SANITATION AND HYGIENE
THEORETICAL EXPOSITIONS AND POLICIES ,SCHEMES

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Abstract: Sanitation and Hygiene is most important after pandemic in the school. The obstacles to improving the sanitation problem in rural India include poverty, cultural prejudices, lack of awareness, and a shortage of running water, among others. Sixty-five percent of the rural population in India either practices open defecation or has inadequate access to toilet facilities. Nearly half of Indians defecate into the environment, which pollutes water and leads to the number one cause of diarrhea-associated deaths in children. More than 140,000 children under the age of five die every year from diarrhea caused by unsafe water and poor sanitation in India. Poor sanitation is linked to transmission of diseases such as cholera, diarrhoea, dysentery, hepatitis A, typhoid and polio and exacerbates stunting. Poor sanitation reduces human well-being, social and economic development due to impacts such as anxiety, risk of sexual assault, and lost educational opportunities. In this paper researcher Explained about Sanitation and Hygiene polices and theoretical expositions ,schemes all over India. Each scheme is launched to provide benefits to the individual in certain areas of their life.

Key words : Swachh Bharath, Sanitation and Hygiene ,schemes, policies.

I. INTRODUCTION
The impact of universal access to WASH on global health would be profound. There is the potential to save the lives of the 829,000 people who currently die every year from diseases directly caused by unsafe water, inadequate sanitation and poor hygiene practices, and we could also drastically reduce child malnutrition, and help alleviate physical and mental under-development. Today, 50% of child malnutrition is associated with unsafe water, inadequate sanitation and poor hygiene. Women and girls would have the facilities and knowledge to be able to manage their menstrual cycles in safety and dignity.

This Paper deals with the Theoretical expositions & Policies, Schemes related to the School Sanitation and hygiene Education in primary School Children
1. Swachh Bharat Mission

Restructuring of the Nirmal Bharat Abhiyan (NBA) into Swachh Bharat Mission and its launch to accelerate the efforts to achieve universal sanitation coverage and to put focus on sanitation, the Prime Minister of India, Narender Modi, launched the Swachh Bharat Mission on 2nd October, 2014. As a fitting tribute to the 150th Birth Anniversary of Mahatma Gandhi, which in rural areas shall mean improving the levels of cleanliness in rural areas through Solid and Liquid Waste Management activities and making Gram Panchayats Open Defecation Free (ODF), clean and sanitized.(SBM-2014 Gov.of .India)

Bal Swachhta Mission

The Bal Swachhta Mission is a part of the nationwide sanitation initiative of ‘Swachh Bharat Mission’ launched by the Prime Minister on 2nd October, 2014. Cleanliness habits should be imbibed in the children in informal ways like small games, poems, storytelling, conversation with children.

Bal Swachhta Mission six themes

Clean Anganwadis, Clean Surroundings e.g., Playgrounds, Clean Self (Personal Hygiene/Child Health), Clean Food, Clean Drinking Water, Clean Toilets

Swachh Bharath: Swachh Vidyalaya

Swachh Bharath Swachh Vidyalaya is the national mission ‘Clean India: Clean Schools’. A main aim is that every school in India has a set of functioning and well-maintained water, sanitation and hygiene facilities. In every school provide healthy school environment and to develop or support appropriate health and hygiene behaviors

It aims to improve the curriculum and teaching methods while promoting hygiene practices and community ownership of water and sanitation facilities within schools.

It improves children’s health, school enrolment, attendance and retention for next child of healthy children.

Swachh Vidyalaya The Essential Elements

School Interventions are very important in the country to child behavior and attitude towards water, good Water, Sanitation and Hygiene Programme.

Following is essential elements

Sanitation, Daily handwashing with soap before mid-day meal, Drinking water, Operation and maintenance (O&M), Behavior change activities, Enhanced capacities

National Education Policy -2020 : 4.26. Basic training in health, including preventive health, mental health, nutrition, personal and public hygiene, and first-aid will also be included in the curriculum, as will be scientific explanations of the detrimental and damaging effects of alcohol, tobacco, and other drugs.

Following are the key policy initiatives by Government of India Constitution

The RTE Act 2009 provides a legally acceptable rights framework with certain time targets that Governments must confirm to. The Schedule to the RTE Act let fall the norms and standards water and sanitation for a school building. A school building has to be an all-weather building comprising at least one classroom for every teacher, barrier free access, separate toilets for boys and girls, safe and adequate drinking water facility for all children.
Policies and programmes

1. **Sarva Shiksha Abhiyan (SSA)** is Government of India’s flagship programme for achievement of Universalization of Elementary Education (UEE) in a time bound manner. Water, sanitation and hygiene infrastructure facilities are provided in all new schools.

2. **The mid-day meal Programme** is a nutrition programme which reaches almost 10 crore children daily, in 12 lakh schools. To enhance the nutritional outcomes Group handwashing with soap before mid-day meal is promoted across the country.

3. **Rastriya Madhyamik Shiksha Abhiyan (RMSA)** launched by Ministry of Human Resource Development, March, 2009, to enhance access to secondary education and to improve its quality. Besides it also lays emphasis on secondary schools to conform to prescribed norms of providing access to quality physical infrastructure like good classrooms, quality toilet infrastructure and drinking water provisions, and norms of removing gender, socio-economic and disability barriers.

4. **Kasturba Gandhi Balika Vidyalaya (KGBV)** aims at residential schools especially established for disadvantage girls groups those who are SC,ST to educate them and access the quality education. Infrastructure support to these centers includes safe drinking water and toilet facilities as per the prevailing SOR rates.

5. **Swachh Bharat Kosh (SBK)** launched by Hon’ble Prime Minister on 15th August, 2014 to achieve the objective of Clean India (Swachh Bharat) by the year 2019, the 150th year of the birth anniversary of Mahatma Gandhi through Swachh Bharat Mission to attract corporate social responsibility. In 2014 to improving sanitation facilities in the rural and urban areas, particularly, school premises.

6. **Hon’ble PM launched Rashtriya Gram Swaraj Abhiyan (RGSA-2018)**, the ‘Transformation of Aspirational Districts’ program aims to fast and efficiently transform selected districts. These districts were selected on parameters like poverty, public health, nutrition, education, gender, sanitation, drinking water, livelihood generation which are in sync with SDGs and fall within the realm of Panchayats. RGSA is proposed to be implemented as a core Centrally Sponsored Scheme (CSS) for four years viz., from 2018-19 to 2021-22 with State and Central shares. RGSA scheme now extends to all states and Union Territories.

7. **Behaviour Change for Water, Sanitation and Hygiene**

   In every Indian school implementation, the Sustainability of interventions to change the students behavior effectively and then specific to the school setting, behavior change must include improvements in handwashing practices, better maintenance and use of toilet facilities and the use of safe drinking water, and improved menstrual hygiene amongst adolescent girls.

8. **School Sanitation and Hygiene Education program (SSHE)**

   It was launched in 1999 as part of the broader Total Sanitation Campaign by the Ministry of Drinking Water and Sanitation to improve sanitation facilities throughout India. UNICEF collaborated with 6 countries like, Burkina Faso, Colombia, Nepal, Nicaragua, Vietnam, and Zambia in the program’s implementation, and has continued to expand its efforts. SSHE emphasized school sanitation as a mechanism to bring about broader social change in sanitation practices (Snel, 2003).

   The SSHE program sought complete school-Sanitation coverage in rural areas for two main purposes:
   
   (1) creating a healthier environment through the elimination of open defecation and reductions in disease and worm infestation; and
   
   (2) reducing security risks for girls attending school, particularly for pubescent-age girls. all resources used for school latrines built, the hygiene education to the distribution of handouts and posters to teachers and schools.
9. “Total Sanitation Campaign (TSC)”

“Total Sanitation Campaign (TSC)” highlight more on Information, Education and Communication (IEC), Human Resource Development, Capacity Development activities to increase awareness about sanitation facilities among the rural people. The Programme is being implemented with focus on community-led and people centered initiatives. This Programme, therefore, deliberate to tap their capabilities as the most convincing of good sanitation practices in the household in the villages. The aim is also to provide separate urinals/toilets for boys and girls in all the schools/ Anganwadis in rural areas in the country.


The Kitchen cum Store should be clean and free from filthy surroundings and should maintain overall hygienic environment. The person suffering from infectious disease should not be permitted to work. All cook cum helpers always wash their hands before meals and after toilet, wear hygienic clothes and finger nails trimmed, raw or contaminated food or using toilet. Nail polish or artificial nails should not be worn because they can become foreign bodies and may compromise on food safety. During cooking cook cum helpers must remove the watches, rings, jewellery and bangles, serving and distribution to avoid the food contamination. Chewing, smoking, spitting and nose blowing should be prohibited within the premises especially while handling food. All utensils should be kept clean, washed, dried and stored at the Kitchen cum store to ensure freedom from growth of mold/ fungi and infestation. If kerosene/gas is used for cooking, the CCHs should be specifically trained in safe handling of stoves, gas cylinders, etc. Raised platform for cooking, adequate light, proper ventilation and arrangement for drainage and waste disposal. The dustbin should have a lid and should be always covered.

11. Central Rural Sanitation Programme

Central Rural Sanitation Programme (CRSP) was launched in 1986 primarily with the objective of improving the quality of life of the rural people and also to provide privacy and dignity to women. Adequate availability of drinking water and proper sanitation are compulsory for Individual Health and hygiene. Major causes of many diseases in developing countries don’t have purified drinking water, human excreta outside flow, improper environmental sanitation and lack of personal and food hygiene. Prevailing High Infant Mortality Rate is also largely allocate to poor sanitation.

12. The Three Star Approach for UNICEF-WASH in Schools

The Three Star Approach for WASH in Schools is to improve the effectiveness of hygiene behaviour change programmes. The essential criteria for a healthy and protective learning environment for children as part of the broader child-friendly schools initiative.

13. Theories of sanitation

Sanitation theories are the importance of cleanliness and absence of germs and provision of facilities to achieve such absence (Wasike, 2010). According to (Wall, Genthe, Steyn and Nortje 2012), sanitation theory states that microorganisms are responsible for infectious diseases.

14. Hand washing Theory

Hand washing theory is the teaching, as opposed the practice, of the first line of defense against cross contamination of pathogenic microorganisms. The U.S. Centre for Disease control maintains that hand washing is one of the most effective means of preventing the spread of disease. Beginning in the 1800s, medical professionals began to implement hand washing rules, which largely reduced in stay hospital fatality counts. In modern times, hand washing is still a critical element of proper hygiene. Cross contamination is still largely to blame for food borne viral infections and cases of hospital disease transference, Bolt & Krukkert (2006).
15. Behavioural theory

Behavioural theory is used a lot in teaching. It is also assumed that people are not born leaders but they can be trained to become effective leaders. Hand washing programme is based on teaching the behaviour of accepting the practice of hand washing with soap. It is to prevent disease causing germs from getting into our bodies.

16. Sustainable Sanitation in Theory and Action (SUSTAIN)

Sustain is an interdisciplinary training program aimed at strengthening the research capacity in postgraduate integrated sanitation management (ISM) at the Department of Water Resources Engineering (WRE) of University of Dar es Salaam (UDSM) through a collaborative partnership and exchange of staff from Lund University Centre for Sustainability Studies.

CONCLUSION

Improve sanitation facilities by providing toilets and latrines in Schools all over India. Promote good hygiene habits, washing hands with soap through the Hygiene education. It could reduce deaths from diarrheal disease by up to 50%. Necessary to provide the facilities and set the goals of ensuring the human dignity to standard living is the right to water and sanitation is a fundamental human right. Indeed, access to WASH interventions to help the progress towards the SDGs 6 eradicate the poverty, work and economic growth, it will help achieve gender equity. Most of the girls are dropouts in school village, lack of WASH facilities then busy with domestic roles in their home.

REFERENCES


