



Dettol School Hygiene Education Programme 2020

Contents

- 2 Abbreviations
- 3 Foreword
- 11 COVID Brief
- 13 Executive Summary
- 19 Introduction
- 27 Scope
- 29 Stakeholder Mapping
- 31 Sampling Methodology
- 33 State-wise KABP Over the Years
- 35 Fact Sheets
- 41 About SROI
- 42 SROI Methodology
- 43 Stakeholders and Related Indicators
- 55 Behavioural Change Communication
- 57 Impact Beyond the Scope
- 59 SROI Value
- 61 Sensitivity Analysis
- 62 Valuation
- 64 Externalities
- 66 Recommendations for the Programme
- 74 Conclusion
- 75 About Sustainable Square
- 77 Annexes

Abbreviations

AKF Aga Khan Foundation

AKDN Aga Khan Development Network
BCC Behaviour Change Communication

BRC Block Resource Coordinators

COVID-19 Novel Coronavirus

CRC Cluster Resource Coordinators

DALY Disability Adjusted Life Year

DBSI Dettol Banega Swasth India

HM Headmaster

IDI In-depth Interviews

MHM Menstrual Hygiene Management

ODF Open Defecation Free
PRI Panchayati Raj Institutions

RB Reckitt Benckiser

SBM Swachh Bharat Mission

SDA School Development Activities
SDP School Development Plan

SHEP School Hygiene Education Programme
SMC School Management Committees

SRO Social Return on Investment

SSA Sarva Shiksha Abhiyan

WASH Water, Sanitation and Hygiene

This assessment was conducted independently and passionately by **Sustainable Square.**

Gaurav Jain

In partnership with the Aga Khan Foundation, the programme aims to increase the capacity of government school teachers to deliver a hygiene focused curriculum in identified schools, thereby increasing knowledge of WASH behaviours amongst school children.

The link between hygiene and public health has now been clearly established. Yet, proper hand washing practices remain elusive in much of the country. Even before a meal, 69.9% of rural India still washes their hands without soap. Another 15% only wash their hands with water after defecation. The Dettol School Hygiene Programme was envisioned as a step towards improving poor sanitary practices in schools, homes and communities, by promoting behavioural changes.

In partnership with the Aga Khan Foundation, the programme aims to increase the capacity of government school teachers to deliver a hygiene focused curriculum in identified schools, thereby increasing knowledge of WASH behaviours amongst school children. It also focuses on helping school management committee members to plan and initiate WASH access projects in schools.

It is especially heartening to see children at the forefront initiatives of the Swachh Bharat Abhiyan (Swachh of the Dettol School Hygiene Programme. The hygiene practices learnt by children in school can help mould them into meaningful ambassadors of change— as young children educating their families and communities, and later, as parents themselves. The role of headmasters, teachers and village panchayats as facilitators of this programme also merits recognition. On the findings itself, I am proud to share that in the past three years, our initial investment of ₹ 15.9 crore has yielded worthy outcomes-- through innovations such as using creative platforms to reinforce key hygiene measures, structured hygiene sessions in schools, supporting trainings at multiple levels and more, we have brought about social value worth ₹ 526 crore.

An evaluation of the Social Return on Investment (SROI) of the project indicates that for every for every ₹1 invested, the School Hygiene Education Programme delivers ₹ 33.05 of social value.

Further, this programme has assumed an added relevance in the context of the COVID-19 pandemic. Frequent and proper hand washing is one of the key measures that can help to substantially reduce the spread of the infection. People in rural areas are especially vulnerable, given the limitations of available healthcare facilities. Thus, there could not be a more opportune time to emphasize the importance of hand washing in rural communities.

At Reckitt Benckiser, we hope that that this project and assessment report can inspire further critical interventions in the sector, as well as serve as an important benchmark. We have already partnered with the school Vidyalay Abhiyan), and we look forward to many more elements of this programme bringing value to various other government initiatives. Most of all, we hope that we can continue to work towards our mission of improving rural sanitation practices towards the better health, well-being and dignity of all people.

> **Gauray Jain** Senior Vice President, AMESA, Health, Reckitt Benckiser





Changing hygiene behaviour is critical for healthier lives and to help protect children from illness. Having access to safe WASH facilities is a major requirement for a healthy learning environment, benefitting both children's health and education.

It gives me great pleasure to see how this partnership between Reckitt Benckiser and the Aga Khan Foundation is delivering impact through a School Hygiene Promotion Programme reaching 3000+ schools. It is rightly focused on changing the behaviours of school children through the delivery of a high quality hygiene curriculum.

I am delighted to see the findings from the Social Return on Investment Study (SROI) that was recently completed. At a time when hand hygiene is of critical importance intervention in schools, and supporting children to to preventing the spread of COVID-19, an increase of 86% in the adoption of hygiene practices by students is a significant achievement. It highlights that we are on the right track, effective in our implementation and have made an impact on the ground. The findings of this joint initiative make a strong case for this kind of hygiene education, and we are committed to continuing our efforts to further strengthen and scale up this programme.

We greatly value our partnership with Reckitt Benckiser and the support we have received thus far from them. I am especially pleased to see how far the programme has grown since it began during my time as the CEO in India, which started with just over 300 schools and is now being implemented in more than 4000. I am confident that AKF and RB can jointly deliver a successful programme in the second phase of our partnership. delivering more impact in children's lives, influencing state and national governments to prioritize hygiene become hygiene ambassadors, taking these messages of good health and hygiene to their homes and communities.

> Dr. Matt Reed Global Director of Institutional Partnerships. Aga Khan Foundation

Tinni Sawhney

The school hygiene programme is at the heart of our water, sanitation and health ini-

tiative as it focuses on changing behaviour

and supporting school children to emerge as hygiene ambassadors, influencing and

motivating their families and the wider community to adopt regular handwashing practices as the foundation for good health.

We are delighted to present the first external impact study of our School Hygiene Programme, supported by under flagship programmes such as the Swachh Bharat Reckitt Benckiser under the Dettol Banega Swasth Campaign. The school hygiene programme is at the heart of our water, sanitation and health initiative as it focuses on changing behaviour and supporting school children to emerge as hygiene ambassadors, influencing and motivating their families and the wider commu- Hugiene Curriculum despite this study taking place nity to adopt regular handwashing practices as the foundation for good health. The programme assumes significance in the current situation of the COVID-19 pandemic, where regular handwashing has emerged as in the future. We are proud of our strong partnership a key strategy for disease prevention. The programme is under implementation in a mix of rural and urban geographies in the states of Bihar, Gujarat and Uttar Pradesh, working with some of the most vulnerable communities to center-stage hygiene as an integral part greatly value the support and encouragement from of their lives.

We are committed to contributing to the national campaian. Swachh Bharat: Swachh Vidualaua. A keu feature of the campaign is to ensure that every school in our country has a functioning and well-maintained drinking water, sanitation and hygiene facility. The model that we have implemented is a collaborative initiative, working in close partnership with the district and state government. It prioritises a strong behaviour change component that promotes hugiene and handwashing amongst children and through them, these messages reach their families and communities, contributing to a movement to ensure that sanitation facilities in schools and communities are used and sustained in a long-lasting manner. The effectiveness of our model of implementation, as showcased by this

study, will go a long way in sustaining the gains made Mission, and help us center-stage hygiene more firmly in the discourse on development...

The fact that there is an 86% increase in adoption of hugiene practices by students due to adoption of the during the COVID-19 lockdown situation, means we are not only effective in our implementation, but also in our impact and potential to increase focus on this key area with Reckitt Benckiser that has enabled us to reach out and benefit a large number of children in some of the most vulnerable geographies, inculcating hygiene practices that are so critical in today's situation. We Reckitt Benckiser and look forward to taking this partnership from strength to strength. We have already initiated our second phase partnership with Reckitt Benckiser.

> Tinni Sawhneu CEO of Aga Khan Foundation (AKF) India



Impact in India

Coverage

Reach

13 million children reached

8 States

40 Districts

256 Blocks

650,000 Schools

Key Impacts

14.2% Reduction in diarrhoea among children

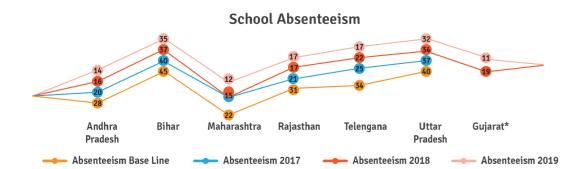
17% Increase in school attendance

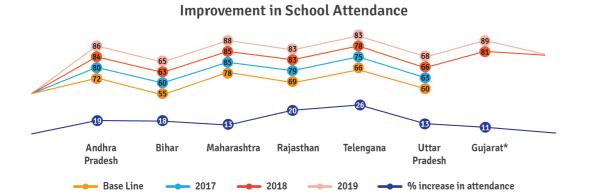
250+ Schools awarded by PM under Swachh Vidyalaya

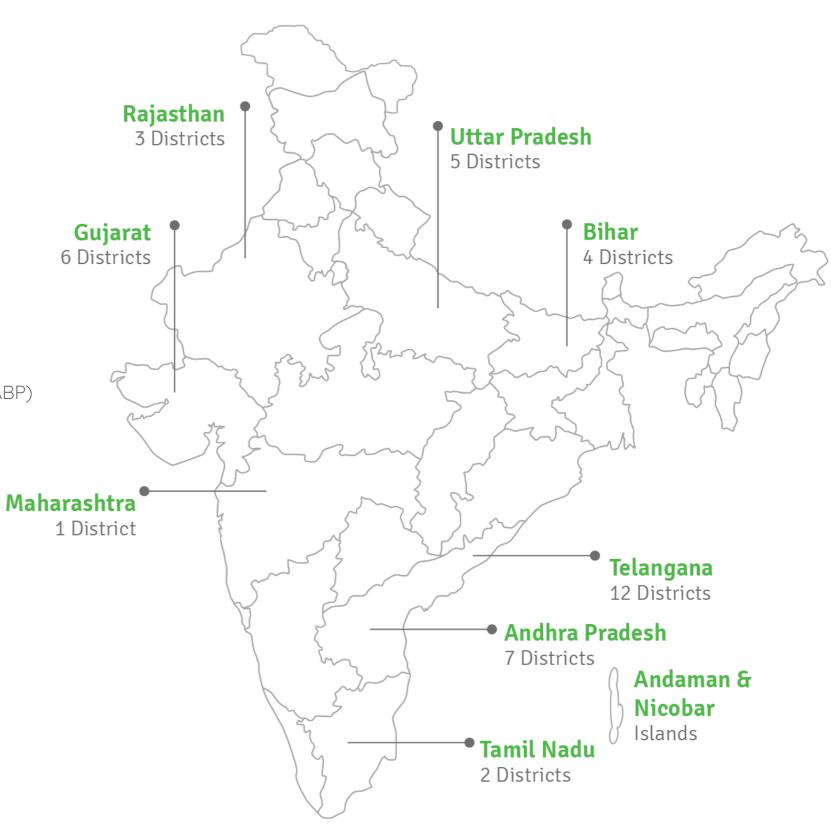
(Clean School) Awards

Programme results

Year on year changes in Knowledge Attitude Behaviour and Practice (KABP) Reduction in school absenteeism







As COVID-19 brings the world to its knees, never in recent times have we seen people place so much importance on issues of sanitation and hygiene. In particular, handwashing with soap before and after sneezing, washing, eating and defecating has become significant in slowing down the spread of the virus. One large group of people being impacted by the pandemic are **1.29 billion school children** (UIS, 2014). The number of children out of school and at home right now accounts for **17%** of the world's population. It is within this **high-risk group, rural school children**, that the main focus of Dettol Banega Swachh India lies.

The most important questions arising in times of COVID-19 are, are children practising what they have been taught as part of the sanitation curriculum? Do they have access to soaps and sanitizers? Has there really been a behavioural shift in the students? Are they influencing behavioural change among their family members? Will the programme have a diminishing return, as students are away from school? Are stakeholders other than students doing their bit in battling the virus? And most importantly, will we stop the push for greater access to water sanitation and hygiene?

One would argue that an added focus on sanitation and hygiene is one of the positive factors to come out of the COVID-19 pandemic. It is important to build upon this as we cannot ignore the fact that more than 30 million children under the age of 5 die every year due to diseases related to diarrhoea. Ensuring equal access to WASH and implementing widespread behavioural change to maintain good sanitation and hygiene practices is key to keeping the world population healthy. Therefore, the 'Dettol Banega Swacch India' campaign will continue to play an important role in improving access to affordable and sustainable WASH facilities in poor communities."

Our Impact Process

Students

SMC Members









AKDN

Teachers

Social Value Created

₹526 Cr

Activities

- Hygiene Corner
- Hygiene Curriculum
- Hugiene Kits
- Strengthening Student Bodies
- School WASH Management

Input Cost

₹15.9 cr

- Strengthening School and Community Bodies
- Teacher Training
- Soap Banks
- Wall Paintings and other BCC Nudges



SROI Ratio

For every ₹1 invested in the School Hygiene Education Programme delivers ₹ 33.05 of social value.

13

Dettol School Hygiene Education Programme seeks to drive hygiene related behavioural change through a multi-faceted approach targeting schools and the community at large.

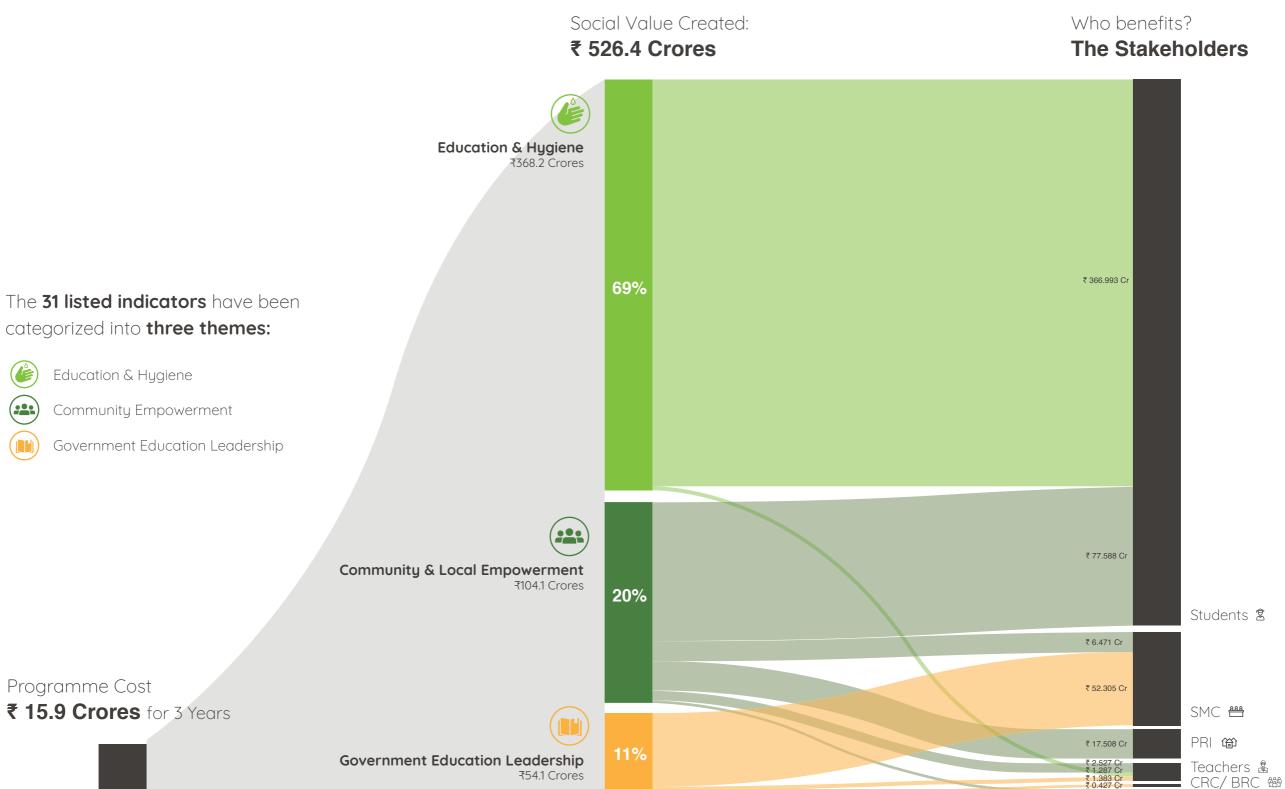
2017-2020











AKDN ...

Value of Our Changes

Students

Improved cleanliness in schools

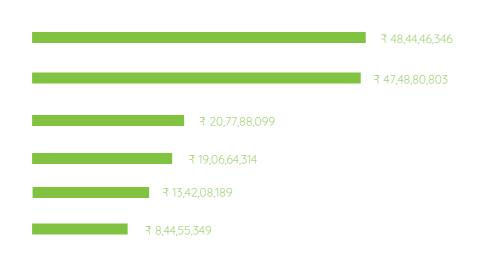
Increased adoption of proper hygiene practices due to an increase in knowledge on the same due to the SHEP intervention

Improved access to sanitation leading to a reduction in open defecation at school

Increased adoption of proper hygiene practices by parents/families

Increase in the adoption of safe menstrual practices by female students

Reduction in the number of families defecating in the open



Teachers

Decrease in acts of vandalism

Increase in technical knowledge regarding SHEP curriculum

Improved functioning of Bal Sansad (Children Parliament) leading to effective sanitation and hygiene programme



SMC & PRI

Improved supervision of academic management

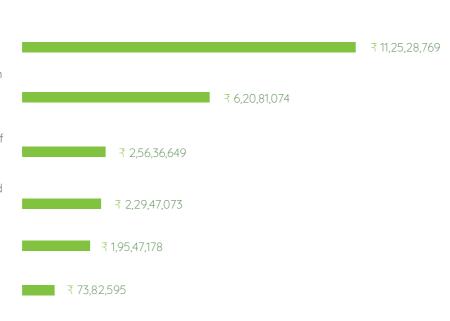
Improved support in community mobilization for school development activities through fundraising and regular monitoring through school visits **(PRI)**

Improved supervision by SMCs in handling of finance used for School Development Activities

Improved community outreach in simple and creative ways to the population in the neighborhood of the school

Improved planning of WASH initiatives via SDPs (School Development Plan)

Increased involvement of SMC in ensuring good WASH infrastructure in schools.



CRC/BRC

Increase involvement in planning and implementation of WASH advocacy and promotional events

Improved coordination among block/cluster departments

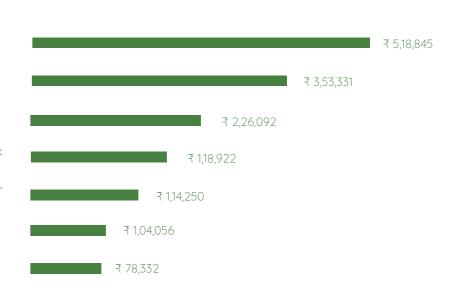
Improved teacher training and knowledge Management

Improved development of the cluster/block as resource rich academic centre

Increase in formation of learning communities among educational stakeholders

Increase in adoption of better pedagogical practices by teachers

Improved collaboration between CRC and SMC/PRI for funding on WASH related educational initiatives.



AKDN

Improved technical knowledge in pedagogy and conceptual clarity

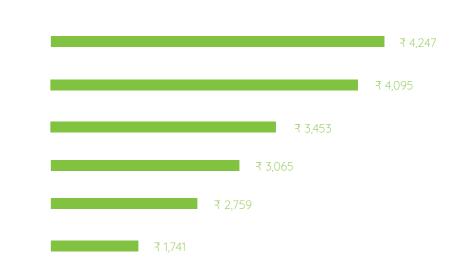
Increased feeling of happiness due to creating positive impact in society.

Improved adoption of hygiene practices

Increased leadership skills

Increases in respect by community and stakeholders

Increase in employability



17



The Programme

Dettol Banega Swachh India is an ambitious 5-year programme which seeks to address the hygiene and sanitation concerns throughout India.





AGA KHAN FOUNDATION

The School Hygiene Education Programme is a joint initiative between AKF and Reckitt Benckiser under the Dettol Banega Swachh India campaign, a flagship, nation-wide sanitation and hygiene campaign initiated by RB. The campaign seeks to drive behaviour change through a multifaceted approach, which targets schools and the community at large. The school programme within the flagship national initiative by RB has been designed in recognition of the fact that, by changing the mindset and behaviour of school students, they can become a catalyst for change in schools, homes and neighbourhoods. By working with teachers and principals, the right knowledge can be passed on to build good habits in children and future generations.

The continuation of the RB-AKF partnership in the third year has evolved and is being scaled to impact over 434,000 children across 3000+ schools in the three states of Bihar, Gujarat and Uttar Pradesh. This is being undertaken by combining on-the-ground implementation in schools along with technical assistance to education departments as they develop the hygiene curriculum in schools.

This programme aims to ensure that children have good hygiene and sanitation practices instilled in them from an early age, making them a catalyst for change in their respective families. Through this programme, government school teachers are delivering sanitation and hygiene curriculum, aimed at driving behavioural change in students and building awareness in the surrounding communities the schools operate in. For this to be successful, local governments must be involved to ensure that basic sanitation infrastructure is available in schools.

Dettol Banega Swachh India is an ambitious 5-year programme which seeks to address hygiene and sanitation concerns throughout India. The initiative aims to:

- Drive behaviour change towards hand hygiene, through numerous awareness initiatives such as the School Hand Wash Programme and Young Mother's Programme.
- Improve sanitation facilities by working with NGO partners to identify areas across the country, to support the development and maintenance of cleaner toilets.



The Programme

Hygiene Education in India

Over 500 million children around the world do not have access to clean water or decent toilets at school. More than 40% of diarrhoea cases that occur in school children in India are transmitted in school.¹ A lack of decent hygiene facilities discourages students, girls in particular, from attending school and completing their education.

Layering hygiene education with a community sanitation initiative has been a strategic approach adopted by AKF to help sustain communities Open Defecation Free (ODF) efforts. Schools present a unique opportunity to engage students, parents and the wider community through demonstrations and community outreach activities. Moreover, healthy hygiene practices, if initiated billion of the cost. during childhood, are not only difficult to change but also influence a person's future health, thus preparing entire generations and keeping them safe from the risk of water-borne diseases.

Hand Hygiene in India

UNICEF data suggests that 60% of the population in India has access to basic hand washing facilities, with a disease burden caused by infectious and associated wide disparity between rural and urban India (49% vs 80%). Hand hygiene practices have also been found to be inconsistent, with only 26.3% of parents washing their hands before feeding their child, 16.7% after disposing child faeces, and 18.4% after cleaning a child's bottom.

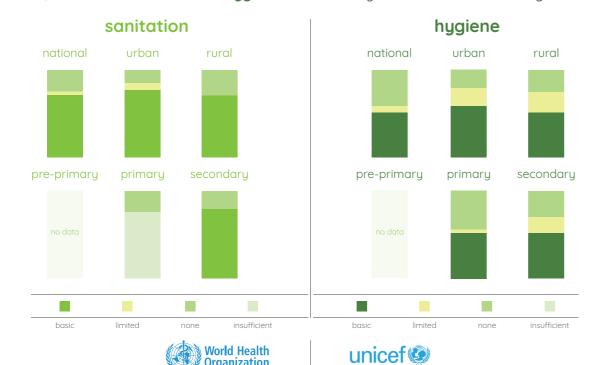
The costs India pays for poor hand hygiene

Annual net costs to India from not hand washing are estimated at US\$ 23 billion (16–35), which is 1.2% of the GDP. Diarrheoa preventable by hand washing contributes to US\$ 17 billion and acute respiratory infections preventable by hand washing contribute to US\$ 6.18

Under 5 mortality in India

India's under 5 mortality rate in 2018 was 36.6 deaths per 1000 live births. The nation has the highest burden of under 5 deaths in the world. This age group suffers 18% of the disease burden in terms of DALYs across all age groups in India, and bears the highest proportion of total

In India, how does sanitation and hygiene services vary in urban v. rural dwelling



It is common for girls to stay at home to avoid the shame felt from attending school while menstruating, preventing schools from teaching healthy attitudes about menstruation and combatting the associated stigma.



Menstruation is the second major reason, after household work, for girls to miss schools

23% of girls drop out of school when they hit puberty

Girls in puberty are typically absent for 20% of the school

31% of women in India miss an average of 2.2 days of work when they menstruate

The Programme



1. Selecting geographies and intervention schools

- The programme is layered onto ongoing projects in AKDN geographies
- Based on defined criteria, schools are selected and grouped in clusters of 10-15 at the block level
- Each cluster is managed and supported by a Cluster Facilitator (CF)





2. Liasing with government (state/district/block)

- Engaging with government at all levels to secure buy-in and commitment Inception meetings, learning-sharing workshops, and joint-monitoring
- school visits to set programme objectives, map expectations, familiarize with the curriculum, and track progress
- Extending technical support to district education department on implementing hygiene interventions





3. Training master trainers

- Training project teams, cluster resource persons on programme design and key activities
- Sessions on curriculum design, use of modules and game kits, developing session plans for content deliveru



4. Empowering teachers to streamline hygiene education in class room

- Capacity building workshops focus on building session plans, developing low-cost Teaching Learning Materials, use of modules & game kits to deliver plau-based sessions
- Hand-holding support post training for effective delivery of sessions in classrooms





5. Implementing structured hygiene sessions in schools

- Weekly sessions on hygiene awareness and behaviours using resource modules and game kits
- Practical learning through group-handwashing during mid-day meals monitoring individual hygiene by teachers





6. Enabling students as hygiene ambassadors

- Supporting development of Bal Sansad and Meena Manch platforms for students to advocate for WASH in school and communitu
- Orienting on regular duties: cleanliness inspection of facilities, monitoring individual hygiene messages in the community



7. Reinforcing key hygiene behaviours through creative platforms

- Colourful wall paintings around toilets, handwashing facilities act as reminders to practice safe sanitation and hydiene
- Hygiene corners display artwork related to hygiene and are dedicated spaces for student to discuss the WASH related issues





8. Strengthening SMCs in managing WASH

- Engaging SMCs in planning and budgeting for WASH in school
- Meetings to orient on roles and responsibilities with respect to WASH developing operations and maintainance systems, supporting in budgeting for WASH infrastructure in School Development Plan





9. Propelling community involvement

- Enabling SMCs in planning and budgeting for WASH in school
- Meetings to orient on roles and responsibilities with respect to WASH, developing operations and maintenance systems, supporting in budgeting for WASH infrastructure in School Development Plan

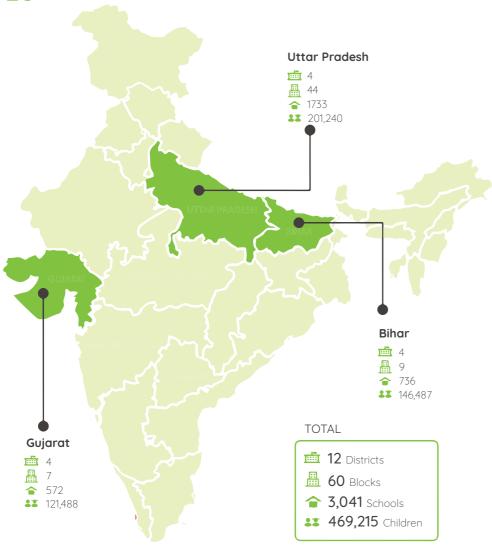
Innovative Tools for Hygiene Education

A structured hygiene curriculum focuses on five key themes: personal hygiene, hygiene at home, at school, in neighborhood and during illness. It is delivered through 15 sessions by trained teachers using workbooks, guiding manuals and game-kits.

Scope

Scope of the Assessment

Year: 2017-2020

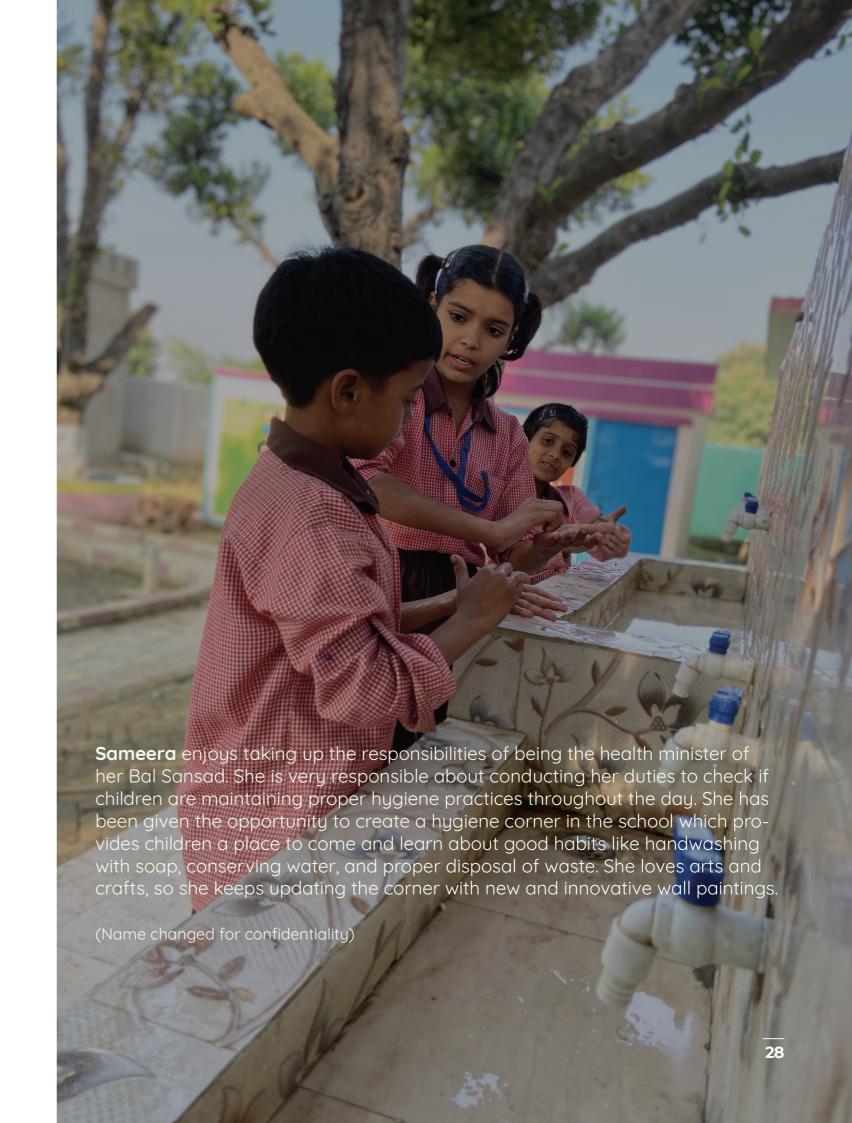


Objective of the Programme

Increase the capacity of government school-teachers to introduce, streamline and effectively deliver a school sanitation and hygiene promotion curriculum in target schools

Increase knowledge of targeted water, sanitation and hygiene-related behaviours amongst school-age children through hygiene sessions and develop them as hygiene ambassadors in their school and community

Enhance capacity of School Management committee members to plan, and prioritize WASH access in the schools



267

Students and Student Proxies

Students are the key participants of the programme who receive knowledge on hygiene education.

Student proxies are parents or guardians of the child who monitor their hygiene behaviour outside the school.

279

Teachers and Headmasters

Teachers and **Headmasters** are facilitators of the School Hygiene Programme, they receive hygiene training and facilitate implementation of the programme.

80

School Management Committee and Panchayat Members

SMCs are part of a team who ensures that the community and parents are involved in bringing schools quality education.

Panchayat members are part of the Panchayati Raj Institution who undertake various responsibilities of development in the region. They are elected representatives of the community.

18

Cluster Resource Coordinator and Block Resource Coordinators

Block Resource Centres (BRCs) and Cluster Resource Centres (CRCs) are deployed under Sarva Shiksha Abhiyan (SSA) to conduct in-service teacher training and to provide academic support to teachers and schools regularly, as well as to help in community mobilisation activities.

30

Members of the Aga Khan Development Network

Key members of **Aga Khan Development** who facilitate operations, execution and implementation of the Dettol School Hygiene Education Programme and solve challenges from the ground level.



Sampling Methodology

Students and Student Proxy

279*

Teachers and Headmasters

= 15% + 15%
of Student Sample of Teachers and Headmasters Sample

School Management Committee and Panchayat Members

1 CRC/BRC per 15 Teachers from the Sampl

Cluster Resource Coordinator and Block Resource Coordinator

To member

10 members from each state

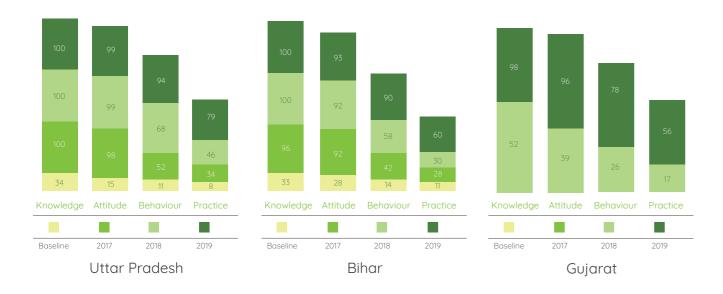
Members of the Aga Khan Development Network



KABP trends over the years

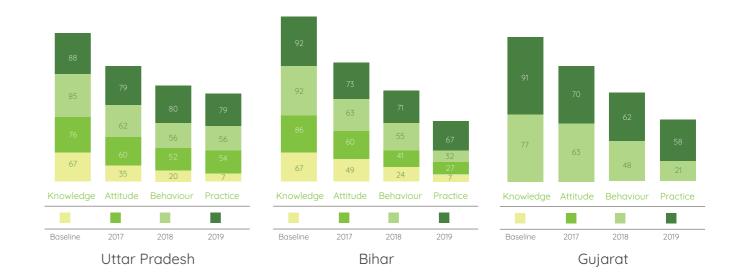
State wise KABP over the years

Hand Washing (Till 2019)



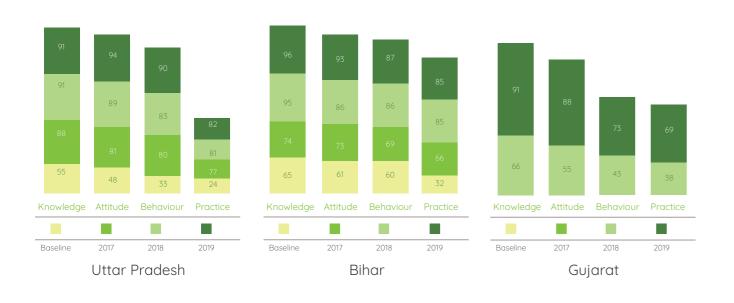
State wise KABP over the years

Sanitation (Till 2019)



State wise KABP over the years

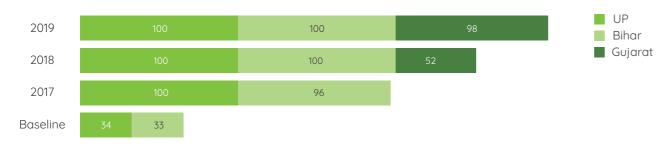
Safe Drinking Water (Till 2019)



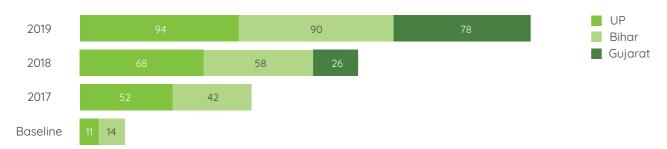


Handwashing

Knowledge of Hand washing (Self Reported by School Kids)

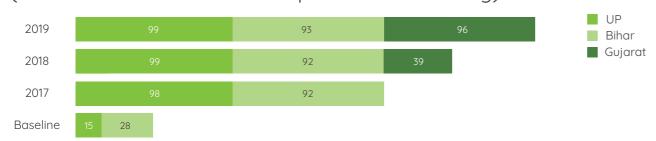


Positive Behaviour towards Hand washing (Observed)

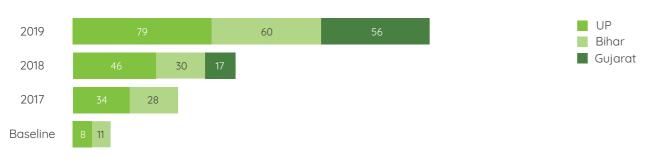


Attitude towards Good Hygiene Practices

(Probed based on WHO 6 Steps of Hand washing)



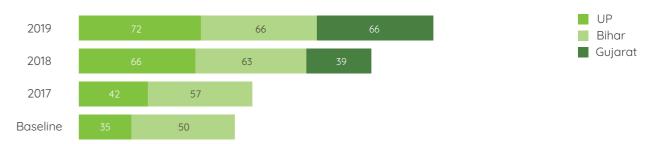
% of kids Practicing Hand washing (Observed)



Fact Sheet

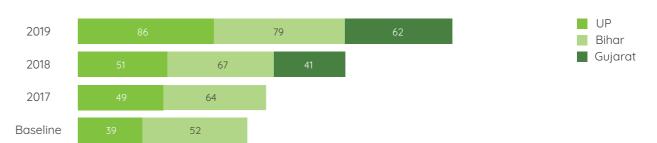
Status of Hygiene Corners, Cleanliness of Toilets and School Management Committees

Knowledge about role of Hygiene Corner in Maintaining Toilets

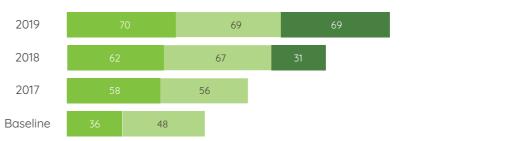


Availability of School Management Committee

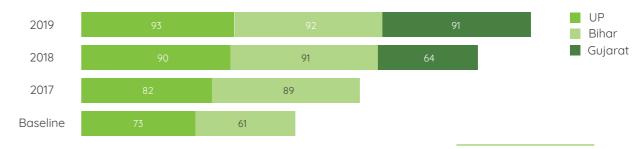
(As per children's response)



Cleanliness of Toilets



School Management Committee participation in Hygiene and Sanitation Activities



UP

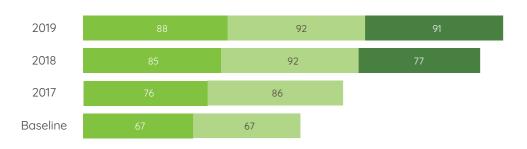
Bihar

Gujarat

Fact Sheet

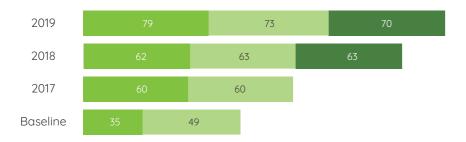
Sanitation

Knowledge about Prevention of Diarhhoea



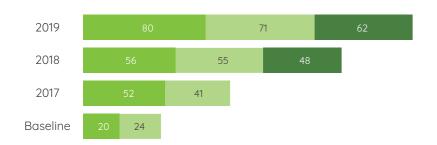


Attitude Towards Healthy Sanitation Practices



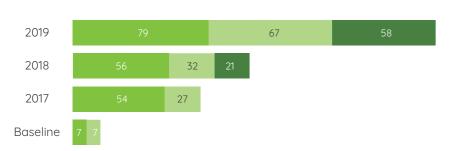


Positive Behaviour towards Sanitation Practices





Always Following Sanitation Practice

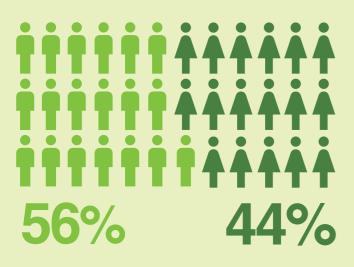






Analysis

Stakeholder: Students





Students follow all the necessary hygiene practices which have been taught in school

89% of all the students engaged follow all hygiene practices.*

Whereas, 11% of the students engaged mentioned that they follow at least one of the hygiene practices mentioned. (N=274)

Hygiene Knowledge Sharing by Students



Share hygiene knowledge with parents and family members



Share hygiene knowledge with friends and fellow students



Share hygiene knowledge with people in the community (neighbours)

Access and Usage of Toilet at School



Have access to and use a functional toilet, 12.7 % of the above do not use it regularly even though they mentioned its kept clean and tidy



Have access to a toilet but don't use it at all



Have no functional toilet at school

Access and Usage of Toilet at Home



No family member defecates in the open



Have access to a toilet at home



Have access to toilet but some members go out to defecate



Have a toilet at home but nobody uses it

11% of students do not have a toilet at home, so what they have learnt at school cannot be implemented at home as they lack the facilities. As a result, they have no choice but to go outside to defecate and urinate.

SROI

An SROI analysis goes beyond just measuring the financial aspects of social impact.

The process involved in analysis and the evidence of outcomes constructs a larger narrative of the qualitative and

7 Principles of SROI



1. Involve stakeholders



2. Understand what changes



3. Value the things that matter



4. Only include what is material

Look at the information collected and include only information and evidence that provides a realistic and genuine picture of the programme; reasonable conclusions can accordingly be drawn about their impact.



5. Do not over-claim



6. Be transparent

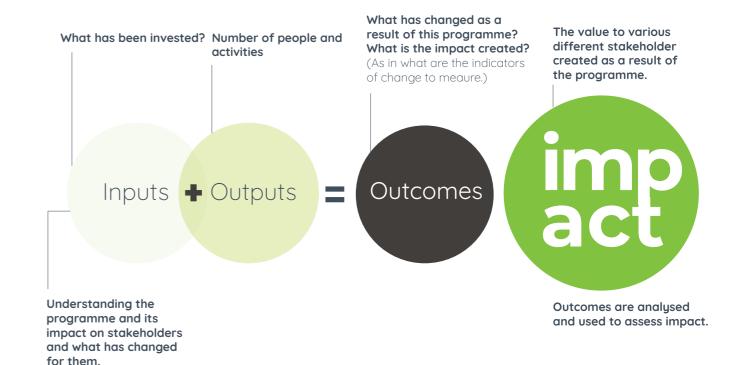


7. Verify the result

SROI Methodology

For this assessment, Social Return on Investment (SROI) was used as the methodology formalised by Social Value International. At its core, SROI is a measurement valuing both the financial and non-financial outcomes of social interventions. There are **four main elements** to how we have measured social value: inputs, outputs, outcomes, and impact (the SROI) as detailed below.





Engagement Process

- Mapping out key stakeholders of the programme
- 2. Identifying how and which resources were used to deliver activities
- 3. How these activities resulted in the outcomes for the target audience
- 4. Evaluating and evidencing outcomes and elected values based on stakeholder feedback
- Assessing the impact and the extent to which the activities have contributed to this impact



Students



Improved cleanliness in schools

The schools remain clean and green due to the student bodies adopting waste management initiatives such as reusing and recycling plastic waste into colourful decorative pieces, planters and creating Eco-Bricks to construct seating benches

N=274







Increased adoption of proper hygiene practices by parents/families

Students inform parents regarding the best hygiene practices and share WASH knowledge. N=274



97% of parents follow all hygiene



39% of parents started practicing all hygiene practices due to the SHEP curriculum knowledge shared with them by their children



safe menstrual practices*3

N=101











Improved access to sanitation leads to a reduction in open defecation at school

that resulted in improved access to and usage of toilets in schools due to the up-gradation of school WASH infrastructure.

N=274





Reduction in the number of families defecating in the open

not to defecate outside. **N=274**



Increased adoption of proper hygiene practices due to increase in knowledge

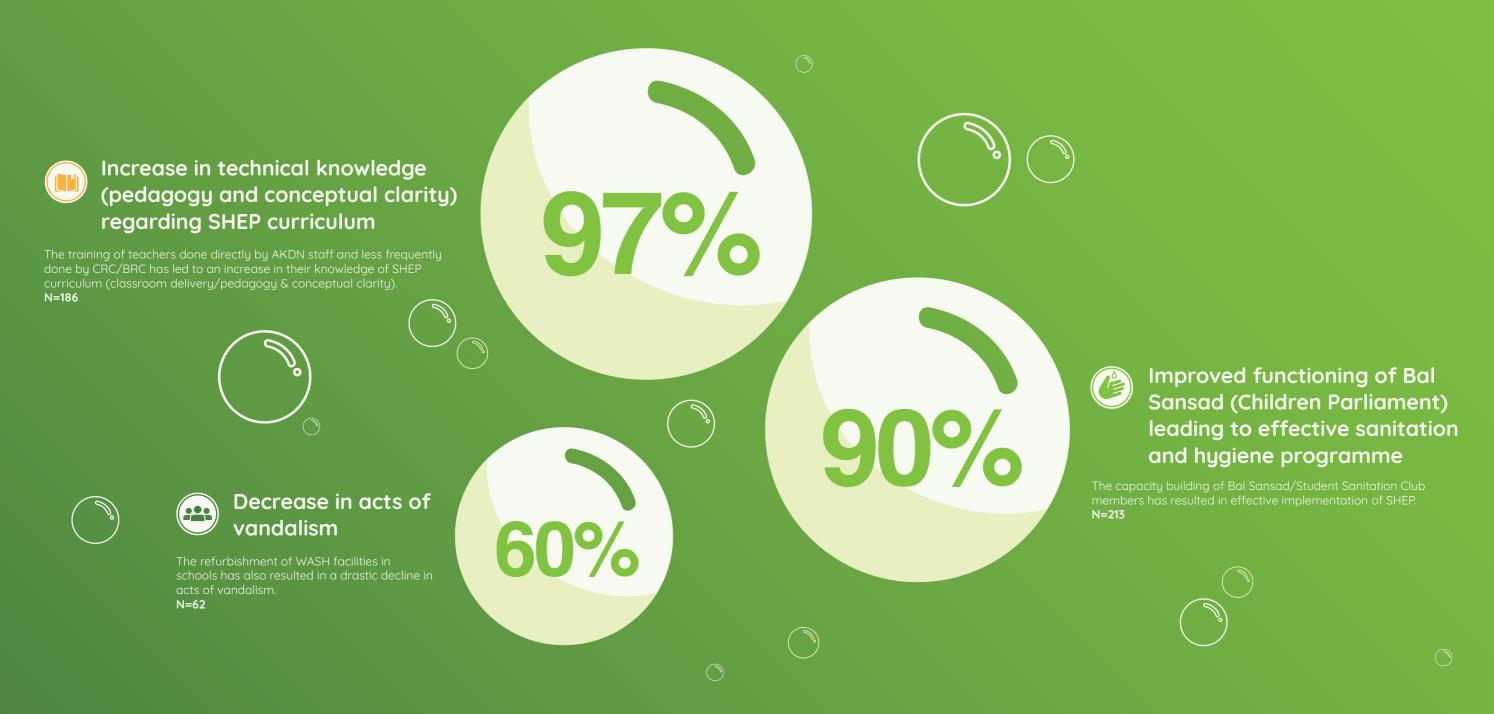
importance of personal hygiene and how to practice this knowledge.

N=192





Teachers and Headmasters







School Management Committee and Panchayat Members

Increased supervision of academic management

Parents are actively conversant with teachers and schools to understand their children's academic

Improved community outreach communication in simple and creative ways to the population in the neighbourhood of

Parents are able to influence their neighbours/community members by educating them regarding best practices in WASH and also regarding low-cost interventions in setting up WASH infrastructure. **N=51**

66%

Increase involvement of PRI in ensuring good WASH infrastructure in schools



Improved supervision by SMCs in handling of finance used for school development activities



Increased involvement in school governance

School Management Committees involved in day-to-day





the school



Parents coming together and influencing activities related to WASH in communities and helping students to initiate successful campaigns, ultimately influencing panchayat members to contribute to the success of their own and higher panchayat authorities' involvement.







Improved planning of WASH initiatives via SDPs (School











Cluster Resource Coordinator and Block Resource Coordinator



Increase involvement in planning and implementing WASH advocacy and promotional events

CRCs are able to implement effective campaigns on WASH. N=16



Improved coordination among block/cluster departments

Role clarification leading to effective implementation of Hygiene Curriculum and school related initiatives by CRC/BRC. N=16



38%



Improved collaboration between CRC and SMC/PRI for funding on WASH related educational initiatives

94%

CRCs/BRCs collaborating with SMC/Parents/PRI to raise funds for storming by AKDN staff N=16





Improved teacher training and knowledge management

N=16



Improved development of the cluster/block as resource rich academic centre



to better availability of reference materials for the teachers. N=16





Increase in formation of learning communities among educational stakeholders





Increase in adoption of better pedagogical practices by teachers

N=16







Members of the Aga Khan Development Network





Increases in respect by community and stakeholders



Increased Adoption of Hygiene Practices

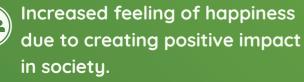
Facilitators being cautious and conscious about the environment they are in to with respect to sanitation and hygiene.











Ability to bring change in the life of students and community













Improved Knowledge

conceptual clarity makes facilitators expert in classroom facilitation.

N=29





Increase in Employability

N=29





Increased Leadership Skills







86%



Behavioural Change Communication

Capacity building of Bal Sansad/Student Sanitation Club members has improved effective implementation of SHEP by 90%, and teachers admit 79% of Bal Sansad members leading to work on WASH related behavioural nudges (Hygiene Corners, Soap Banks, posters, etc) effectively.





Teachers ranked Bal Sansad members highest, compared to other stakeholders like parents and community members, as highly active in promoting BCC (Behavioral Change Communication) methods

Major **School Hygiene Education Programme** interventions that helped to bring Behavioural Change Communication/aspect are:

- 1) Hygiene Corner: A dedicated corner to teach WASH practices using posters, paintings, etc.
- 2) Adoption of Games and Experiential Learning Methods: Gamification helped to make learning fun and day-to-day application led to experimentation of the lessons learnt at home and in school.
- 3) Distribution of Hygiene Kits: Access to soaps, hand-wash and sanitary pads.
- 4) Soap Banks: Soap kept near toilets and wash basins for use before and after meals or after using the



Replicable **Behaviour Change Communication** interventions and nudges include:

- 1) Encouraging headmasters to utilise the fund for 'Building as a Learning Aid' to paint footprints on the floor, designed to lead students to hand washing stations.
- 2) Introducing rotating posters in bathrooms to motivate and remind students to wash their hands. Messages targeting behavioural motivators for handwashing help (Example: Disgust, Social Affiliation
- 3) Sticking a pair of eyes or a mirror above the handwashing station to draw students' attention.
- 4) Soap dish with an arrow beside it on the wash basin to remind students to wash their hands with soap.

Source: Designing and Testing Nudges to Improve School Handwashing in the Philippines (Department of Education (DepEd) schools across Zamboanga Del Norte) - Study by IDinsight

At a cost of less than \$60 USD per school (PPP adjusted is equivalent to ₹1199 INR), IDinsight is recommending that the Department of Education scale up school-based nudges in other elementary schools in the Philippines, as a part of its WinS policy (WASH in School policy).

<u>55</u>

Impact Beyond the Scope

Knowledge Sharing

Additional value beyond the scope:

Programme outreach cost saved, due to children sharing their knowledge with the community, is ₹ 57 Lakhs per year.

Number of Children benefited through the programme = 4,69,215

92% of the students share their knowledge with parents and family members $4.69.215 \times 0.92 = 4.31,678$

74% of the students share their knowledge with friends and fellow students $4,69,215 \times 0.74 = 3,47,219$

54% of the students share their knowledge with members of the community $4,69,215 \times 0.54 = 2,53,376$

Total number of non-beneficiaries reached = 10,32,273

Cost per child = ₹ 5.6

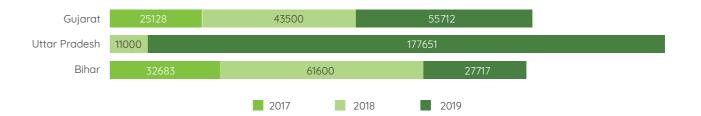
Cost saved due to the students sharing knowledge to people in their lives = ₹ 57,80,729

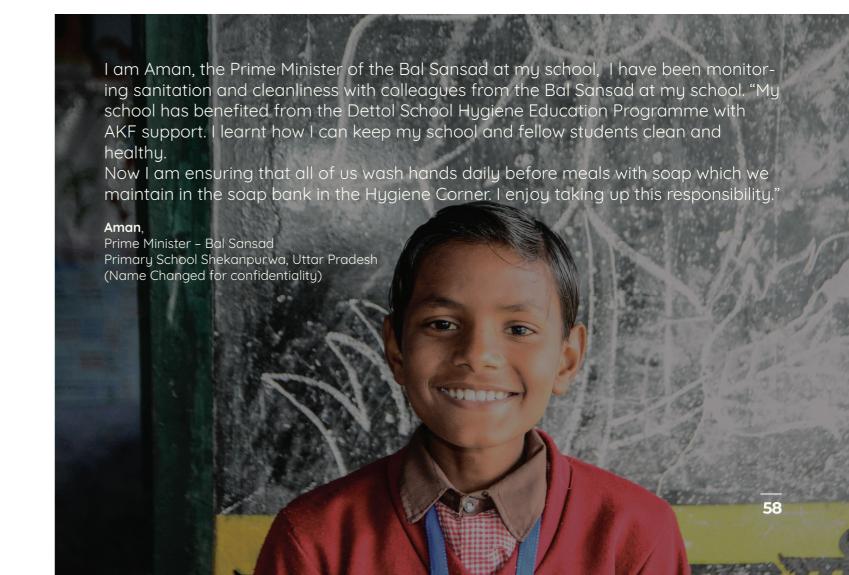
Replication of the Model

Increased promotion of replicability among non intervention schools of the School Hygiene Education Programme

94% of the government officials engaged for the study strongly believe in the replication of the model in non-intervention schools. Aga Khan Foundation was able to adapt and reinforce their model through learnings from various geographies, this led to a creation of a strong model for government agencies to replicate.

There have been other schools which have replicated the SHEP model and strongly advocate for the promotion of the SHEP model in non-intervention schools, however due to lack of accessibility for the study to be conducted on field these aspects were not captured. The below graph shows the growth of the School Hygiene Education Programme over the last three years across various geographies:





Impact Values



4,69,215

Total Number of Children reached



₹159,322,468

Total cost leveraged through all partners



₹ 5,264,976,570

Total Social Value Created



For every ₹1 invested in the School Hygiene Education Programme delivers ₹33.05 of social value.

Sensitivity Analysis



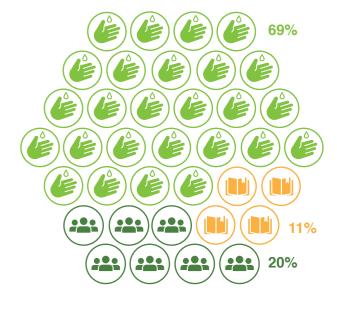
Valuation

To measure the social value and impact created in monetary terms, financial values have been assigned to things that do not have a market price. For this study, the financial values were determined using primary sources (revealed preference).

Revealed preference valuation proxies were taken directly from stakeholders of the School Hygiene Education Programme, giving them the agency and autonomy to determine their own impact valuation.

Stakeholder	No. of Stakeholders Engaged	Mode of Engagement
Students/ Student Proxy	10	Video Calls
Teachers and Headmasters	11	Video Calls
SMC and Panchayo Members	^{at} 5	Video Calls
CRC and BRC AKDN Members	7 6	Video Calls Video Calls

Total Impact Based on Value Created



Please refer to the annex for a full list of impact valuations per indicator or click **here** for the Impact Map

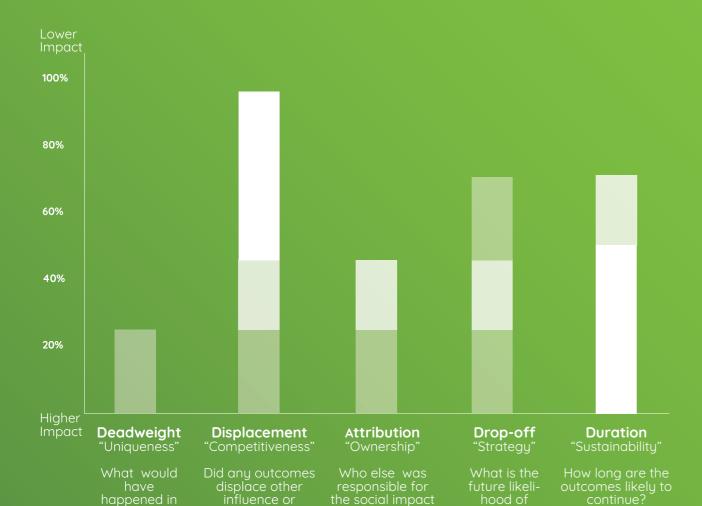
Sensitivity allows for a reasonable assumption of over and under estimates, resulting in the most likely range of impact achieved by the programme. The assumptions being offset include sample and valuation bias and externalities.





Externalities

External factors on SHEP's social interventions have been included to devalue claims of impact calculation, accounting for other influences in creating social value as per the following:



any case, if the project had not taken

Low deadweight means that the programme is unique and there are not many similar programmes

being executed by other organisations.

Displacement:

Deadweight:

Low displacement means that the constituents preferred this programme other similar programmes (if any available).

Attribution:

Moderate attribution, accounts for factors outside the programme that influence its beneficiaries.

Drop-off:

Drop-off is the measure of how much value is lost in subsenquent years.

Duration:

High duration means that the change will last longer

participants abandoning the practices

Quantity:

Measures how effective the programme is at reaching the constituents







Recommendation: Upgrades and availability of school and potentially home WASH infrastructure should be treated as a prerequisite to bringing about behaviour change amongst the students

Data

20% of students who do not have access to toilets in schools have not discussed hygiene practices at home

17% of the students who claimed that cleanliness in their schools was poor or very poor, also did not discuss hygiene practices at home

16.3% of the schools with a SDP do not have dedicated funding for operations and maintenance of WASH infrastructure

58% of the SMC and PRI members claim that the funds provided by the government are insufficient to carry out all WASH related activities in schools

Rationale

The gap in proper implementation of the programme usually arises where the WASH infrastructure quality is either poor or not available.

The students are keen to learn and practice good hygiene, however, lack of WASH infrastructure in schools restricts them from following the good hygiene practices taught to them.

Relying only on one source of funding does not meet the financial requirements of a school for proper operations and maintenance of school WASH infrastructure.

Implementation

Before beginning BCC related activities in intervention schools, there is a need to ensure that the schools are equipped with functional WASH facilities.

Make multiple sources of funding available for all intervention schools for the operations and maintenance of school WASH infrastructure.

Recommendation: Mainstream 'Menstrual Hygiene Management' in the programme

Data

38% of adolescent female students don't have access to sanitary pads during the lockdown

31.5% of adolescent female students claimed to have never used feminine hygiene products

A drop out rate of 30% has been observed amongst female students in intervention schools.

23% of girls drop out of school on reaching puberty due to the inability to manage their periods in school (ref: https://www.downtoearth.org.in/blog/health/23-girls-drop-out-of-school-on-reaching-puberty-59496)

Rationale

For many adolescent female students, schools remain the sole source of access to sanitary pads and hence, the only means to adopt safe menstrual hygiene practices.

Poor sanitation in schools and lack of access to good quality sanitary products can be associated with lower enrolment in schools, absenteeism, and dropout (ref: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6286883/).

Implementation

Encourage production of local, low cost and ecological sanitary pads by conducting sanitary pad making workshops in schools and distributing hygiene kits containing feminine hygiene products and pain relievers.

For better MHM, schools should have a place to wash / change for girls, sanitary items, and a discrete disposal unit.

Encourage kishori groups for peer-to-peer support and sensitisation (Ref: https://www.unicef.org/wash/schools/files/MHM_study_re-port_Burkina_Faso_and_Niger_English_Final.pdf).

Partner with research institutes to investigate cultural norms and religious taboos associated with menstruation in the intervention areas and come up with strategies to combat them.

67



Recommendation: Introduction of classroom observation tools to help teachers introduce better pedagogical practices

Data Classroom delivery of the curriculum is crucial. New York University introduced

TIPPS after 30 years of research on effective pedagogy practices. Teacher Instructional Practices and Processes System (TIPPS) is an observation tool that aims to understand the quality of the classroom environment. (https://steinhardt.nyu.edu/ihdsc/global-ties/initiatives/ad-

vanced-methods/teacher).

Rationale Standardising pedagogy can help teachers in effective learning facilitation, and

can also be scaled up across different locations and by like minded organisa-

tions

Implementation Cluster facilitators need to be trained on usage of the tool with 19 observation

indicators in the classroom. Teachers should be aware and given orientation. Cluster Facilitators should motivate the teachers to take a 20 minute video of their classroom facilitation and discuss the same with the indicators they can

improve.

Recommendation: Development of a Needs Analysis Tool for teachers to bring conceptual clarity in planning lessons properly according to the skill sets of students

Data Learning capacity of students is unique. Mapping and understanding where a

student stands is really useful in planning lessons, which is ultimately needed of

the teacher.

Rationale Classroom grouping with students having different skill sets and allotting

exercises helps to teach efficiently and bring conceptual clarity to all students.

ImplementationDividing the hygiene curriculum into different skills (Skill 1, Skill 2, Skill 3, etc) according to the intensity (Class 3, Class 5, Class 7) and promoting teachers

to plan lessons with the framework guidelines.

Recommendation: A coaching need analysis tool to work on leadership skills, targeting headmasters/principal

Data

AKDN staff during the interviews and IDIs emphasised the importance of working with the landership (adjusting system) to bring effective governance in SUED initiatives.

the leadership (education system) to bring effective governance in SHEP initiatives.

Rationale Working on leadership of school by regular coaching, understanding where HM/

Principal needs support can help SHEP sustain school interventions.

Implementation Setting a framework to understand the requirements for each school is important.

Thus, working with principals and cluster facilitators can bring tailor made WASH solutions to each school. Strengthening of leadership skills of key constituents of the programme to bring hygiene education to the forefronts in the overall development

initiative.

Recommendation: Targeting SHEP related health outcomes by collaborating with Government Health and Education departments to bring more community level accessibility

DataGiven the importance by government connecting health and hygiene initiatives, AKDN staff shared their belief that SHEP can bring a long lasting impact via improved health

outcomes

The importance of hand hygiene has been known since 19th century. It helps in reducing:

1) Incidence of acute respiratory infections (ARI's)

2) Diarrhoea rates when done at critical times - including before eating or preparing food and after using the toilet

3) Incidence of diarrhoea when done at primary schools and daycare centers

4) Challenges to new born survival rates when practices by birth attendants and mothers

Implementation

Rationale

Possible strategies that can be deployed by SHEP towards wider health outreach:

1) VHSND - Understand the presence and activeness of VHSND's in SHEP' intervention

2) ICDS - Understand the community access of ICDS scheme, interventions by ASHA workers towards RKSK (Rashtriya Kishor Swasthya Karyakram) and leveraging existing collaborative committees.

3) SHGs - Equip SHG members as micro-entrepreneurs by engaging and offering simple health and sanitation related products and services.



Recommendation: Strengthen the role of the community for an improved and lasting impact

98% of the SMC and PRI members believe that their involvement in schools

improved the condition of WASH infrastructure

Rationale Schools that observe greater involvement by the community in its sanitation

efforts are in superior condition compared to the ones that observe little to no

involvement by the community.

Implementation Focus on building and strengthening ties amongst various stakeholders of the

programme to give them a sense of teamwork.

Assign them the role of carrying forward the goals of the programme to

ensure the sustainability of the programme's impact.

Recommendation: Encourage entrepreneurial initiatives within the school leveraging school clubs/bal sansad

Data

To promote behavioural change in schools related to WASH, accessibility to WASH facilities (such as soan) matters. As they face resource scarcity.

WASH facilities (such as soap) matters. As they face resource scarcity, encouraging schools and students to make soaps in a low cost manner can

help them access soap/hand wash.

RationalePromoting students to find solutions for their own problems will encourage them to become problem solvers and the programme will help students to

build new habits among themselves and in the community they live.

Implementation Forming WASH clubs across schools with the help of Bal Sansad, students can

start making soaps, detergents, bathroom lotions, etc and start small ventures which will help them to become problem solvers in their community/school.



Recommendation: Monitoring Increase in Student's Learning Outcomes

Data The SHEP interventions are able to increase the attendance rate by **52.5%.**

Benchmarking it with secondary resources, demonstrated that there is at least an increase of **25%** in attendance via WASH interventions across the world.

Rationale Even without any interventions, Government Schools in India show an average

increase of **5%** Student Learning Outcome (SLO) with interventions, the SLO varies between **15%** to **25%**. On an average, NGOs and foundations reach a

18-20% increase in SLO via interventions.

Implementation As the number of intervention schools are really high, conducting a large scale

RCT study via third party assessment can bring more insights to understand the programme's influence in improving the learning outcome of schools.

Recommendation: Outreach of SHEP programme to regions where there are less interventions (other organisations)

Data There are similar programmes working in the same geography SHEP operates,

with major components such as campaigns, curriculum, and $\,$ teacher training.

Attribution is 42.5%

Rationale By reaching out to regions where there are less WASH interventions, SHEP can

reduce its externalities almost to zero.

Implementation Expansion of the programme to areas with fewer WASH interventions would

lead to increased attribution of the impact on beneficiary towards the

programme.

71



Recommendation: SHEP's WASH initiatives can adopt campaign model to build quality standards for delivery across operations to ensure consistency of delivery. To track the sustainability of campaign mode initiatives, SHEP can introduce Maturity Model (MM)

Data

WASH initiatives in schools are supported by campaign mode initiatives from the government (Swachh Vidhyalay Abhiyan). AKDN staff emphasised the importance of reaching milestones for schools by collaboratively working with government to sustain impact.

Rationale

SHEP interventions are multi stakeholder dependent. Mapping how each initiative should reach towards sustainability will help us to understand how we can enable stakeholders as effective change makers. This will also bring role clarity for each stakeholder in achieving the impact SHEP wishes to create. The Maturity Model will help AKDN to set milestones, pause and check, rework if necessary and then proceed towards SHEP's north star.

Implementation

Maturity Model can be used for all SHEP processes and interventions, to map at what stage it is and what can be done to reach **'Sustainability'**. There are five stages:

- 0) Non-existence
- 1) Set up
- 2) Initial Success (Campaign and Commitment)
- 3) Regularity (Consistent delivery for three months)
- 4) Governance
- 5) Sustainability (not person dependent, system takes care)

After the 3rd stage, evidence of commitment needs to be checked. Post **'Regularity'**, Impact Assessment needs to be done.

the

Conclusion

Hygiene is highly valued by our stakeholders, it has a significant impact on their lives. Hygiene has been prioritised by all constituents of the programme, which in turn leads to lasting behavioural changes in their lives.

The future wicked problem of the Dettol School Hygiene programme will hinge upon longevity and the resilience of its message. The ratio of 1:33 is extremely positive as against global and Indian comparison, as well as hygiene and SROI benchmarks. Despite respondents being away from the programme for months, and coming from low income backgrounds, there was a significant total value created. Additionally, response rates for take-home impact and behaviour change were extremely high. These factors demonstrate the validity and likely sustainability of this and expanded social investments in the WASH domain.

t is clear that the COVID-19 pandemic and subsequent lockdown has had two effects on the population of this study:

- Never before has sanitation received so much attention at the national and international level. Implementing recommendations from the programme has never been easier, nor more widely accomplished. This is a net-positive for both the short-term and medium-term sanitation and hygiene situation of rural India, regardless of causality and links to any one programme (and regardless of the valuation of this study).
- 2) Increase in hygiene-related external activities by the government and the absence of school hygiene activities during the pandemic, may likely decrease the valuation for the study.

SHEP stakeholders shared that Hygiene Education helped them well to be prepared to face COVID-19. Swachl Bharat Mission (SBM II) phase 2 holds major significance while India is dealing with COVID-19 pandemic.

37% of the total outlay **₹1,40,881 crore** being allocated from the Department of drinking water and sanitation itself shows the importance given by the government in Hygiene related initiatives via SBM II.

The importance given to ODF Sustainability & SLWM (Solid and Liquid Waste Management) in SBM II is an opportunity for SHEP to develop a cadre of Hygiene warriors from childhood onwards via school and community interventions to steer the agenda of SBM II with the government to impact policy making.

The COVID-19 panic has likely helped this message stay even more relevant and transfer from school-to-home-to-community more effectively. This pandemic will eventually subside, but people will not forget and will evolve their priorities and approach to hygiene.

Sustainable Square

Sustainable Square is an advisory firm that delivers impact through redefined solutions in the field of social investment, sustainability and environmental practices. More than just an advisory firm however, Sustainable Square is a culture in itself.

ensures that each intervention is localised and assessed on an individual basis.

Sustainable Square has developed a globally robust Social Impact Measurement Framework and

Sustainable Square's team of experts have served leading organisations in various industries across the globe, transforming the way businesses are conducted. The team consists of advisors with expertise covering a spectrum of industry-relevant disciplines. This diversity means that clients can tap into a broad knowledge base and ensures that delivery is always to a high-level global standard. The following table includes all the services Sustainable Square currently offers:



ESG

- ESG Due Diligence
- ESG Strategies Implementation
- ESG Benchmarking Analysis
- ESG Disclosure and Reporting



Impact Investment

- Impact Portfolio
- Strategy Development and Management
- Designing ImpactFunds/Bonds and Transaction Advisory
- Impact Portfolio Evaluation and Management
- Impact Investment Ecosystem Building



Sustainability & Climate change

- Sustainability Benchmark & Materiality Analysis
- Sustainability Strategy and Integration
- Sustainability Reporting and Assurance
- Sustainable Supply Chains and Procurement
- SDGs Alignment and Strategies
- Climate Change Risk Assessment
- GHG Protocols and Reporting.
- Corporate and Products' Carbon Footprints.
 Ecosystem Building.



Social Impact

- Social Investment
- Strategies
- Human Rights Impact
 Assessments
- Social Impact Monitoring, Evaluation and
- Measurement

 Community Needs
- Assessments
- Charity & Philanthropy Management Social Economic Study



Eric Hensel

75

Co-Founder and Sustainable Square India - CEO Stakeholder Engagement and Research Incharge



Eman Hussain

Sr. Sustainability and Social Impact Advisor Global Research Lead



Jinu George

Project Manager - In Operations Lead



Subhag Raj

Social Impact Advisor -India Local Stakeholder Engage ment Team







Limitations of the study



All engagements with participants were conducted remotely during COVID-19 lockdown in India.



Only participants with mobile phones and available networks could be reached.



Students have been staying at home for the last 3 months prior to the engagements as a measure taken by the governments to counter the pandemic, thus potentially affecting responses in an unknown manner.



Increased social media and government pressure on hygiene & sanitation during the pandemic, had likely affected externality estimations (This could affect the discounting factors to an unknown degree).



Increase in school enrolment and reduction in school children dropping out were not accounted for, and as a direct correlation was not established through this study due to unavailability of data from schools.

Assumption:

Population size of Panchayati Raj Institutions involved in the programme. 3 PRI members per school have been taken as an estimate, $3 \times 3055 = 9165$ members in total.

Benchmarking

- According to the report on CSR in WASH by Samhita, **26%** of CSR WASH projects benefit only schools, whereas **48%** benefit both schools and communities.
- According to the same report, although **28%** of girls face difficulties in schooling during menstruation, very few WASH programmes provide support for menstrual management in schools.

Name of the organisation (India)	Programm	me	State	N	Main a	activities	Supports Schools	Sanitation Infrastruc- ture/ Supplies	Sanitation and hygiene awareness	Menstrual hygiene awareness	Training and working with Teachers	Works with Panchayats
UPL	Sanitation	& Hygiene Awareness	Gujarat	Ir	nfrastr	ructure improvements, awareness drives, behaviour change	Yes	Yes	Yes	Yes	No	No
Bayer	Sanitation	& Hygiene (SAHY)	Andhra Prac	lesh Ir	nfrastr	ructure improvements and awareness	Yes	Yes	Yes	No	No	No
Dabur & Sundesh	700 Se 7 k	Kadam	Uttar Prades	sh Ir	nfrastr	ructure improvements, awareness, behaviour change	Yes	Yes	Yes	Yes	No	No
Atul	Atul Found	dation	Gujarat	Ir	nfrastr	ructure improvements, awareness, behavior change	Yes	Yes	Yes	No	No	No
Bharti Foundation	Satya Bho	arti School Program	Multiple state	es Ir	nfrastr	ructure improvements, awareness, behavior change	Yes	Yes	Yes	Yes	No	No
PwC & Reaching Hand	School Sa	nitation Programme	Karnataka	Ir	nfrastr	ructure improvements, awareness, behavior change	Yes	Yes	Yes	No	Yes	No
Hindustan Unilever Ltd	Swachhat	a Curriculum, others	Multiple state	es Ir	nfrastr	ructure improvements, awareness, behavior change	Yes	Yes	Yes	Yes	Yes	Yes
Jindal SPL	Subhangi		Odisha, Chh	atisgarh A	Awarer	ness, supplies, behaviour change	No	Yes	Yes	Yes	No	No
Tata Trusts	Menstrual	Hygiene Management	Multiple state	es A	Awarer	ness, supplies, behaviour change	No	Yes	Yes	Yes	No	No
Ambuja Cement Foundation	Sanitation	Programme	Multiple state	es Ir	nfrastr	ructure improvements, awareness, behaviour change	Yes	Yes	Yes	Yes	Yes	No
Name of the organisat (Interneational)	tion	Programme		Country	ı	Main activities	Supports Schools	Sanitation infrastructure/ supplies	Sanitation and hygiene awareness	Menstrual hygiene awareness	Training and working with teachers	Works with Panchayats
WaterAid UK, Banglades Zambia and Emory University, Atlant		Menstrual Hygiene M	atters	Banglades Zambia		Menstrual hygiene management, awareness, behaviour change	Yes	Yes	Yes	Yes	Yes	No
SNV Netherlands Develor Organization, Zambia (cof the National Technica Group on WASH in Scho	on behalf al Working	Menstrual Hygiene M	anagement	Zambia	ŀ	Hygiene management	Yes	Yes	Yes	Yes	No	No
UNICEF Pakistan		Pakistan Approach to Sanitation	Total	Pakistan		Menstrual hygiene management, awareness, behaviour change	Yes	Yes	Yes	Yes	Yes	Yes
Nepal Fertility Care Cent (NFCC), Kathmandu, Ne UNICEF Nepal		МНМ КАР		Nepal		Menstrual hygiene awareness and management	No	No	Yes	Yes	No	No
Community Education S Canada, Barrie, Canada and Kakamego		CES Canada Pad Pro	fect	Kenya	ŀ	Health care services for orphaned young girls	Yes	Yes	Yes	Yes	No	No

81

Valuation and Input Cost

Stakeholder	Indicator	Value
Students/Parents	Improved cleanliness in schools	48,44,46,346
Students/Parents	Increased adoption of proper hygiene practices due to an increase in knowledge on the same due to the SHEP intervention	47,48,80,803
Students/Parents	Improved access to sanitation leading to a reduction in open defecation at school	20,77,88,099
Students/Parents	Increased adoption of proper hygiene practices by parents/families	19,06,64,314
Students/Parents	Increase in the adoption of safe menstrual practices by female students	13,42,08,189
Students/Parents	Reduction in the number of families defecating in the open	8,44,55,349
Teachers/Principal	Decrease in acts of vandalism	89,61,494
Teachers/Principal	Increase in technical knowledge regarding SHEP curriculum	49,02,609
Teachers/Principal	Improved functioning of Bal Sansad (Children Parliament) leading to effective sanitation and hygiene programme	45,64,985
SMC	Improved supervision of academic management	11,25,28,769
SMC & PRI	Improved support in community mobilization for school development activities through fundraising and regular monitoring through school visits	6,20,81,074
SMC	Improved supervision by SMCs in handling of finance used for School Development Activities	2,56,36,649
SMC	Improved community outreach in simple and creative ways to the population in the neighborhood of the school	2,29,47,073
SMC	Improved planning of WASH initiatives via SDPs (School Development Plan)	1,95,47,178
SMC	Increased involvement of SMC in ensuring good WASH infrastructure in schools.	73,82,595

Stakeholder	Indicator	Value
CRC/BRC	Increase involvement in planning and implementation of WASH advocacy and promotional events	5,18,845
CRC/BRC	Improved coordination among block/ cluster departments	3,53,331
CRC/BRC	Improved teacher training and knowledge management	2,26,092
CRC/BRC	Improved development of the cluster/block as resource rich academic centre	1,18, 922
CRC/BRC	Increase in formation of learning communities among educational stakeholders	1,14, 250
CRC/BRC	Increase in adoption of better pedagogical practices by teachers	1, 04, 056
CRC/BRC	Improved collaboration between CRC and SMC/ PRI for funding on WASH related educational initiatives.	78, 332
AKDN	Improved technical knowledge in pedagogy and conceptual clarity	4,247
AKDN	Increased feeling of happiness due to creating positive impact in society	4,095
AKDN	Improved adoption of hygiene practices	3,453
AKDN	Increased leadership skills	3,065
AKDN	Increases in respect by community and stakeholders	2,759
AKDN	Increase in employability	1,741

^{*}These valuations have been calculated before applying discount rate of 5.8%

The discount rate was derived from recent historical average of interbank lending rate.

Input Cost: ₹159,322,468

Donor : Reckitt Benckiser, AKDN and cost leveraged through various stakeholders and Initiatives

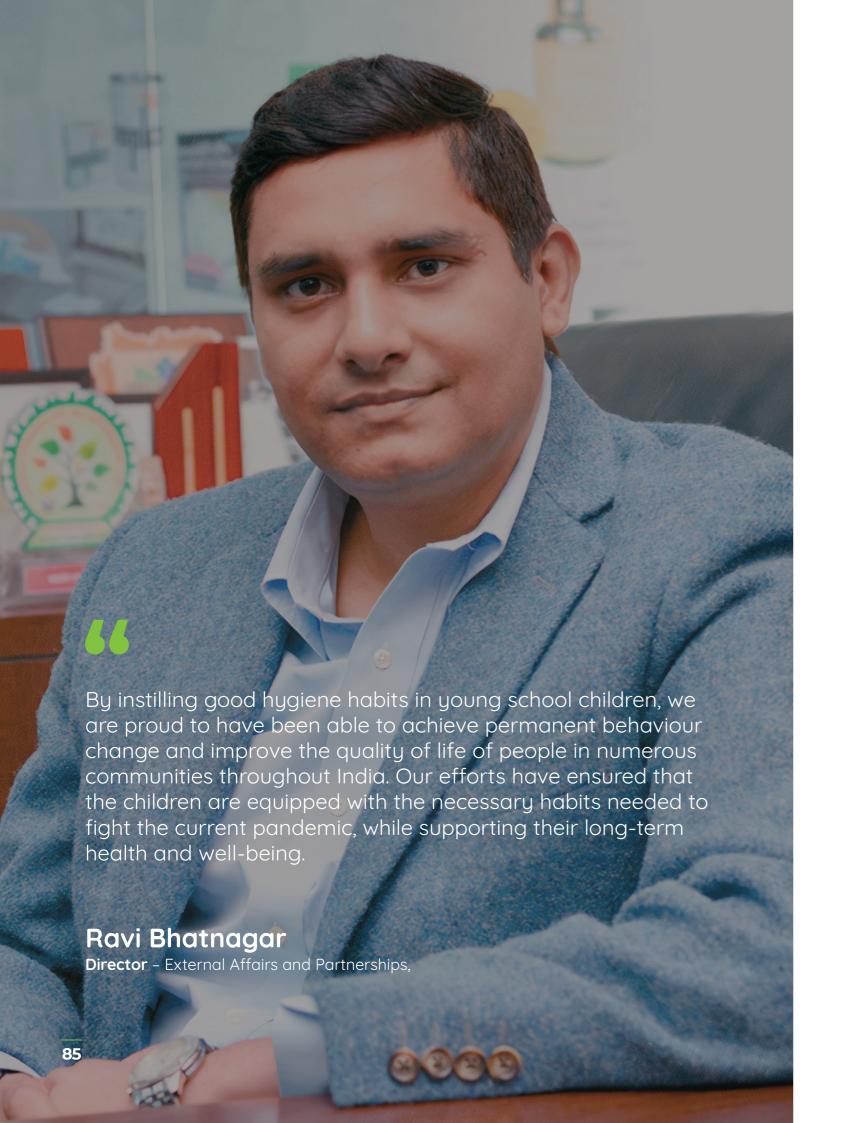
Impact Map

Scan the QR Code to access the impact map or Click **here**



Contacts for this report:

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"Wherever we live, whatever we do, we want to secure a healthy and happy life for ourselves and those closest to us. Therefore, we research, test, create and produce effective and convenient solutions to the everyday challenges faced by people all over the world."

