

#### WASH & HIV/AIDS INTEGRATION: TRAINING AND SUPPORT SAFE FECES MANAGEMENT

This document was taken from the comprehensive training package: Global WASH Training Package for the Prevention of Diarrheal Disease. The sections contained in this document are from the trainer's manual and contain only those pieces that pertain to safe feces management. When actually conducting the training, it might be necessary (depending on the level of capacity of the trainees) to also include introductory sessions on the importance of WASH and more general information. The entire training package (including these introductory sessions) can be downloaded from <a href="http://www.hip.watsan.net/page/3396">http://www.hip.watsan.net/page/3396</a>.

Please note that the following sessions were taken from a larger document and sections have been removed; the numbering of the various sections matches the original document and is therefore not always consecutive.

Water, Sanitation, and Hygiene Improvement Training Package for the Prevention of Diarrheal Disease

# **GUIDE FOR** TRAINING OUTREACH WORKERS

FECES MANAGEMENT

- **►** Guide for Training Outreach Workers
- ► Collection of Resource Materials
- ► Outreach Worker's Handbook

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## **ACRONYMS**

AIDS Acquired Immune Deficiency Syndrome

CDC Centers for Disease Control and Prevention

CLTS Community-Led Total Sanitation

HIP Hygiene Improvement Project

HIV Human Immunodeficiency Virus

IPC Interpersonal Communication

MOH Ministry of Health

NGO Non-Governmental Organization

ORS Oral Rehydration Salts

PVO Private Voluntary Organization

SODIS Solar Water Disinfection

SSS Sugar Salt Solution

UN United Nations

USAID United States Agency for International Development

WASH Water, Sanitation, and Hygiene

WHO World Health Organization

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# PREFACE: LETTER TO PROGRAM MANAGER AND TRAINER

The USAID-funded Hygiene Improvement Project has compiled a training package to facilitate work in water, sanitation, and hygiene (WASH) around the world. This training guide, along with its accompanying Outreach Worker's Handbook and Collection of Resource Materials, is intended for use by any organization that works with or is about to start working with outreach workers—local individuals who work at the community level. Your organization has decided—or is in the process of deciding—to provide your outreach workers with training so they will be prepared to work in communities to help people adopt healthier behaviors related to water, sanitation, and hygiene. These new or improved practices will result in significantly fewer cases of diarrhea (and therefore less illness and fewer deaths), especially among children. In addition, these new practices may well have psychological benefits such as increased feelings of pride/prestige, of being good parents, and of contributing to the community's welfare.

If your organization is already involved in WASH activities, these materials can help your outreach workers become more effective at persuading individuals, families, and groups in their communities to adopt new and healthier behaviors to reduce the incidence of diarrhea.

Regardless of your organizational focus, these materials can make a link to improved WASH practices in the following ways:

- Family planning: Improved WASH practices lead to less diarrhea and childhood illness and better child survival, which are linked to couples' interest in family planning.
- HIV/AIDS: Improved WASH practices are critical for persons living with HIV/AIDS
  because they live at high risk of contracting diarrhea, which can cause or contribute to their
  premature death. These persons are potentially a source of diarrhea in the community, since
  they are highly susceptible to it.
- Food production: Preventing diarrhea in the community is potentially of interest to food production projects for two reasons. Diarrhea among persons working in agriculture, or among their children, reduces their availability and productivity, sometimes at critical harvest

or planting times. If one purpose of improved food production is consumption by the family itself, then diarrhea among family members works to reduce the positive impact of increased and/or more healthful food consumption.

• *Income generation:* As in the case of food production, diarrhea among both adults and children in a family reduces the amount of time available and ability to focus on productive tasks, so preventing diarrhea has a complementary benefit. It also reduces the resources used on treatment, enabling them to be used elsewhere.

It is likely that your outreach workers are already carrying out such tasks as:

- Giving group talks or demonstrations
- Making home visits
- Counseling and joint problem solving with families
- Collecting and/or leading community members to collect information on their conditions, resources, and opinions
- Planning, implementing, and monitoring activities

These are precisely the type of skills that lend themselves to effectively promoting improved WASH practices. In some cases, all that outreach workers lack is knowledge of WASH, strategies for improving family WASH practices, and an orientation to using job aids and other supports.

Should your organization decide to sponsor WASH training for your outreach workers, you, as a program manager, will be responsible for a number of tasks before, during, and after the training. The following recommendations and suggestions will give you a broad idea of the scope of the task you are about to undertake. (In the Introduction starting on p. 8, you will find more detailed information about the *Guide for Training Outreach Workers*, *Outreach Worker's Handbook*, and the workshop.)

HIP developed these materials through a wide review of WASH technical and training materials. The HIP materials most directly reflect the experiences of several USAID-funded projects—the Environmental Health Project (I and II) and HIP—in such countries as the Dominican Republic, Nicaragua, Uganda, Peru, Madagascar, and Ethiopia. The draft materials were revised based on valuable feedback from a field test that ChildFund International conducted in Zambia.

# Deciding If You Should Incorporate WASH Activities into Your Program

You, the program manager, should *begin* at the *strategic level* by thinking about and answering a series of questions that will help you put the WASH activities into an organizational context that ensures congruence with other activities. For example:

- How important is diarrhea as a cause of illness and deaths in the communities where your project works?
- How will this training and the subsequent WASH activities of the outreach workers fit into the existing programmatic framework of your organization?
- How will adding a WASH component to an existing program or project change (help or hinder) the program or project and its ability to achieve its goals and objectives?
- What resources (financial, human, and material) are available to support the addition of a WASH training and outreach component?
- How will the results of the outreach workers' efforts be monitored, evaluated, and reported?
- On which aspects of WASH would the outreach workers concentrate their efforts? The decision to start with water, sanitation, and/or hygiene should be made as a function of the organization's programmatic priorities and local needs and conditions.

#### **Preparing for the Training**

Once you and your organization have decided to undertake WASH outreach activities and there is a "fit" with your other program activities, there are a number of steps you, the program manager, should take to prepare for the training.

- 1. You should familiarize yourself with both this Training guide, which will be used by the trainer, as well as with the accompanying *Outreach Worker's Handbook* and the *Collection of Resource Materials* that the outreach workers will use during training and in their community work. This will give you a clear idea about roles, responsibilities, and scope of the training and its follow-on activities.
- 2. You or the trainer (see the note to trainer on p. 5) will need to gather certain information (such as national, regional, or local level WASH statistics) that will be presented during the training. These statistics should help the trainer and outreach workers understand the broad WASH context in which they are working. Suggestions for different kinds of statistics can be found in Module 1, Session 2, p. 33, of this guide or p. 7 of the *Outreach Worker's Handbook*.
- 3. If your organization has already conducted assessments of local WASH conditions, the information from these assessments should be summarized in a way that both the trainer and outreach workers can understand easily. This information may facilitate the selection of target communities as well as help you determine the focus of promotional activities in the field.
- 4. You and the trainer should be familiar with the WASH conditions in the communities where the outreach workers will be conducting activities and be clear about your expectations (results or outputs). This will help the outreach workers know broadly where to focus efforts, although conditions may vary somewhat from community to community.
- 5. Designate someone to handle the logistical aspects of the training: selecting the participants, arranging the lodging for the participants, selecting the venue, making arrangements for meals, etc.
- 6. The introduction section contains a generic list of WASH tasks for outreach workers. As program manager, you should use the items contained in the job description to help craft a task list appropriate for *your* program's outreach workers. You should then use that list to help you complete the next item in this list (#7).
- 7. One of the most important decisions you and the trainer need to make is which sessions you will offer to your outreach workers. To help you do this, there is a menu of options on pp. 14–15 with suggestions about which sessions you might include in the training. The length of the training will vary according to which sessions you choose to include. Appendices 6–8 outline half-day, one-day, and three-day trainings. The shorter workshops are for raising awareness. To conduct all of the sessions in this Training guide (covering all three major WASH key practices—safe water, feces disposal, and hand washing) requires a training of at least four days.

8. It is impossible to create a generic manual—intended for use in any country where there are outreach workers—that does not need to be adapted to be relevant and appropriate for each particular setting. There are instructions on how to do this adaptation in various places in the text.

#### **Trainer Note:**



You (the program manager) and/or the trainer need to choose the most important sessions as well as MODIFY any sessions that have information that is not relevant for your country (for example, remove information about chlorination products that are not available in your country or remove information on alum if alum is not available in your country).

The Outreach Worker's Handbook is provided in both PDF form and in Word form, so that you might adapt the handbook to the particular needs of the outreach workers being trained by your program. Please keep in mind that page numbers have been cross-referenced between the Guide for Training Outreach Workers and the Outreach Worker's Handbook. Therefore, if you make changes in the handbook, you will need to change the references to those page numbers in the training guide.

This training package suggests tools to facilitate data collection for monitoring the progress of outreach workers and tracking changes in WASH practices in the community. These tools require a certain level of literacy and numeracy. You are free to adapt and use them or not. If appropriate, decide how you want to integrate WASH monitoring into your existing monitoring instruments and procedures, what data need to be collected, and how the data will be used. The tools included here can help your program collect data at two levels:

Individual/Household Level—The outreach worker uses an assessment and joint problem-solving card (Discussion Card) to determine the current behaviors in a household and to mutually plan with the community member how to improve behaviors. The Household Tracking Sheet helps the outreach worker document the current and negotiated improved behaviors for each household. The Discussion Card(s) and Household Tracking Sheet are intended to facilitate such counseling activities.

Multiple Household/Communitywide—The Consolidation Sheet helps gather in one place the information collected by multiple outreach workers within one community or geographic area. The Bar Graph helps the outreach worker turn the numbers on the Consolidation Sheet into a bar graph, which is a more visual way to present the data that is useful when giving feedback to the community on its progress. Use of the Consolidation Sheet and Bar Graph is optional, so you, the program manager, need to decide if these are useful tools for the program. (Giving the community feedback on how it is doing on key WASH practices both reminds and motivates people to try to do better.)

Visual aids and handouts used by outreach workers both in the field and in the training workshop are supplied in the *Collection of Resource Materials*. It is highly desirable that you adapt these illustrations to fit the local cultural context and then make sufficient copies. Information to help you do this can be found on pp. 11–14 below and in the *Collection of Resource Materials*—"Adapting Visual Aids."

Information is available concerning session, daily, and workshop evaluations (Appendix 4), as well as templates for developing outreach worker self-appraisal forms (Appendix 3). This information can also be found in the *Collection of Resource Materials*.

# Supporting the Training of the Outreach Workers

It is recommended that you, the program manager, take the following steps to support the participants while the training program is in progress:

- 1. Welcome the participants to the training program and tell them that they have the organization's approval and support. Explain how their new tasks will help meet organizational goals and objectives by improving household and community practices that will prevent diarrhea and child deaths, what (in general) they will do to improve WASH, what kind of support they can expect once in the field, etc.
- 2. Monitor the progress of the workshop to see that participants understand the technical content, that the training conditions are favorable for learning, and that the participants are motivated to undertake their new roles. If it is logistically feasible, an effective way to train the outreach workers is to have them spend time in the workshop learning one set of skills, then venture into their communities to try out their newly acquired skills, and then return to the classroom to discuss what they learned and receive more training in preparation for their next community experience.

# Supporting Your Outreach Workers in the Field

There are steps you should take to assist the outreach workers after the training is complete:

- 1. Make every effort to put the outreach workers' newly acquired skills and knowledge into practice as soon as possible. The longer they wait, the more they'll forget what was learned in the training. Take advantage of their enthusiasm and motivation.
- 2. Make sure they have the supplies and materials they need. The activities they will be conducting in the field require some locally available items (such as containers and water treatment products). There are low-cost options for most of these materials.
- 3. Provide supportive supervision to them, particularly in the first months following training, since WASH activities and related skills are likely to be new to them.

- 4. Assist the outreach workers with their monitoring forms and tasks if your organization decides to gather WASH data.
- 5. Conduct debriefing sessions where the outreach workers can compare notes, think about lessons learned, and develop new ways and practices for their work.

The Training guide refers to many websites where you can find additional information (see Appendix 5).

Finally, an introductory word or two to share with the trainer(s):

- 1. Preparing to implement any workshop takes a lot of time. The general rule is two days of preparation for every day of workshop. Once you and the trainer(s) have selected the workshop topics appropriate for your community (the section on pp. 14–15 will help), you should allow your trainers enough time to carry out the preparations. The preparation will involve finding out information as well as gathering materials such as bottles, water, basins, soap, and cloth, and photocopying forms and tools for participants. These tasks are in addition to the logistical and administrative tasks involved in staging a workshop.
- 2. The Training guide has been written purposefully in a "recipe" style, so that someone whose primary duties are not related to training will be able to implement the workshop. Experienced trainers may find the training directions too detailed and should treat them accordingly. Also, please feel free to have experienced trainers "upgrade" the training methodologies based on their level of comfort with training and the content.
- 3. The timing for the various activities is generous. You may find that you are able to complete an activity well within the suggested timeframe. For example, an experienced trainer may be able to complete the introductory activities in a relatively short period of time on the first morning. Please remember timing suggestions are illustrative.
- 4. Finally, the session objectives have been written in terms of what the participants should be able to do. They are learner-focused. They guide the content of the session and help both trainer and participant to assess the acquisition of new knowledge and skills. Acquisition of WASH knowledge is not an end in itself, but should serve as a basis for what the participants will do in the field.

Good luck!

# THE FECAL-ORAL ROUTE: THE DANGERS OF CONTAMINATION

#### **Session Objectives**

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

- 1. Identify some common community practices related to the disposal of feces.
- 2. Review how feces can be spread by the five F's.
- **3.** Remind people about the specific dangers of and diseases related to contamination by feces.
- **4.** Identify the steps on the "sanitation ladder."

#### SESSION AT A GLANCE: The Fecal-Oral Route

Activity	Time	Materials
A. Introduction  Trainer introduces the topic of why feces can be dangerous and presents the four objectives for the session.	5 minutes	- Flipchart paper, markers, tape
B. Climate Setter  Trainer asks the participants to discuss some of the common practices in the community related to defecation, especially how feces are disposed of.	10 minutes	- Flipchart paper, markers, tape
C. Large Group Discussion and Task  Trainer reminds participants about the concept of the five F's introduced in Module 1, Session 5.	30 minutes	<ul> <li>Five cards and five flipchart pages with one word each: food, flies, fingers, field, fluids</li> <li>Drawing of someone defecating openly</li> </ul>
D. Large Group Discussion and Contest  Participants discuss some of the known dangers (diseases) related to open defecation and the sanitation ladder is introduced.	10 minutes	<ul> <li>Complementary information, if needed, about diseases not mentioned during the discussion</li> <li>Sanitation ladder drawings</li> </ul>
E. Reading, Conclusions, and Planning	45 minutes	- Outreach Worker's Handbook



# PREPARING TO TEACH THIS SESSION: The Fecal-Oral Route

Before you present Module 4, Session 1:

- 1. If possible, have copies of the sanitation ladder (see next page), one for each table.
- 2. Be aware that there may be reluctance to talk about this subject. Also make sure you find the locally appropriate words that are used to refer to feces, defecation, etc.
- 3. Prepare a set of cards with the words "food," "flies," "fingers," "field," and "fluids," one set per table and one set for the trainer, and write each word on a flipchart page. (Pictures for the F diagram are also available in the *Collection of Resource Materials* in the section titled Module 4, Session 1).
- 4. Prepare a culturally appropriate drawing (or use a predrawn picture) of someone defecating openly (samples in *Collection of Resource Materials* section for Module 1, Session 5).
- 5. Do some preliminary research about diseases transmitted by the oral-fecal route such as hepatitis A, cholera, typhoid, giardia, amoebic dysentery, rotavirus, or polio. In general, many of the diseases that have diarrhea as a symptom can be transmitted from contact with contaminated feces. The participants should not be overwhelmed with a lot of technical information about all the diseases but should realize how many diseases are associated with the oral-fecal route.

SESSION 1: THE FECAL-ORAL ROUTE 11

#### The Sanitation Ladder

The idea of the sanitation ladder is useful to help outreach workers assess current feces disposal practices and give them options for working with families to promote improved practices. The ladder indicates, from most dangerous to safest, the options for how people dispose of feces. Using the ladder concept can help a family take small, incremental steps up the ladder.

The following options create a large risk of spreading diarrheal disease in the community and represent the lowest "rung" (level, ground level) of the ladder. They are not acceptable practices:

- Defecation in the compound by young children
- Defecation in the open—indiscriminately

On the ladder (in order from least acceptable [#1] to "best" practice [#8]):

- 1. Defecation in the compound by young children
- 2. Defecation in the open—indiscriminately
- 3. A designated place in the open for defecation (not an acceptable option except in emergency setting)
- 4. Cat's method (defecate in a small hole, then cover with earth)
- 5. A traditional pit latrine or basic ecosan solution (this option meets the Millennium Development Goal criteria for feces disposal)
- 6. An improved pit latrine (generally means with an improved slab) or ecosan solution
- 7. An improved pit latrine with ventilation
- 8. Flush toilet with onsite disposal
- 9. Flush toilet with sewage and wastewater treatment

#### **Trainer Note:**



A sample sanitation ladder illustration is available in the *Collection of Resource Materials* section labeled Module 4, Session 1. This ladder should be adapted to contain the different "steps" from your community.

# TRAINING ACTIVITIES: The Fecal-Oral Route

- A. Introduction to the Session (5 minutes)
  - 1. Welcome the participants. Tell them that during this session they are going to learn about how feces can be spread, how they can be dangerous, and something about how people in the community dispose of their feces. They will also be introduced to the concept of the sanitation ladder, which they will learn more about in the next session.
- B. Climate Setter (10 minutes)
  - 1. Ask the participants to name some of the common defecation practices in the community (use the culturally appropriate word) and how people presently dispose of their feces.

#### X

#### **Trainer Note:**

The answers will vary according to the degree of development in the area of sanitation. The answers may range from "flush toilet" to "in the field/woods."

- 2. Record their answers on a piece of flipchart paper.
- 3. Ask their opinions about each of the answers: What do you think about this practice? What are positive and negative aspects to the current practices? Do not belabor this discussion. There is no need to record the opinions.



#### **Trainer Note:**

By asking about "opinions" there is no judgment implied about the behavior. Reinforce the idea that they are not there to evaluate the practices but to begin thinking about how to get people to adopt a different, safer behavior.

- C. Large Group Discussion and Task (30 minutes)
  - 1. Review the concept of the five F's (see Module 1, Session 5, p. 41) and distribute the cards, one set per table (sample pictures for the F diagram are also available in the *Collection of Resource Materials* section for Module 4, Session 1).
  - 2. Hold up the picture of the person openly defecating and ask the participants what happens when someone defecates in the open?

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Take a few answers.

Then ask: Where do the feces go? What happens to them when it rains? How do people feel about stepping in feces? Does the smell of feces in the community bother people? What is the perception of someone who defecates in open areas?

- 3. Complement the discussion by emphasizing that all feces is potentially dangerous and needs to be "treated with care" because all feces contain germs that can cause illnesses in people. This is why feces should be deposited in a latrine or toilet where they cannot be transported by one of several possible routes—water, dirt, food, flies, or hands—into the mouths of other people. When someone sick defecates in the open, s/he is putting everyone at risk of catching the same illness.
- 4. Show a set of the five F cards and have the five flipchart pages with the five F's on them posted.
- 5. Then ask each table to write one action on their cards that the community could take to help stop the spread of feces by that particular method. (For example, on the fingers card, the group might write "make sure everybody washes his or her hands following defecation.")

#### **Trainer Note:**



Although "flies" is stated as one of the five F's, this manual focuses on water, sanitation, and hand washing. To research more information on home hygiene and preventing flies, please refer to the websites and links in Appendix 5.

- 6. When the tables are done, go around the room and collect the suggestions. Record their answers on a flipchart and then open the discussion and let people add suggestions. Push the group to come up with as many different ways as possible.
- D. Large Group Discussion and Contest (10 minutes)
  - 1. Ask the participants if they know of some diseases that are spread by not removing feces from the environment. Give each table a couple of minutes to brainstorm. See which table can generate the most diseases (prize optional).
  - 2. Take, verify, and record the answers. If some of the common diseases (listed in the introduction to this session) have been left out, add those to the list. Talk briefly about some of the symptoms. For example: "cholera, which causes severe dehydration due to diarrhea."
  - 3. Conclude by introducing the sanitation ladder and saying that a few measures taken by people can greatly reduce the spread of feces and thus help "break" the cycle of feces getting into mouths. Show each step on the ladder. Explain that they will look at the ladder in more detail in the next session.

- E. Reading, Conclusions, and Review (45 minutes)
  - 1. Ask the participants to turn to p. 19 in the *Outreach Worker's Handbook* to the question and answer section on the proper disposal of feces. Have them read aloud each question and answer. Remind them again that they do not have to memorize all this but should know where to find it in the *Outreach Worker's Handbook*.

An alternative way to have the participants become familiar with the supplemental information is to ask them questions (individually, in pairs, trios, by tables, etc.) and have a "treasure hunt" where everyone looks in the *Outreach Worker's Handbook* to see who can find the right answer first.

- 2. Then on pp. 73–74 in the *Outreach Worker's Handbook*, record their thoughts about teaching this session as an outreach worker:
  - What did you learn during this session?
  - Are you comfortable enough with the subject matter to facilitate a session with an individual, family, or group?
  - What are you going to remember about the five F's when you are working with members of the community?
  - What else do you need to know/to do to be ready?



#### Trainer Note:

This may be done orally with the trainer recording answers on a flipchart.

- 3. Summary points:
  - Some of the current practices in the community
  - How each of the F's can spread feces
  - Some of the serious diseases spread by not isolating feces
  - What are the potential dangers and perceptions of open defecation in the community
  - The steps on the sanitation ladder
- 4. State that in the next session, they are going to take a look in more depth at ways to properly dispose of fecal material.

# PROPER FECES DISPOSAL

#### **Session Objectives**

At the end of this session, the participants will be able to:

- 1. Identify where most of the community members are on the sanitation ladder regarding their method of feces disposal.
- 2. Discuss the pros and cons of the various steps/methods of disposal on the ladder.
- **3.** Relate why it's especially important that the feces of children, animals, and invalids be properly disposed.
- **4.** List three possible ways to properly clean oneself following defectaion (make sure to include hand washing with soap).

#### **SESSION AT A GLANCE: Proper Feces Disposal**

Activity	Time	Materials
A. Introduction	5 minutes	- Flipchart paper, markers, tape
Trainer introduces the topic of feces disposal, reviews how feces can be harmful, and presents the four objectives for the session.		
B. Climate Setter  Trainer quickly reviews the sanitation ladder and asks the participants how most community members dispose of their feces and why.	10 minutes	- Flipchart paper, markers, tape - Copy of the sanitation ladder from previous session (p. 139, or Outreach Worker's Handbook p. 20 or Collection of Resource Materials) posted or one copy per table
C. Table Discussion and Task  For each step on the ladder, participants discuss the pros and cons of the disposal/isolation method.	30 minutes	- Flipchart paper with steps on the ladder down the left hand side and two columns (pro and con)
D. Large Group Brainstorm and Discussion	25 minutes	- Flipchart paper, markers, tape
Participants discuss how they might get community members to "move up the ladder," and why it's especially important to ensure the proper disposal of feces from children, animals, and invalids.		
E. Large Group Discussion	10 minutes	- Outreach Worker's Handbook
Review of proper methods of cleaning oneself following defection.		
F. Reading, Conclusions, and Planning	20 minutes	- Outreach Worker's Handbook



#### 100 minutes

# PREPARING TO TEACH THIS SESSION: Proper Feces Disposal

Before you present Module 4, Session 2:

- 1. Be prepared to summarize briefly the previous session about why feces are potentially dangerous and why open defecation is harmful, as well as the oral-fecal route.
- 2. Have copies ready of the sanitation ladder (see previous session, also in *Outreach Worker's Handbook* p. 20; sample illustration available in *Collection of Resource Materials* section for Module 4, Session 1), one large copy for posting or copies for each table. On a piece of flipchart paper, put the steps of the ladder down the left hand side and label the top "pro" and "con." Use only those steps on the ladder that are appropriate for the community.
- 3. Do research on some of the more common practices in the community regarding feces disposal and methods of cleaning oneself afterward.

# TRAINING ACTIVITIES: Proper Feces Disposal

- A. Introduction to the Session (5 minutes)
  - 1. Welcome the participants. Tell them that during this session they are going to learn more about the sanitation ladder, look at actual community practices, and talk about ways to get the community members to properly dispose of (isolate) their feces. In addition, there will be a review of hand washing and cleaning practices with special attention to its importance following defecation.
- B. Climate Setter (10 minutes)
  - 1. Quickly review the different steps on the sanitation ladder and ask where the participants think most community members are at the present time regarding feces disposal. Extend the conversation to talk about the feces of babies, sick people, and animals and why it's important to think about the correct disposal of these kinds of waste.

The s	teps on the sanitation ladder are:
1.	Defecation in the compound by young children
2.	Defecation in the open—indiscriminately
3.	A designated place in the open for defecation (not an
	acceptable option unless in an emergency setting)
4.	Cat's method (in a small hole and covered with earth)

5.	A traditional pit latrine or basic ecosan solution (this option
	meets the Millennium Development Goal criteria for feces
	disposal)
6.	An improved pit latrine (generally means improved slab) or
	ecosan solution
7.	An improved pit latrine with ventilation
8.	Flush toilet with onsite disposal
9.	Flush toilet with sewage and wastewater treatment

- 2. Record their answers on a piece of flipchart paper.
- 3. Ask participants what they think about these practices. Do not belabor this discussion. There is no need to record the opinions.

#### **Trainer Note:**



By asking about "opinions," there is no judgment implied about the behavior. Much of this will be review from the previous lesson. The program may well want to record these opinions for use in creating messaging.

- C. Table Discussion and Task (30 minutes)
  - 1. Referring to the sanitation ladder list on the wall or the copies on the desk, ask the participants at each table to talk about the pros and the cons of a couple of the methods of disposing of excreta and to record those on flipchart paper. (The number of methods per table will vary depending on the number of tables.)

#### Trainer Note:



The idea in the previous activity was for the participants to think about the community's practices and to express their opinions about such practices. In this activity participants talk about the steps on the ladder and their pros and cons.

2. When the tables have completed and posted their work, ask the participants what they've begun to conclude about the steps on the ladder.

Take a few answers.

- D. Large Group Brainstorm and Discussion (25 minutes)
  - 1. Put the flipchart pages where everyone can see them. Ask the participants to look again at the pros and cons and to remember how most community members currently dispose of their feces.

2. Open the discussion by asking the participants how they might get community members to "move up the ladder." Encourage creative ideas.

#### **Trainer Note:**



At this point, don't worry too much about the specificity of their ideas. This will come in the final analysis following the session on latrines. If the session on latrines will not be covered, then the synthesis session on management of feces should be done following this session.

- 3. Record the ideas and save them for the synthesis session.
- E. Large Group Discussion (10 minutes)
  - 1. Ask the participants to recall the most important things to remember when it comes to handling feces (proper disposal of feces and hand washing!).
  - 2. Take and record a couple of answers.
  - 3. Remind participants about how to wash their hands (based on what they remember from the hand washing sessions). Talk about "washing" with soap or ash, air drying, how long to wash, etc.
  - 4. Ask a volunteer how they clean feces off a baby's bottom (following the baby's soiling). Talk about the importance of the special needs of sick or elderly people: their feces should be properly disposed of in a way that doesn't contaminate the caregiver and/or other members of the family.

#### **Optional Learning Activity**

This activity will take at least two hours and requires some preparatory time, but it can be a good learning experience that has the additional benefit of getting the participants out of the training room.

#### **Preparation:**

- 1. Meet with community leaders of an area very close to the training location to ask their permission to conduct the activity in their community.
- 2. Option 1: Prepare a form for participants to use to assess how many families are at particular steps on the sanitation ladder.
  - Option 2: Design a simple survey form on sanitary solutions in the community. Some suggested questions are found below.
- 3. Prepare questions for a discussion after the community visit (both options).

#### Implementation:

Option 1, assessing where families are on the sanitation ladder. Begin by dividing the participants into teams of three or four persons each. Have each team visit 10 homes in the nearby community. If possible, they should speak briefly with an adult or older child to ask about where the family goes to the bathroom. If no one is available, participants should try to observe where, but if they cannot see where, then they should move on to another residence and not count that one in their 10. Team members should rotate the roles of talking and recording.

The group should use the form with the sanitation ladder to tick where each family's sanitary solution is on the ladder.

Later, back in the training location, each group should report on their findings (how many families at each level of the ladder). One volunteer can consolidate the findings for the entire community. Then the facilitator should lead a discussion of the findings, asking such questions as:

- How do you feel about these findings?
- How similar are the sanitary conditions here to those in your own community?
- How feasible is it for families in the community visited to move up the sanitation ladder?
- What support would they need from an outreach worker to move up the ladder?
- Could people move up more than one step at a time?

Option 2, doing a simple survey of sanitary conditions in the community: Begin by dividing the participants into teams of three or four persons each. Have each team visit 10 homes in the nearby community. They should speak briefly with an adult or older child to ask permission to visit the area where the family goes to the bathroom. If no one is available, they should move on to another residence and not count that one in their 10.

The group should use the survey form that the trainer(s) prepared. It should consist of five to 10 aspects of sanitation that the trainees can observe, e.g.:

- How many homes do/don't have a latrine?
- How many homes do/don't have feces on the ground nearby?
- How many latrines are/are not at least 10 meters from the home and any stream or river?
- How many latrines do/don't have a hand washing station nearby?
- How many latrines do/don't have walls?
- How many latrines do/don't have at least 2 meters between the seat and the waste in the hole?
- How many are/are not structured to be comfortable and safe for an eight year old child?
- How many do/don't have windows or a chimney for ventilation?
- How many latrines do/don't stink badly?
- How many latrines do/don't have feces stains on the floor or seat?

Later, back in the training location, each group should report on its findings. One volunteer can consolidate the findings for the entire community. Then the facilitator should lead a discussion of the findings, asking such questions as:

- How do you feel about these findings?
- Which sanitation conditions should be priorities to address in this community: (1) lack of latrines, (2) poor condition/maintenance of the latrines, (3) poor use of the latrines?
- How similar are the sanitary conditions here to those in your own community?
- How feasible is it for families in the community visited to move up the sanitation ladder?
- What support would families need from an outreach worker to move up the ladder?
- Could people move up more than one step at a time?
- F. Reading, Conclusions, and Planning (20 minutes)
  - 1. Ask the participants to turn to p. 35 in the Outreach Worker's Handbook (assessment of feces disposal, also available in the Collection of Resource Materials). Ask them to read, if appropriate.



#### **Trainer Note:**

A diagnostic sanitation ladder tool about properly disposing of feces may feature fewer steps, depending on the community.



#### **Trainer Note:**



This drawing is meant to be illustrative. Water and quicklime, or water and ash, can also be used to clean the latrine. It should also be noted that open defecation is especially dangerous when shallow wells are in use. In all cases, to be safe, a latrine should be situated 15 meters downhill from the water source, and the pit of the pit latrine should be located 2 meters above the groundwater table.

An alternative way to have the participants become familiar with the supplemental information is to ask them questions (individually, in pairs, trios, tables, etc.) and have a treasure hunt where everyone looks in the *Outreach Worker's Handbook* to see who can find the right answer first.

- 2. Then ask them to record their thoughts about teaching this session as an outreach worker on p. 74 in the *Outreach Worker's Handbook*:
  - What did you learn in this session about feces disposal?
  - Are you comfortable with the subject matter?
  - What are you going to remember about the sanitation ladder?
  - What kinds of problems might families have in improving how they dispose feces? What are some strategies they might use to make improvements?

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#### **Trainer Note:**

This may be done orally with the trainer recording answers on a flipchart.

- 3. Summary points:
  - Most community members are currently disposing of their feces by \_\_\_\_\_ (fill in).
  - Each step on the ladder has advantages and disadvantages, but it's important to move up the ladder in order to isolate feces and their contamination potential.
  - Proper washing following defecation is critical.
- 4. State that in the next session they are going to take a look at latrines.



#### **Trainer Note:**

This session on latrines is optional, depending on the local conditions. Most of the information can be synthesized and put into a document.

# LATRINE BASICS: THE USE AND MAINTENANCE OF HOUSEHOLD LATRINES

#### **Session Objectives**

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

- 1. List the five basic principles to follow regarding latrines in general.
- 2. Identify five basic maintenance recommendations for keeping latrines clean.
- **3.** List three rules for correct use of latrines.
- **4.** Describe the four location and sizing criteria for latrines (*optional*).

#### **SESSION AT A GLANCE: Latrines**

Activity	Time	Materials
A. Introduction	5 minutes	- Flipchart paper, markers, tape
Trainer introduces the topic and the		
session's three objectives (four, if locating		
and building latrines is included).	4.0	
B. Climate Setter	10 minutes	- Flipchart paper, markers, tape
Trainer asks the participants to discuss the		
situation in the community regarding latrines		
and their use/nonuse.		
C. Discussion by Halves	15 minutes	- Flipchart paper, markers, tape
Participants discuss what they think might be		
the five guiding principles for any latrine and		
the five basic maintenance rules for keeping		
them clean.		
D. Triads	20 minutes	- Flipcharts, markers, tape
Participants discuss how to get people to use		
latrines and then how to use them correctly.		
E. Optional Handouts		
Handouts to be distributed to those who are		
interested only.		
F. Review, Conclusions	10 minutes	
1. Review, Colletasions	10 minutes	
G. Synthesis	45 minutes	- Copies of the matrix
•		-



## 105 minutes with the synthesis

# PREPARING TO TEACH THIS SESSION: Latrines

Before you present Module 4, Session 3:

- 1. Make sure that this session is appropriate. In many cases, outreach workers will be more involved in helping motivate people to use a latrine and keep it clean, or perhaps in connecting community members with local vendors or masons, than actually in latrine construction. In such cases, this session can be skipped.
- 2. Familiarize yourself with some of the materials on latrine construction, use, and maintenance. The information presented here is very basic. Additional information can be found through the websites/links in Appendix 5.
- 3. Make sure that the information on location, sizing, and minimum quality standards is presented to the participants in handouts. (Available in the *Outreach Worker's Handbook* pp. 21–23 and in the *Collection of Resource Materials*.)
- 4. There is no one global standard about how far from a water source a latrine should be placed. Find out what local authorities and the ministry guidelines say.
- 5. Make copies of the Feces Disposal Matrix for synthesizing the work done about disposal of feces (also in *Outreach Worker's Handbook* p. 31). A sample chart of key points related to feces disposal is also available at the end of this session, in the *Outreach Worker's Handbook* p. 13, and in the *Collection of Resource Materials* section for Module 4, Session 2.

# TRAINING ACTIVITIES: Latrines

- A. Introduction to the Session (5 minutes)
  - 1. Welcome the participants to this session. Tell them they are going to look at some of the basics of latrines, but that the session is only a start if they are very interested in the topic. Tell them they will cover basic principles regarding any latrine, some maintenance guidelines, and some suggestions for the correct use of latrines. The session will also touch on latrine construction, but participants are unlikely to play a key role in this as community outreach workers.
- B. Climate Setter (10 minutes)

1. Open this session by asking the participants what they think the current situation is in the community with regards to presence and use of latrines.

Take a couple of answers. Find out why latrines are built and not used, for example. Or why people are reluctant culturally to build latrines, etc. What do participants think motivates families to build latrines?

### How Do Sanitation-Improvement Conditions in Urban Areas Differ from Those in Rural Areas?

There are three basic "scenarios" in urban areas, as described below.

Dense urban population, economically active, have title to land, have household water service. There may or may not be a formal sewer system. Issues here are to get people hooked up to sewers instead of doing what they are doing—piping their wastewater into informal canals, the street, ditches. Household facilities might not be the issue, but rather the contamination caused by improper wastewater disposal. The needs are for adequate sewers, with everyone connected, and, ultimately, treatment of the wastewater.

Dense, urban, very poor squatter population, just receiving land rights and services such as water. It is likely that water is piped or tanked for public distribution. It is also possible that rainwater is collected. There will be different kinds of onsite and perhaps neighborhood collection and treatment systems in these situations. If there is enough water, and if the water can be pumped into household storage tanks, there may be flush toilets with onsite disposal—infiltration pit or septic tank with infiltration pit. There might also be condominial (low bore) sewerage, with household or neighborhood septic tanks, before disposal into a common leach field or infiltration pit. These condominial systems can eventually be connected to a public sewer, once one is installed. Onsite dry options are typically just dry pit latrines, although composting latrines are certainly possible. Both pour-flush and dry-pit latrines will fill with solids and will either have to be emptied or closed out and a new adjacent pit constructed. Septic tanks or pits in limited land areas will require solids handling and disposal. In areas where there is land tenure, there is usually a better chance of private-sector services for solids handling and disposal. Another option is the construction of shared bathrooms that are operated on a charge-per-use system by a private-sector entity that also provides upkeep.

Very poor urban squatter populations with no land tenure. Water comes from rainwater or a truck supplied by private-sector vendors. Water for flush toilets is unlikely to be available. Dry options (pit and composting) are the only ones available, or perhaps depositing feces in plastic bags, then throwing them away. Informal public latrines with pay-per-use systems are possible. Usually there is not enough space for double-rotating pit options, and dry pits will require emptying when full. This is typically done informally, with emptiers using hand tools and dumping solids wherever convenient. Some areas in Africa are investigating the use of plastic bags that are disposed of in the solid waste stream. Composting toilets are possible in these areas as well, but are a bit pricy for most slum dwellers and also require more operation and maintenance than people can provide (e.g., urine separation, additives to feces, stirring, storage, and manual disposal).

The main differences among urban dwellers are those created by densities and by unstable land tenure. High density complicates use of all technologies, and families with tenure are more likely to invest in home improvements. And of course poverty is an issue as well as is government inattention to the poor

Rural areas, by virtue of available space and relatively secure tenure, give owners more economic options with much lower operational and maintenance issues than the urban situation. In rural areas households can install different disposal pits that can fill and be sealed for years before they are then emptied of what is benign black soil, whereas lack of space in urban scenarios often negates the multiple-pit option and forces households to find a way to remove, handle, and dispose of fresh "biosolids." Add a high water table, periodic flooding, or rock substrate to the poor urban squatter community, and the technical situation is even more complicated.

Source: Scott Tobias, ARD Inc.

- C. Discussion Task (two discussion groups) (15 minutes)
  - 1. Ask the participants on one side of the room to think about what would be a good set of guiding principles for any latrine.
  - 2. Ask the participants on the other side of the room to discuss at least five ways to keep latrines clean.
  - 3. Give them time to talk and then take some answers. For the guiding principles, make sure they include:
    - Adequate pit depth to last a family at least two years—ask about local practice
    - Placement at the back of the house within 10 meters and at least 15 meters (downhill) from a water source
    - Pit should not go into ground water—especially if people in the village get water from wells
    - Hole must have a cover to discourage flies
    - Privacy, comfort, and safety
  - 4. Take a couple of answers for keeping them clean. Make sure they include:
    - Check the structure daily to make sure it's solid.
    - Wash down or sweep into the hole any fecal material that's on the slab.
    - Verify that the platform is solid.
    - Keep animals out of the latrine.
    - Don't allow insects to live in the latrine.
    - Clean the slab daily with quicklime or ashes by sprinkling a handful or two on the slab to soak up moisture around the hole and then sweep into the pit.
    - Clean concrete slabs with water and bleach or soap.

#### **Handout: Locating and Sizing Latrines**

Latrines should ideally be located:

- Within 10 meters from kitchen or homestead
- At least 15 meters downhill from a water source
- At the back of a dwelling house for privacy purposes
- At least 1.5 meters above highest seasonal groundwater table

Size could be measured using the arm length (about 50 cm). A rope with a stake can be used to draw circles.

If families will not accept these standards or physical conditions do not permit them to be followed, the best advice may be to locate the latrine as far as possible without discouraging people from using it because it's too far.

#### Digging the pit:

- Dig the latrine to a depth of at least 4 arm lengths (2 meters), but 3 or 4 meters is preferable. Some places with very favorable soil conditions can even go deeper. Or dig as deep as soil conditions allow.
- The pit should be more than 1.5 meters above the highest groundwater table and free of cracks
- If there is water in your latrine from an underground source, backfill the pit with soil until there is no splashing. If people in the village use shallow wells for drinking water, add and compact 1.5 meters more of soil.
- See instructions below for building a pit that is lined or a pit that is not lined.

One basic option for covering the latrine hole:

- Cut thick and strong logs of wood and put across the hole.
- Cover the space between the logs with smaller and thinner branches or pieces of wood.
- Cover the wood with dirt, pound, and smooth the surface, leaving the squat hole, which is 25x35 cm.
- The slab should be above the surrounding ground level so that water will not drain into it.

Other cultural traditions call for a simple squat hole, with nothing for the user to sit on.

Constructing the superstructure (walls and roof):

Refer to local construction practices, noting that the walls must afford privacy; a door is preferred, as is a roof that keeps rain out.

More detailed notes on pit digging:

If you are constructing a pit that will not be lined:

- 1. Mark the spot and make a circle that has a diameter of two arm lengths (1 meter). You can lay out the circle by marking the diameter of the hole on the ground.
- 2. Put a peg in the middle of these marks and tie a rope onto the peg.
- 3. Stretch out the rope from the peg to one of the marks you made and tie a small pointed piece of wood onto the rope at that point. By moving this pointed piece of wood around and marking the ground, you will have a perfect circle that is 1 meter in diameter.

If you will be installing a casing (lining) for the pit, you need to make the hole wider. For many soil conditions you will only have to line the top 50 cm of the pit. For very poor soils, you will have to line the entire pit from the bottom to the top.

- 1. Lengthen your measuring rope by the width of the casing.
- 2. To install a 50 cm lining at the top of the pit, dig about 1 arm length (50 cm) straight down inside this wider circle.
- 3. Build a stone masonry or mud and grass mortar or use a bamboo mat around the wall of the 50 cm-deep pit.
- 4. When this casing is installed, complete the excavation by digging down from the wall of the casing.
- 5. If the casing is stone, it is likely that the pit will now have a diameter of about 2 arm lengths (about 1 meter).
- 6. If the lining is to cover the entire pit, you will have to dig the wide hole all the way to the bottom and install the casing from the bottom to the top of the hole.

If you are going to install a round concrete slab, no matter what the soil conditions, you will need to make sure that it has something strong to sit on:

- 1. Make sure that you dig a pit that is about half an arm length narrower than the diameter of the slab.
- 2. Make sure that you build a stone or mud mortar rim (not a bamboo one) around the top of the hole that supports the slab.
- 3. The rim is built the same as the casing described above, except it can be only half an arm length (25 cm) deep.

#### Minimum Quality Standards for Latrine Construction

- Given the limited economic resources of the average family, hardware for sanitation and hygiene should be selected with a focus on "appropriate technologies" that are locally sustainable and have an impact on protecting health.
- The generally accepted definition of "sanitation coverage" requires that a household have access to a sealed, cleaned, and maintained latrine. "Sealed" means that there are covers for the hole in the slab and that any ventilation pipe is screened. This is a minimum standard for a pit latrine.
- Improved traditional pit latrines meet these minimum standards and may be the most appropriate design in many settings.
- Sanitation systems should not be constructed that contaminate ground or surface water or
  otherwise compromise human health or environmental quality. The construction of systems
  that dispose of raw sewage into a surface water source or into groundwater is not permitted.
- All latrines, household or institutional, should have access to a hand washing station with sufficient water for multiple hand washings and a cleansing agent (soap, ash, sand).
- Appropriate low-cost hardware for hand washing that consumes little water is easily furnished (see session on tippy taps) or locally available.
- Institutional latrines and toilets that see high usage (compared to the household latrines) should maintain minimum standards for a pit latrine, but must also have a slab that is easily covered and cleaned—concrete SanPlats (sanitation platforms) are a low-cost and reasonable technology.

The use of local materials to build slabs and superstructures is encouraged as a strategy to reduce or eliminate external subsidies. Adverse conditions for construction of pit latrines (high groundwater tables, soils that cannot be excavated, or soils that collapse easily) limit low-cost options for sanitation and may require a program to offer subsidies for adequate feces disposal options.

Selected information adapted from: Training Manual on Hygiene and Sanitation Promotion and Community Mobilization for Volunteer Health Promoters. USAID/HIP.

#### D. Discussion in Trios (20 minutes)

- 1. Count off by threes. Ask each trio to come up with some reasons why latrines are not used, or used improperly.
- 2. When each trio has worked for a couple of minutes, take some of the responses and write them on a flipchart.
- 3. In the large group, for each reason that a latrine is not used, have the participants come up with a counter argument. (For example, for the reason "It's too smelly," a counter argument might be that "it's easy to install proper ventilation, keep clean, or cover the hole.")

- 4. Discuss some of the points about the protocol of latrine use. This might include: putting a tippy tap near so people can wash their hands immediately upon exiting the latrine, keeping a supply of wiping material handy inside the latrine, respecting people's privacy, etc.
- E. Distribute Handout on Locating and Sizing of Latrines and Minimum Quality Standards. (The handout can be found at the end of this session or in the *Collection of Resource Materials*.)

#### **Trainer Note:**



A sample chart of key points related to feces disposal is also available at the end of this session if you choose to review it (also in the *Outreach Worker's Handbook* p. 13 and in the *Collection of Resource Materials* section for Module 4, Session 2).

- F. Review and Conclusions: (10 minutes)
  - 1. Ask if there are any questions. Review some of the summary points below, if necessary.
  - 2. Summary points (to be filled in based on the discussion):
    - Five guiding principles for any latrine
    - Top recommendations for keeping latrines well-maintained and clean
    - Some strategies for getting people to use latrines
- G. Synthesis on Feces Management and Latrines (45 minutes)
  - 1. Ask the participants to think about the following questions and to construct a chart, as they did with water and with hand washing. Remind them this is the third chart they've developed and they will use these charts to help them start their work in the community. Use the table found at the end of this session to facilitate this conversation.
    - What are some of the most pressing problems in the community regarding the effective disposal/isolation of feces?
    - Who are some of the potential audiences for targeting your activities?
    - What are some of the most prevalent behaviors related to disposal?
    - What are some of the barriers to improved practices?
    - What are some of the enabling factors?
    - What are some of the motivational activities from the water, hand washing, and feces sessions that might be done in the community?

### **Consolidation Matrix for Safe Disposal of Feces**

	Community One	Community Two	Community Three
Major issues in the community about disposal (isolation) of feces			
Possible audiences for mutual planning or group activities			
Behaviors now prevalent			
Alternatives to current behaviors			
Barriers to adopting new practices			
Enablers to adopting new practices			
Potential activities for the outreach workers			

Discuss as needed. Post the charts on the wall for a gallery walk, if time permits.

### **Barriers to Safe Disposal of Feces**

Common reasons why people don't	What an outreach worker can do to address this barrier
People don't know how important the practice is. They don't connect where they defecate with their children getting sick, and/or they consider diarrhea a "normal" and not dangerous condition.	Explain and show to the community the most likely ways that germs or contamination can go from feces into people to make them sick. To explain the effects of diarrhea, mention what happens to crops when they don't get enough water. Acknowledge that it should not be common for children to get diarrhea and that one of the key ways to reduce it is for everyone to dispose of their feces safely.
People accept open defecation as normal or traditional.	Outreach workers can work with the families using some of the exercises in this training, teaching about how feces on the ground eventually cause illness. In some settings, creating a sense of disgust or even shame (using the Community-Led Total Sanitation methodology) has worked.
Families don't have latrines. Some, especially in urban slums, may not have space far enough from the house. Some may live on land where only a hole lined with rock or cement would work. Some don't understand the importance or otherwise are not sufficiently motivated. Some don't know how to build one. They may lack tools and basic materials. Some cannot afford the materials and/or labor necessary to construct a latrine.	On their own, outreach workers cannot address all of these problems. They must have strong back-up from an organization or program. The organization should do a technical assessment to decide the best couple of options for the conditions and should link program participants with loans, materials, or skilled labor to facilitate construction.
Latrine is not situated within 10 m from the home and at least 15 m downhill from a water source.	Advise a new location if a better one is available; explore access to a public or neighbor's latrine if it is not possible to build one.
People don't use the latrine at night because it's too dark, there are too many bugs and vermin, and it's dangerous to be walking around at night, especially for women.	Suggest using candles or flashlights, but if such ideas do not solve the problem, explore the possibility of using chamber pots, with ash in the bottom (and putting additional ash on top of feces), which can be emptied in the latrine or hole in the morning.
Latrine is not well-cleaned, so there are feces or urine stains on the floor and seat.	Try to problem-solve with the family how it can be kept clean; advocate that the family members share the responsibilities; it shouldn't just be added to the mother's burdens. If multiple families share the latrine, discuss how to improve maintenance.
Latrine is used for storage or other purposes.	Motivate owners to use the latrine as intended; suggest other possibilities for storage.
Latrine is not well-used because it stinks.	Consult with the local environmental health officer. Quicklime or ash should be used to clean the slab daily: Sprinkle a handful or two on the slab to soak up any moisture around the hole and then sweep it into the pit. Add an appropriate chimney to the slab to ventilate the pit, or add small, high windows for ventilation of the structure. Covering the hole also

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	helps to reduce smell.
Latrine is not well-used because it is infested with worms or bugs.	Consult with the local environmental health officer.
Latrine hole is filling up with water.	Move the latrine location if that is feasible and will solve the problem, or build a rock-lined or cement-walled hole, if feasible.
Latrine is not well-used because there is no wiping material.	Buy toilet paper or have children collect paper trash or leaves for wiping. Once used, it can be burned or buried. In places where people use water to clean, problem-solve to make enough water available.
Family cannot/will not build latrine because it has no tools to dig hole.	Community can facilitate the shared use of appropriate digging tools.
In some cultures, it is not acceptable for men and women to share the same latrine.	A family could either build a second latrine, or could negotiate with its neighbor so that one family's latrine could be designated for the women and one for the men.
Children up to age 6 or 8 do not use the latrine because they are afraid of falling in the hole, and they are allowed to defecate anywhere.	Explain that children's feces have even more germs and contamination than adults', so they must defecate either in a chamber pot (with ashes if possible) or a latrine. Keep a sanded board in the latrine to cover part of the hole when a child uses it.

2. Make the link to the next session on interpersonal communication.

Explain that now that they have technical content about WASH, they will explore some communication techniques and possible types of messages for working with their audiences.

# **ACTION PLANNING**

### **Session Objectives**

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

- **1.** Use the trainer self-assessment sheet (Appendix 3, Outreach Worker's Handbook p. 53 and in the Collection of Resource Materials).
- 2. Describe fully their role as an outreach worker and answer questions about this role.
- **3.** Establish a plan for starting their work as an outreach worker once they reach home.

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## **SESSION AT A GLANCE: Action Planning**

Activity	Time	Materials
A. Introduction	5 minutes	- Flipchart, tape, markers
Trainer introduces the topics: back home planning, finalizing the job description and self-assessment, and the three objectives for the short session.		
B. Climate Setter	10 minutes	- Flipchart, tape, markers
Trainer asks how the group might help one another once they have launched their efforts and how they might work to improve their technical and joint planning/IPC skills.		
C. Large Group Discussion  Trainer revisits the list of questions and the job description from day one to clear up any issues related to what the outreach workers are expected to do. Reviews IPC and the discussion tools.	10 minutes	<ul><li>List of questions from the first day's review of job description</li><li>Copies of the job description if needed</li></ul>
<b>D. Large Group Task</b> The trainer shows them the self-assessment sheet in the <i>Outreach Worker's Handbook</i> and explains its use.	15 minutes	- Copy of the self-assessment form for the outreach workers on a flipchart from the Outreach Worker's Handbook and/or individual copies at tables
E. Letter of Commitment	30 minutes	- Letters to be signed
and Closing Ceremony		- Any props for the ceremony



70 minutes

# PREPARING TO TEACH THIS SESSION: Action Planning

Before you present Module 6, Session 1:

- 1. Know where the facilitator self-assessment form is in the *Outreach Worker's Handbook* (p. 53). Also available in the *Collection of Resource Materials* and in Appendix 3.
- 2. Make sure you have the outreach worker's job description questions from day one and have checked off the ones that were answered during the course of the workshop.
- 3. Make sure that the participants have their original "pretest" assessment (*Outreach Worker's Handbook* p. 3) at hand so they can look and see if there are still areas that need to be clarified.
- 4. Prepare appropriate questions for the participants to answer concerning their commitment once they leave the training.

# TRAINING ACTIVITIES: Action Planning

- A. Introduction to the Session (5 minutes)
  - 1. Welcome the participants to this session on planning for next steps.
  - 2. Let them know that this is the last session. Congratulate them on how well they've worked during the past \_\_\_\_\_ (fill in the number) days.
  - 3. Present the session's three objectives:
    - Become familiar with the facilitator self-assessment sheet
    - Finalize the job description for an outreach worker
    - Plan for their jobs as outreach workers
- B. Climate Setter (10 minutes)
  - 1. Ask the participants how they might continue to improve their skills once they leave the workshop. Take several answers quickly.
  - 2. Ask the participants how they might continue to support each other once they're working in the community. Take several answers quickly.

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- 3. Record on flipchart if time allows.
- C. Large Group Task (10 minutes)
  - 1. Revisit the questions from day one on the job description of an outreach worker. Answer any remaining questions. If necessary, revisit the suggested tasks of an outreach worker in the *Outreach Worker's Handbook* p. 8, or the program specific job description (also in the *Collection of Resource Materials* and Appendix 1).
  - 2. Briefly revisit the initial "pretest" or "assessment tool" filled out by the participants. Retake the pretest (pp. 3–5, Outreach Worker's Handbook; also in Collection of Resource Materials and Introduction of Training Guide). Give them a couple of minutes to see where they might need to continue studying WASH, joint planning, or any of the other themes explored during the training.
  - 3. If time permits, call on some volunteers to tell what they want to continue to work on.
- D. Large Group Discussion/Task (15 minutes)
  - 1. Show the participants where the self-assessment sheet is in the *Outreach Worker's Handbook* (p. 53) or Appendix 3.
  - 2. Guide the participants through the different desired practices (in the left column) and say that following their sessions with their community members, they should take a few minutes to assess their performance. Continue by saying that in this way, they will have a record on how they should adjust or improve their own performance with the clients in order to attain behavior change.
- E. Individual Task, Large Group Discussion, and Pairs (20–30 minutes)
  - 1. Post the following questions on a flipchart and ask each participant to answer the questions below:



#### **Trainer Note:**

Consult with the program manager to learn the most appropriate answers.

- Will you be working mainly with individuals, families, or groups?
- How will you acquire supplies that you need?
- When will you start and how will you introduce yourself to your audience(s)?
- Will you work in teams? If so, how will you divide up the work?
- Does your organization want you to track your progress and feed data to them?
- What about narrative progress reports?

- How can you stay in contact with your fellow participants and share important lessons about helping people to change their behavior?
- 2. When it looks like most participants have completed their answers, ask them to find a partner and share their responses.



#### **Trainer Note:**

The idea is to spark interest/curiosity/new ideas as you share the answers to the questions.

- F. Drawing Conclusions, Commitment Letter, and Ceremony (10 minutes)
  - 1. Ask the participants to put any final reminders about what they've learned in their *Outreach Worker's Handbook* p. 76. They should also record what they'll do at home to launch themselves as outreach workers who promote improved water, sanitation, and hygiene practices. This may also be done orally.
  - 2. If you are not doing Module 7, conduct the graduation ceremony, as appropriate: Hand out certificates (see copy in the *Collection of Resource Materials*) or hold a little ceremony and invite any local dignitaries or WASH actors. Also pass out the workshop evaluation. (Sample questions are available in Appendix 4.)
  - 3. Thank them heartily.



#### **Trainer Note:**

If the session on data management follows, let the participants know.

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### **APPENDICES**

# **APPENDICES**

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### Possible Tasks for Outreach Workers Related to Improving WASH Practices

The following tasks are related to improving WASH practices and may not include broader responsibilities that the outreach workers in your program have. Considering only their duties related to WASH, select those tasks relevant for the outreach workers of your program. Use those tasks to develop your program's own job description or incorporate them into your outreach workers' existing job description.

- Facilitate assessments of the WASH situation in the community using participatory exercises such as leading discussions of photos or drawings, doing a WASH map, leading a walk focusing on hygiene, or coordinating a community hygiene baseline survey.
- Advocate with community leaders and influential people to support WASH improvements.
- Help establish, support, and participate in a community health committee that focuses on or addresses WASH issues.
- Help establish, support, and participate in a community water committee (which monitors and/or maintains and repairs the water system, collects fees).
- Liaise with resource organizations: local health facilities, NGOs, private companies, manufacturers and distributors of sanitation-related technology, hand washing, and water treatment supplies.
- Conduct regular home visits/counseling on diarrhea prevention, consisting of an assessment of current conditions and practices and joint problem-solving to assist with improvements.
- Lead participatory group discussions on WASH issues.
- Put on demonstrations to teach WASH-related actions (e.g. proper hand washing, how to construct a latrine, how to chlorinate water correctly).
- Organize events to promote improved WASH practices (health fairs, contests, public demonstrations, etc.) and support school-based WASH activities.
- Monitor or manage monitoring of WASH practices and conditions.

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# Tips on Demonstrations, Role Plays, and Group Discussions

#### **Conducting Promotional Activities in the Community**

In general, outreach workers will be working with three kinds of audiences: individuals, families, and general or specific groups such as mothers' clubs, cooperatives, and school teachers. When conducting activities mainly for creating awareness and sharing information about WASH issues, the outreach worker will primarily be working with groups of people. The activities below are generally appropriate for groups of more than 10 people. When the outreach worker is conducting activities with an individual or family (to negotiate changes in behavior) s/he will be using IPC and the discussion tools.

#### 1. Tips for Conducting Successful Demonstrations

When you are planning a demonstration for an individual, family, or group:

- Make sure you have assembled all the necessary materials and equipment. Have these readily at hand. Audiences don't like to wait while you look for your props.
- Explain to the audience what you are about to do and why you're doing it, then give them time to move where they can see exactly what you're doing.
- It can help to have pictures for each step, or, if the audience is literate, a written point-bypoint description of the steps. You can also tell the audience what you're doing as you demonstrate.
- Once the demonstration is over, ask the audience to comment on what they've seen (what was new, useful, important, feasible, or not?). Generally you will have no trouble getting them to comment.
- If there's time, you might want to repeat the demonstration with audience participation, or have someone repeat it.
- Ask the audience members what they might do differently as a result of having seen the demonstration.

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• Follow up with some negotiation (using the assessment tools and counseling cards) to get the audience members to commit to new behaviors and to talk about what would be easy or difficult for them.

#### 2. Tips for Conducting Successful Role Plays

The following are tips for when you're planning a role play using members of your audience (or fellow outreach workers).

Be aware that in many cultures, people are reluctant to participate in anything that makes them "stand out." Other cultures use role plays (skits) willingly. Know your audience beforehand.

- Make sure you've thought about what you'd like to achieve as a result of the role play. Role plays are a technique that is best suited for exploring skills (like the steps in a counseling session) and/or attitudes (like feelings about the level of cleanliness of the village). They are also good for showing what is "normal" in the community, without embarrassing any particular individual.
- Prepare the players by giving them enough information about the characters they will play. Give the players a couple of minutes to "get in role."
- Have them play their roles for a determined length of time. Five minutes is a good length. Do not let the role play go on too long. If the role play goes in the wrong direction, stop the action, regroup, and start again.
- Tell the actors to step out of their roles and talk about what it was like to play the parts. This will help them to talk about the role play as a member of the audience and not the character they were playing.
- Discuss the role play with the audience members. How did it go? Was it realistic?
- Talk about what they learned from watching the role play and what they plan to do as a
  result of having seen the role play. Transition to negotiation for a new behavior, if
  appropriate.

#### 3. Tips For Managing a Group Meeting/Discussion

Here are some tips for when you might have to run a meeting with a large number of participants.

- When preparing, have a clear idea of what you want to accomplish. Is the meeting primarily for discussion, or will you need to reach agreement or a decision?
- Once everyone has assembled, explain some of the ground rules and go over the agenda, making sure you emphasize the timing.

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- Facilitate by paraphrasing (saying back to the speaker what you've heard) and summarizing (stopping from time to time to capture the important points that have been made) as the discussion moves forward.
- Pay attention to body language and level of participation. Don't let people monopolize the floor.
- Encourage cross-participant dialogue and try to limit how much you yourself talk.
- Use visual aids.

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## **APPENDIX 3:** Self-Assessment Form

# Self-Assessment Form for Outreach Workers Counseling Families to Promote Hygiene Improvement

Name of Worker:Name of Community:	Name of Organization: Year:					-						
Desired Practice	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
I was friendly and polite.												
I asked a lot of questions, both for assessing and planning.												
I observed practices and conditions to compare what I saw with what people said.												
I encouraged people to talk; I was a good listener.												
I used my visual aids and other materials effectively.												
I respected and tried to incorporate people's ideas.												
At the end of counseling, people clearly understand what they will try to do.												
Community members are able to make the improvements we discussed.												
Follow-up Steps:												

Instructions: The project should modify this form as needed (before the training). For example, the project could ask each outreach worker to write "yes" or "no" for each practice at the end of each month. Or the outreach worker could be asked to use a scoring system, for example, 1 = always, 2 = usually, 3 = sometimes. The purpose of the follow-up step boxes is to give space for the outreach worker to write a few words about what he or she will try to do to improve during the next month. The project may decide to eliminate that section.

You, the outreach worker, should complete this form honestly. The purpose is not to evaluate, but rather to give you and your supervisor feedback so you can improve the way in which you counsel community members on how to improve their WASH practices. If all of your scores are perfect from the beginning, there is no room to improve!

APPENDIX 3

# Sample Questions & Evaluation Templates

#### Questions and Templates for Evaluating the Workshop

A Word about Evaluation: By Session and by Day

Trainers and program managers will want to gain a sense of how the workshop is progressing on a daily or even on a session-by-session basis. The feedback from the participants will help determine whether or not the training is on the right track, if the level of the information being presented is appropriate, and if the participants are indeed learning. Course corrections are then possible.

If the trainer establishes a trusting atmosphere at the beginning of the training and allows the participants to know that their feedback is welcome, it should be easy to conduct evaluations in an open fashion by simply asking questions. At the conclusion of each session a question such as, "Did we meet the objectives for this session?" may suffice to establish a platform for discussing whether or not the session was "successful" (useful, practical, understandable, etc.).

At the end of the day, ask questions such as:

- What was the highlight of the day?
- What was the low point of the day?
- Were the logistical arrangements conducive for learning?
- How are you feeling about the amount of information? Too little? Too much?
- How was the level of the technical information? Too hard? Too easy?
- Which training techniques did you find most exciting? Why?
- What would you do differently if you were the trainer?
- What suggestions do you have for the organizers?

It may take a while for the participants to become comfortable with this type of discussion.

If the participants would be more comfortable (and open) using a paper evaluation form, keep it as simple as possible by using scales of 1 to 5 or by having the participants make a check mark by their appraisal of the item.

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#### Example One

	Evaluate the	degree to whicl	n the logistical a	rrangements h	elped the	e learning:
	1	2/	3	4/	5/	/
	Did little to encourage lea	urning			tributed learning	a lot to
Exam	ple Two					
	Training tech	niques used in	the workshop:			
			Very useful	Somewhat u	ıseful	Not useful
	Demonstration Group discuss Role plays Lecture					
	Reading alou	d				
The F	inal Evaluatio	on				
trainer simple Again, any kin	and the progre and straightfo a stand-alone and of "criticism	am manager. A rward as possib oral evaluation '" in public. Of	s with the daily on the saily of the sail of the conductors of the conductors of the sail	evaluations, the slittle writing ed, but participan oral discuss	e evaluat as possil pants are	ne entire workshop to the tion form should be as tole from the participants. often reluctant to express a written evaluation
Sam	nple Final	Evaluation	on Templa	ite		
1.	Rate whether	or not you thin	nk the workshop	objectives we	ere met.	
	(List worksho	op objectives w	ith a 1 to 5 scale	·.)		
	Describe the	role of an outro	each worker in t	he context of	our prog	ram.
	1	2	3	4/	5	_/
	Not met	Some	ewhat met		Tota	lly met

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1	2	3	4	5	/	
Not helpful	So	omewhat helpf		Very	y helpful	
Rate the usef worker.	ulness of the	e technical (W	ASH) informa	tion for your	role as a WA	ASH outreach
Same kind of	scale.					
Rate the logis	stical and ad	ministrative arr	rangements as	to how supp	ortive they v	were for a

List the training techniques used during the workshop such as lectures, demonstrations, etc.

Rate how helpful the following training techniques were to you.

5. Rate the materials (handouts, drawings, etc.) as to how useful they will be for your work in the community.

Same kind of scale.

learning environment.

Same kind of scale.

with a 1 to 5 scale.

2.

3.

4.

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### Websites/Links

Hygiene Improvement Project <a href="http://www.hip.watsan.net">http://www.hip.watsan.net</a>

IRC International Water and Sanitation Centre <a href="http://www.irc.nl">http://www.irc.nl</a>

Global Public-Private Partnership for Hand Washing with Soap <a href="http://www.globalhand.washing.org">http://www.globalhand.washing.org</a>

Solar Water Disinfection <a href="http://www.sodis.ch">http://www.sodis.ch</a>

WELL Resource Center <a href="http://www.lboro.ac.uk/well/index.htm">http://www.lboro.ac.uk/well/index.htm</a>

Water Supply and Sanitation Collaborative Council <a href="http://www.wsscc.org/interwater/">http://www.wsscc.org/interwater/</a>

WHO/UNICEF Joint Monitoring Programme for Water and Sanitation <a href="http://www.wssinfo.org/en/welcome.html">http://www.wssinfo.org/en/welcome.html</a>

World Health Organization – Water Sanitation and Health <a href="http://www.who.int/water-sanitation-health/hygiene/envsan/en">http://www.who.int/water-sanitation-health/hygiene/envsan/en</a>

UNICEF Water, Sanitation and Hygiene <a href="http://www.unicef.org/wes/index.html">http://www.unicef.org/wes/index.html</a>

Water, Engineering and Development Centre (WEDC) <a href="http://wedc.lboro.ac.uk/">http://wedc.lboro.ac.uk/</a>

Useful Site for Finding Statistics (WHO) <a href="http://www.who.int/quantifying-ehimpacts/national/en/">http://www.who.int/quantifying-ehimpacts/national/en/</a>

Global Handwashing Day www.globalhand washingday.org

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**WASH Visual Aids Library**: All you need to run WASH activities: picture sets, photos, posters, leaflets, games, songs, radio slots, videos. Comes with instructions in English, French, and Spanish. Will be available at <a href="https://www.humanitarianreform.org">www.humanitarianreform.org</a> (click on "Water Sanitation Hygiene") Produced by the WASH Cluster Hygiene Promotion Project 2009 (c/o UNICEF)

**Training Manual for SODIS Promotion**. SANDEC Report No.13/06, 2006 © EAWAG/SANDEC Regula Meierhofer <a href="http://www.sodis.ch/files/TrainingManual\_sm.pdf">http://www.sodis.ch/files/TrainingManual\_sm.pdf</a>

#### References for more information on varying approaches to hygiene in communities:

The PHAST Approach

http://www.who.int/water\_sanitation\_health/hygiene/envsan/phastep/en/index.html

Community-Led Total Sanitation Approach

http://www.communityledtotalsanitation.org/page/clts-approach

#### Compendium of Hygiene and Sanitation Software

Water Supply and Sanitation Collaborative Council (wsscc.org), Draft 3.0, February 2009.

#### WASH Standards in Schools in Low-Cost Settings

Edited by: John Adams, Jamie Bartram, Yves Chartier, Jackie Sims. World Health Organization, Draft, January 6, 2009.

www.who.int/water sanitation health/hygiene/settings/wash standards schools per review2.doc

#### Hygiene Promotion: A Practical Manual for Relief and Development

By Susan Ferron, Joy Morgan, and Mario O' Reilly, Practical Action, 2007. <a href="http://www.irc.nl/page/38052">http://www.irc.nl/page/38052</a>

#### Reference for WASH in Schools:

Towards Effective Programming for WASH in Schools: A Manual on Scaling Up Programmes for Water Sanitation and Hygiene in Schools

IRC International Water and Sanitation Centre, 2007.

http://www.irc.nl/page/37479

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