change agents. What children learn at school they can transfer to their homes, communities and to other children at home who are unable to go to school for various reasons. These children will later become parents and will be duty bound to provide a safe and clean environment for their own children's development. If children are brought into the development process as active participants, they can become change agents within their families and catalysts for community development.

Improve hygiene and sanitation is critical to health of school children and the community at large: In reality, schools are often more than just places for learning and behavior change. If school sanitation and hygiene facilities are absent, or are badly maintained and used, schools become a health hazard. During the 1997-98 cholera epidemic, the Ugandan government spent 4.3 billion Ugandan Shillings (US \$3.5 million) in health care costs. The schools were rapidly becoming a place for disease transmission and 560 schools had to be closed due to lack of adequate and acceptable facilities.

School dropout and low literacy rates, especially among the girl children can be attributed to poor sanitation and health conditions in schools: Girls, who are already marginalized in accessing education keep suffering because of inadequate sanitation facilities which allow them no privacy especially during their menstruation period. The lack of private sanitary facilities for girls discourages parents from sending girls to school, contributes to the drop out of girls at puberty, and a contributing factor to fewer women teachers who are needed to encourage girls to attend schools. The low level of literacy among women, as a result of girl push-out aggravates prejudices based on inferiority and superiority complexes between men and women. By promoting girls' attendance and retention in school, the sanitation project influences sound cultural patterns of conduct in future.

School sanitation project offers opportunities for participation: It has other socio-economic advantages such as empowerment, independence, decision-making, self-reliance, confidence building, creative development, life skills development and sustainability.

2. IMPLEMENTATION STRATEGY AND PROGRESS

A. Evolution of Sanitation in Uganda

The political climate in Uganda is now encouraging better sanitation as attested by:

1. **The holding of the National Sanitation Forum:** The most important achievement in the evolution of sanitation in Uganda has been the national Sanitation Forum, which was held on 16-17 October 1997. With the theme: **"Better Sanitation, A Responsibility for All"**, the forum brought together the leadership of all 45 Districts in Uganda who, together with Members of Parliament, donors, Non-governmental agencies and concerned citizens spent two days discussing the issue of sanitation. The culmination of the forum was the signing of **The Kampala Declaration on Sanitation (1997)** by the Chairmen of the District Councils. The main output of the forum was the 10-point strategy program of which school sanitation was a priority in the action point number 5, which states that:

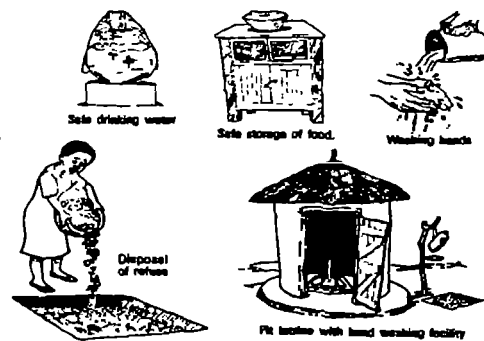
"We shall ensure that every primary school and all other institutions of learning have adequate sanitation facilities (latrines, safe drinking water supply and hand-washing facilities; with separate facilities for girls) by the end of 1998"

2. **The formation of a sanitation task force:** The force was set up to develop new approaches and a concept paper entitled "Promotion of Sanitation in Uganda". This concept paper is the most comprehensive statement on sanitation ever written in the country. It covers the global situation and the history of sanitation in Uganda.

3. **Sanitation remains high on the national agenda.** The President's 1996 election manifesto promised the electorate improved sanitation. Sanitation has been the subject of over 600 newspaper articles in the national press since the beginning of 1998. Home and school improvement competitions are being held. Schools have built latrines and hand washing facilities; teachers have been trained in the establishment of sanitation and health clubs. Private entrepreneurs are setting up businesses to recycle garbage. The visit of President B. Clinton of the United States of America led to a massive clean up Kampala campaign led

personally by the First Lady, Mrs. Janet Museveni. Sanitation promotion also features high in the manifestos of all the Kampala City mayoral aspirants.

4. **Redefinition of Sanitation:** Working in close collaboration with DANIDA, UNICEF, WHO and the Water and Sanitation Program Group in Nairobi, the approach to sanitation for the entire country was redefined. The definition of sanitation was broadened from the mere provision of latrine slabs to a wider concept of environmental sanitation (excreta disposal, solid waste disposal, liquid waste disposal, hygiene control and vector control). Box 1 shows the main components of school sanitation definition in Uganda.



3. INSTITUTIONAL ARRANGEMENTS

A. Public Institutions involved in School Sanitation

It has always been a policy in Uganda, as far as possible, to integrate water source development, sanitation promotion and community empowerment for sustainable community ownership, utilization and maintenance of installed facilities/services. As a result there exist a number of line ministries involved in sanitation. The co-ordination is done at national level through the **Inter-Ministerial Steering Committee (IMSC)** and **Project Management Teams (PMTs)** to provide an enabling environment in aspects of policy development, technical assistance, quality assurance and monitoring and evaluation. These frameworks have greatly assisted/promoted the multi-sectoral collaboration and lobbying needed for policy reforms. The IMSC comprises the highest ranking civil servants, i.e. Permanent Secretaries from each of the ministries mentioned earlier with their technical heads

of department as ex-officials do. Below are outlined the main responsibilities of each institution:

- **The Environmental Health Division in the Ministry of Health** has the overall responsibility for environmental sanitation improvement. Before the ongoing policy reforms, the division had operated as a traditional centralized department with environmental health officers posted in each district and urban authority. At present, the role of the division is being redefined with a view of strengthening its capacity to support local governments to improve environmental sanitation. Officers who used to belong to the division now belong to their District Local Governments. These officers and assistants are trained in the Schools of Hygiene as Health Inspectors and Health Assistants and their job is to carry out mobilization and training activities at community level, including mobilization for school sanitation and hygiene education.
- **The Ministry of Gender, Labour and Social Development** through the Directorate of Gender and Community Development and district staff is responsible for social mobilization and promotion of the role of women in sanitation improvement initiatives. District level officers for the rural water and sanitation sub-sector are mainly trained by the Institute of Social Development, as Community Development Assistants.
- **The Ministry of Education** through its Inspectorate Department plays a role in enforcement of Government policy through guidance, supervision and monitoring. It also plays a role in the promotion of national syllabus that supports and teaches sanitation and hygiene.
- **The Ministry of Water, Lands and Environment (MWLE)** is also, to date, the most important institution involved in sanitation promotion and it is represented by its Directorate of Water Development (DWD) through its two main programs, namely
 - i) WES/UNICEF (1995-2000) covering 34 districts with a total budget of US\$ 27 million; and
 - ii) RUWASA/DANIDA (1996-2000) covering 10 districts with a total budget of US\$ 40 million.
- **Other Government Projects** include Small Towns Water and Sanitation Project (STWSP) and Eastern Centers, which are involved in sanitation improvement programs in both rural and urban settlements. NGOs such as Action Aid, AMREF, WaterAid, AVIS and Uganda Community Based Health Care Association (UCBHCA) are also involved in sanitation improvement programs, including community capacity building
- **At the District level**, the responsibility is borne by the Department responsible for health services competing with other health services like immunization, HIV/AIDS, nutrition, and MCH. At district level, sanitation activities are coordinated through respective sectoral committees of LC V e.g. Works, Social Services, Health and district management teams with responsibility for planning, budgeting, supervision and monitoring implementation. The water components come under the Water section, which is usually housed in the Works Department.
- **At sub-county level**, the responsibility for water and sanitation falls mainly on the extension staff, namely health assistants and community development assistants. There are also sectoral committee members for health and education as well as local NGOs and CBOs. The sub-county chief also plays an important role by mainly enforcing by-laws and government policy.
- **At parish and village level**, water and sanitation is the responsibility of PDCs, local council secretaries for health, school management committees and water and sanitation committees.
- **At schools and community levels**, Parents-Teachers Associations (PTAs) form the interface between the community and the schools. There exists institutional trust between schools and PTAs shown by the fact that in some communities, when given a choice of where to locate a water source, they choose the school compound or a place near the school. Some communities offer land for expansion of the school and contribute labor for the expansion. Although the PTAs role, especially in paying teachers was redefined in 1996, they still operate alongside the School Management Committees (SMC). There are also good relations between the School Management Committees and the schools. The SMC is mainly an executive committee in charge of the day to day running of the school. Problems occur between communities and schools when a shared water

source is left to the school to repair or when community members come to use the school latrines and foul them.

B. Private Sector Involvement

The private sector is both one of the main strategies as well as being an institution that the program is using. This is in support of the Government policy on privatization. The use of the private sector for school sanitation is a very new venture, of not more than a year old.

Initially the public sector was in charge of constructing the school facilities. However, some problems were encountered. They included:

- Latrine construction in most cases was very slow and inefficient; and
- Some latrines collapsed due to the fact that they were sited badly and because technical staff did not supervise construction of the latrines.

Because of these reasons, there was a need to build capacity for the private sector to get them involved both in latrine construction and latrine construction supervision. The private sector is also involved in development, production, and dissemination of appropriate sanitation materials as well as skills development for sanitation service delivery and advocacy.

Under the school sanitation program, private contractors undertake all latrine construction work except digging the pit, which is done by the school community. The District Tender Boards advertise and invite tenders following the Government tendering

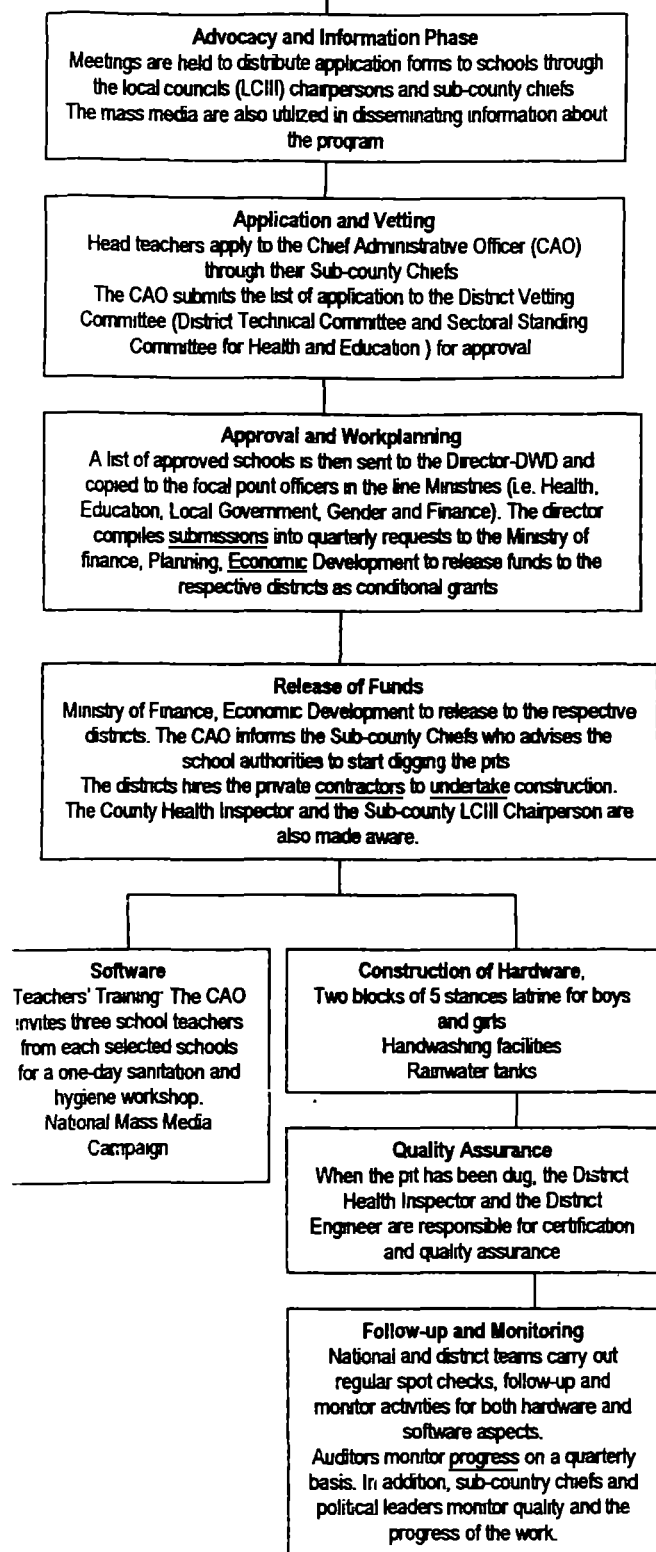
procedures. Sub-counties are encouraged to employ local contractors to take up construction work. The role at the national level is to support districts to strengthen the tendering processes, assist in preparation of tender documents for certification and payment and supervision.

C. Implementation Arrangements for School Sanitation

Below is the implementation framework of the program. The following key issues are made sure all throughout the process:

- Continuous involvement of all stakeholders (central and local governments, bilateral and multilateral agencies, private sector and community members) ensuring the continuity of both the process and benefits arising from the school sanitation promotion.
- Ensuring that sanitation promotion remains a highly political process. The target is that all elected officials in Uganda starting with the President and Cabinet, moving down through Chairmen and Secretaries at village level. The local councils are recognized as vital institutions with their main role being in planning, monitoring and resource allocation.
- Applying a demand driven and bottom up approach. This approach is proven by the fact that the school expresses their demand by filling in application forms and sending them to the district. It also ensures that all partners commit themselves to play their roles, such as digging the pit for example.

Implementation Framework




4. EXPECTED OUTPUTS OF THE ON-GOING ACTIVITIES

The Government, UNICEF, DANIDA and various other partners has made efforts, to initiate school sanitation programs. Below are some of the desired outputs with respect to the various activities:

Expected Output 1: Better hygienic practices at various levels and higher level of participation

Activities undertaken to achieve output:

- **Primary school teachers' training** with an emphasis on providing them with participatory tools to teach children in a more effective manner. Teachers are taught where and how to apply for assistance, how to ensure pupils practice hygiene behavior and how to mobilize community members.
 
- **School sanitation mass media campaigns** as an attempt to inform, persuade and motivate sanitation and hygiene behavioral change in children, teachers and decision-makers. The development of a sanitation news page for advocacy was started in three of the leading daily newspapers.
- Mobilization of political leadership for school sanitation as a process of passing on salient information to relevant stakeholders in order to solicit their support, participation and commitment to school sanitation activities.
- Development of sanitation materials in support of the school sanitation activities. Some of the materials developed are:
 - School sanitation guidelines
 - Teachers training facilitators guide
 - Posters and hygiene and sanitation participatory tools

Expected Output 2:

Development of a more sanitation sensitive school curriculum

Activities undertaken to achieve output:

Sanitation messages have already been incorporated in the national school science curriculum. There has also been an attempt to integrate hygiene and sanitation into other subjects and examinations.



Expected Output 3: Development of effective monitoring systems and indicators

Activities undertaken to achieve output:

Monitoring indicators have been developed and are being used by the inspectorate of education staff.

Monitoring is being done at four levels:

- Management information systems, spot checks, surveys, reviews are used at the national level
- Spot checks and supervisory visits by District Health Inspectors, District Education Officers, District Inspector of Schools, District Water Officer at the District level
- Spot checks and report verification from the politicians
- Monthly reports done by the extension staff at sub-county level.

Expected Output 4: Provision of Sanitary facilities to the schools

Activities undertaken to achieve output:

The programs mainly support the provision of latrines while taking into consideration the gender perspectives. In UNICEF supported programs, two blocks of five stance latrines are provided (with urinals for boys and no urinals for girls), alongside with hand-washing facilities of two hundred litres each. Rainwater tanks are provided to schools that are distant from other visible water sources.

The difference between RUWASA and UNICEF programs is the provision of extra stance for girls. The UNICEF program aims for 25 per cent coverage of UPE supported schools for 34 districts and RUWASA covers 50 percent for 10 districts. The dimensions and design criteria are mainly based on what is

common usage around Uganda to ensure optimum use of the facilities. The construction is carried out by private contractors selected through a competitive tender system by the District Tender Board and local masons in some districts selected by the School Management Committee Chairman, the Head Teacher and LC II Chairperson. Some schools provide bathrooms for girls on their own initiative.

An example of facilities built with local community/s



Expected Output 5: An Integrated Software and Hardware Approach

Activities undertaken to achieve output:

- Software activities are planned to precede the hardware ones and are designed to support hardware activities. For example, mobilization activities which entail advocacy/information awareness, mass media campaigns, training of teachers.
- Hardware activities entail providing assistance for construction of latrines, hand washing and water supply facilities.
- The convergence between software and hardware takes place at planning meetings where both hardware and software personnel share their plans and to try to harmonize them. At district level, this happens at the district management team meetings.

5. FINANCIAL ASPECTS OF THE PROGRAMS

The main funding sources include donors, like SIDA, DANIDA, UNICEF and the World Bank, the Government districts local government and donors

pay for all materials, skilled labor, and hand washing facilities and rainwater tanks. Below is the breakdown of the unit costs of the sanitation and hygiene package used by WES-UNICEF. The costs are based upon the assumption that the latrines are constructed on stable soil formations.

Table 1: Unit Costs used by WES-UNICEF (February 2000)

Details	Ugandan Shillings	US Dollars	Donor/ Government	Community/ School
One block of 5 stances latrines Hand washing facilities	2,085,484	1,600	85 % (UNICEF) 91 % (RUWASA)	14% 9% (RUWASA)
Rainwater tanks (10,000 litres)	1,800,000	1,200	87%	13%
Training for 3 teachers	150,000	100	100%	0%
Production of materials for 3 teachers	45,000	10	100%	0%
National mass media campaign	100,000	67,000	100%	0%

6. RESULTS AND IMPACTS

Impact assessment has not been done yet because the program is still in the early stage. However, internal and external monitoring exercises are on going and the results outlined below are based on the stated activities in the study:

- The teacher-training program was reported to be good in terms of content and delivery, and very relevant to the school sanitation needs. After the training, the teachers reported to have been able to convince their head teachers to buy hand washing facilities. However it was observed that the one-day duration of the training is not sufficient for the teachers to internalize and share diverse experiences that exist in different schools. The teachers trained felt that the training was beneficial and they proposed that it should be extended to two days and should include more teachers.
- Monitoring checklists used by the educational staff have revealed some behavior change in the community overall. There has been an increased appreciation of the habit of hand washing, and an understanding of the safe water chain. However, the hardware part of the program is more appreciated and requested.
- The study confirms high levels of pupil knowledge of hygiene and sanitation issues with the main source of information being the schools. However, translation into behavior still remains too low to show significant results. In all the schools visited, the pupils were generally clean, and those interviewed were aware of the problems associated with poor sanitation and how to improve on the school environmental sanitation. In addition, hygiene knowledge was very high, although practice is still low.
- The teachers also reported some linkages and impact on the surrounding community. The said that if they observe pupils with problems like being always dirty or with jiggers and lice, they investigate further by going to the children's home. Very often they would link up these results with poverty or a weak family structure (old grandparents).
- It has also been established that districts and sub-counties are now beginning to plan and budget for sanitation from their own resources. This shows that they are beginning to appreciate the importance of sanitation.
- Involvement of the politicians in the sanitation program has resulted in better physical and financial accountability as well as increased implementation in some districts.
- Some districts have gone ahead to recruit more staff to fill in vacancies of health and community development staff so as to give more to water and sanitation development.
- Latrines provided by UNICEF and RUWASA have a life span of 5 years and there are no mechanisms set in place to ensure they are either emptied or replaced.

- Communities have been mobilized to play their roles as is evidenced by the contributions that they make towards the construction of latrines. It must be said however, some communities contribute unwillingly or often not all as they have often the wrong understanding of their responsibilities in the school activities.
- In general, there is insufficient monitoring and supervision at the national level. Monitoring and evaluation unit in the Directorate of Water Development developed a set of survey tools for WES –Management information system in 1998. However, it is a very comprehensive tool but its efficient and effective use needs to be reviewed.
- The monitoring checklists at the school level though effective have proven to be time consuming. When used, there is insufficient feedback for appropriate actions to be taken.
- Integration between software and hardware components exists although priority and resources are still skewed towards hardware activities such as latrine construction and borehole drilling. Funds are for use on tangible, physical outputs whereas software activities rarely have physical outputs to claim in the short run.
- Integration becomes difficult when hygiene lessons on sanitation are given in class, but the school does not have the required facilities. For example, many lessons emphasize washing hands but most schools do not have water nearby. Drinking water is not available let alone for washing hands because very few schools have water within a reasonable distance (0.5 km). Others have water latrines that are very dangerous structurally and hazardous hygienically. So such messages like 'use the latrine' become difficult to translate into practice. The reverse is true for hardware installations without supportive software inputs. For example, many schools have hand washing facilities locked up in their stores because they fail to understand the value of washing hands.
- High level political commitment established through advocacy is the key to successful implementation of SSH interventions.
- High level of pupils knowledge of hygiene and sanitation issues does not ensure change in behavior
- Regular supervision, follow up and monitoring is essential for proper operation and maintenance.
- Gender-sensitivity is essential when implementing school sanitation and hygiene activities.
- Sanitation and hygiene promotion messages did not focus on health benefits alone. They also promoted values of self-esteem, recognition and accepted status in the society.
- Schools have to be considered in a holistic perspective, where classrooms, urinals, latrines, hand washing facilities and water supply sources are all classified as sanitary requirements.
- Follow up and supervision is necessary for the progress of activities, as well as ensuring that the teachers applied the participatory tools that were used during the training.
- Working through existing institutions rather than creating specific structures ensures ownership, capacity and sustainability of the activities. Institutions that exist are more legitimate because they have statutory powers and are governed by laws of Uganda. This makes them more accountable and reliable.
- There are too many players involved in sanitation leading to weakness in coordination and assumption of responsibility.
- There is need for a decentralization of resources. Resources are not reaching the intended beneficiaries in the amounts expected to make a difference. There is need to further decentralize resources so that they can move from the district level to the sub-county.
- Training of teachers should include at least one female teacher in each school, as they are needed to encourage girls to attend schools.
- The participation and willingness of the schools, school management teams, and teachers especially head teachers to take part in the project are crucial.

7. LESSONS LEARNED FROM THE STUDY

Lessons are to be extracted from the weaknesses and successes of the Ugandan approach to school sanitation and hygiene.

- Political interference in the tendering process results in delays and quality control.
- Effective participation ensures project activities relevancy and sustainability. Communities should contribute in whichever way that they can to the acquisition of new sanitation facilities.
- Monitoring and Evaluation tools in the school should be simple to use and should take very little time.

8. THE WAY FORWARD

Based on the results of the study, a number of recommendations were made to improve the current school sanitation and hygiene promotion, using Uganda as a case study.

1. More advocacy is needed to:

- Ensure that political support and commitment continues
- Increase sector partners support for school sanitation programs if coverage is to be realized and sustained; and
- Ensure that communities are aware of their roles and responsibilities in UPE implementation activities.

2. More capacity building activities should be undertaken to:

- Increase coverage of teachers trained with a special focus on the female teachers.
- Develop mechanisms that ensure that students are involved in school sanitation activities in order for them to adopt improved hygiene behaviors at schools and at household level.
- Develop strategies that involve beneficiaries in national-level management to ensure sustainability and local capacity building
- Develop a multi-sectoral approach to enhance impact as education, nutrition and

health are linked to water supply and sanitation.

- Work on the syllabus to incorporate gender sensitivity and emphasis on using soap where hand washing is concerned.
- Invest more in the private sector for cost-effective implementation and capacity building
- Reinforce the Local Government Act which prohibits political interference in the tendering process should also enhance private sector involvement.

3. Sustainability and use of hardware should be achieved through:

- Exploration of technological options that could be more children friendly as well as giving choices to schools
- Provision of technologies for the disabled children in all schools; and
- Availability of physical facilities for teachers to assume their responsibilities as role models

4. Software and participatory approaches should be integrated:

- In order to prioritize them at all levels since behavioral change calls for continual reinforcement of hygiene messages.
- Diversification of approaches and target groups is required to promote and sustain good use, operation and maintenance of facilities.

5. Monitoring and evaluation should focus on:

- The development of simpler monitoring checklists for educational staff and ensuring that quality control mechanisms are established at all levels.
- The provision of more staff at the sub-county level in order to accomplish the monitoring activities.

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