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| Water, Sanitation and Hygiene Promotion | |
| **Outcome X: Immediate reduction in risk of waterborne and water related diseases in targeted communities** | |
| **Outputs (expected results)** | **Activities planned** |
| X.1 Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities | * Conduct training for RC volunteers on carrying out water, sanitation and hygiene assessments * Conduct initial assessment of the water, sanitation and hygiene situation in targeted communities * Continuously monitor the water, sanitation and hygiene situation in targeted communities * Coordinate with other WatSan actors on target group needs and appropriate response. |
| X.2 Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population | * Provide safe water to XX people in targeted communities through [SPECIFY SOURCE OF WATER: e.g. water trucking, well or pipeline rehabilitation, mobile water treatment plant, or household water treatment]. * Monitor use of water through household surveys and household water quality tests.   -*If household water treatment:*   * Determine the appropriate method of household water treatment for each community based on effectiveness and user preference. * Distribute XX household water treatment products [SPECIFY: chlorine tablets, sachets, liquid chlorine, or filters], sufficient for XX days, to XX people. * Train population of targeted communities(SPECIFY: on safe water storage, on safe use of water treatment products) * Monitor treatment and storage of water through household surveys and household water quality tests. |
| X.3 Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population. | * Select design for toilets based on consultation with targeted communities with considerations for cultural preference, safety, access for children and disabled, anal cleansing practices, national standards, and menstrual hygiene as well as environmental impact and sustainability. * Construct XX toilets in XX [SPECIFY LOCATION: households, schools, health centres, public areas] for XX people. [NOTE: Unless a sufficient explanation can be provided, the number of sanitation beneficiaries must meet number of water beneficiaries] * Ensure toilets are clean and maintained through [SPECIFY CLEANING AND MAINTENANCE PLAN FOR TOILETS: community mobilization –or- management of cleaners.] * Equip toilets with handwashing facilities, anal cleansing material or water and menstrual hygiene disposals and ensure they remain functional. * Carry out [SPECIFY ENVIRONMENTAL SANITATION ACTIVITIES: drainage, vector control, and solid waste] in targeted communities.   -or-   * Mobilize targeted communities to construct XX toilets and carry out environmental sanitation activities. |
| X.4 Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population. | * Conduct needs assessment: define hygiene issues and assess capacity to address the problem. * Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication). * Develop a hygiene communication plan. Train volunteers to implement activities from communication plan. * Design/Print IEC materials * Assess progress and evaluate results. * Engage community on design and acceptability of water and sanitation facilities. * Construct or encourage construction and maintenance of handwashing facilities in targeted communities. |
| X.5 Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population | * Determine the needs for hygiene NFIs, including soap, water storage, and menstrual hygiene for each community based on health risks and user preference in targeted communities in coordination with the WASH group or cluster. * Distribute XX hygiene kits, sufficient for XX month(s) to XX people. * Train population of targeted communities in use of distributed hygiene kits. * Determine whether additional distributions are required and whether changes should be made. * Monitor use of hygiene kits and water treatment products and user’s satisfaction through household surveys and household water quality tests. |