

UNICEF South Africa
Thematic Water, Sanitation and Hygiene Report
Reporting period: 1 January to 31 December 2016

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B. ABBREVIATIONS AND ACRONYMS

- BAT Bottleneck Analysis Tool
- CAPS Curriculum Assessment Policy Statements
- CHW Community Health Workers

CMT - Community Media Trust

DBE - Department of Basic Education

DWS - Department of Water and Sanitation

ECD - Early Childhood Development

NDoH - National Department of Health

WASH - Water Sanitation and Hygiene

C. EXECUTIVE SUMMARY

Water, Sanitation and Hygiene (WASH) is a cross cutting programme that contributes to improved health outcomes for children under five and children of school going age. The main strategies underpinning the delivery of WASH related interventions include capacity development of children and their caregivers on hygiene practices and evidence based

advocacy to influence policy and strategies. UNICEF South Africa has established and maintained strategic partnerships to deliver results for children. Such partnerships include the Department of Basic Education (DBE), the Department of Health (DOH) and Civil Society Organisations (CSOs). UNICEF is working in partnership with the Mpumalanga Department of Education to train 60 068 Grade R and 1 learners from 292 primary schools on handwashing with soap, oral hygiene and safe sanitation practices. The WASH component is part of the broader Care and Support for Teaching and Learning (CSTL) Programme in Mpumalanga province. CSTL is a coordinated multi-stakeholder response to address the socio-economic barriers to teaching and learning.

Work continued in 2016 towards finalization of the National hand washing and Behaviour Change Strategy which was approved in February 2017 by the National Technical committee in the Department of Health. Funding from the grant contributed to strengthening the community level capacity building for health and other outreach workers building on the work done in 2015. Hygiene and hand washing messages were incorporated in the 1000 days package for community workers. Importantly, hygiene promotion was linked to the ongoing district health system strengthening addressing system and community bottlenecks and prioritizing actions linked to results for improving maternal, newborn and child health and nutrition outcomes.

D. STRATEGIC CONTEXT OF 2016

The programmes implemented with the funding is directly linked to the UNICEF Global Strategic Plan Outcome 3 on WASH, with particular reference to increased capacity on WASH in Schools and Early Childhood development (ECD) programmes. WASH is also integral to the post 2015 Sustainable Development Goals (SDG) and impact directly on children's well-being and rights. It furthermore lays the foundation to achieve SDG3, SDG4 and SDG6 through ECD and basic education in South Africa. The inclusion and the promotion of WASH, specifically hand washing and hygiene in the curriculum for children in the foundation phase is essential against the reality that while in 2012, 63.1% of children (all ages) lived in dwellings with access to piped water within the dwelling or yard (compared to general population average

of 69.4%)¹, by 2015 this had deteriorated to 45.8% by 2015². On the other hand, only 36% of young children (ages 0-4) lived in households that have access to piped water within the dwelling in 2012 and a further 3% had piped water in the yard³. UNICEF's analysis shows that by 2015, 4 out of 10 children do not have access to piped water inside the dwelling or on site, and that among children in the poorest households just 50% have access to adequate sanitation.⁴ Out of 23,589 schools, 452 schools have no water supply and 4,773 schools have unreliable water supply⁵. Similarly, 70.6% of children (all ages) lived in dwellings with a flush toilet (compared to the general population average of 75.2%)⁶. Only 48% of young children (ages 0-4) had access to a flush toilet and 1% to a chemical toilet. More than 40% of young children have to rely on pit latrines, and 6% reside in households with no sanitation system⁷. Out of 23,589 schools, 6,783 schools have only pit latrines on the premises⁸.

The work done with support from this funding is linked directly to support the achievement of overall improved child health and nutrition outcomes. The last few years are seeing the decline in maternal, perinatal and under-5 mortality at national level in South Africa however there are disparities at sub national levels. Diarrhoea remains one of the top five causes of death for children. Poor nutritional status, poor environmental conditions, and illnesses such as HIV and AIDS make children more susceptible to severe diarrhoea and dehydration. Efforts to improve public health and save the lives of children need to scale up on interventions that have a direct impact on diarrhoeal mortality, therefore improving practices for handwashing with soap becomes vital.

Handwashing with soap has been proven as the single most effective way to prevent diarrhoea and other hygiene related diseases as automatic behaviours performed in homes, schools, and communities. Research suggests that washing hand with soap can reduce the rate of diarrhoea

¹ Statistics South Africa. 2012. *Social profile of vulnerable groups in South Africa, 2002–2012.* Pretoria: Stats SA. (p. 28).

² GHS 2015

³ Statistics South Africa, 2013: 50. Statistics South Africa. 2013: *South Africa's young children: their family and home environment, 2012.* Pretoria: Statistics South Africa.

⁴ UNICEF. 2015. South Africa – Children's Access to Adequate Standard of Living. Pretoria: UNICEF

⁵ Department of Basic Education. 2015. *National Education Infrastructure Management System (NEIMS) Reports at 12 May 2015*. Pretoria: DBE.

⁶ Statistics South Africa. 2012. *Social profile of vulnerable groups in South Africa, 2002–2012.* Pretoria: Stats SA. (p. 28).

⁷ Statistics South Africa, 2013: 51.

⁸ Department of Basic Education. 2015. *National Education Infrastructure Management System (NEIMS) Reports at 12 May 2015.* Pretoria: DBE.

by almost 40% and acute respiratory diseases by up to 25%. When practiced by mothers and birth attendants can reduce neonatal mortality rates by almost 40%.

The national task team on WASH met regularly in 2016 and worked towards finalization and submission of the strategy through the approval processes leading to the successful final approval in February 2017. There has been progress towards establishing an intersectoral forum with all key departments and partners as well as discussions related to establishing a public private partnership platform towards fast tracking results as outlined in the strategy.

It is important to support the ground work that facilitate the implementation of the strategy in the field and share lessons learned including best practices. Engaging facility and community role players, and capacitating them on incorporation of handwashing behaviours and messages in their everyday work is critical. Knowledge and capacity building of front line workers on handwashing with soap also supports reaching communities at household level with key behaviour change messages and practices. UNICEF supported the Water Institute of South Africa (WISA) conference in 2016 co leading a session with the Department of health and partners and key stakeholders.

E. RESULTS IN THE OUTCOME AREA

Since 2012, UNICEF has also been supporting the Mpumalanga Department of Education (MDE) on whole school improvement targeted at 171 under-performing schools through the Child Friendly Schools Programme. UNICEF with the support of the DBE and the MDE has merged CFS with CSTL with the goal of rolling out a strengthened care and support programme to schools in Mpumalanga. This will serve as a basis for the DBE to take the CSTL programme to scale across the country. A second phase of implementation of CSTL is currently underway in the province covering the period 2016-2018 and targeting 393 schools. CSTL addresses the needs of the whole child using multi-faceted, child-centred and rights-based approaches and aims to improve access, retention, progression and achievement within the schooling system.

As the premise of the CSTL programme is that care and support must be provided in a comprehensive and integrated manner, a WASH programme focusing on education has been initiated in Mpumalanga province as part of the infrastructure, water and sanitation pillar of CSTL.

The WASH component of the CSTL programme has the following key components:

- 1) Detailed mapping of the sanitation needs of the 393 schools supported by UNICEF;
- 2) Training of provincial and district officials, School Management Teams (SMTs), School Governing Bodies (SGBs), School Based Support Teams, Representative Council of Learners (RCLs), GEM/BEM clubs and educators on hand washing and good hygiene practices; and options to improve, maintain and advocate for sanitation facilities in schools and communities based on local resources;
- 4) Training of relevant personnel in the schools on appropriate maintenance of sanitation facilities;
- Implementing a training programme for Grade R and 1 learners on good sanitation practices, hand washing with soap and brushing teeth that must be facilitated by educators on a daily basis (note that the inclusion of brushing emanates from the findings of the ISHP that over 50% of learners screened by school nurses are referred for oral health problems. In addition, the combination of deworming, hand washing and brushing has been successfully trialled in East Asia and shown to reduce morbidity amongst children).
- 6) The provision of tippy taps for schools
- 7) Quality assurance of programme implementation through routine collection of data

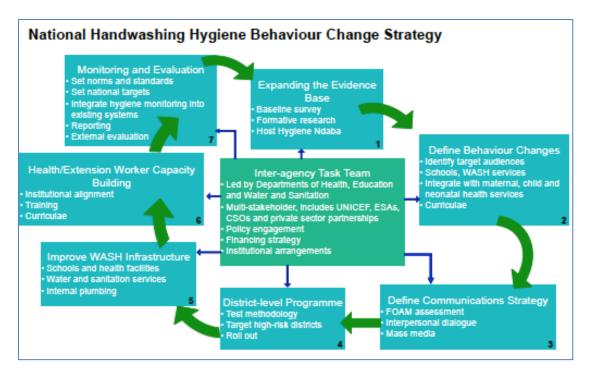
In 2016, the implementing partner contracted by UNICEF, with direct support, led extensive discussions with various directorates (EMIS, GIS, Physical Resource Planning, Infrastructure, and Curriculum directorates) of the MDE on the water and sanitation component of the CSTL Programme. The discussions have also been extended to the Mpumalanga DOH on availability of materials and potential collaboration on water and sanitation. The latter has yielded positive results with DOH oral health teams supporting training and implementation of the programme.

Some concrete achievements so far include:

- 1) An audit on water and sanitation availability in the respective schools has been conducted by 40 learner support agents (trained unemployed youth) to address the current lack of reliable data on the status of water and sanitation in the 393 schools through EMIS. Capturing of data and quality assurance has been completed. A database and photographic library have also been prepared. A short report has been drafted together with a GIS map of the water and sanitation needs of the 393 schools. This database will be fed into the National Education Infrastructure Management System (NEIMS) and for the first time provide verifiable data on water and sanitation needs for the 393 schools. The data is proving invaluable in determining which schools require hand washing facilities.
 - 2) A trial was undertaken in a Grade R class to determine average usage of soap and toothpaste per learner. This assisted in projecting quantities of commodities required. A product distribution plan has also been developed. Based on these investigations, purchase of toothpaste, toothbrushes, soap has been tendered.
 - 3) A prototype for group handwashing (catering for 15 learners) that is low cost and durable has also been designed. The prototype is now being developed for testing in a school setting. Based on the outcomes of the testing group handwashing facilities will be constructed and erected in schools requiring such facilities. This is a significant achievement as for the first time a low cost model for group handwashing will be tested in South Africa with the potential of being replicated throughout the country.
 - 4) Existing material on handwashing, oral health care and sanitation has been sourced. Subject to necessity, some of the existing material will be reprinted for the training. Materials have also been developed for the Representative Council of Learners, which use an action project approach to engage learners on water and sanitation issues.

Training of trainers is planned for early 2017 followed by programme implementation in schools. UNICEF continued working closely with the National and provincial department of health and key district teams towards supporting implementation of the strategy on the ground, designing integrated 1000 days package incorporating hygiene and handwashing messages, supporting task team meetings and consultations with various stakeholders including dissemination of the strategy in forums so as to facilitate finalization and wider consultation. Finalizing the strategy has been the main focus of activity in the reporting period. Additional information was provided towards costing activities outlined in the strategy.

The key activities outlined in the strategy are outlined below.



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Further work will be done in 2017 focusing at the community and household level on behaviour change and documenting the processes, inputs and key activities that support behaviour change towards improved hygiene practices at the household level.

UNICEF's partnership with NGOs working in this field has helped maintain focus on building knowledge and skills at the community level and ensuring that field level experiences are linked to and inform policy and program design at national level. Through this work there is promotion of behaviour change related to hygiene and sanitation, particularly the key practice of hand washing with soap, as well as strengthening the capacity of health outreach workers to prevent and address illnesses related to the lack of basic hygiene practices. Training packages focused on the first 1000 days (continuum of care for children) incorporating key child health and nutrition messages and handwashing, hygiene are available. Further, work was done towards capacitating community care givers (CCGs) in one district in KZN province through learning sessions and mentoring processes in building understanding of hygiene practices and child health and nutrition outcomes. In 2016, 119 CCG mentoring visits across 37 clinics (with between 5 and 40 CCGS in each session) were conducted.

Monitoring hygiene and handwashing remains one of the most challenging areas of WASH monitoring. Further, this area has not been a regular part of baseline or regular monitoring systems in Southern Africa. Whilst a number of health-related behaviours are covered in Statistics South Africa (Stats SA) national monitoring reports, no data is collected on hygiene

or handwashing. The Demographic Health Survey results will be available in 2017 and should be able to share further information on WASH and practices.

Various aspects of the work done are in the process of being documented for wider sharing. The documentation includes a summary of the handwashing strategy and stories from the field showcasing community aspects of the WASH program. These materials will be ready by mid-2017 and shared widely.

UNICEF South Africa utilised Communication for Development (C4D) to achieve results for children. UNICEF supported *the WASH challenge* (details of images are in Annex I), a series of 30 x 3-minute "mini game shows" for youth to raise awareness about inadequate access to safe water and sanitation services and to educate them about safe hygiene practices. The WASH Challenge is a fun game show which highlights these practices and spreads awareness in communities across South Africa. WASH Challenge was broadcast on Bona Retsang on SABC 1 from Wednesday, 22nd June 2016 till 26th August 2016. Airing Wednesday – Friday from 16h00 – 16h30. Bona Retsang is a youth magazine show that entertains and educates its viewers, encouraging them to develop a solutions-driven and positive outlook, face up to the challenges in their lives and fix their own problems. The show reached over 700-thousand young people weekly.

The WASH Challenge sees a team of WASH investigators who step in when someone commits a WASH 'crime'. In each scenario contestants are given 4 questions related to WASH principles and for every correct answer they are given R50 airtime. The WASH investigators then offer advice on how to protect themselves from germs based on the given scenario. A teacher's toolkit for Life Orientation teachers to use in the classroom has been developed.

The South African Institute of International Affairs (SAIIA) has established and managed numerous youth-focused programmes for several decades. Among the most extensive is the Model United Nations (MUN) debates and discussions in which high school learners participate. With funding from UNICEF, a series of WASH-focused activities with high school learners took place in various parts of the country.

Model United Nations conferences were held in Gauteng, KwaZulu-Natal and Western Cape. Each event took the form of a UNICEF meeting with 20 teams of three learners. Learner delegates debated issues connected to WASH, the SDGs and the UNICEF Gen2030 report.

Youth@SAIIA held a two-day workshop in which 100 learners focused on policy participation, blogging, and the use of social media. Case studies around WASH were used to highlight key areas of action and sessions were addressed by the SACO Chief of Communications and the SACO Communications Specialist.

Learners participated in blog-writing sessions with 11 blogs now finalised and 3 of them posted on the SAIIA and SACO website. In addition, a topic pack was researched and written with input from the learner participants of the Model UNICEF WASH sessions. The youth media and communications team created a WASH blog area, and tweeted, posted on Facebook and Instagram during the various activities. Each post reached an average 1000 people. In addition, SAIIA youth intern Kenneth Diole participated on SABC Channel Africa radio programme to highlight WASH issues and the SDGs.

The funding provided by SACO for was for a fixed set of outcomes – which have been completed. Nevertheless, in terms of the next steps, youth participants from these initiatives are now creating thematic working groups on WASH related themes (water, health, etc.) and are starting policy engagement for the year ahead.

F. FINANCIAL ANALYSIS

Table 1: Planned budget by Outcome Area

Outcome Area 5: WASH			
South Africa			
Planned and Funded for the Country Programme 2016 (in USD)			
Intermediate Results	Funding Type	Planned Budget	
Intermediate Results 03-06 WASH # General	Funding Type OR	Planned Budget 650,000	

Table 2: Country-level thematic contributions to outcome area received in 2016

There were no WASH related Thematic contributions received in 2016

Table 3: Expenditures in the Outcome Area

Outcome Area 3: WASH				
South Africa				
2016 Expenditures by Key Results Areas (in US Dollars)				
	Expenditure Amount			
	Other Resources -	Resources	Regular	All Programme
Organisational Targets	Emergency	- Regular	Resources	Accounts
03-06 WASH # General		216,832	14	216,847
Total		216,832	14	216,847

Table 4: Thematic expenses by programme area

Outcome Area 3: WASH		
South Africa		
Thematic Expense by Programme Area (in USD)		
03-06 WASH # General	122,599	
Total	122,599	

Table 5: Expenses by Specific Intervention Codes

Outcome Area 3: WASH		
South Africa Expenses by Specific Intervention Code		
08-02-08 Monitoring # General	2,294	
08-03-01 Cross-sectoral Communication for Development	3,213	
08-03-02 Communication for Development at sub-national level	4,535	
08-09-06 Other # non-classifiable cross-sectoral activities	4,170	
08-09-10 Brand building and visibility	1,090	
12-02-01 Private sector fundraising (Offset budget)	13,934	
5011 Situation Assessment and Analysis (SITAN) and MDG monitoring	14	
7921 Operations # financial and administration	1,165	
Total	216,847	

G. FUTURE WORK PLAN

In 2017, UNICEF will procure toothpaste, toothbrushes and soap for 60 068 Grade R and 1 learners in Mpumalanga and implement the WASH programme in terms 3 and 4 (July-December 2017) in 292 primary schools.

Subject to additional funding, UNICEF intends to build on the work that is ongoing with Grade R and 1 learners in 292 primary schools. The proposal for 2017 is to extend the reach of this component of the programme to Grade 2 learners in the same schools, reaching a further 38 931 learners.

The programme will have the following key components:

- 1) Training of Grade 2 educators on hand washing and good hygiene practices; and options to improve, maintain and advocate for sanitation facilities in schools and communities based on local resources:
- 2) Implementing a training programme for Grade 2 learners on good sanitation practices, hand washing with soap and brushing teeth that must be facilitated by educators on a daily basis (note that the inclusion of brushing emanates from the findings of the ISHP that over 50% of learners screened by school nurses are referred for oral health problems. In addition, the

- combination of deworming, hand washing and brushing has been successfully trialled in East Asia and shown to reduce morbidity amongst children).
- 3) Purchase of toothpaste, toothbrushes and soap to enable training on oral hygiene and handwashing
- 4) The provision of group handwashing facilities in schools

An important barrier confronting girls in South Africa is lack of ready access to sanitary towels to support menstrual hygiene together with menstrual hygiene education. While evidence from the rest of the continent suggests that this is an important contributor to periodic absenteeism amongst girls from school, the 2011 Youth Risk Behaviour Survey conducted amongst grade 8-11 learners suggests that nationally just under a third of girls do not find it easy to access sanitary towels when needed. However, this national average masks significant provincial and population group variations. More, accurate and current data is required on access to sanitary towels and its link to absenteeism. A national research study using mixed methodology (qualitative and quantitative) is therefore proposed for 2017 to establish girl's access to sanitary towels, availability of appropriate sanitation facilities in schools to facilitate menstrual hygiene, its impact on school attendance and coverage of menstrual hygiene education through the school curriculum. The study will recommend policy action to the Department of Basic Education on facilitating availability of sanitary towels to girls in schools, possible target areas (high risk districts) and mechanisms (such as public private partnerships) to do so (if required), and interventions required on menstrual hygiene education.

Going forward in 2017, UNICEF will continue to work with the National and provincial Department of Health and district teams towards incorporating hygiene and hand washing messages in the district health system strengthening work being rolled out as the '3 feet approach' for results for children.

Further, work will be done towards monitoring key indicators linked with improving child health incorporating assessment of hygiene and hand washing practices.

The work with communities and the community health workers will support roll out of the 1000 days campaign at community level integrating the key messages for WASH and in particular hygiene and hand washing messaging.

Support will continue towards facilitating regular WASH task team meetings at national level, including exploring the establishment of a Public Private Partnership initiative for supporting implementation of the strategy across the country.

Table 6: Planned budget for 2016

Outcome Area 3: WASH South Africa				
		Planned	Funded	
Intermediate Result	Funding Type	Budget	Budget	Shortfall
03-06 WASH # General	OR	750,000	468,132	281,868
Total		750,000	468,132	281,868

H. EXPRESSION OF THANKS

UNICEF South Africa wishes to express its most sincere appreciation for the funding provided through the Thematic Funds for WASH. This contribution greatly assisted the country programme to realize the strategic support provided to the Department of Basic Education and Department of Health as described in the results analysis above.

I. ANNEXES: HUMAN INTEREST STORIES AND DONOR FEEDBACK FORM



The WASH Challenge logo



The WASH investigators catch another unsuspecting viewer committing a WASH crime

