An effective approach for hygiene education: life skills

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An effective approach for hygiene education: life skills

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This paper advocates that ‘life skills based hygiene education’ can be effective in the promotion of hygienic behaviour of young people at schools. It briefly focuses on the themes and topics that should be dealt with in this new approach and lists some principles that need to be taken into account when developing materials and lesson plans. This is followed by some concluding remarks on existing challenges and constraints for those wishing to use the life skills approach in School Sanitation and Hygiene Education (SSHE) in their own schools.

In many developing countries the most populated institutions are schools. Since schools are important learning places, the promotion of school sanitation and hygiene education (UNICEF and IRC, 1998) helps children to adopt good habits during formative childhood.

School Sanitation and Hygiene Education focuses on development of life skills, a healthy and safe school environment and outreach to families and communities.

In many countries these children are taught through more traditional ‘information based’ approaches. However, more effective teaching and learning outcomes are likely to result from classroom methods that address skills as well as information, values and attitude related issues. This educational approach is also known as the life skills approach.

The life skills approach is part of the overall FRESH initiative (Focusing Resources for Effective School Health) (WHO, UNESCO, UNICEF and World Bank, 2000). FRESH has developed a framework as a starting point for an effective health component in a broader effort to achieve more child-friendly schools. The FRESH approach addresses the following issues:  
- school health policies;
- safe drinking water and sanitation facilities;
- skills based health and hygiene education; and
- health and nutrition services in schools.

What do we mean by life skills based hygiene education?

The life skills approach refers to the interactive process of teaching and learning that focuses on acquiring knowledge, attitudes and skills to support behaviour that enables people to take greater responsibility for their own lives. The life skills based hygiene education approach is a behaviour changing strategy that can be applied in schools and that seeks to:

- enhance the already positive and healthy, pro-social behaviour and skills of the majority of young people; and
- prevent or reduce risks to health and other aspects of development, such as social and emotional development, leading to better learning outcomes.

Life skills based hygiene education consists of two elements: the content, and the teaching and learning methods.

- The content consists of a balance of knowledge, attitudes, and (life) skills. The skills component consists of interpersonal and psycho-social skills such as assertion, negotiation, decision making, empathy building, values clarification, stress and coping skills– commonly known as life skills; and
- The teaching and learning methods are mainly interactive and participatory with room for information-focused and child-centred sessions.

The content and the teaching and learning methods should be designed to have the greatest impact on reducing risks, promoting behaviour that will help to prevent water and sanitation related diseases.

How is the life skills approach more effective towards teaching and learning?

Traditional approaches of teaching and learning have often over-emphasized information, and often neglected the ‘real life’ applications of information and the role of attitudes and values, or the need for skills, especially related to sensitive issues and personal behaviour. These approaches are useful for developing the necessary information base. They are generally not sufficiently effective in making an impact on attitudes and skills that might promote and support conditions at the school. The same goes for improvement of practices of school staff and children that help to prevent water and sanitation related diseases (WHO, 1997).

In selecting information to teach the students, the scientific terms and details may seem to be important. However, for the purpose of hygiene education, they are considered less important than practical and basic information that will enable students to avoid risk behaviour. For example, it is more important for a student to understand why and when handwashing is vital than to know the name of the bacteria and/or parasite that could be left on the hands if not washed.
The development of specific psycho-social skills and the opportunity to use and practice them are central to effective skills-based health education. When individuals have these skills, they are more likely to adopt and sustain a healthy lifestyle during schooling and the rest of their lives.

**The context - themes and topics for life skills based hygiene education**

For the development of the context of life skills based education, we need to consider a balance of the three elements knowledge, attitudes and skills. In order to create this balance we have to find out what we need to address in terms of knowledge, attitudes and skills within the given socio-cultural context. Furthermore, the knowledge, attitudes and skills that will be included have to focus on the most important aspects that are relevant to the experiences and interests of children of different age groups and in different situations.

We can divide the themes that should be included in the context of life skills based hygiene education in two categories:

- The category dealing with the water, sanitation and hygiene-related diseases and containing information on the incidence and transmission of the most common diseases in the local environment; and
- The category dealing with personal hygiene and environmental hygiene aspects in the community, schools and homes that have an impact on the transmission of these diseases, as well as technical and managerial aspects of the operation and maintenance of the facilities.

IRC in collaboration with UNICEF is currently working on two SSHE projects - SSHE Global which focuses on Viet Nam, Burkina Faso, Colombia, Nepal, Nicaragua and Zambia and SSHE India which focuses on three states: Bihar, Karnataka and Tamil Nadu. All teams in the participating countries are in the process of developing life skills based materials and some of the teams are in the process of developing an outline of the various themes’ knowledge, attitudes and skills which are relevant for hygiene education.

In the Zambian context the Psycho-Social Life Skills will be addressed through the integration of topics across the curriculum and mainly in the following subject areas; English, Social Studies, Moral and Social Values, Environmental Science, Home Economics and Zambian Languages. This means that the psycho-social life skills and their related teaching and learning activities will be utilized in topics from the identified themes/subject areas. For example, health issues such as drug use, safe and clean drinking water, HIV/AIDS can be addressed in Home Economics or Environmental Science; human/child rights and abuse can be covered in Social Studies and Social and Moral Values; and consumer education can be covered in Home Economics and Social Studies. The School Health and Nutrition Team went a step further to work with Curriculum Development Centre officials in developing a scope and sequence of the cross cutting themes as identified in the Basic School Curriculum Framework. The result for the theme “water hygiene” for grade 1 – 3 is presented below (Ministry of Education, 2000).

**What principles should we keep in mind when developing life skills?**

Life skills materials should not be externally developed materials, because diseases, attitudes and behaviours that are prevalent in the various areas are different; they are determined by culture and conditions. In other words, we need to identify for each region the specific behaviours and conditions that are the most relevant for the transmission and prevention of water, sanitation and hygiene-related diseases, as well the specific factors associated with these behaviours and conditions.

Other important principles, although not exclusive, which should be taken into account when developing life skills based hygiene education materials are the need for:

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<td><strong>Sub-topic</strong></td>
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• integrated approach of (1) the technical interventions with (2) student/parent/teacher participation and (3) pedagogic activities;
• developing the context of life skills materials in collaboration with a variety of stakeholders who are directly and indirectly involved at the school;
• developing hygiene education methods and materials that are simple, inexpensive and culturally acceptable and therefore the most feasible to implement;
• implementing learning tools and games that do not require any external materials, such as printed and plasticized tools, but that use what is already available in the school; and
• designing and selecting educational methods in line with development stages of children to increase knowledge, build positive attitudes and values, dispel myths, increase skills, and promote the reduction and prevention of water and sanitation related diseases.

Challenges and constraints
During the life skills based hygiene education workshop, which was held at UNICEF, NY in September 2000, a number of participants from field offices of the UNICEF/IRC SSHE projects discussed how the life skills approach could be used in their own School Sanitation and Hygiene Education projects. The exchange of ideas at this workshop proved to be fruitful for all participants and the applicability and effectiveness of the life skills approach was recognized. However, the participants realized that the development of the materials, as well as the implementation of the approach, would require a considerable amount of effort and time at the various political and institutional levels within their own country as well as for them as individuals. Other specific issues which have been identified are the need for:
• developing the life skills-based hygiene education materials in an inter-sectoral and collaborative manner;
• ensuring that there is a good balance between water, sanitation and hygiene issues covered in the materials;
• catering for more training on the life skills approach; the teacher training needs focus on including both the hygiene and sanitation content in the exercises as well as the instructional aspects on how to implement the life skills approach;
• ensuring more time for teachers to prepare lessons that focus on skills development and capacities needed to analyze potentially harmful behaviour;
• paying more attention on how gender aspects and social differentiation aspects can be included, to foster social equity and solidarity in the life skills based hygiene education.

Conclusion
The above noted challenges and constraints are currently being tackled by those already using the life skills approach directly and indirectly at the international, national and local level. There is a continuous need to exchange experiences developed at all of these levels in order to come to a comprehensive life skills based hygiene education curricula, which can be adapted to the local level. We hope that this article will contribute to this by encouraging those professionals interested and/or involved in life skills to further develop their ideas.

References


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