# **SESSION PLANS**



Day 3 Module 9, Session 1 Putting WASH Knowledge and Practice into Action

# **Session Learning Objectives**

# By the end of this session, participants should be able to:

- 1. Identify two ways they can advocate for improved availability of WASH supplies for themselves, clients, and household members.
- 2. Describe the importance of documenting information on the WASH activities provided in the home and using this information for improved programmes.
- 3. Identify resources in their communities that will be of support them as they improve WASH practices in their households.

# Time: 3 hours

# **Prep Work**

# Before you teach:

- 1. Gather and bring enough pieces of blank paper or newsprint and markers so that each participant can create a community resources diagram in Section D.
- 2. Photocopy and bring enough "Pre/Post-Training Assessment Tool" (located in Module 9, Annex 2) and End of Workshop Evaluation forms (located in Module 9, Annex 3) for each participant.
- 3. Prepare a Certificate of Achievement for each participant (cut and paste your organization's logo on the bottom of the generic certificate so that when it's photocopied the logo appears on each certificate).

# Trainer Steps: Putting Knowledge and Practice into Action

# A. Introduction

Explain that this session will reflect on what was covered in the training to assist HBC providers to use what they have learned and put it into action. The session will review the supplies, resources, monitoring, and community support which is necessary to support improved practices in WASH care.

# B. Large Group Activity and Discussion: Accessing WASH Supplies (15 minutes)

- 1. Acknowledge that access to supplies varies greatly and is affected by what is available in the community and through the HBC provider's organisation, the cost of the product/resource, and the supply chain system for making the supply available.
- 2. Explain to participants that you are going to discuss practical ways to improve access to WASH supplies for use in their work as HBC providers, as well as for use by their clients and families. Ask participants to think of their experiences from the field and their own households as they respond to two questions:
  - Think of a time when you, your client, or the client's family really needed any supply, food, or medication (even if it is not related to water, sanitation, and/or hygiene). How did you help your client get that item?
  - Think of a time when you, your client, or the client's family needed to have continuous access (more than one time) to a particular supply, food, or medication (even if it is not related to water, sanitation, and/or hygiene). How did you make sure that the item could be continuously available?



# **Trainer Note:**

Record ideas on the flipchart that point to ways that a HBC provider can improve access to a particular item for him/herself, their clients, or their families.

4. Ask participants, "Could you use some of these same ways or methods to improve access to supplies for improved hand washing; treatment, storage, and handling of safe drinking water; faeces handling and disposal; and menses handling and disposal?"

- 5. Explain that access to many WASH supplies such as soap, gloves, and chlorine solution for water treatment is important. However, a person can still improve water, sanitation, and hygiene practices without access to all the supplies. For example, you can teach your clients to wash their hands with ash if soap is not available.
- 6. Ask participants to open their **Participant's Guide** to **page 165** and briefly summarise the information on pages 165–168.
- 7. Ask if anyone has any questions and respond appropriately.

# C. Diagramming Exercise and Discussion (45 minutes)

- Explain that one of the most valuable contributions that HBC providers make is their knowledge and awareness of the communities they serve. It is helpful to take the time to formalise and extend knowledge of the community so that it can be used effectively to meet the needs of people who are served in home based care. This also provides a foundation for networking and referral – a process that contributes significantly to building a continuum of care.
- 2. Divide participants into groups based on their geographical location or organisational groups. To carry out this exercise, participants must work with people who are from the same community. If there is only one representative from each community attending the course, participants can form pairs for support, but participants should develop their own answers and diagrams, based on their communities. If there are any people from one location, divide the group so there are more than six individuals per group.
- 3. After the groups have been formed according to their geographic location, ask them to identify the following individuals, organisations and approaches that HBC providers can call on for support as they work to improve WASH practices after this training:
  - Other HBC providers who are in the similar geographic area;
  - Organisations or groups that provide care-related services to the HBC clients;
  - Other families;
  - Community members that provide care-related services to the HBC clients and families;
  - Mechanisms through which the HBC provider could link with the other providers, community members, organisations, or groups.



Trainer Note:

Allow the groups or pairs time to discuss local resources and ways that they can help each other once they leave the training. While they are working, ensure that each group or pair has enough pieces of blank paper or newsprint and markers so that each participant can make a diagram in the next section.

- 4. Ask each participant to take a piece of paper or newsprint and explain to them that they will create a diagram that they can take with them and use after the training. Ask participants to draw according to the following steps:
  - Step One: Draw a stick figure that represents him or her on the left side of the piece of paper.
  - **Step Two:** Draw a stick figure on the right side of the page which represents someone (or some organisation) who may be able to help you or who already helps you promote and improve WASH practices in your HBC work. For example, you may approach a fellow HBC provider in the community who can help you demonstrate water treatment with chlorine tablets, a community leader who has helped others with placement of a tippy tap, or a worker from another organisation who works with you in the household. Write a name or draw a symbol by this stick figure so you remember which person or organisation it represents. Draw other stick figures and/or list other names on the right side of the page that represent other people/organisations that are able to help you in the community where you work.
  - **Step Three:** Draw a **solid line** between the stick figure which represents you and the stick figure(s) which represent other people/organisations you ALREADY communicate with in your community (and who support you) to improve WASH practices in the households where you serve.
  - Step Four: Draw a dotted line between the stick figure that represents you and the stick figures that represent other people or organisations with whom you DO NOT currently communicate about WASH practices, but with whom you would like to do so.
  - Step Five: Ask participants to spend two minutes reflecting on what it is that they need to do with the people/organisations represented by the dotted lines to actually talk to them about WASH. (For example, Is it time? Do you need someone to introduce you to this person? Do you need to set up an appointment? Do you need someone to identify a contact person for you within the new organisation you would like to contact?) Ask participants to write down on the paper an action item or symbol that will help them remember what they can do to get the communication going with the identified people/organisations.

- 5. Explain to participants that the diagram can form the basis for a support system that they can use after they have completed this training. After everyone has completed an individual diagram, have participants share their diagrams within their groups. Allow a few minutes for each group to share their diagram. If time allows, ask participants to share their diagrams with participants from other groups.
- 6. Explain to participants that having a network of people is important because it is a way to provide assistance and support in promoting WASH practices, and provides someone else to work alongside the provider to make sure that the WASH practices are being correctly done.
- 7. Take the next five minutes to ask participants to share steps or actions they would like to take first in their communities or households when they return from the training. Then, transition to review of the self-reflection technique.

# D. Documenting, Record Keeping, and Monitoring WASH Activities in Home Based Care (20 minutes)

1. Explain to participants that this next session will focus on information an HBC provider needs to document and keep about the WASH activities or the services the worker provided.



# **Trainer Note:**

If all the participants in the training are from the same organisation, then the trainer can replace this section with information that is specific to the organisation.

If the training participants are from different organisations, then follow what is outlined below since each HBC organisation or programme typically has unique requirements and ways of documenting/reporting the services provided by the HBC provider. This session will not introduce a standardised method of recording or reporting WASH activities but will review key principles that apply to all organisations or programmes. Participants also will have an opportunity to discuss their programmespecific WASH documentation and reporting issues later in the session and following the training.

- 2. Ask participants to share why it is important for HBC providers to document, keep records, and monitor what they do in water, sanitation, and hygiene. Record responses on the flipchart.
- 3. Explain that documenting the work we do provides a written record to store facts, events, activities, etc. The way that HBC providers document information varies, but the idea is to document and preserve information in a way that makes it

accessible and usable by those who need it. Explain that it is helpful for HBC providers to document the activities they do which help their clients and their families with improved WASH practices. This type of information can be included in their organisation's information system and used to improve their programmes.



# **Trainer Note:**

Emphasise to participants that there are always lessons to be learned from any activity, successful or not. It is important to record and understand these to avoid making the same

mistakes again. Learning from such lessons is a part of good programme management. Remind participants that sharing lessons is not the same thing as sharing facts and details about clients and their care. Respecting client confidentiality is critical.

- 4. Remind participants about the principles of good recordkeeping. Acknowledge that keeping records can be difficult at times, but the following points should be kept in mind:
  - Date the information;
  - Record the information under the appropriate headings/sections;
  - Be consistent with the information;
  - Collect information at the right time;
  - Record complete information;
  - Ensure that the written information is legible;
  - Store confidential records (e.g. information with client's names, etc.) in a secure place with limited access so that only appropriate staff involved in the care of the client can access the information.
- 5. Remind participants that this training course has introduced use of the WASH Assessment Tool, which is an important tool to use when documenting and keeping records of WASH practices in home based care. The WASH Assessment Tool helps the HBC provider identify what WASH practice they assessed in the home visit and helps the provider and client agree on what the client and/or family member would change or improve in the next home visit.

# **Small Group Work**

6. Ask participants to form small groups or pairs from the same organisation or HBC programme. Ask them to review how HBC providers currently document and/or report what they do on a home visit within their specific organisation or programme. Each group or pair has two minutes to discuss.

7. Invite participants in the small groups to take a few moments to think about how they (1) currently document information about their clients and (2) how they can incorporate documentation of WASH activities without adding too much work for the HBC provider. Documentation can be for any support provided by the HBC provider to improve hand washing, water treatment and storage, faeces handling and disposal, and menstrual blood handling and disposal practices in the households. Explain that it is useful for the HBC provider to also document the WASH practice(s) that the HBC provider and client and/or family member agreed on to improve (e.g., the client may have agreed to try hand washing with soap after toilet use). Document the changes made by the client and/or family member (which are noted when the information is gathered in a follow-up visit). Ask the small groups to take five minutes to discuss possible ways they could or would like to document and/or report WASH information in their programme.

### **Trainer Note:**

If participants are not sure how their programme/organisation requires them to document or report HBC activities, have them discuss the following two questions:

- Who can we ask in our organisation or programme about documenting and reporting so when we go back we can find out what records we need to keep and how to keep them?
- What are the questions we need to ask of our supervisors about documenting or reporting the assistance we provide in water, sanitation, and hygiene?
- 8. Call the time and invite participants to share with the group the ideas they have discussed. Record responses on the flipchart.



# Trainer Note:

Keep participants in small groups if they are split into small groups or pairs by organisation. Small groups or pairs by organisation also will be used for the next diagramming exercise.

 Ask participants if they have any questions and respond appropriately. Transition to the next activity on follow-up support to HBC providers as they improve WASH practices in their communities.

# E. Self Reflection Technique

- Explain that to improve your skills and the services you provide, you need to get in the habit of asking yourself a few simple questions after you leave a client's home. These questions can help you identify what you did that helped your client the most and what you can do better in the future.
- 2. Tell the participants they will now learn a self-reflection technique. Ask the participants to turn to the Training Handouts, page 19, item Self Reflection Tool (see copy in Training Manual Module 9, Annex 1). Explain to the participants that it is important, especially at first, to use this checklist both as a self-reflection tool and to make sure they are taking the appropriate steps to assist households with their WASH practices.
- 3. Tell participants that after leaving a client's house, they should ask themselves the questions on this form and put a tick (✓) mark in the appropriate spaces for their answers. They do not need to share this form or the information with anyone. Tell them that initially they can use the Self Reflection Tool. In time, they will initiate self-reflection on their own.
- 4. Transition to the post-training self assessment, which is the last session prior to the closing of the training programme.

# F. Post-Training Assessment (30 minutes)

- 1. Explain to participants that you have finished the workshop, but that they now are going to fill in again the exact same assessment that they filled in at the beginning of the workshop. You want them to do this so the trainers can see what information they have learned.
- 2. Distribute a copy of the Pre/Post-Training Assessment to participants (a copy can be found in Module 9, Annex 2), making sure that you give each participant the document with the SAME NUMBER that they had when they completed the assessment at the beginning of the workshop.



### **Trainer Note:**

It is not necessary for participants to identify themselves on the form.

3. Ask each person to fill out the assessment and tell participants to leave a question unanswered if they do not know the answer. Give participants 30 minutes to complete the assessment and collect the assessments.

# G. Workshop Evaluation, Closure of the Workshop, and Presentation of Course Certificates (75 minutes)

- 1. Thank the participants for coming and participating in the training. Tell them that they now are going to have an opportunity to give the trainers feedback, which is very important because the information will be used to help improve future trainings.
- 2. Pass out the **End of Workshop Evaluation** form and give participants 30 minutes to fill it out.
- 3. Collect the completed evaluations.
- 4. Remind participants that they are key players and leaders in making improved WASH practices happen in Uganda. With their help, they can make their communities stronger and healthier by implementing what they have learned in the training they just completed.
- 5. Thank all participants again and pass out Certificates of Course Completion (see Module 9, Annex 4 for a copy of a "generic" certificate.)

# Annex 1

# Module 9

# Self-Reflection Tool

# Client's Name:

Self-assessment objective: To assess how well I am improving water, sanitation and hygiene practices during each household visit.

- <u>Instructions:</u> a. Write the client's name in the space above.
- Read each question and place an "X" in the box that corresponds with your answer. م
- I have yet to be successful
- Yes, I was successful
- For questions that were answered "I have yet to be successful," think about how you can reach your objectives and discuss the problem with your colleagues in your organisation or with your fellow HBC providers. പ
- Repeat the same process every time you visit the household. σ

	riouserioia.								
		MEETING 1	ING 1	MEET	MEETING 2	MEE	MEETING 3	<b>MEETING 4</b>	NG 4
	OLIFSTIONS	I have yet	Yes, I	I have	Yes, I was	I have	Yes, I was	I have yet	Yes, I
		success- ful	was success- ful	yet to be success- ful	success- ful	yet to be success- ful	success- ful	to be successful	was success- ful
	Did I help the family identify at least one practice (water								
-	treatment, hand washing, faeces care, or menstrual care) to improve?								
7	Did the family commit to trying at least one improved WASH practice?								
З	Did I ensure that all of the household members actively participated?								
4	Did I use the Assessment Tool to identify the current behaviours ?								
2	Did I use the Counselling Cards?								
9	Did I use the Assessment Tool and/or Counselling Cards to help the client/household members identify at least one improved behaviour to try?								
~	Did I write down the client's current practice and new practice goals in my notebook?								
ω	Did the clients and/or household members ask questions?								
ი	Did I set up a day and time for my next household visits?								

# Annex 2

# **Pre/Post-Training Assessment Tool**

Number:\_\_\_\_\_

### Instructions

Please complete the following questions by marking the correct answer(s) with a tick ( $\checkmark$ ) mark. **Do not worry** if you do not know all the answers. Answer as many questions as you can. Some questions ask for one answer, others for more than one answer. Some questions involve giving a description.

Participants will complete another copy of this same assessment at the end of the training so they can see areas of improvement in their knowledge and skills involving water, sanitation, and hygiene care.

Please read all the questions carefully and answer as best as you can.	Do not
	write in
You have 30 minutes to answer all the questions.	this
	column
1. What water, sanitation, and hygiene (WASH) behaviours should an HBC worker target in home based care?	
[tick four boxes]	
$\Box$ Hand washing	
□ Hair combing	
Diet	
Drinking safe water	
Proper handling and disposal of faeces	
Car washing	
Menstrual care	
2. The goal of WASH care for PLWHA is to:	
[tick <b>one</b> box]	
□ Prevent malaria, increase bed net use, promote the eradication of mosquito	
breeding areas.	
Prevent yellow fever.	
Prevent tuberculosis.	
□ Prevent diarrhoea for family members, improve the PLWHA's quality of life,	
and prevent HIV transmission (to the caregiver).	
3. What are the key steps to negotiate an improved behaviour?	
[tick <b>one</b> box]	
Educate and convince	
Scold the household on inadequate behaviours and lecture on proper had an inadequate behaviours and lecture on proper	
behaviours	
□ Tell people what to do	
□ Assess current practices, congratulate on existing "good" practices, identify	
needed improvement, review safer behaviour options, and come to an	
agreement on an improved behaviour	

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4. Select <b>one</b> phrase that encourages "open-ended questions":	
[tick <b>one</b> box]	
□ How many ?	
□ What would make it easier to …?	
□ Have you ever …?	
□ You don't usually …do you?	
5. An HBC worker's main WASH role is:	
[tick one box]	
$\Box$ Meeting with community leaders.	
$\Box$ Discussing with neighbours.	
□ Negotiating improved WASH behaviours, providing WASH care for sick PLWHA,	
and teaching the caregiver how to provide WASH care to a sick PLWHA.	
6. You can make household water safer for drinking by:	
(tick <b>four</b> boxes)	
□ Having one big open container for animals, kids and the whole family.	
Serving your water by dipping a bowl or cup into the container water.	_
<ul> <li>Keeping your treated water in a narrow-neck container with a lid.</li> </ul>	
<ul> <li>Boiling water until large bubbles appear.</li> <li>Keeping the container of treated water on the fleer so that children can serve</li> </ul>	
Keeping the container of treated water on the floor so that children can serve themselves.	
<ul> <li>Adding chlorine solution or tablets to your water.</li> </ul>	
Transporting your water to the house in a container with a lid.	
7. Four critical times in which hands should be washed to prevent diarrhoea	
include.	
(tick <b>four</b> boxes)	
After defecating	
<ul> <li>Before preparing food or cooking</li> <li>Before washing clothes</li> </ul>	
<ul> <li>Before eating or feeding someone</li> </ul>	
<ul> <li>After changing a child's nappie and cleaning a baby's bottom;</li> </ul>	
□ After working in the garden	
8. The main job of the <b>soap</b> when washing hands with water is to:	
(tick <b>one</b> box)	
Make the water clean	
<ul> <li>Loosen the germs from the hands</li> <li>Make the bands as from</li> </ul>	
Make the hands softer	

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0. The main ich of the <b>running water</b> when weaking hands is to:	
9. The main job of the <b>running water</b> when washing hands is to: (tick <b>one</b> box)	
- Holp dissolve the sean	
<ul> <li>Help dissolve the soap</li> <li>Make the soap softer</li> </ul>	
<ul> <li>Remove/wash away the germs from the hands</li> </ul>	
10. If soap is not available, what can be used as an alternative cleanser when	
washing your hands?	
(tick <b>one</b> box)	
□ Nothing	
$\square$ Hair tonic	
Ash	
□ Jik	
11. One reason that safe water, sanitation and hygiene practices are important for	
people who are living with HIV and/or AIDS (PLWHA) is that:	
(tick <b>one</b> correct box)	
□ They are more likely to become ill or even die from the complications of	
diarrhoea.	
They have a strong immune system and are at a low risk for diarrhoeal	
disease.	
They have to take medications	
12. The following two things can make it easier and safer for a caretaker to dispose	
of faeces:	
(tick <b>two</b> boxes)	
Bedside commode	
A soft cotton bed sheet	
□ A towel	
Use of plastic pants	
Wearing a soft cloth on hands	
12 In a rural area, the extent ways to diamone of eleth or coniter up do eached with	
13. In a rural area, the safest ways to dispose of cloth or sanitary pads soaked with	
menstrual blood are:	
(tick <b>two</b> boxes)	
Throwing them in the trash	
Burning them	
<ul> <li>Burying them</li> <li>Butting the main the lateing</li> </ul>	
Putting them in the latrine	
Thank you!	
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# Answer Key

# **Pre/Post-Training Assessment Tool**

### Instructions

The CORRECT response(s) for each question on the Pre/Post-Training Assessment Tool are shown below.

To score, put a tick ( $\checkmark$ ) for each correct answer in the box in the far right column. For example, for a question that has four possible correct answers, there are four boxes in the column on the right (on the participant's copy of the assessment tool.) If the participant got three answers correct, put a tick in each of three boxes and leave the fourth box empty. To score the assessment, add up the number of boxes that have tick marks in the entire test. The participant's score then can be compared on the assessment he/she took before and after the workshop. Use the number in the top, right corner of the participant's copy of the assessment tool to match each individual's pre/post-training assessment.

The CORRECT ANSWERS for each question are as follows:

- 1. What water, sanitation, and hygiene (WASH) behaviours should an HBC worker target in home based care? [4 correct answers]
  - ☑ Hand washing
  - ☑ Drinking safe water
  - ☑ Proper handling and disposal of faeces
  - ☑ Menstrual care
- 2. The goal of WASH care for PLWHA is to: [one correct answer]
  - ☑ Prevent diarrhoea for family members, improve the PLWHA's quality of life, and prevent HIV transmission (to the caregiver)
- 3. What are the key steps to negotiate an improved behaviour? [one correct answer]
  - Assess current practices, congratulate on existing "good" practices, identify needed improvement, review safer behaviour options, and come to an agreement on an improved behaviour.
- 4. Select one phrase that encourages "open-ended questions": [one correct answer]
  - ☑ What would make it easier to ...?

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- 5. An HBC worker's main WASH role is: [one correct answer]
  - ☑ Negotiating improved WASH behaviours, providing WASH care for sick PLWHA, and teaching the caregiver how to provide WASH care for sick PLWHA
- 6. You can make household water safer for drinking by: [four correct answers]
  - I Keeping your treated water in a narrow-neck container with a lid
  - ☑ Boiling water until large bubbles appear
  - Adding chlorine solution or tablets to your water
  - ☑ Transporting your water to the house in a container with a lid
- 7. Four critical times in which hands should be washed to prevent diarrhoea include: [four correct answers]
  - ☑ After defecating
  - ☑ Before preparing food or cooking
  - ☑ Before eating or feeding someone
  - After changing a child's nappie and cleaning a baby's bottom
- 8. The main job of the **soap** when washing hands with water is to: [one correct answer]
  - ☑ Loosen the germs from the hands
- 9. The main job of the running water when washing hands is to: [one correct answer]
  - ☑ Remove/wash away the germs from the hands
- 10. If soap is not available, what can be used as an alternative cleanser when washing your hands? [one correct answer]
  - 🗹 Ash
- 11. One reason that safe water, sanitation, and hygiene practices are important for people who are living with HIV and/or AIDS is that: [one correct answer]
  - If They are more likely to become ill or even die from the complications of diarrhoea.
- 12. The following two things can make it easier and safer for a caretaker to dispose of faeces: [two correct answers]
  - ☑ Bedside commode
  - ☑ Use of plastic pants

- 13. In a rural area, the safest ways to dispose of cloth or sanitary pads soaked with menstrual blood are: [two correct answers]
  - ☑ Burning them
  - Putting them in the latrine

# Annex 3

# **End of Workshop Evaluation**

To be completed by the participants at the end of the training workshop

# A. Educational Aspects

- 1. Please evaluate the following aspects of the training by circling one answer for each question.
  - Were the workshop/course objectives achieved?
     a) Yes
     b) No
  - Were your personal objectives achieved?
     a) Yes
     b) No
  - Will the content/information apply to your work?
     a) Yes
     b) Some of it
     c) No
  - Were the training materials (e.g. handouts) appropriate/easy to understand?
     a) Yes
     b) No
- 2. The duration of the training (circle one correct answer)
- (a) Too long (b) Too short (c) Just right
- 3. Put one tick (✓) per row to indicate what you think of the training techniques used in the workshop:

	Very useful	Somewhat useful	Not useful
Demonstrations			
Group discussions Role Plays			
Lectures			
Reading aloud			

- 4. List three topics that you found MOST USEFUL and will apply to your work:
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_ c.
- 5. List topics that you thought were **NOT USEFUL**, if any:
  - a. \_\_\_\_\_\_ b. \_\_\_\_\_
  - c. \_\_\_\_\_ d. \_\_\_\_\_

# B. Administration Aspects

 Please evaluate each of the following aspects of the training with a tick (✓) in the box on the scale below:

	Excellent	Good	Fair	Poor
Accommodation				
Meals				
Training venue				
Logistical support				

- 2. What is your overall rating of the workshop (circle the correct answer)?
  - 4. Excellent 3. Good 2. Fair 1. Poor
- 3. Suggestions/recommendations:

THANK YOU!

# Annex 4

Certificate of Achievemen.

has successfully participated in the Training on Water, Sanitation and Hygiene Practices in HIV/AIDS Home-Based Care. This is to certify that

(name and title of organizer)

(name and title of trainer)