



POLICY BRIEF:

Water, Sanitation, and Hygiene in Schools

KEY MESSAGES:

- Inadequate Water, Sanitation, and Hygiene (WASH) facilities in schools negatively impact health, attendance, learning and development outcomes of children, specifically for girls and children with disabilities. The Sustainable Development Goals include targets that emphasize the need for WASH in schools.
- In Tajikistan, school WASH facilities need improvement and upgrading: only 44 percent have access to improved sanitation facilities that are single-sex and usable, and a mere 26 percent have water and soap available at handwashing stations close to toilets.
- While hygiene is formally taught, behaviors, such as handwashing with soap, are not systematically practiced in the school environment; education on menstrual health and hygiene remains an unaddressed issue.
- This calls for interventions that comprehensively address the following areas: i) WASH infrastructure and service provision; ii) communication and education for adoption of hygiene behaviors and for supporting girls' menstrual health, and iii) an enabling policy and programming environment to sustain social change.
- Improving the enabling environment for WASH in schools requires better coordination, dedicated financing, capacity building, and monitoring of results.



This policy brief aims to bring together policy makers, development partners and implementing agencies to advance the WASH-in-schools' agenda in Tajikistan. In June 2019, the World Bank and UNICEF carried out a rapid assessment¹³ to evaluate the status WASH in schools, particularly looking at the specific needs of girls. As a result, this note highlights key challenges and makes recommendations to improve the WASH in school situation in Tajikistan.

Why Water, Sanitation and Hygiene (WASH) in Schools matters

Available evidence¹ highlights the critical contribution of WASH to development outcomes for children, specifically, in reducing child diseases, undernutrition and school attendance. In Tajikistan lack of safe drinking water and sanitation contribute to 25 percent of students missing or dropping out of school². Malnutrition and disease burden are directly related to unsafe water and sanitation and poor hygiene practices. A recent analysis from both developed and developing countries shows that investments in WASH during the early years of children helps prevent gut inflammation³, anemia and stunting⁴, yielding benefits to families, societies and countries. The importance of WASH in schools has been recognized globally by its inclusion in the Sustainable Development Goals (SDGs) targets 4.a, 6.1, 6.2 as critical components of a safe, non-violent, inclusive and effective learning environment and as part of achieving universal WASH access⁵. Tajikistan committed to achievement of the SDGs and recognized the presence of WASH facilities as important favorable learning conditions in schools in its National Development Strategy 2030 with commitment to SDGs related targets defined in its National Programme for Children.



WASH in Schools Situation in Tajikistan

WASH in Schools (WinS) is the term used for a package of child- friendly school interventions that aim to provide access to improved drinking water, sanitation, and hygiene facilities along with hygiene promotion. This seeks to improve the health and wellbeing of children, enhance girls' school attendance, boost educational achievement, and promote gender equity.

In Tajikistan, 79 percent of schools have access to drinking water from an improved source⁷, only 44 percent have access to improved⁸ sanitation facilities that are single-sex, usable, private and functional. In terms of hygiene, only one in four schools have water and soap available at handwashing stations⁹. This lack of infrastructure, services and products, like soap, results in poor WASH behaviors. Disparities also exist between urban and rural schools. For example, 27 percent of rural schools have pit latrines without a proper slab or simply open pits - versus just 11 percent in urban schools. On the contrary, while 31 percent of urban schools have flush toilets connected to a sewer, such facilities are not found in rural schools.

While the Tajik government is actively encouraging the inclusion of children with disabilities into regular schools, sectoral data suggests that less than 40 percent of identified children have access to education, only 32 percent of them are in mainstream schools, and 62 percent of children with disabilities enrolled in schools never or rarely use school latrines. This is mostly due to the poor quality or incompleteness of adjustments to make schools and their WASH facilities fully accessible¹⁰.

In addition to adequate and accessible infrastructure, of equal importance is to ensure that proper hygiene behaviors are regularly practiced in the school environment, as well as at home. Thus, broader behavior change and educational interventions should ensure that hygiene habits are taught, practiced, and integrated into daily school routines to establish a healthy and protective learning environment for children.



Situation of Menstrual Health and Hygiene in Tajikistan

Menstrual Health and Hygiene (MHH) is essential for the fulfilment of girls' and women's rights, a key objective of the SDGs. Goal 6.2 acknowledges the right to menstrual health and hygiene, with the explicit aim to pay special attention to the needs of women and girls. To achieve this goal, the need for safe and dignified menstruation requires deliberate interventions. However, inadequate information, cultural taboos, poverty and lack of basic services often cause girls' menstrual health and hygiene needs to go unmet. In Tajikistan, only one percent of schools have covered bins for disposal of menstrual hygiene waste, while only two percent of schools have water available in girls' cubicles for menstrual hygiene management¹¹. By strengthening self-efficacy and creating an enabling environment, MHH programs can help girls build the skills to overcome obstacles to their health, learning and development¹², and contribute to Tajikistan's goals for improving girls' health and well-being.



Challenges and Opportunities

Policy and Enabling Environment: Firstly, there are no specific WASH in School policies or guidelines for schools on effective strategies to improve WASH behaviors. While basic hygiene practices are covered as part of the life skills curriculum for lower primary grades, national guidance, including interactive tools and instruments, to promote WASH behaviors as part of extra-curricular activities, are lacking. Secondly, poor maintenance of WASH facilities including the observed absence of soap in the school environment can be ascribed to the lack of dedicated funds to support WASH services in schools and the low prioritization for such items in schools' discretionary budgets. Thirdly, while the national Education Management Information System (EMIS) collects some data on WASH infrastructure in schools, it lacks indicators on functionality, accessibility for children with disabilities and the presence of MHH facilities. Understanding the status of WASH facilities in schools is a necessary first step towards ensuring that rehabilitation and construction programs are inclusively addressing the priority needs of children in schools.

WASH Behavior Change Interventions in Schools: The assessment revealed that although children have adequate knowledge of basic hygiene practices like handwashing, this did not translate into the desired practice. Many schools typically lack the resources and facilities to create a conducive environment for children to practice WASH behaviors. For example, in Sughd, 75 percent of schools reported not having soap available, with 18 percent of school administrators not considering it necessary¹⁴. Students reported unwillingness to use school WASH facilities because they were dirty, smelly and lacked privacy. Existing interventions are focused mostly on knowledge and awareness and not behavior change. Efforts to promote hygiene remain fragmented and would require scale-up through a systematic, inclusive, and gender-sensitive approach to achieve behavior change.

Menstrual Health and Hygiene: MHH is embedded in a 'culture of silence' that prevents girls from managing their menstruation with safety, dignity, and privacy. The absence of an education policy, specifically addressing puberty, means that MHH is not systematically taught in schools. Moreover, teachers lack the skills and age-appropriate tools and materials to discuss the topic and create a supportive environment for girls to manage their period.



Recommendations Going Forward

Responding to the above challenges requires robust institutional mechanisms and capacities, particularly at the sub-national levels to address WASH in school infrastructure and behavior change. The following priority actions are proposed along three pillars.



I *Strengthening the Enabling Environment through Policy and Advocacy*

- *Mainstreaming of WASH in Schools in sector strategies and plans:* Increased coordination among the Ministries of Education and Science, Health and Social Protection, and Water Resources and Energy, State Committee for Women and Family Affairs, State Committee for Local Development and other agencies could help to explicitly include WASH in Schools in educational and preventative health policies and budget allocations. This will contribute to a safe learning environment for children. A good starting point would be including WASH in schools in the forthcoming National Educational Sector Plan.
- *Development of a national WASH in School Guideline:* The development of a national guideline on WASH in schools, approved by the Ministry of Education and Sport will be critical to ensuring high-quality and inclusive facilities are provided in schools and that MHH is covered in the formal curriculum as well as through extra-curriculum activities¹⁵.
- *Creation of supportive policies:* Enabling national policies are required for long-term sustainable change that impacts the access young girls have to infrastructure, products and information. These include the allocation of resources for WASH and MHM education, for maintenance of WASH facilities including soap and other products, and policies that limit taxation on sanitary products.



II *Improvements in WASH Infrastructure*

- *Investments in School WASH infrastructure:* This includes both rehabilitation/retrofitting of existing facilities in schools and kindergartens, as well as ensuring that new educational buildings are fitted with improved facilities accessible for children with disabilities. The facilities should be aligned with the requirements of the SDGs, including handwashing stations with water and soap at all times, separate toilet facilities that take into consideration the needs of girls and children with disabilities, and facilities and supplies to enable girls to manage their menstruation with dignity in school.
- *Monitoring of WASH facilities for sustainable access and use:* To allow progress monitoring, EMIS could be expanded to include comprehensive data on the status of WASH facilities, aligned with the definitions of the SDGs. Secondly, school administrations can be supported with user-friendly tools/checklist for proper operation and maintenance of facilities and encouraged to report WASH facility status to student councils and parent-teacher associations, so that issues can be immediately addressed.



III Behavior Change Communication and Education

- *Development of a WASH-MHH communication package for extra-curricular activities.* A nationally approved extra-curricular communication package, including child-centered and interactive learning tools, is required to promote positive WASH behaviors. Resources will be needed to support the training of school administrators and teachers to gradually roll-out such activities, optimally leveraging existing platforms, such as student councils and Centers for Additional Education.
- *Address behavioral and knowledge gaps in a multi-faceted way.* Various avenues can be used to mainstream MHH into the in-class curriculum as well as through extra-curricular mechanisms including engaging parents. Connecting school-led activities with community WASH behavior change will amplify the impact.
- *Investments in capacity development and skills training.* Outreach workers of the Healthy Lifestyle Center, teachers, and NGO partners require training to strengthen the quality of the services delivered.

Collective leadership of the concerned ministries is needed to address the above recommendations, with the coordinated support of development partners. As a first step it is foreseen that, under the leadership of the Ministry of Education and Science a group of experts will be tasked with supporting the operationalization of selected recommendations, with assistance of the World Bank, UNICEF as well as other partners.



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Endnotes

1. World Bank (2018) Water and Human Capital. Impacts along the Lifecycle.
2. UNICEF (2013) Tajikistan Country Study: Global Initiative on Out of School Children.
3. Referring to environmental enteropathy, which is a poorly defined state of intestinal inflammation without overt diarrhea. It occurs in individuals exposed over time to poor sanitation and hygiene.
4. UNICEF (2017) UNICEF Strategy for Early Childhood Development.
5. WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP) reports country, regional and global estimates of progress on drinking water, sanitation and hygiene (WASH) <https://washdata.org>
6. Improved meaning from piped water, tube well or borehole, protected dug well, protected spring or rainwater. This does not mean that the water is safely managed and free from contamination.
7. Improved meaning facilities that are likely hygienically separate excreta from human contact, meaning pit latrines with a slab, flush toilets to pit, septic tank or sewer and composting toilets. Single-sex means that there are separate toilet facilities for male and female students and teachers/staff. Usable means they are available (not locked or a key is always available), functional (toilet holes are not blocked; water is available for flush toilets), and private (lockable from inside and no large gaps in structure).
8. World Bank (2017) Glass Half Full: Poverty Diagnostic of Water Supply, Sanitation, and Hygiene Conditions in Tajikistan. WASH Poverty Diagnostic. World Bank, Washington, DC.
9. Government of Tajikistan and UNICEF, 2019, Assessment of the results of sub-component 2.3 of the fourth Global Partnership for Education Fund grant: Promoting inclusive education.
10. Idem.
11. UNICEF (2019) Global Guidance on Menstrual Health and Hygiene. New York.
12. The assessment methodology included a desk review of WinS/MHH documents, consultations with WASH and education sector partners. Focus group discussions in five urban and rural schools as well as key informant interviews with mothers, male and female teachers and representatives of the Ministry of Education and Sport, and the Healthy Lifestyle Centre.
13. World Bank, 2017, Glass Half Full: Poverty Diagnostic of Water Supply, Sanitation, and Hygiene Conditions in Tajikistan. World Bank, Washington, DC.
14. The life skills in-class curriculum for grades 11 and 12 are currently under revision, with the support of UNESCO. This provides an opportunity for the inclusion of puberty education and MHH.
15. See reference 7.