Essential Hygiene Actions

Lesson Plan

Module 2
Essential Hygiene Actions

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Lessons, stories, and activities in the Essential Hygiene Actions Lesson Plan complement the information provided in Essential Hygiene Actions Care Group Volunteer Flipchart.
Introduction: Understanding the Lesson Plan

Each lesson begins with objectives. These are the behaviors that are covered in the lesson.

The objectives are behavioral objectives written as action statements. These are the practices that we expect the caregivers to follow based on the key messages in the flipchart.

Under the objectives, all of the materials needed for the lesson are listed. Materials with an asterisk (*) should be brought by the Activity Leader selected at the end of Module 3. See below for more information.

Each exercise (section of the lesson plan) is identified by a small picture. Pictures are used to remind non-literate Care Group Volunteers (CGVs) of the order of the activities. For example when it’s time to lead the game the lesson plan shows a picture of people laughing as if they are enjoying a game (see below). The pictures in the lesson plan cue CGVs of the next activity. Review the descriptions below for more information.
Introduction: Understanding the Lesson Plan

**Game**
The first activity in each lesson is a game or song. Games and songs help the participants to laugh, relax and prepare for the lesson. Some games review key messages that the participants have already learned.

**Attendance and Troubleshooting**
Following the game, all facilitators will take attendance. Following attendance, the promoter follows up with any difficulties that the CGVs had teaching the previous lessons.  
When CGVs are teaching neighbor groups, this is a good time for to review key messages from the previous lesson and hear the success and challenges the neighbor mothers had when trying out new practices from the previous lesson.

Next the facilitator reads the story printed on the flipchart, using the images to share the story. The story in each lesson is followed by discussion questions.

**Show: What do you see in these pictures?**
While reading or telling the story, the facilitator shows participants the images to reinforce the words they hear.

**Ask and Listen**
Discussion questions are used to discuss the problems faced by the main characters in the module. Use the story and discussion questions to find out the current practices of the women in the group.

The lesson plan also contains **additional information** for the trainer. The additional information does not need to be discussed during the lesson unless it relates to questions asked by the participants.

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1 In the Kibera Care Groups Project, paid staff are called promoters. The role of the promoters is to train Care Group Volunteers to facilitate lessons with their neighbors. A few exercises (such as the Troubleshooting exercise and the Practice and Coaching exercise) are only for promoters training Care Group Volunteers. This exercise does not need to be used by the Leader Mothers when sharing with their neighbors.

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Activity
Next is an activity. Activities are “hands-on” exercises to help the participants understand and apply what they have learned. Most of these activities require specific materials and preparations.

Beginning in Module 2, an Activity leader is responsible to organize materials for each lesson’s Activity. The Activity Leader meets with the facilitator ten minutes before each lesson to discuss the needed materials for the next lesson’s activity. The Activity Leader is responsible to talk with the others (CGVs or neighbors) during the “Attendance and Troubleshooting” to organize the materials needed for the next meeting, asking them to volunteer to bring the items. The facilitator will lead the activity, but the Activity Leader will support her by organizing the volunteers and aiding the facilitator as needed during the activity.

Identify and Discuss Obstacles
The facilitator asks if there are any obstacles that prevent the caregivers from trying the new practices. Together with the other mothers in the group, the facilitator helps to solve problems and obstacles mentioned. The group may offer information, skills or tips to help mothers overcome obstacles.

Practice and Coaching
We want to make sure that each CGV understands the material and can present it to her neighbors. The promoter observes and coaches CGVs as they practice teaching in pairs using the flipcharts.

When CGVs teach their neighbors, they will repeat this activity asking each woman to share the key messages (and practices) that she has learned with the woman next to her. The CGV will go around and listen to each pair, making sure they understood the key messages correctly.

Ask for a Commitment
Finally, the facilitator asks for a commitment from each of the women in the group. It is up to each woman to make a choice. Do not force anyone to make a commitment if they are not ready.

All lessons follow the pattern described above. Lessons can be adapted as needed to fit the needs of your group. Lessons should not exceed two hours in length although some lessons may take longer than others. The suggested time for each section is listed below.
<table>
<thead>
<tr>
<th>Section name</th>
<th>Time needed for this section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Game or Song</td>
<td>5 - 15 minutes</td>
</tr>
<tr>
<td>Attendance and Troubleshooting</td>
<td>5 - 15 minutes</td>
</tr>
<tr>
<td>Story/Show: What do you see in these pictures?</td>
<td>5 minutes</td>
</tr>
<tr>
<td>Ask and Listen</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Explain the Meaning of Picture 2</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Explain the Meaning of Picture 3</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Explain the Meaning of Picture 4</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Activity</td>
<td>15-30 minutes</td>
</tr>
<tr>
<td>Identify and Discuss Obstacles</td>
<td>15 minutes</td>
</tr>
<tr>
<td>Practice and Coaching</td>
<td>20 minutes</td>
</tr>
<tr>
<td>Ask for a Commitment</td>
<td>5 minutes</td>
</tr>
<tr>
<td></td>
<td>2 - 2 ½ hours</td>
</tr>
</tbody>
</table>

**Acknowledgements**

This Module was adapted from Hanold, Mitzi J. (2011) Essential Hygiene and Malaria Prevention Flipchart. Washington DC. Food for the Hungry (FH).

Many thanks to Hesperian Health Guides, especially to Shu Ping Guan, Kathleen Tandy, and Robin Young for the illustrations and layout. Tom Davis, Chief Program Officer and Cindy Pfitzenmaier, Chief Nutrition Officer of Feed the Children's Program Impact Department are greatly appreciated for their technical input in adapting the materials. Special thanks to Clementina Ngina, Japheth Kaeke, and Dennis Kaunda of Feed the Children/Kenya, and to Margaret Mulingwa, Jessica Mbochi, Judy Wairiuko, Hellen Nyakundi, Flomena Mwaura, and Joyce T. Nzorge of Kenya’s Ministry of Health for field testing the drafts. Games used in the lessons are available through the HIV/AIDS Alliance. (International HIV/AIDS Alliance. (2002). 100 Ways to Energize Groups: Games to Use in Workshops, Meetings and the Community. Available at www.aidsalliance.org).

The Kibera Care Groups Project includes the following partners: Feed the Children and the Kenyan Ministry of Health of Lindi Sub Location in Nairobi County

Preferred Citation: Moses, Phil., Pfitzenmaier, Cindy, and Davis, Tom. (2015) Essential Hygiene Actions Flipchart. Oklahoma City, OK. Feed the Children.
Lesson 1: Handwashing with Soap at Critical Times and When Caring for Those Who Are Ill

Objectives
- Caregivers will wash their hands with soap and water at the appropriate times:
  - Caregivers will wash their hands appropriately
    - Before handling a newborn baby
    - After using the latrine or flying toilet or cleaning child feces or urine
    - Before preparing foods, feeding children or eating
    - Before and after caring for someone who is ill
    - Caregivers will wash their hands appropriately:
      - Wet hands and soap with water.
      - Rub hands with soap until a lather forms.
      - Rub in between fingers and under fingernails for 30 seconds while singing the hand washing song.
      - Rinse off the soap with running or dripping water.
      - Allow hands to air dry or dry them with a clean cloth.
- Caregivers will encourage family members to wash hands after using the toilet, before touching food, eating or preparing meals, or handling a newborn baby.
- Caregivers will be able to sing the Hand Washing Song.
- Caregivers will believe they have the tools, information and ability to care for and protect the health of their child (increased self efficacy).

Materials:
- Attendance Registers
- Leaky Tin or basins for hand washing
- Essential Hygiene Actions Flipchart

Summary:
- Game: Rainstorm
- Attendance and Troubleshooting
- Share the story about current behaviors: The Family has Diarrhea
- Ask about current practices
- Share the meaning of each Picture Box in the flipchart (Soap Kills Germs, When to Wash, How to Wash, Asking Caretaker to Have Children Wash Their Hands)
- Activity: The Hand Washing Song
- Discuss Barriers
- Practice and Coaching in pairs
- Request Commitments
1. Game: Rainstorm – 10 Minutes

1. Ask the women to sit quietly in a circle a foot or so apart, with their eyes closed.
2. They must listen to the sounds made by the woman sitting on their right side. They should repeat the sound that they hear from that woman.
3. The Promoter begins each action, continuing the action until the person on their right starts the action and the action is repeated by all the women in the circle:
   a. Rub your palms together to create the sound of rain. Continue rubbing your palms together until the woman on your right rubs her palms and the noise is passed to each woman in the circle.
   b. Now, snap your fingers until everyone is snapping their fingers.
   c. Clap your hands together quickly until everyone is clapping their hands.
   d. Slap your thighs until everyone is slapping their thighs.
   e. Stomp your feet until everyone is stomping their feet.
   f. Now the rain is going away: Slap your thighs until everyone is slapping their thighs.
   g. Clap both hands together until everyone is clapping their hands.
   h. Snap your fingers.
   i. Rub your palms together.
   j. Sit in silence for a moment.

Ask the women what that sounded like to them. Explain that it was supposed to sound like a storm. Explain that epidemics like Cholera are like a storm — it has come, and it will someday leave as all storms do if we do what we need to do. Now that we are energized, let’s begin our lesson.

2. Attendance and Troubleshooting – 10 Minutes

When teaching Care Group Volunteers:

1. Promoter fills out attendance sheets for each Care Group Volunteer and neighbor group (beneficiary group).
2. Promoter fills out vital events mentioned by each Care Group Volunteer (new births, new pregnancies [if on the form], and mother and child deaths).
3. Promoter asks if any of the Care Group Volunteers had problems meeting with their neighbors.
4. The Promoter offers advice on how to solve the problems mentioned.
5. The Promoter asks the Care Group Volunteers to review the key practices from the last lesson.

When this is the first lesson plan in this section of the module, we expect that many Care Groups will have covered other Care Group modules prior to when this module is used.

Lesson 1: Handwashing with Soap at Critical Times and When Caring for Those Who Are Ill
6. The Promoter asks the Care Group Volunteers about their commitments from the last meeting and follows up with those who had difficulty trying out new practices.

| ? What was your commitment at the last lesson? Have you been able to keep that commitment? |
| ? What did you do? |
| o Did anyone (spouse, grandmother or children) interfere or tell you not to follow your commitments? Tell the story of what happened. |
| o What factors (people, events or chores) in your life made it difficult to keep your commitments? |
| o How were you able to overcome these problems? |

7. Promoter thanks all of the Care Group Volunteers for their hard work and encourages them to continue.

8. Promoter encourages Care Group Volunteers to have a sense of pride that they are protecting the health of their communities by reinforcing messages and commitments.

9. Promoter asks the group’s Activity Leader to discuss the needed items for next week’s activity (based on the Promoter’s conversation with her prior to this meeting) and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #1 in this module.)

When Care Group Volunteers teach their Neighbors:

1. Care Group Volunteers will take attendance.

2. Care Group Volunteers will ask about new births, pregnancies (if this is kept on the form), mother and child deaths, and illnesses in the families of the mothers attending and will help refer those with severe illness to the local health facility.

3. Care Group Volunteers will ask the mothers to review the key practices from the last lesson.

4. Care Group Volunteers will ask the neighbor mothers about their commitments from the last meeting and follow up with those who had difficulty trying out new practices.

5. Care Group Volunteer asks the neighbor group’s Activity Leader to discuss the needed items for next week’s activity and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #1 in this module.)

The Family Has Diarrhea (Picture 1.1) – 10 Minutes

3. Story

- Read the story on page XX of the flipchart
- The story explains how Halima’s family became sick. It introduces the topic of germs causing sickness

Halima’s son returned from the toilet. When Halima wasn’t looking, he took some of the family food with his hand. When they all sat down to eat, they dipped their hands in one bowl of water to wash. They didn’t use soap. Halima stirred the food and served everyone. That afternoon the family had stomach pains and diarrhea. Soon they were all running to the toilet.

3 The Activity Leader should arrive ten minutes prior to each care group meeting to get the description of the activity and the list of needed items from the promoter.
### Story: The Family Has Diarrhea (Picture 1.1)

<table>
<thead>
<tr>
<th>Image</th>
<th>Text</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="Diaper Change" /></td>
<td>Halima’s son did not wash his hands after he left the toilet.</td>
</tr>
<tr>
<td><img src="image2" alt="Food Preparation" /></td>
<td>When his mother wasn’t looking, he took some of the family food with his hand.</td>
</tr>
<tr>
<td><img src="image3" alt="Meal Time" /></td>
<td>When they sat down to eat; they dipped their hands in one bowl of water. They didn’t use soap.</td>
</tr>
<tr>
<td><img src="image4" alt="Diarrhea" /></td>
<td>That night the family had stomach pains and diarrhea.</td>
</tr>
</tbody>
</table>
### 4. Ask and Listen – 5 Minutes

- Why did everyone have stomach pains and diarrhea?
- When should you wash your hands?
- When did you wash your hands today?

- Encourage discussion. Don’t correct “wrong answers.” Let everyone give an opinion. This page is for discussion, not for teaching.
- After the participants answer the last question, move to the next flipchart page by saying, “Let compare your ideas with the messages on the following pages.”

### Soap Kills Germs (Picture 1.2) – 5 Minutes

5. Show. What do you see in these pictures?
Soap Kills Germs (Picture 1.2)

Germs live all around us.

Many germs enter the body on your hands.

Germs that get inside the body can cause coughing and diarrhea.

Soap kills germs.
6. Explain

- Share the key messages using flipcharts pages XX.
- Use the captions to remind you which images represent each point.

Germs live all around us.

- Germs are tiny creatures that cause sickness.
- Germs live on our skin, in our house, on plants and trees.
- Germs are too small to see with our eyes.
- This picture shows us what a microscope would show us, that germs live on our hands.

Many germs enter the body on our hands.

- Germs get inside the body when we lick our fingers.
- Germs that land on our hands get into our mouth when we eat.

Germs that get inside the body can cause coughing and diarrhea.

- Germs that get inside the body cause most sicknesses.

Soap kills germs!

- Washing hands with soap for 30 seconds prevents diarrhea and sickness.
- Washing hands with soap protects pregnant mothers from illness that may harm their infant.
- It is okay to use water that is not treated or safe for drinking to wash our hands, as long as we use soap and let the water run over our hands to rinse.

Additional Information for the Trainer:

Diarrheal Disease

- Hand washing with soap is the most cost-effective intervention to prevent death and disease from diarrhea.\(^4\) Hand washing before eating, preparing food and after using the toilet can reduce diarrhea in children by 50 percent.\(^5\)

Definitions

- A germ is a bacteria or virus that causes disease.

Effectiveness

- Manufactured soap and water is the best and most effective virus and bacteria killer. If manufactured soap is not available, homemade soap or ashes are the best substitutes.
- If you are using ashes, wet hands first, then add the ashes.

When to Wash (Picture 1.3) – 5 Minutes

7. Show: What do you see in these pictures?

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<table>
<thead>
<tr>
<th>When to Wash</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1.png" alt="Image" /></td>
<td>Wash hands with soap before preparing food.</td>
</tr>
<tr>
<td><img src="image2.png" alt="Image" /></td>
<td>Wash hands with soap before eating.</td>
</tr>
<tr>
<td><img src="image3.png" alt="Image" /></td>
<td>Wash hands with soap after using the latrine.</td>
</tr>
<tr>
<td><img src="image4.png" alt="Image" /></td>
<td>Wash hands with soap before holding a newborn.</td>
</tr>
<tr>
<td><img src="image5.png" alt="Image" /></td>
<td>Wash hands with soap before and after caring for someone who is ill.</td>
</tr>
</tbody>
</table>
Lesson 1: Handwashing with Soap at Critical Times and When Caring for Those Who Are Ill
Lesson 1: Handwashing with Soap at Critical Times and When Caring for Those Who Are Ill

8. Explain
   - Share the key messages using flipchart page 3.
   - Use the captions to remind you which images represent each point.

Wash your hands with soap for 30 seconds, or while singing the Handwashing Song, before eating or before feeding someone.
   - Help your children to wash their hands.
   - Wash your hands with soap after using a latrine, toilet or flying toilet.
   - Help your children to wash their hands.

Wash your hands for 30 seconds after cleaning a child’s or sick person’s feces or urine.

Wash your hands with soap for 30 seconds before preparing food.

Wash hands with soap for 30 seconds before holding a newborn.
   - Newborns get sick very easily.
   - Keep them healthy by keeping your hands clean.
   - Ask others to wash hands before touching the infant.

Wash hands with soap before AND after caring for someone who is ill.
   - Remember that many germs that can make you sick are present in an infected person’s body fluids (feces, urine, sweat, vomit, semen or breastmilk).
   - Washing your hands after caring for someone who is sick can reduce your risk of getting sick too.
   - Washing your hands BEFORE caring for someone who is sick and help prevent you from passing on germs to the sick person. Sometimes germs that won’t make a healthy person sick can make a sick person even sicker because their body is weak and cannot defend itself
   - If possible, use latex gloves when caring for someone who is ill - but wash hands frequently regardless of whether gloves are used.
   - While caring for someone, do not touch your face or body, or anything or anyone with your hands before thoroughly washing your hands with soap and flowing water.
   - What are some other times it is important to wash hands?

Additional Information for the Trainer

Newborns and Hand Washing
   - A study showed that newborns where birth attendants and mothers washed hands before handling them had a 41% lower illness rate compared to newborns where the mother and birth attendant did not wash hands.6

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How to Wash (Picture 1.4) – 5 Minutes

9. Show: What do you see in these pictures?
Lesson 1: Handwashing with Soap at Critical Times and When Caring for Those Who Are Ill

How to Wash (Picture 1.4)

1. Wet your hands and the soap with water.
2. Rub your hands and fingers together. Rub between your fingers. Lather up to your wrist. Rub under your fingernails.
3. Pour clean water over your hands to rinse off the soap.
4. It is best to let your hands air dry.
10. Explain

- Share the key messages using flipchart page 4.
- Use the captions to remind you which images represent each point.
- Encourage the women that hand washing is easy to do, but it is very effective in killing germs. We can stop infection in our homes with this simple practice.

- Wet your hands and the soap with water.
- Rub your hands and fingers together.
  - As you rub your hands, the soap will lather.
  - Sing the Hand Washing Song.
  - Rub between your fingers, scrub under your fingernails, and lather your wrists.
  - Continue rubbing your hands together until the Hand Washing Song is finished.
- Pour clean water over your hands to rinse off the soap.
  - Never wash and rinse hands in one basin.
  - The water will hold the germs and spread them to everyone else who dips their hands in the water.
  - If washing in a basin, use a cup to pour water over your hands.
- It is best to let your hands air dry.
  - If you use a towel, clean the towel every day.
  - A wet towel can easily gather germs and put them back onto your hands.

Additional Information for the Trainer

Germs on Towels

- Germs grow and multiply quickly on damp surfaces and fabrics. Avoid using towels to dry hands unless they are washed each day.
- Hang the towel on a tree limb or rack in the sun after each use. The sunlight and heat from the sun kills the bacteria and virus as the towel dries.
Lesson 1: Handwashing with Soap at Critical Times and When Caring for Those Who Are Ill

11. Activity: The Hand Washing Song – 15 Minutes

Song Example:
I wash his hands before he eats, I wash his hands after visiting the latrine
I wash after changing diapers, I wash before preparing food. - Chorus

I rub between my fingers, I rub under my fingernails
I rinse with clean water, and let the air dry my hands. - Chorus

Chorus:
Hand washing keeps my child healthy. I wash with soap.
I wash with water. I wash a long time. I wash because I love my child.

• Practice the Hand Washing Song with the Care Group Volunteers.

Explain: In order to kill all the germs, hands need to be washed for at least 30 seconds. To help us remember to wash our hands for 30 seconds we will sing this song.

Each person in your home should learn the song and sing it after they wet their hands and begin to scrub their hands.

When the song is finished, it is time to stop scrubbing and rinse.

12. Identify and Discuss Obstacles – 15 Minutes

• What do you think of these ideas? Is there anything that might prevent you from following the practices we have discussed today?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed. Help find solutions to their concerns. Encourage them to try these new practices. If a woman offers a good solution to another woman’s concern, praise her and encourage other mothers to consider using this solution when they talk with others.

Before meeting with the CGV, the promoters and supervisor should take this example of a song, translate it into the local language and adapt it using a popular tune that most mothers will recognize. Every promoter should use the same song, same words, and same tune to make sure that ALL mothers are receiving the same messages.
13. Practice and Coaching – 20 Minutes

1. Ask Care Group Volunteers to share the teachings they have learned today using the first two flipchart pages. They should share with another woman in the care group.

2. Tell the Care Group Volunteers listening to the message that they should give one objection to the lesson; one reason that they think this message would be difficult for them.

3. The Care Group Volunteers sharing the message should try to help the women overcome this obstacle.

4. After ten minutes, ask the women to switch roles.

5. The Promoter should watch, correct, and help the Care Group Volunteers who are having trouble.

6. When everyone is finished, answer any questions that the mothers have about the materials, or today’s lesson.

14. Ask for a Commitment – 2 Minutes

Ask each Care Group Volunteer: Are you willing to commit to following the new practices that we discussed today?

Ask mothers to give a verbal declaration that they will commit.

For example:

- I commit to washing my hands with soap before handling my newborn.
- I commit to talking with my family about washing hands at the appropriate times.
- I commit to teaching my family how to wash their hands using the Hand Washing Song.
Lesson 2: Creation of Household Handwashing Stations

Objectives

- Each caregiver will demonstrate how to build a Leaky Tin and how to use it for a handwashing station in their home.
- Each caregiver will be able to instruct others in the creation of a Leaky Tin.
- Each caregiver will know how to set up a hand washing station using basins.
  - Never rinse and wash hands in the same basin. Always use a cup to pour water over the hands for wetting hands and for rinsing hands.
- Before leaving their baby or small child with a care taker or at a day-care center, caregivers will show the person in charge how to make sure that they and the baby wash hands at the critical times.

Materials for Lesson 2:

- Attendance Registers
- Encourage each family to gather Leaky Tin materials in preparation for this lesson.
  - 20-liter jerry can, or 10-liter jerry can.
  - Small tap
  - Nail
  - Super glue
  - Tin can
  - String or rope

Summary:

- Game: Move to the Spot
- Attendance and Troubleshooting
- Share the story: Too difficult to wash
- Ask about current practices
- Share the meaning of each Picture Box in the flipchart:
- Activity: Build a Leaky Tin
- Discuss Barriers
- Practice and Coaching in pairs
- Request Commitments
1. Game: Move to the Spot – 10 minutes

1. Ask everyone to choose a particular spot in the room. They start the game by standing on their ‘spot’. Remind participants that they should leave plenty of space and be careful not to touch as they are playing the game.

2. Instruct people to walk around the room and carry one particular action, for example, hopping, or saying hello to everyone wearing blue, or walking backwards, etc.

3. When the Promoter says “Stop”, everyone must run to his or her original spot. The person who reaches their place first is the next leader and can instruct the group to do what they wish.\(^8\)

Now that we are energized, let’s begin our lesson.

2. Attendance and Troubleshooting – 10 Minutes

When teaching Care Group Volunteers

10. Promoter fills out attendance sheets for each Care Group Volunteer and neighbor group (beneficiary group).

11. Promoter fills out vital events mentioned by each Care Group Volunteer (new births, new pregnancies [if on the form], and mother and child deaths).

12. Promoter asks if any of the Care Group Volunteers had problems meeting with their neighbors.

13. The Promoter offers advice on how to solve the problems mentioned.

14. The Promoter asks the Care Group Volunteers to review the key practices from the last lesson.

15. The Promoter asks the Care Group Volunteers about their commitments from the last meeting and follows up with those who had difficulty trying out new practices.

\(?\) What was your commitment at the last lesson? Have you been able to keep that commitment?

\(?\) What did you do?

- Did anyone (spouse, grandmother or children) interfere or tell you not to follow your commitments? Tell the story of what happened.

- What factors (people, events or chores) in your life made it difficult to keep your commitments?

- How were you able to overcome these problems?

\(^8\) International HIV/AIDS Alliance. (2002). 100 Ways to Energize Groups: Games to Use in Workshops, Meetings and the Community. Available at www.aidsalliance.org.
16. Promoter thanks all of the Care Group Volunteers for their hard work and encourages them to continue.

17. Promoter encourages Care Group Volunteers to have a sense of pride that they are protecting the health of their communities by reinforcing messages and commitments.

18. Promoter asks the group’s Activity Leader to discuss the needed items for next week’s activity (based on the Promoter’s conversation with her prior to this meeting) and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #2 in this module.)

When Care Group Volunteers teach their Neighbors:

6. Care Group Volunteers will take attendance.

7. Care Group Volunteers will ask about new births, pregnancies (if this is kept on the form), mother and child deaths, and illnesses in the families of the mothers attending and will help refer those with severe illness to the local health facility.

8. Care Group Volunteers will ask the mothers to review the key practices from the last lesson.

9. Care Group Volunteers will ask the neighbor mothers about their commitments from the last meeting and follow up with those who had difficulty trying out new practices.

10. Care Group Volunteer asks the group’s Activity Leader to discuss the needed items for next week’s activity and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #2 in this module.)

3. Story: Too difficult to wash (Picture 2.1) – 10 Minutes

- Read the story on page 5 of the flipchart.
- The story discusses the difficulty that Halima has trying to adopt the new hand washing practice.
- Use the story to encourage the women, that change is not always easy. Sometimes we need to rearrange objects in our homes to make change easier.

Halima heard the messages from Kioni. Kioni is Halima’s neighbor. Kioni is also a Care Group Volunteer and visits Halima every two weeks with messages from the Care Group. In the previous week, Kioni showed Halima how important it is to wash her hands. Halima committed to wash her hands every time she should, just like Kioni taught her. But when she left the toilet, she forgot. When she started to prepare foods, the soap was missing. When the family sat down for dinner, there was no water left. She wanted to change, but the change seemed too difficult.

4. Show: What do you see in these pictures? – 5 minutes
Halima committed to wash her hands every day just like Kioni taught her.

But when she left the toilet, she forgot.

When she started to prepare foods, the soap was missing.

When the family sat down for dinner, there was no water left.
5. Ask and Listen – 5 minutes

- Why didn’t Halima wash her hands?
- Is it easy for you to wash your hands?
- Do you have a handwashing place (station) with soap and water? Where is it?

On the following pages are instructions for making a handwashing station. We will make one together.

6. Explain

A Leaky Tin makes handwashing easy and uses a small amount of water.
- It uses less water than handwashing with water basins.

Let’s make one together. You need: A 10- or 20-liter jerry can, a small tap, a nail and super glue.
- Rinse and clean the jerry can well.
- Do not use pesticide containers to make the Leaky Tin.
- The pesticide will damage your hands and cause sickness.
A Leaky Tin makes handwashing easy and uses a small amount of water. Let's make one together. You need: a 10- or 20-liter jerry can, a small tap, nail and super glue.
7. Explain
Instructions for constructing a Leaky Tin:
1. Take a 20- or 10-liter jerry can.
2. Clean it thoroughly with soap and water, inside and out.
3. Take the tap, and draw its circumference on the jerry can above the lower line.
4. Take a nail and drill a hole where you have drawn the circle, make that hole a bit smaller
5. Insert the tap with a rotating motion, gently screwing it in until it’s securely fastened.
6. Apply super glue around the joint.
7. Hold the tap steady in place for 5 minutes to allow it to dry.

The Leaky Tin can be used as a handwashing station and as storage for treated water. These should be two separate Leaky Tins.
Place your handwashing station in a clean area in your home.
Add bricks or boards under the Leaky Tin to hold it off the floor
Place a small basin under the tap to catch waste water.
Leaky Tin Construction (Picture 2.3)

- Clean the jerry can thoroughly, inside and out.
- Take the tap and draw its circumference on the jerry can above the lower line.
- Take the tap and draw its circumference on the jerry can above the lower line.
- Insert the tap with a rotating motion, gently screwing it in until it's securely fastened.
- Apply super glue around the joint.
- Hold the tap steady for 5 minutes to allow it to dry.
- Place handwashing station in a clean area near your home.
8. Activity: Practice using the Leaky Tin – 10 minutes

- Every Care Group Volunteer should practice washing her hands with the Leaky Tin.

9. Ask and Listen – 5 minutes

? How does it feel to use the Leaky Tin?
? How is using a Leaky Tin different than how you wash your hands now?

How can I make sure the care-taker washes my baby’s hands?
(Picture 2.4) – 10 Minutes

[Use this section only in places where mothers commonly leave their babies and children under 2 years old with a care-taker or at a day-care center during the day]

10. Story:

- Read the story on page 8 of the flipchart
- The story explains how Halima and her neighbor Constance figure out how to make sure Halima’s baby’s hands stay clean even when she must leave her with a caretaker when Halima goes to work.

Halima was talking with her neighbor, Constance, about the lessons they’d discussed with Kioni, the Care Group Volunteer that visits them: “Constance, I am going to practice proper handwashing just as the Care Group Volunteer instructed us. But sometimes I have to leave my children with a caretaker. How will I make sure she washes their hands at the right times when I am not there? I want to keep my family from getting sick, but how can I protect them all the time?” Constance shook her head. “Halima, we cannot protect them from everything. We can make sure that our family practices the Care Group Volunteer’s lessons while we are there, and I think there are some ways that we can pass these lessons on to our caretakers as well…”

11. Show: What do you see in these pictures?
How can I make sure the care-taker washes my baby’s hands? (Picture 2.4)

How can Halima make sure her baby’s hands get washed properly when she is with a care-taker?

Halima washes her baby’s hands with the Leaky Tin to demonstrate to her care-taker how to make sure her baby’s hands are washed properly at all the appropriate times.
Lesson 2: Creation of Household Handwashing Stations

12. Ask and Listen – 5 Minutes

? What problem are Constance and Halima discussing?
? What do you think Constance will suggest?
? Do you find it difficult to make sure the caretaker washes your children’s hands while you are away?
? Halima washes her baby’s hands with the Leaky Tin to demonstrate to her care-taker how to make sure her baby’s hands are washed properly at all the appropriate times.
? What are some other things you can think of to make sure the caretaker has your children wash their hands while you are away?

13. Explain:

- Grandmothers and other caretakers can help mothers to make sure their children wash their hands.
- If you have to leave your baby with a caretaker:
  - Show the caretaker where the Leaky Tin is located, and demonstrate how to use it.
  - If you don’t have a leaky tin, show the caretaker where you normally wash your hands, show her where you keep the soap and the water.
  - Encourage the caretaker to wash you’re her hands and your children’s hands after using the toilet, before touching food, eating or preparing meals, handling a newborn baby, and before and after caring for someone who is ill.

14. Identify and Discuss Obstacles – 15 Minutes

- What do you think of these ideas? What do you think of these ideas? Is there anything that might prevent you from following the practices we have discussed today?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed. Help find solutions to their concerns. Encourage them to try these new practices. If a woman offers a good solution to another woman’s concern, praise her and encourage other mothers to consider using this solution when they talk with others.

15. Practice and Coaching – 20 Minutes

1. Ask Care Group Volunteers to share the teachings they have learned today using the first two flipchart pages. They should share with another woman in the care group.
2. Tell the Care Group Volunteers listening to the message that they should give one objection to the lesson; one reason that they think this message would be difficult for them.
3. The Care Group Volunteers sharing the message should try to help the women overcome this obstacle.
4. After ten minutes, ask the women to switch roles.
5. The Promoter should watch, correct, and help the Care Group Volunteers who are having trouble.
6. When everyone is finished, answer any questions that the mothers have about the materials, or today’s lesson.

<table>
<thead>
<tr>
<th>16. Ask for a Commitment</th>
<th>2 Minutes</th>
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Ask each Care Group Volunteer: Are you willing to commit to following the new practices that we discussed today?
Ask mothers to give a verbal declaration that they will commit.
For example:
- I commit to building a Leaky Tin.
- I commit to dedicating a space in my home as a handwashing station until I can build a Leaky Tin.
- I commit to teaching my family how to wash their hands using the Leaky Tin.
Lesson 3: Worms and Deworming

Objectives

- Caregivers will be able to explain the effects of worms on child health: worm eggs live in feces, parasites steal the child’s food and blood inside the body and cause weak blood and malnutrition.

- Caregivers will take action to prevent worm infection:
  - Caregivers will wash hands with soap and water before preparing food or eating, or helping others to eat, and after using the latrine or helping others to use the latrine.
  - Caregivers will wash fresh fruits, vegetables, and other foods that are eaten raw with soap and water [boiled or purified water].
  - Caregivers and their children will wear shoes to stop worms from burrowing into their feet.
  - All family members will use a latrine every time they need to relieve themselves.

- Caregivers will take their children to the health clinic to receive a deworming pill every six months starting at 1 year of age.

- Pregnant women will take a deworming pill in the fourth month of pregnancy to prevent anemia.

Summary:

- Game: Who is the Secret Leader?
- Attendance and Troubleshooting
- Share the story: Our bellies are full
- Ask about current practices
- Share the meaning of each Picture Box in the flipchart: (Worms and Malnutrition, Worm Prevention, and Deworming Children and Pregnant Women)
- Activity: Deworming song
- Discuss Barriers
- Practice and Coaching in pairs
- Request Commitments

Materials:

- Attendance Registers
- Essential Hygiene Actions Flipchart
1. Game: Who is the Secret Leader? – 10 minutes

1. Ask the Care Group Volunteers to sit in a circle. A volunteer leaves the area where she cannot see or hear the group.

2. After they leave, the rest of the group chooses a “Secret Leader.” The secret leader must perform a series of actions, such as clapping, tapping a foot, or snapping their fingers. Everyone in the group copies the action of the Secret Leader as quickly as possible after the leader starts. The Secret Leader should tell the rest of the women in the group (without the volunteer who left present) what the first action will be. This is important — otherwise, the Secret Leader will be the only person performing an action to start with and it will be easy for the volunteer (who left the area) to guess who the Secret Leader is. Do not tell the volunteer who left the room who the Secret Leader is when she returns.

3. The volunteer returns and stands in the middle of the circle. At this time the Secret Leader of the group should quietly begin an action just as she had done a few minutes ago. The others follow the Secret Leader doing the action with her immediately. After a few seconds, the Secret Leader changes the action. As soon as the others see, they should do the same action that the Secret Leader is doing.

4. The volunteer tries to guess who the Secret Leader is. The Secret Leader must change the actions without getting caught. The group protects the Secret Leader by not looking at her. The women in the circle should not stare at the Secret Leader as that makes it too easy for the volunteer to guess who the Secret Leader is.

5. When the volunteer identifies the Secret Leader, the volunteer joins the circle, and the person who was the Secret Leader leaves the room.

6. Repeat the game several times.

? What can we learn from this game?
- Sometimes the person who is making decisions is hidden or acts quietly.
- Often when we meet with women, there are others in their life that lead or influence their decisions.
- We need to find the people who make decisions in the household and find creative ways to persuade them to practice good health practices, including essential hygiene actions.

Now that we are energized, let’s begin our lesson.
When teaching Care Group Volunteers:

1. Promoter fills out attendance sheets for each Care Group Volunteer and neighbor group (beneficiary group).
2. Promoter fills out vital events mentioned by each Care Group Volunteer (new births, new pregnancies [if on the form], and mother and child deaths).
3. Promoter asks if any of the Care Group Volunteers had problems meeting with their neighbors.
4. The Promoter offers advice on how to solve the problems mentioned.
5. The Promoter asks the Care Group Volunteers to review the key practices from the last lesson.
6. The Promoter asks the Care Group Volunteers about their commitments from the last meeting and follows up with those who had difficulty trying out new practices.

7. Promoter thanks all of the Care Group Volunteers for their hard work and encourages them to continue.
8. Promoter encourages Care Group Volunteers to have a sense of pride that they are protecting the health of their communities by reinforcing messages and commitments.
9. Promoter asks the group’s Activity Leader to discuss the needed items for next week’s activity (based on the Promoter’s conversation with her prior to this meeting) and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #3 in this module.)

When Care Group Volunteers teach their Neighbors:

1. Care Group Volunteers will take attendance.
2. Care Group Volunteers will ask about new births, pregnancies (if this is kept on the form), mother and child deaths, and illnesses in the families of the mothers attending and will help refer those with severe illness to the local health facility.
3. Care Group Volunteers will ask the mothers to review the key practices from the last lesson.
4. Care Group Volunteers will ask the neighbor mothers about their commitments from the last meeting and follow up with those who had difficulty trying out new practices.
5. Care Group Volunteer asks the group’s Activity Leader to discuss the needed items for next week’s activity and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #3 in this module.)

3. Story: Our Bellies are Full (Picture 3.1) – 5 Minutes
   - Read the story on page 9 of the flipchart.

At dinner, Halima sees that her children are not eating well. “Why aren’t you eating?” she asks. “My stomach is already full” her son says. “I’m just not hungry” says her daughter. This continues for many days. Even though their bellies feel full, Halima knows they are not eating enough.

4. Show: What do you think these pictures mean? – 5 Minutes
At dinner, Halima sees that her children are not eating well. “Why aren’t you eating?” she asks. “My stomach is already full” her son says. “I’m just not hungry” says her daughter. This continues for many days. Even though their bellies look full, Halima knows they are not eating enough.
Lesson 3: Worms and Deworming

5. Ask and Listen – 5 Minutes

¿ Why aren’t the children eating?
¿ What sickness can cause this problem?
¿ What do you do when your children lose their appetite?
¿ Let’s compare your ideas with the messages on the following pages.

Worms and Malnutrition (Picture 3.2)

6. Show: What do you think these pictures mean? — 10 Minutes
A parasite is a small worm that lives in the body.

Children with worms do not eat well and become malnourished.
7. Explain
A parasite is a small worm that lives in the body.
  - Some worms are too small to see.
  - Others can be several meters long inside the body.
  - Parasites live off of food and blood in the body.

Children with worms do not eat well and become malnourished.
  - Worms steal food from the child’s body.
  - Worms steal blood from the child’s body.
  - Children with worms do not grow well.
  - Children with worms get sick easily.

What are signs that a child has worms?
  - Sometimes worms are seen in the child’s feces.
  - The child’s belly may become round and large.
  - The child may lose interest in eating.

8. Show: What do you think these pictures mean?
   – 10 Minutes
Worm Prevention (Picture 3.3)

Always use a latrine. Keep feces away from others.

Wash fresh fruits and vegetables with purified water.

Wear shoes. Stop worms from burrowing into your feet.
9. Explain

Worm eggs live in feces.

- This child has worms.
- His feces has eggs which are ready to hatch.
- The ground now has worm eggs on it.
- This child may have worm eggs on his hands and feet.

Always use a latrine or toilet. Keep feces and worms away from others.

- Don’t let worm eggs get onto the soil.
- Wash hands and child’s hands after using the toilet.
- Soap kills germs and worm eggs on hands.

Wash fresh fruits, vegetables, and other foods that are eaten raw with soap and boiled or purified water before eating them.

- Wash off fruits, vegetables and other foods that are eaten without cooking.
- Use water that has been boiled or purified with WaterGuard.

Wear shoes. Stop worms from burrowing into your feet.

- Some worms hatch in the soil.
- The break through skin on the feet and enter the body.
- Always use a mat when sitting on the ground.

Deworming Children and Pregnant Women (Picture 3.4)

10. Show: What do you think these pictures mean? – 10 Minutes
Pregnant women, take a deworming pill in the fourth month of pregnancy.

Beginning at the child’s first birthday, give a deworming pill every six months.
11. Explain
Pregnant women, take a deworming pill in the fourth month of pregnancy.

- Many pregnant women don’t know they have worms.
- Women who take deworming pills have healthier pregnancies and infants.
- When a pregnant woman’s belly begins to show and she feels movement inside, three months have passed.
- She is ready to take a deworming pill.

Beginning at the child’s first birthday, give a deworming pill every six months.

- Most children have worms and don’t know it.
- Worms prevent children from growing well.
- Worms give children weak blood.
- They are weak and are not able to do well in school.

Additional Information for the Trainer
School Age Children

- The number of worms inside the body is highest in school age children. Deworming school children every six months should be continued until worms are no longer present in the majority of the children.

Deworming Children

- A two year study in India showed that deworming children every six months prevented 82% of child stunting (shortness) and produced a 35% increased weight gain in children.

Treatment

- The following drugs can be used for treatment for children: Albendazole 400mg (single dose) and Mebendazole 500mg (single dose) for soil-transmitted parasites.
- After treatment for soil-transmitted worms, children will have immediate relief. Abdominal worms will be expelled from their body within 24 hours.
12. Activity: Deworming Song – 15 Minutes

1. Practice the Deworming Song with the mothers until they know it by heart.
2. Give each mother a chance to sing the song for the others.

Sample Song:

*After your child is 12 months old, give a deworming pill.*

Every six months give a deworming pill

Chorus: Deworming, deworming. Don’t let parasites steal your food. Deworming, deworming, don’t let parasites live in you.

Children will be sick less often
Children will have energy
Children will be tall and strong

Chorus: Deworming, deworming. Don’t let parasites steal your food. Deworming, deworming, don’t let parasites live in you.

*After four months of pregnancy, get a deworming pill.*

Pregnant women need them too

Chorus: Deworming, deworming. Don’t let parasites steal your food. Deworming, deworming, don’t let parasites live in you.

Pregnant women will be sick less often.
Women will stay strong in birth
Your babies will be healthy

Chorus: Deworming, deworming. Don’t let parasites steal your food. Deworming, deworming, don’t let parasites live in you.
Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed.

14. Identify and Discuss Obstacles – 15 Minutes

- What do you think of these ideas? What do you think of these ideas? Is there anything that might prevent you from following the practices we have discussed today?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed. Help find solutions to their concerns. Encourage them to try these new practices. If a woman offers a good solution to another woman’s concern, praise her and encourage other mothers to consider using this solution when they talk with others.

15. Practice and Coaching – 20 Minutes

1. Ask Care Group Volunteers to share the teachings they have learned today using the flipchart pages covered. They should share with another woman in the care group using the ASPIRE method.

2. Tell the Care Group Volunteers listening to the message that they should give one objection to the lesson; one reason that they think this message would be difficult for them.

3. The Care Group Volunteers sharing the message should try to help the women overcome this obstacle.

4. After ten minutes, ask the women to switch roles.

5. The Promoter should watch, correct, and help the Care Group Volunteers who are having trouble.

6. When everyone is finished, answer any questions that the mothers have about the materials, or today’s lesson.
Ask each Care Group Volunteer: Are you willing to commit to following the new practices that we discussed today?

Ask mothers to give a verbal declaration that they will commit. For example:

- I commit to saving money so I can purchase shoes for my children.
- I commit to washing my hands after using the latrine.
- I commit to taking my child to the latrine to defecate.
Lesson 4: Improved Water Source, Water Purification and Storage

Objectives

- Caregivers will understand the following and act accordingly:
  - *Always* purify water before drinking, either by using WaterGuard (preferred) or boiling your water for ten minutes.
  - *Do not* drink water directly from the water source. Even if the water is from a *protected source*, germs can still get into the water.
  - Purifying your water removes bacteria, germs, worms, and cysts. *This will reduce diarrhea and sickness in your family.*
  - Carry your water in a container with a lid to keep out germs.
  - Store treated drinking water in a leaky tin.
  - Clean the storage container and the purification materials weekly.
  - When you leave your baby with a caretaker try to make sure the caretaker gives your baby only treated water.

Materials:

- Attendance Registers
- A ball of string or yarn
- Ask each woman to bring a clean drinking cup
- Materials needed to purify water with WaterGuard
- Materials needed to boil water (pot with lid, electric burner, etc.)
- One liter of unpurified water

Summary

- Game: Memory
- Attendance and Troubleshooting
- Share the story: Selling WaterGuard
- Ask about current practices
- Share the meaning of each Picture Box in the flipchart: Water Purification; Boiling and WaterGuard; Improved Water Storage; Asking the caretaker to give baby only treated water
- Activity: Water Taste Test
- Discuss Barriers
- Practice and Coaching in pairs
- Request Commitments
1. Game: Memory – 10 minutes

1. Ask the participants to stand in a circle.
2. Starting with the first participant, she must make a statement and indicate a part of the body.
3. The statement should not match the stated action. For example she says, “This is my nose,” when pulling on her ear.
4. The next participant must repeat the phrase and action and then add another phrase and action of their own (e.g., “this [pulling on ear] is my nose, and this [pointing to mouth] is my foot”).
5. Continue going around the circle with each participant saying and doing the actions from everyone before them and adding a new one. If someone has trouble, help them out. If the game is too easy, encourage people to speak more quickly.
6. Continue until everyone is laughing.

Now that we are energized, let’s begin our lesson.

2. Attendance and Troubleshooting – 10 Minutes

When teaching Care Group Volunteers (Mother Leaders):
10. Promoter fills out attendance sheets for each CGV and neighbor group (beneficiary group).
11. Promoter fills out vital events mentioned by each CGV (new births, new pregnancies [if on the form], and mother and child deaths).
12. Promoter asks if any of the CGVs had problems meeting with their neighbors.
13. The Promoter offers advice on how to solve the problems mentioned.
14. The Promoter asks the CGVs to review the key practices from the last lesson.
15. The Promoter asks the CGVs about their commitments from the last meeting and follows up with those who had difficulty trying out new practices.

? What was your commitment at the last lesson? Have you been able to keep that commitment?
? What did you do?
  o Did anyone (spouse, grandmother or children) interfere or tell you not to follow your commitments? Tell the story of what happened.
  o What factors (people, events or chores) in your life made it difficult to keep your commitments?
  o How were you able to overcome these problems?
16. Promoter thanks all of the CGVs for their hard work and encourages them to continue.
17. Promoter encourages CGVs to have a sense of pride that they are protecting the health of their communities by reinforcing messages and commitments.
18. Promoter asks the group’s Activity Leader to discuss the needed items for next week’s activity (based on the Promoter’s conversation with her prior to this meeting) and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #4 in this module.)

When CGVs teach their Neighbors:

6. CGVs will take attendance.
7. CGVs will ask about new births, pregnancies (if this is kept on the form), mother and child deaths, and illnesses in the families of the mothers attending and will help refer those with severe illness to the local health facility.
8. CGVs will ask the mothers to review the key practices from the last lesson.
9. CGVs will ask the neighbor mothers about their commitments from the last meeting and follow up with those who had difficulty trying out new practices.
10. CGV asks the group’s Activity Leader to discuss the needed items for next week’s activity and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #4 in this module.)

3. Story: Selling WaterGuard (Picture 4.1) – 10 Minutes

- Read the story on page 13 of the flipchart.

At the market, Halima meets a man selling WaterGuard. The man says. “Do you purify your water? If you add WaterGuard to your water, it will stop your children from having diarrhea!” Halima shakes her head, “No one adds WaterGuard to the water in my compound. Our water comes from a water kiosk. It’s already clean!”

4. Show: What do you see in these pictures?
At the market, Halima meets a man selling WaterGuard. The man says. “Do you purify your water? If you add WaterGuard to your water, it will stop your children from having diarrhea!”

Halima shakes her head. “No one adds WaterGuard to the water in my compound. Our water comes from the water kiosk. It’s already clean!”
5. Ask and Listen – 10 Minutes

- Why doesn’t Halima clean her drinking water?
- Do you think her water is clean? Why?
- Is your water clean? Do you purify it? Why or why not?
  - How safe do you think that water is compared to the water Halima draws from the water kiosk?
- Let’s compare your ideas with the messages on the following pages.

Germs

- Germs in the water can cause sickness. These germs include viruses like hepatitis and rotavirus and bacteria such as cholera, typhoid and giardia.
- All of these germs can be spread through drinking water directly from the water source. None of these germs can be seen with the human eye.

Clean Water and Clear Water

- Some people believe that clear water is clean water. Clear water does not mean that it does not have germs. Even clear water and water drawn from protected water sources needs to be purified before drinking. Water is clean only if it is purified.

Water Source

- Latrines, troughs for animals to drink and washing stations should be at least 20 meters from the water source.
- Liquids from these sources can sink into the underground water and contaminate the well water.
- You should always draw water from the cleanest source that is available. Don’t use sources that are unprotected if you can get water from a protected source.

Additional Information for the Trainer

Baseline Data (Assess to Potable Water)

- In Kibera only 49% of households treat their drinking water before using it.⁹

Water Purification: Boiling and WaterGuard (Picture 4.2) – 20 Minutes

6. Show: What do you see in these pictures?

⁹ Urban MNCH Baseline Survey Kibera Slum. Concern World Wide 2014 Email communication.
### Water Purification: Boiling and WaterGuard (Picture 4.2)

- **Do not drink water directly from the source. Water must be purified.**
- **Pour cloudy water through a clean cloth to remove dirt.**
- **Kill germs by boiling. Boil for 10 minutes.**
- **Let water cool in a covered pot.**
- **Kill germs with WaterGuard. Add 1 bottle top full for each 20 litres of water. Mix well.**
- **Wait 30 minutes before drinking.**
7. Explain

- Always purify water before drinking.
- Even clear water may cause sickness. Germs are too small to see.
- Do not drink water directly from the water source. Even if the water is from a **protected source or from pipes**, germs can still get into the water.
- Purifying your water removes bacteria, germs, worms, and cysts. **This will reduce diarrhea and sickness in your family.**
- If you leave your child with a care-giver during the day make sure the caregiver only gives purified water.
- Even if you can’t be sure that you child receives purified water while with a caregiver, **ALWAYS** make sure to give your child purified water at home. It STILL offers much protection.

**WaterGuard is the ideal way to purify water.**

**Instructions for purifying water with WaterGuard:**

1. Start with the cleanest water you can get. If your water looks dirty, either pour it through a cloth to filter it or leave it in a container for several hours to let all the dirt that you can see settle down to the bottom. Then pour the clear water into a different container to use for treating the water.

2. Measure one bottle top full of WaterGuard.

3. Pour the water guard into a 20-Liter jerry can or container full of water.

4. Close the container and shake it well until WaterGuard mixes properly with water.

5. Wait for 30 minutes before using the water.

6. Your water is now safe for drinking!

**You can also boil water to kill germs.**

**Instructions for boiling water:**

1. Pour cloudy water through a clean cloth to remove dirt.
   - This removes large particles in the water.
   - This helps to improve the taste of the water.

2. Kill germs by boiling. Boil for 10 minutes.
   - Boiling begins when large bubbles appear.

3. Let water cool in a covered pot.

Try to only purify enough water for one day at a time:

- After one day, germs begin to grow in still water.
- Store purified water in a leaky tin.
  - Keep the tap clean - do not allow the children to put their fingers in it.

**Solar Water Disinfection, or SODIS**

**SODIS** is a water treatment method which uses the sun and means **solar water disinfection**. For SODIS you need a transparent PET-bottle, such as clear juice bottles or the bluish mineral water bottles (no more than 2 Litres). After filling this bottle with water you place it in the sun for at least 6 hours. Ultraviolet (UV)-light and heat from the sun kill the germs in the water which cause diseases like diarrhoea.
How to use SODIS

- Wash the bottle well before the first time you use it.
- Use the cleanest water you can get. If your water looks dirty or cloudy either pour cloudy water through a clean cloth to remove dirt filter it or let it settle as if you were going to boil it.
- Fill the bottle ¾ full with water.
- Shake the bottle for 20 seconds.
- Fill up your SODIS-bottle completely with water and close it. Only a small air bubble should be seen after turning around the bottle.
- Lay down your SODIS-bottle in the sun. Most people put it on the roof.
- Leave your SODIS-bottle for at least 6 hours from morning till evening in the sun. If it is cloudy, expose your SODIS-bottle at least 2 days to the sun.
- The water is now ready for drinking.
- Keep your SODIS-bottle clean. Replace your bottle when it got too many scratches and is not clear any more.

Additional Information for the Trainer

Baseline Data (Point-of-Uses Water Treatment)

- Only 49 percent of households in Kibera slum treat their water before drinking it. Of those who do treat their water, about half boil their water and about half use WaterGuard or chlorine.

Baseline Data (Knowledge of Water Treatment Methods)

- Include data from your baseline survey or data from other recent studies done in your area.

Taste

- Chlorine does affect the taste of the water and some may not like using chlorine products. The longer water purified with chlorine sits, the less chlorine taste it will have.

Effectiveness

- Chlorine kills 99.99% of diarrhea-causing bacteria and viruses when purifying clear water. It is less effective in cloudy water.

Turbid (cloudy) Water

- Water that is cloudy or looks muddy is called turbid. Before purifying turbid water, the large particles must be removed.
- After clarifying turbid water, people still need to treat it using one of these four methods: boiling, filtering, chlorinating, or using solar disinfection.

Water Purification for Cloudy Water

- Cloth filtration has been shown to reduce cholera transmission in Bangladesh by removing the copepods to which the cholera bacteria are attached. The weight of cloth varies; cloth should be thick so it can remove more dirt. The use of cloth reduces the turbidity of the water, but the water still needs a full treatment of chlorine.
- Settling and Decanting. In this method, water sits for 2 to 24 hours until all of the particles settle to the bottom of the container. The clear water is decanted (poured into another bucket), leaving the settled residue. This method reduces both turbidity and the amount of chlorine needed to purify the water.

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10 Urban MNCH Baseline Survey Kibera Slum. Concern World Wide 2014 Email communication.
11 Preventing Diarrheal Disease in Developing countries: Simple Options to Remove Turbidity (January 2009) CDC USAID.
Cooking water

- Water used for cooking should also be purified. The only time when unpurified water can be used in cooking is if the water (while cooking) boils for 15 minutes or more.

### Improved Water Storage (Picture 4.3) – 10 Minutes

8. Show: What do you see in these pictures?

- Show the pictures on page 15 of the flipchart
Improved Water Storage (Picture 4.3)

Open storage containers let germs inside.

Serve water with a ladle. Protect the ladle from germs.

Pour water from the capped storage container. This water is protected.

Drinking from the dipping cup adds germs from dirty hands to the purified water.
9. Explain
Carry your water in a container with a lid to keep out germs.
   - Purify a portion for drinking once you reach home.
Store treated drinking water in a leaky tin.
   - Serve by pouring the water from the tap on the leaky tin into a clean cup or container
   - This keeps children’s hands and other contaminants from getting into the water.
Clean the storage container and the purification materials weekly.
   - This includes any filters, utensils and cups or ladles.
   - This prevents germs from growing inside the container.
How often should we clean our water storage containers?
   - At least once a week with soap. Rinse with purified water.
Other than drinking water, what other water should be purified?
   - Water used to wash fruits or uncooked foods.
   - Water used for quick cooking. Water must boil for at least 10 minutes to kill germs.
   - Water used to clean a newborn child.
   - Water used to clean a wound.

Asking the caretaker to give baby only treated water (Picture 4.5) – 10 Minutes

10. Story: Mrs. Mwanza
   - Read the story on page 16 of the flipchart.

   Halima was talking with her mother Patience about the conversation she had with the man selling the WaterGuard. Patience thought about what her daughter said, and then explained.
   “Listen Halima. Our neighborhood is much more crowded now than it was just a few years ago. So sicknesses can spread much more easily now. You have to be even more careful with your babies than I had to be with you. You need to treat your water even if it looks clean when you draw it from the water kiosk. It would make me very happy if you would make sure that my grandbabies ONLY drink water that has been treated.”

   Halima said: “Mother, I can do this while I’m at home with the baby. But when I have to go into town to work I have to leave her with Ms. Mwanza who takes care of the little babies during the day while their mothers work. I can’t really make sure that the baby only drinks treated water when she is with Ms. Mwanza.”

11. Show: What do you see in these pictures?
   - Show the pictures on page 16 of the flipchart.
Halima’s mother and her friends are all very pleased with Halima for making sure that her baby only drinks treated water.

When Halima leaves her baby with Ms. Mwanza she leaves a bottle of treated water for the baby to drink.
12. Ask and Listen

- What can Patience suggest to Halima, to make sure her children get only treated water when they are with Mrs. Mwanza?
- If her baby drinks treated water, can we be sure that she will not get diarrhea?

13. Activity: Water Taste Test – 10 Minutes

Supplies needed:
- Liter of water purified with chlorine (demonstrated during the lesson)
- Liter of cool water purified by boiling
- Drinking cups for each woman

- Give each woman a sample of boiled water.
- Give each woman a sample of water purified with chlorine.

? Which water tastes better?

- Discuss the positive and negative of each method including taste, cost, and ease of preparation.
- Encourage each woman to choose one method which she can use in her home to purify water. Either method is effective.
- Review the steps for adding chlorine until everyone can do it correctly. Review the steps for boiling and letting water cool. Answer questions.
Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed.

### 14. Ask and Listen – 10 Minutes

- What do you think about these ideas?
- Do you think this advice would be difficult to follow?
- Is there anything that might stop you from following this guidance?

### 15. Identify and Discuss Obstacles – 15 Minutes

- What do you think of these ideas? What do you think of these ideas? Is there anything that might prevent you from following the practices we have discussed today?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed. Help find solutions to their concerns. Encourage them to try these new practices. If a woman offers a good solution to another woman’s concern, praise her and encourage other mothers to consider using this solution when they talk with others.

### 15. Practice and Coaching – 15 Minutes

1. Ask Care Group Volunteers to share the teachings they have learned today using the flipchart pages covered. They should share with another woman in the care group using the ASPIRE method.
2. Tell the Care Group Volunteers listening to the message that they should give one objection to the lesson; one reason that they think this message would be difficult for them.
3. The Care Group Volunteers sharing the message should try to help the women overcome this obstacle.
4. After ten minutes, ask the women to switch roles.
5. The Promoter should watch, correct, and help the Care Group Volunteers who are having trouble.
6. When everyone is finished, answer any questions that the mothers have about the materials, or today’s lesson.
Ask each Care Group Volunteer: Are you willing to commit to following the new practices that we discussed today?

Ask mothers to give a verbal declaration that they will commit.

For example:

- *I commit to drawing water only from a water kiosk or other clean source.*
- *I commit to buying WaterGuard to add to my drinking water.*
- *I commit to making a tight lid for my water pot.*
- *I commit to purifying my drinking water by boiling.*
Lesson 5: Use of Latrines and Proper Disposal of Feces

Objectives

- Caregivers will dispose of child feces in a latrine.
- Caregivers will have their young child defecate into a container (potty) if it is not practical to use the latrine.
- Caregivers will wash the container and their hands with soap and water after the feces are disposed.
- Caregivers will immediately wash the child’s hands with soap after the child defecates or uses the latrine.
- Caregivers will always defecate in a latrine and will encourage their other family members to do so as well.
- Caregivers and other family members will defecate into a container if it is not practical for them to use the latrine.
- Caregivers will wash their hands with soap and water for 20 seconds immediately after defecating or after helping a small child to defecate.

Materials:

- Attendance Registers
- Essential Hygiene Actions Flipchart

Summary

- Game: Catch the Fly
- Attendance and Troubleshooting
- Share the story: Feces in the Yard
- Ask about current practices
- Share the meaning of each Picture Box in the flipchart: Feces in the Yard; Germ Transmission; Improving Feces Disposal
- Activity: Feces Walk
- Discuss Barriers
- Practice and Coaching in pairs
- Request Commitments
1. Game: Catch the Fly – 10 minutes

- Ask the women to stand in pairs.
- In this game, one woman is a fly and the other woman is a fly trap.
- The fly trap holds out one of her hands, palm up, at waist level.
- The person who is a fly points with her index finger down towards the other woman’s palm. The tip of her finger lightly touches the palm of the fly trap.
- The fly trap tries to close her fingers onto the fly, catching the woman’s finger. She cannot move her arm or other hand, only close her fingers trying to grasp the other woman’s finger. Each time she misses, she must open her hand again letting the fly land, lightly touching her palm.
- If the fly is caught, the women switch roles.
- Continue for several minutes until everyone is laughing.

Now, let’s begin today’s session.

2. Attendance and Troubleshooting – 15 minutes

When teaching Care Group Volunteers (Mother Leaders):

19. Promoter fills out attendance sheets for each CGV and neighbor group (beneficiary group).
20. Promoter fills out vital events mentioned by each CGV (new births, new pregnancies [if on the form], and mother and child deaths).
21. Promoter asks if any of the CGVs had problems meeting with their neighbors.
22. The Promoter offers advice on how to solve the problems mentioned.
23. The Promoter asks the CGVs to review the key practices from the last lesson.
24. The Promoter asks the CGVs about their commitments from the last meeting and follows up with those who had difficulty trying out new practices.

? What was your commitment at the last lesson? Have you been able to keep that commitment?
? What did you do?
  o Did anyone (spouse, grandmother or children) interfere or tell you not to follow your commitments? Tell the story of what happened.
  o What factors (people, events or chores) in your life made it difficult to keep your commitments?
  o How were you able to overcome these problems?

25. Promoter thanks all of the CGVs for their hard work and encourages them to continue.
26. Promoter encourages CGVs to have a sense of pride that they are protecting the health of their communities by reinforcing messages and commitments.

27. Promoter asks the group’s Activity Leader to discuss the needed items for next week’s activity (based on the Promoter’s conversation with her prior to this meeting) and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #5 in this module.)

When CGVs teach their Neighbors:

11. CGVs will take attendance.

12. CGVs will ask about new births, pregnancies (if this is kept on the form), mother and child deaths, and illnesses in the families of the mothers attending and will help refer those with severe illness to the local health facility.

13. CGVs will ask the mothers to review the key practices from the last lesson.

14. CGVs will ask the neighbor mothers about their commitments from the last meeting and follow up with those who had difficulty trying out new practices.

15. CGV asks the group’s Activity Leader to discuss the needed items for next week’s activity and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #5 in this module.)

3. Share the story – 5 minutes

Story: Feces in the Yard (Picture 5.1)

Halima goes to a community meeting. At the meeting, Halima’s hears an important woman speak about keeping the community clean. In the afternoon, the community leaders walk around the community. They stop near Halima’s home. The woman from the meeting points to the feces just outside of the entrance. “Whose compound is this one? Don’t they have a latrine? There are feces everywhere.” Halima suddenly notices the feces too.
Halima goes to a community meeting. At the meeting, Halima’s hears an important woman speak about keeping the community clean.

In the afternoon, the community leaders walk around the community. They stop near Halima’s home. The woman from the meeting points to the feces just outside of the entrance. “Whose compound is this one? Don’t they have a latrine? There are feces everywhere.” Halima suddenly notices the feces too.
• Ask the first question to discuss the story and Halima’s embarrassment.
  o We hope the mothers respond in the way: Halima is embarrassed because a community leader has come to her compound and shamed her by pointing to the feces in her compound. Halima knew that there were feces in the compound, but she did not think this was bad. This morning she heard a presentation in the community about hygiene. She realizes that she needs to make a change.
• Ask the second question to let the women discuss where most people defecate in the community.
  o Some may defecate behind a wall. Some women may have a latrine. Others may defecate in their compound, or some may use a “flying toilet”.
• Ask the last question to hear about the practices of the women in your group.
• Encourage discussion. Don’t correct “wrong answers.” Let everyone give an opinion. This page is for discussion, not for teaching.
• After the participants answer the last question, move to the next flipchart page by saying, “Let compare your ideas with the messages on the following pages.”

Germ Transmission (Picture 5.2)

5. Show: What do you see in these pictures? – 5 minutes
Feces are full of germs.

Germs from dirty fingers are in the child's mouth.

Germs from the flies are in the child's mouth.

Germs from dirty fingers are in the drinking water.

Swallowing germs from feces causes diarrhea and sickness.

---

6 Explain
Germs are tiny animals that we can’t see. They live in the soil and environment around us, but we can’t see them! They are too small to see with our eyes.

- The picture shows us germs that we usually can’t see.

Germs can be passed into our body in 5 ways (5 F’s):

- By drinking contaminated fluids (fluids with germs in them).
- Eating contaminated foods.
- Eating off fingers contaminated by
  - feces or
  - flies.

When these germs get into a child’s body, the child can get diarrhea.

- Feces are full of germs.
- Germs from the child’s feces are on his hand.
  - Germs from dirty fingers are in the child’s mouth.
  - The feces on his fingers are now in his mouth.
- Flies land on feces.
  - Germs from the feces stick to their legs.
  - When they land on food, they add germs to the food.
  - Germs from the flies are in the child’s mouth.
  - This child is swallowing these germs.
- Germs from dirty fingers are in the drinking water.
  - The drinking water is no longer clean.
  - Germs are floating on the water.
- Swallowing germs from feces causes diarrhea and sickness.
  - Now the child has diarrhea.
  - The germs have made him sick.

What are the five ways that germs get into the body?

Fingers, fluids, flies, food and feces

What is one thing the child’s mother could have done to prevent this sickness?

Wash the child’s hands after he defecated.

Additional Information for the Trainer
Baseline Data
- Of the Kibera households interviewed at the baseline, X% said they defecated in the open or used a “flying toilet”.

Lesson 5: Use of Latrines and Proper Disposal of Feces
Improving Feces Disposal (Picture 5.3)

7. Show: What do you see in these pictures? – 5 minutes
### Improving Feces Disposal (Picture 5.3)

<table>
<thead>
<tr>
<th>Image 1</th>
<th>Image 2</th>
<th>Image 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Picture of child squatting]</td>
<td>![Picture of child emptying feces into a latrine]</td>
<td>![Picture of child washing pot]</td>
</tr>
</tbody>
</table>

- **Feces contain germs that have been excreted from the body.**
- **If the child uses a pot, empty the feces into a latrine immediately.**
- **Wash the pot after each use.**

<table>
<thead>
<tr>
<th>Image 4</th>
<th>Image 5</th>
<th>Image 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Picture of hands washing]</td>
<td>![Crossed-out latrine]</td>
<td>![Latrine partially covered]</td>
</tr>
</tbody>
</table>

- **Wash your hands and your child’s hands with soap and water for 30 seconds.**
- **Always keep the latrine opening covered when you are not using it to keep flies out.**

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Lesson 5: Use of Latrines and Proper Disposal of Feces
8. Explain

- Feces on the ground or in open containers spread germs to others.
  - Flies will come to feed on the feces. They can breed there and carry germs to other places.
  - Animals will feed on the feces.
  - Worms in feces can crawl into the soil and infect others.
- Latrines help prevent germs from spreading.
  - If possible, use a latrine that is sealed/covered. This is the best kind for avoiding germs and disease.
  - Open latrines are not ideal. They allow flies to breed and carry germs to others.
- If you or your family member cannot get to a latrine (for example, because it’s nighttime or the child is small and cannot wait), use a bucket or pot with a lid.
  - Empty the feces from the container into a latrine as soon as possible. This will help protect your household from germs.
  - Wash the pot or bucket with soap after each use.
- Remember to wash your hands (and your child’s hands) with soap and water for 20 seconds after going to the latrine or cleaning up feces.

What method do you use to dispose of feces? Which of these latrines looks like the one you typically use? How can you improve the way you dispose of child feces?

Additional Information for the Trainer

Bacteria

- There are good and bad bacteria, just as there are good and bad (poisonous) plants. We have good bacteria inside our stomach that helps to break down and digest foods. Without these bacteria we would not survive.
- There are also small amounts of bad bacteria (poisons) in our stomach and intestine. If there are too many bad bacteria in our stomach and intestines (by ingesting too many germs), sickness develops.
- The bad bacteria attack the cells that make up our intestines, destroying them and causing inflammation, diarrhea and other symptoms.
- Both the good and bad bacteria are excreted with our feces.
1. Visit the households of some of the women in your group.
2. Ask them to take you to the places where people defecate. If the households use an open area for defecation, walk to this area.
3. Spend as much time as possible in the open defecation areas asking questions. People will become very uncomfortable standing with the open defecation and smell. The longer you are able to stand and ask questions about the feces the better. This will trigger them to take action and increase the social pressure for others to change too.13

4. Draw attention to the chickens and other animals that are eating or lying near the feces.
5. Visit several latrines on your way.
   - Are the people using the latrine? Why not? Is it clean? Does it have a lid? Does it have a hand washing station?
6. Ask the women to discuss what they have learned from the village walk.

10. Ask and Listen – 10 minutes

? Ask the children in the group, Where do you defecate?
? Are there rules about where people can defecate in your village? Do people follow these rules? What happens if they don’t follow the rules?
? Pointing to fresh feces ask, Do you see any living things on the feces (mosquitoes, flies, maggots, insects, etc.)? Are these the same flies that land on your food? Do you think they carry feces with them into your house?
? Do all the feces look the same? Why not?” Point out the number of watery feces in the area.

11. Identify and Discuss Obstacles – 15 minutes

- What do you think of these ideas? Is there anything that might prevent you from following the practices we have discussed today?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed. Help find solutions to their concerns. Encourage them to try these new practices. If a woman offers a good solution to another woman’s concern, praise her and encourage other mothers to consider using this solution when they talk with others.

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share barriers and concerns they have about the new teaching. Together they should try to find solutions to these barriers. After five minutes, ask the women to share what they have discussed.

Help find solutions to their concerns. If a woman offers a good solution to another woman’s concern, praise her and encourage others to consider this solution.

12. Practice and Coaching – 20 minutes

For Leader Mother Groups:
1. Ask each Leader Mother to share the teachings she has learned with the person sitting next to her. She will use the first two flipchart pages of today’s lesson.
2. Each Leader Mother will teach the person next to her in the same way that the promoter taught her.
3. After ten minutes, ask the women to switch roles. The other Leader Mother will share the teachings from the third and fourth pages of the lesson.
4. The Promoter watches, corrects, and helps Leader Mothers who are having trouble.
5. When everyone is finished, answer any questions that the Leader Mothers have about today’s lesson.

For Neighbor Groups:
6. Ask each woman to review the key messages she has learned from today’s teaching with the person sitting next to her. Ask them to share in pairs what new things they will do in their home based on this new teaching.
Ask each Care Group Volunteer: Are you willing to commit to following the new practices that we discussed today?

Ask each mother to say aloud a new commitment that she will make today.

For example:

- *I will talk with the men in my compound about building a latrine.*
- *I will talk to the village council about the problem of open defecation in our village and work with them to find a solution for the disposal of feces.*
- *I will get a potty and teach my older children how to make sure my toddler uses it.*
Lesson 6: Healthy Play Areas

- Caregivers will provide a play space for children under two years old that is clean lean mat for children to play on to prevent them from eating soil or feces.
- Caregivers will clean and sanitize the play mat once a week and whenever it is soiled with food or dirt:
  - First clean the play mat by scrubbing with soap and water.
  - After it has been cleaned, sanitize the play mat by mixing a tablespoon of bleach (15 ml) with a four litres of water. Rub this thoroughly over the surface of the play mat.
- Caregivers will clean and sanitize toys and other items that babies frequently stick in their mouths at least two or three times per week and: each time you notice that they are soiled with food or dirt; when the baby is recovering from an illness; and when other children have put the items in their mouth
- When Caregivers leave their child at a day care center, they will encourage the care takers to use clean mats and to clean and sanitize mats and toys regularly.
- Caregivers will keep household livestock (such as chickens or rabbits) in pens or cages to keep animal feces away from children

Materials:
- Attendance Registers
- Essential Hygiene Actions Flipchart

Summary
- Game: Germ in the Circle
- Attendance and Troubleshooting
- Story: Francis gets sick – 5 minutes
- Ask and Listen: Why did Francis get sick?
- Show: What do you see in these pictures?
- Ask and Listen: What could Halima do to protect Francis from the germs that come from feces?
- Show: What do you see in these pictures?
- Ask and Listen: Safe places for a baby to play
- Show: What do you see in these pictures? (Keeping the Play Area Clean)
- Activity: The Cost of Diarrhea
- Identify and Discuss Obstacles
- Practice and Coaching
- Ask for a Commitment
Lesson 6: Healthy Play Areas

1. **Game: Germ in the Circle – 10 minutes**

1. Ask the women to stand in a circle. Choose a volunteer to stand in the middle of the circle.
2. Tie a piece of cloth over the volunteer’s eyes so they cannot see.
3. Explain: The circle is a compound. The volunteer in the middle is a diarrhea-causing germ. In order to prevent sickness, you want to stay away from the germ!
4. The game begins when “the germ” calls out two women’s names from the group.
5. These two women must quietly change places with each other, while keeping away from “the germ.” “The germ” tries to touch the players as they pass by listening and reaching out for them.
6. If someone is tagged, they become “the germ” and the game is repeated.
7. Repeat the game so that everyone has a chance to play.

Now that we are energized, let’s begin our lesson.

2. **Attendance and Troubleshooting – 10 minutes**

When teaching Care Group Volunteers:

1. Promoter fills out attendance sheets for each CGV and neighbor group (beneficiary group).
2. Promoter fills out vital events mentioned by each CGV (new births, new pregnancies [if on the form], and mother and child deaths).
3. Promoter asks if any of the CGVs had problems meeting with their neighbors.
4. The Promoter offers advice on how to solve the problems mentioned.
5. The Promoter asks the CGVs to review the key practices from the last lesson.
6. The Promoter asks the CGVs about their commitments from the last meeting and follows up with those who had difficulty trying out new practices.

What was your commitment at the last lesson? Have you been able to keep that commitment?

What did you do?

- Did anyone (spouse, grandmother or children) interfere or tell you not to follow your commitments? Tell the story of what happened.
- What factors (people, events or chores) in your life made it difficult to keep your commitments?
- How were you able to overcome these problems?
7. Promoter thanks all of the CGVs for their hard work and encourages them to continue.

8. Promoter encourages CGVs to have a sense of pride that they are protecting the health of their communities by reinforcing messages and commitments.

9. Promoter asks the group’s Activity Leader to discuss the needed items for next week’s activity (based on the Promoter’s conversation with her prior to this meeting) and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #4 in this module.)

When CGVs teach their Neighbors:

16. CGVs will take attendance.

17. CGVs will ask about new births, pregnancies (if this is kept on the form), mother and child deaths, and illnesses in the families of the mothers attending and will help refer those with severe illness to the local health facility.

18. CGVs will ask the mothers to review the key practices from the last lesson.

19. CGVs will ask the neighbor mothers about their commitments from the last meeting and follow up with those who had difficulty trying out new practices.

CGV asks the group’s Activity Leader to discuss the needed items for next week’s activity and solicit volunteers. (Note: No additional materials are needed for Lesson Plan #4 in this module.)

3. Story: Francis Gets Sick (Picture 6.1) – 5 minutes

Halima’s infant son, Francis, is becoming more curious and wants to touch everything and put things in his mouth. He plays on the ground in front of their home while Halima does chores, exploring and touching everything in his vicinity. There are chicken feces on the ground. When Halima is not looking, Francis puts dirt in his mouth. The next day he is crying from stomach pain and has diarrhea.

4. Show: What do you see in these pictures? – 5 minutes
Story: Francis Gets Sick (Picture 6.1)
5. Ask and Listen – 10 minutes

Where do your young infants usually play at home?

- Ask the first question to hear what the women believed caused Francis to become sick.
  - We hope the women respond in this way: Francis became sick because he put his hand in his mouth after it touched the chicken feces.
- Ask the second question to hear from the mothers about where their young children normally play when they are at home.
- After the participants answer the last question, move to the next flipchart page by saying, “Let’s look at this problem a little more closely with the picture on the following page.”

6. Show: What do you see in these pictures? – 5 minutes
Traffic of Dirt (Picture 6.2)
8. Ask and Listen – 10 minutes

? What could Halima do to protect Francis from the germs that come from feces?

- Ask the question to hear the mothers’ opinions about what mothers can do to protect their small child from animal feces and other harmful things as they play and explore.
- Encourage discussion. Don’t correct “wrong answers.” Let everyone give an opinion. This page is for discussion.
- Then say, “Let’s see how your suggestions compare to the information on the following pages”

8. Explain

- Human and animal feet track all sorts of germs from feces through the dirt and into our home.
  - This may include animal feces, or human feces that were not properly disposed of.
  - Here the contamination from feces are indicated in black.
- Swallowing feces or food or water that have been contaminated with feces will cause diarrhea.
- By playing in the dirt and putting their hands in their mouth without washing them, children can get diarrhea.
  - Diarrhea interferes with the infant’s healthy growth and development.
- Swallowing animal feces or food or water that have been contaminated with feces can harm a child even if she does not get diarrhea.
  - Feces contain lots of harmful germs, ESPECIALLY chicken feces.
  - When babies and small children swallow germs that hurt their stomach and intestines, they may become malnourished.
  - This is because the nutrients that come from the food they eat get used up fighting off infections instead of being used to help them grow the way they need to.

Additional Information for the Trainer

- Babies and small children who live in poor sanitary conditions are much more likely to become stunted (too short for their age) than are children who live in good sanitary conditions. Chicken feces and human feces contain more harmful germs than feces from other animals. So it is especially important to keep chickens away from small children. Swallowing germs from feces irritates the intestines of small children. When this happens, the child’s intestines may not absorb as many nutrients from the food that she eats. Also, when the intestines become irritated, germs can pass very easily from the intestines into the blood. This causes the body to use up many nutrients to fight off these germs rather than to help the child’s body grow the way it should. THIS CAN HAPPEN EVEN WHEN THE CHILD DOES NOT LOOK OR FEEL SICK. Many organizations around the world are now beginning to help caregivers to protect their children from poor sanitary conditions in order to reduce the chance that their child will become stunted.
9. Show: What do you see in these pictures? – 5 minutes
Providing a Healthy Play Area (Picture 6.3)
10. Explain
- Play is an important part of babies’ and young children’s development
- In order to keep your baby healthy, you can provide a clean and safe play space
- Choose a place for infants and young children to play that is:
  o Within eyesight of a caregiver
  o Safe from dangers such as fires or hot surfaces, sharp objects, standing water, etc.
  o Separate from where chickens and other animals roam
  o At least 10m from the latrine or place where the family disposes of feces
- Use a play mat (or lesso) to prevent children from eating soil or feces
  o The play mat shields baby from fecal matter and germs on the ground
- If you have to leave your child at a day care center, encourage the care takers to use clean mats and to clean and sanitize mats and toys regularly.
- If you have household livestock (such as chickens or rabbits), keep them in pens or cages to keep animal feces away from children

10. Ask and Listen – 5 minutes
- What are some ways that you play with your infants and young children at home?
- What would you use as a play mat?

12. Show: What do you see in these pictures? – 5 minutes
Keeping the Play Area Clean (Picture 6.4)
13. Explain

- Clean and sanitize the play mat once a week and whenever it is soiled with food or dirt:
  - First clean the play mat by scrubbing with soap and water.
  - After it has been cleaned, sanitize the play mat by mixing a tablespoon of bleach (15 ml) with a four litres of water. Rub this thoroughly over the surface of the play mat.

- Clean and sanitize toys and other items that babies frequently stick in their mouths at least two or three times per week and at key times:
  - Each time you notice they’re soiled with food or dirt
  - When your baby is recovering from an illness
  - When other children have put the items in their mouth


1. Choose a literate mother to help write down the costs for each item below. She can write on paper.

2. Ask the mothers how much money is needed to care for diarrhea. If mothers give different costs for an item, use the most common amount mentioned.
   - What is the cost for one trip to the clinic?
   - What is the cost of one sachet of oral rehydration salts?
   - What is the cost of the extra food needed to help the child recover during and after illness (a total of three weeks)?
   - Do you lose income from caring for a sick child? How much money is lost if you miss one week’s work for people who work in jobs like yours?
   - For example. If I can’t sell fruit in the market for one week, how much money would I lose?
   - Write down other costs mentioned by the mothers.
   - Add all of the costs together to get the total cost of one child’s diarrhea.

3. Ask, how often does a child have diarrhea in one year?
   - Multiply the total cost by this number.
   - This is the “price” of caring for one child’s diarrhea in one year.

4. Now discuss child health. What is the cost of caring for a healthy child?
   - Do you need medication for a healthy child? (no)
   - Do you have to feed a healthy child extra snacks to help them recover? (no)
   - Do you lose income caring for a healthy child? (no)
   - What is the cost of a lesso or a play mat (Promoter should have these costs ready before the lesson)?
   - What is the cost of soap and chlorine for disinfecting a play mat and toys?
   - What is the cost of building a small chicken pen with bamboo or sticks?

5. Compare the “price” of sickness to the “price” of health. Which costs more, sickness or health?
6. Reinforce the principle that a small amount of prevention saves a lot of money that would have been needed for treatment. Being healthy saves money. Sickness increases poverty.

15. Identify and Discuss Obstacles – 15 minutes

- What do you think of these ideas? What do you think of these ideas? Is there anything that might prevent you from following the practices we have discussed today?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these practices. Together they should try to find solutions to these worries and problems. After five minutes, ask the Care Group Volunteers to share what they have discussed. Help find solutions to their concerns. Encourage them to try these new practices. If a woman offers a good solution to another woman’s concern, praise her and encourage other mothers to consider using this solution when they talk with others.

11. Practice and Coaching – 20 minutes

For Groups of CGV:
7. Ask each CGV to share the teachings she has learned with the person sitting next to her. She will use the first two flipchart pages of today’s lesson.
8. Each CGV will teach the person next to her in the same way that the promoter taught her.
9. After ten minutes, ask the women to switch roles. The other CGV will share the teachings from the third and fourth pages of the lesson.
10. The Promoter watches, corrects, and helps CGVs who are having trouble.
11. When everyone is finished, answer any questions that the CGVs have about today’s lesson.

For Neighbor Groups:
12. Ask each woman to review the key messages she has learned from today’s teaching with the person sitting next to her. Ask them to share in pairs what new things they will do in their home based on this new teaching.
Ask each Care Group Volunteer: Are you willing to commit to following the new practices that we discussed today?

Ask each mother to say aloud a new commitment that she will make today.

For example:

- I will get a lesso or play mat for my child to play on.
- I will wash and disinfect my child’s toys with soap and then with chlorine
- I will pen my chickens to keep them away from my children and from my neighbor’s children