

ARE YOUR SCHOOL-GOING
KIDS & TEENAGERS
HAVING PROPER
WASH!?

Water
And
Sanitary
Hygiene

WASH (Water and Sanitary Hygiene)

Intervention Program

by Naihati ProLife

A Success Story

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naihati proLife – where life changes

Naihati ProLife is a non-profit non-governmental organisation headquartered at Naihati, 24 Parganas (North). Its registration number is: 587681. You can find us at www.naihatiproLife.org and also at 151 Mitrapara Road, P.O.- Naihati, Dist.- 24 Parganas (N), West Bengal, India, PIN – 743165, by email: nproLife@rediffmail.com and by Phone: (+91) 33-2581-5056

We started our journey in 1995.

In 1999, somehow the DFID (UK) spotted our activities and chose us as a recipient organisation; they became our first donor organisation. Later we got such sponsors as the ILO, Water Aid International, Water For People, The Loreto (School) etcetera and many governmental bodies of Govt of West Bengal and Govt of India.

We work mainly in the spheres of:

- Providing Safe Drinking Water (Arsenic - Free) System in Schools
- Water and Sanitary Hygiene implementation in Schools
- Basic Education of Underprivileged Children (who are mainly ST and SC) of the Migrant Labourers in brick-Fields
- TB (tuberculosis bacilli) Awareness Programme, Counselling along with Patient Searching & Referring, Patient-Tracking
- HIV/AIDS Awareness Programme, Counselling, Running HIV Clinics
- Environmental Awareness Programme (including Sustainable & Organic Agriculture Awareness and Extension Service to farmers)
- Health & Mass awareness programme at different Municipality/Panchayat level (Drama & Magic shows *focusing both the Subject Matter and Target Audience*, Road Shows, Health Check-up Camps, Street-Corner Awareness Campaign)

Indian Donors to this organisation can access provisions under 80G of Income Tax Act. Foreign Donations get clearance by FCRA (Foreign Currency Regulation Act).

Introduction

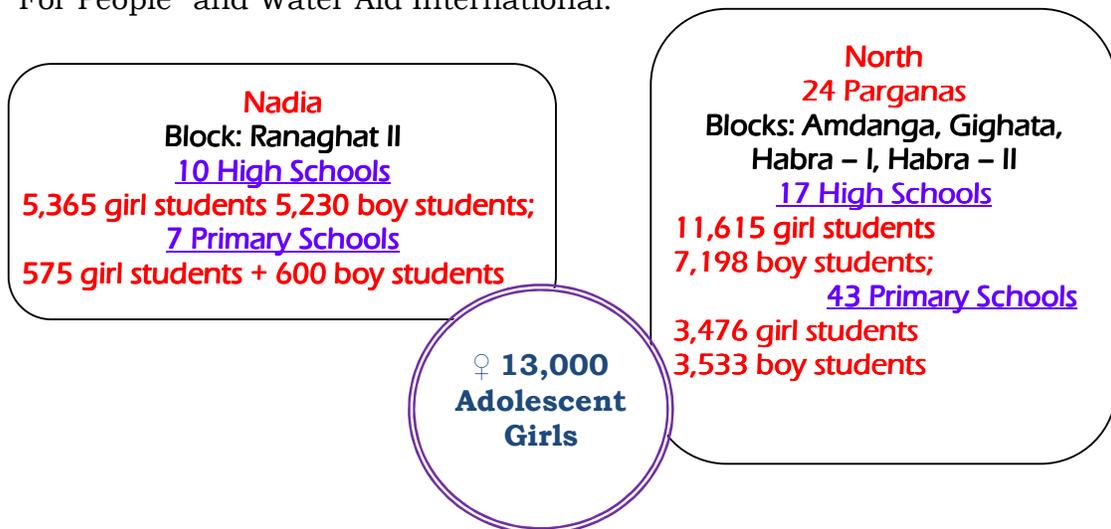
The WASH interventions by Naihati Prolife have yielded several success stories – scripted by the hard work and dedication of its team members. However the enthusiastic proactive involvement of the teachers and students of these schools have to be mentioned in the onset, without whose effort this programme could not have been such a huge success.

In all the schools the pre intervention scenario was more or less similar. Lack of proper sanitation infrastructure, lack of maintenance in cases wherever there were some facilities, marked absence of awareness of personal hygiene – especially among adolescent girls – were the standard observations. Special requirement of the girl students was such an issue that did not receive its due attention; needless to say that the prevailing social environ gives rise to some sort of embarrassment or hesitation among adolescent girl students to discuss this issue even with female teachers, this tradition needed to be addressed. This coupled with arsenic and iron contamination of drinking water created a nightmarish situation.

As a result of the above situation, instances of water borne diseases, insanitary condition and lack of menstrual management during school hours led to absenteeism thus affecting studies. The effect of the intervention was pronounced in the all cases.

Range of our Activity

Starting from 2009 May we are working as a partner organisation of “Water For People” and Water Aid International.



So, in total, we have worked among nearly thirty eight thousand students including nearly thirteen thousand adolescent girl students – not at all an insignificant number! Now, let us present some snippets of our experience.

What Changed

Let us take just a glimpse of the result; here we are quoting from one of our KAP (Knowledge, Awareness & Practice) Study for the year 2011-12:

- 96% at the primary level students and 100% at secondary respondents answered all the question related to water pollution correctly that shows the awareness level increased substantially among the students.
- 98% respondent told open defecation is an unhealthy practice.
- Habit of open field urination decreased from 38.68% to 1.05% among the respondents of the study.
- 62% Primary students and 86% secondary level students reported they always practice washing their hands before and after taking meals and using toilets.

**Within 1 Year
Boys' Open Field
Urination Habit
Decreased
from ≈ 39%
to ≈ 1% !!**



Iron & Arsenic Filters at a high school



A High School Boys' Toilet

*We have changed
We're changing*



**We Wash Our Hands
Before & After Meals**



**A meeting of WATSAN
(water & sanitation)
Committee
at a High School**



**High School Girl
Students are making
their sanitation plan
themselves**

ⓐ A grossly neglected field of hygiene and sanitation, largely as part of a social taboo or hesitation to discuss publicly, is **menstruational hygiene** of girl students. But here also change occurred. From the same KAP study we can see:

ⓐ Most significant change has been noticed in the attitude of the students on their concept on menstruation. During initiation of the project the rate of drop out among the respondent girls' students of this study was 67% but after the end of the programme the dropout rate decreased to 14%. It is a quite remarkable achievement among the students by providing menstrual hygiene education and providing them adequate water, proper change room facility within the school.

**Within 1 Year
Girls'
Absenteeism
during
'Period'
Dropped from
67% to 14%!**

ⓐ 98% of the respondent adolescent girls' students are now aware that menstruation is a natural physiological process though only 59% of them are now comfortable to discuss about issue with their teachers.

ⓐ In tabular form:

Menstruation is a topic that can't be discussed	Menstrual hygiene can be discussed with mother or other women member of the family	Menstrual Cycle is a secret issue but can be discussed with friends	Menstrual Cycle is not a secret issue, it should be discuss with all girls'	It is natural physiological process	Do you discuss the issue with your friends?
86%	100%	84%	59%	98%	92%

ⓐ We have helped in setting up "Change Rooms" in schools for teen-age girls where they can get napkins and dispose off used ones. We have also helped in installing incinerators for the used up nappies.



Girls' Change Rooms



Incinerator

What We Learnt

Though our near-2-decade experience of working as awareness augmenting activists in various fields and more than 3 years experience in this particular field can say a word or two –

- awareness campaign do yield result if done with enough motivation and zeal *plus, what is perhaps no less important*, hardware support must have to be provided; in other words, hygiene is not just consciousness, it is a conscious practice, and like all practice it also needs *things*;
- we rediscovered and re-learnt the already much known axiom: aesthetic sense also comes from concrete reality around the people; if the surrounding is beautiful it, in turn, imbues people to keep that surrounding beautiful;
- we re-realized that people have the power to change themselves and the surroundings and *the children possess this power in abundance*; though the scarcity around them pushes them to hygienically-misbehave. *But once trained and got the taste of good life they tend to assimilate the good practices deep inside.*

What We Can Do Here

- Ⓒ We can work as Awareness Augmenting Activists in the schools in the sphere of Personal & Social Hygiene and *show concrete result in one year* as we have done elsewhere;
- Ⓒ We can prepare batches of students who will work as the Peer Group and initial WATSAN (water & sanitary) Committee, later this committee can be reconstituted by the teachers and students with the aim of participation of all in the working committee level;
- Ⓒ We can install ■ Hygienic (& Aesthetic) Drinking Water Platforms, ■ Washing Platforms for hand-washing and/or utensil-washing, ■ Sanitary Urinals and Toilets (Boys/Girls) and ■ Change Rooms for Girl students – *all at competing/low cost*;
- Ⓒ We can install and maintain Arsenic Filters and Iron Filters; and so on so forth in the domain of Hygiene and Environment.



Give
Hygiene
A Chance

