Youth Development through Football in Zambia

EVENTS MODULE

Join Water Sanitation and Hygiene Education

(JWASHE) Facilitation Book

HEALTH AND HYGIENE FOOTBALL GAMES
Imprint

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I ORGANISATION, OBJECTIVE AND USE OF THIS TRAINING HANDBOOK

This handbook is written for the implementers of Health and Hygiene activities in the German Technical Cooperation (GTZ), Youth Development through Football (YDF) Programme. Implementers in this case refer to members of the YDF Team; the programme team members; the coaches/trainers; peer leaders and any other stakeholders who may be involved in the implementation process.

This handbook should not prevent the trainers from being flexible and creative; however, all users are requested to stick to the basic information on Health and Hygiene as given in this Toolkit. Prior consent from YDF should be obtained before changing any information given.

The handbook should be considered as a tool, which:

- Identifies the various elements of the training programme and implementation process.
- Deals with the conceptual aspect of the programme.
- Contains the necessary and adequate information that can be used to train the implementers.

In other words, the main objective of this handbook is to assist the implementers of the health and hygiene programme to acquire sufficient and appropriate information that will enable them to successfully implement activities.
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1 INTRODUCTION

The United Nations Children Education and Scientific Fund (UNICEF) states that 88% of deaths worldwide are attributable to unsafe water, inadequate sanitation and poor hygiene. According to them, water, sanitation and hygiene should therefore be the first step in any strategy to combat diarrhoea. Water Aid, Zambia discloses that a systematic review of studies estimated that the safe disposal of excreta can reduce diarrhoea by 36%, whilst another review found that hand washing with soap can reduce diarrhoea by 45%. Scaling up sanitation interventions would therefore have a significant impact on the diarrhoeal disease burden.

According to the Zambian Ministry of Health, diarrhoeal diseases are the major causes of hospital deaths; they are the common cause of outpatient attendance for all age groups; they are the cause of hospital admissions for infants; and they cause frequent deaths in children aged between 1 and 14 years. It is therefore of utmost importance that organisations such as the Devolution Trust Fund (DTF) implement sanitation interventions aimed at curbing the adverse effects of poor water supply and sanitation facilities as well as the actual lack of access to such services.

Youth Development through Football (YDF) is a supranational programme implemented in 10 African countries with the hub in South Africa. It is operated by the German Technical Cooperation (GTZ) in partnership with the Department of Sport and Recreation South Africa (SRSA). The project forms an important part of the German – South African FIFA World Cup 2010 cooperation and is funded by the German Federal Ministry for Economic Cooperation and Development (BMZ) and the European Union. This Events Module offers guide to the user on how football is used to implement water and sanitation related health and hygiene activities targeting children and youths in low income areas in Zambia. The youths and children, as alluded to above, are the major victims of poor health and hygiene which result from improper, or the lack of water supply and sanitation facilities.
2 YOUTH DEVELOPMENT THROUGH FOOTBALL (YDF) CONCEPT: BACKGROUND AND INTRODUCTION

The general objective of the Youth Development through Football Programme is to utilise the power of football to empower youth and improve their life skills in South Africa and other African countries. YDF’s political partner is the South African Department of Sports and Recreation (SRSA), aligned to “Legacy campaign”. YDF is funded by German Federal Ministry of Economic Cooperation & Development (BMZ) and the European Union (EU). YDF’s vision is to make the world a better place using football.

YDF has four result areas:

1. Governmental entities and nongovernmental organisations (NGOs) are enabled to implement youth empowerment through sports initiatives

2. Youth empowerment through Sports-for-development concepts, methods and tools are developed; training of project partners is supported

3. A system for the exchange of knowledge and experience has been set up and operates

4. ‘Sport-for-development events’ are used for educational, motivational and promotional purposes

Scientists say that Football can:

- Contribute to physical and psychosocial health and development,
- Build self-awareness, self-esteem and confidence,
- Improve judgment and problem-solving and decision-making abilities,
- Provide opportunities to release aggression and decrease anxiety,
- Facilitate the acquisition of positive values (personal responsibility, active citizenship etc.),
- Enhance employability by nurturing the development of transferable life and social skills, which include self-efficacy, resilience, leadership, perseverance, teamwork and cooperation.

In Zambia the YDF programme is implemented by the GTZ Water Sector Reform Programme and its water sector partner institutions NWASCO (National Water Supply and Sanitation Council) and the Devolution Trust Fund (DTF) as well as the Water and Sanitation Association of Zambia (WASAZA) in cooperation with the YDF project in South Africa. In addition, the programme cooperates with experienced non-governmental local sport partners: EduSport Foundation and Break-through Sports Academy (BSA). The main objective of the Health and Hygiene programme is to reduce the incidence of children that are dying from waterborne diseases by raising their awareness in proper health, hygiene and sanitation facts and encouraging a positive change in their practices and attitudes that increase their vulnerability to water borne diseases.
The following are the expected outcomes of the YDF Zambia programme:

• Eight (8) DTF projects being implemented in cooperation with Zambians formal water and sanitation service providers are used as an entry point for project implementation to reach out to as many beneficiaries as possible all over Zambia. Six (6) WSS football teams (comprising of 10 – 16 year old girls and boys) are formed in each of the four (4) DTF project areas. In addition, local football leagues are created.

• YDF Zambia and its partner organisations take part in the official YDF World Cup 2010 campaign.

• A national Sanitation Football Cup is organized in 2010 to celebrate the 2010 World Water Day.

• Strong partnership between sport education organisations (EduSport, BSA) and organisations working in the field of water and sanitation (DTF, WASAZA) is facilitated.

• A toolkit incl. educational materials on Water Supply and Sanitation (WSS) related health and hygiene is developed.

• Football coaches and players are well trained on WSS related health and hygiene issues and act as peer educators equipped with leadership & life skills to train and positively influence a further number of esp. girls to make informed decisions on issues that affect their lives.

• Community Outreach: Key secondary stakeholders – parents and community leaders adopt positive attitudes to WSS related health and hygiene issues.

• A large number of especially girls have accessed more effective, youth- & girl-friendly HIV and Aids preventative and WSS related health and hygiene education as well as life-skills training through the medium of sport.

• A communication and information platform for the exchange of knowledge and experience among delivery agents (NGOs) and governmental sports institutions is developed.

3 HEALTH AND HYGIENE TOOLS: J-WASHE (Join Water, Sanitation and Hygiene Education)

The aim of the games is to deliver the health and hygiene promotion message through interactive games that are based on the Join In Circuit (JIC) concept. The Join In Circuit was developed by the National Centre for Health Education in Germany in 1997, as one instrument within a broader campaign on HIV prevention. Central to the JIC concept is the belief that love, sexuality and growing up are all pleasurable events in a young person’s life. The use of innovative strategies enables young people to talk more openly about HIV and AIDS; helps them to confront the challenges they face as they grow up and motivates them to take protective action against HIV.
The JIC concept in the YDF case is referred to as Join Water, Sanitation and Health Education (J-Washe). It culminates from the fact that issues of health and hygiene are central to every human life and that the earlier this fact is embedded in children and youths, the higher the chances of achieving and sustaining positive results in their generation and the community as a whole.

The J-Washe, concept's slogan is: „Don’t give unsafe water, unmanaged waste, contamination, worms and improper toilets a chance.“

The J-Washe comprises of five (5) stations, each of these represents the five pillars (topics) of the health and hygiene promotion. Each station shall have 10 children/youths and the duration of activity at the stations is 30 minutes.

The health and hygiene concept is based on the principles of the Participatory Hygiene and Sanitation Transformation (PHAST) methodology. The PHAST methodology helps people to feel more confident about themselves and their ability to take action and make improvements in their environments. PHAST principles are capable of yielding the intended outcomes when mainstreamed in the J-Washe as it calls for participation which aims at building self-esteem and a sense of responsibility for one’s decisions.

3.1 The key issues of the J-WASHE:

1. Safe disposal of human faeces at household and community levels:
   • With special focus on small children’s faeces (1-5 years)
   • Emphasis on eradication of worm infestation among children

2. Personal behavioural change: Prevention of Diarrhoea through hand-washing with soap at 2 critical times

3. Water for drinking and cooking: Safe use, treatment and storage

4. Solid and liquid waste disposal on community and household level

3.2 The key messages of the J-WASHE are:

• Safe use, treatment and storage of water for drinking and cooking,
• Proper disposal of solid and liquid waste as and the adverse effects of unmanaged solid and liquid waste,
• Enhancement of personal behavioural change aimed at preventing Diarrhoea through hand washing with soap at all critical times,
• Promotion of the understanding of soil and water transmitted worms, the danger of worms to children and the importance of regular de-worming and hand washing with soap always after contacting stools and before food
• Promotion of the proper use of toilets and avoidance of open defecation.
### 3.3 The J-WASHE learning stations and their objectives

<table>
<thead>
<tr>
<th>Station</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Football and safe water use</td>
<td>To educate children on the importance of drinking treated water from a reliable source such as a water kiosk; the importance of fetching water with a clean container; and the need to avoid contamination after the water has been fetched via safe storage and use of clean containers.</td>
</tr>
<tr>
<td>Football, solid waste disposal and stagnant water</td>
<td>To promote understanding of the health risks of rubbish in yards and neighbourhoods (diarrhoeal and eye infections) and eradicate the impact of waste disposed off in open sewers and toilets.</td>
</tr>
<tr>
<td>Football and hand washing with soap</td>
<td>To promote understanding of the importance of hand-washing with soap, after contacting stools e.g. after defecation, cleaning a child’s bottom and before handling or eating food.</td>
</tr>
<tr>
<td>Football and worm infestation</td>
<td>To educate community members on the high risk of contact with worms (hookworms, roundworms, and whipworms) and snails that cause Anaemia, Bilharzia. And retard the growth and increase vulnerability of children to carry highest load of worms that causes them to be often sick and absent from school.</td>
</tr>
<tr>
<td>Football and toilet usage</td>
<td>To promote understanding of the benefits of having a toilet and to promote behaviour change e.g. refraining from throwing stones, cardboard and other rubbish in the toilets.</td>
</tr>
</tbody>
</table>

### 4 FOOTBALL, HEALTH AND HYGIENE GAMES

#### 4.1 Football and safe water use (FSW): J-WASHE Station 1

**GAME 1 (FSW1): GERM TRANSMISSION GAME**

**Aim:** To obtain an understanding of participants knowledge of possible routes through which germs that cause waterborne diseases reach the human body and thereafter provide them with correct information.
Materials:

a) Station hardware
b) 8 pictures showing possible/impossible situations of germ transmission; actions that can/cannot cause a person to suffer from a waterborne disease

c) Red, Yellow and Green cards to rate/asses the likelihood of transmission
   Red: very likely to cause waterborne diseases
   Yellow: might cause waterborne/sometimes
   Green: cannot cause water borne diseases

d) For each picture, one of the participants will place the card that the group deems most applicable for the situation.

e) Record sheet for monitoring purposes

Process:

1. Welcome the participants to the station and introduces himself/herself
2. Ask participants what they understand by waterborne diseases and how these arise.
3. Explain the red, yellow, and green cards to be used for assessing germ transmission
4. Focus on a single picture at a time, allow the participants themselves to agree on which coloured card to place on each picture until each picture has a coloured card
5. Guide the participants into an informative discussion that should disclose the correct assessment of possible germ transmission for each picture

GAME 2 (FSW2): SAFE WATER USE ROLE PLAY

Aim: To educate the participants on the sources of safe water, the importance of drinking safe water and the value of avoiding contamination of safe water.
If wells are not covered or protected, the well water can become polluted when germs wash into the well with mud on the rope or bucket. Rain water may also wash excreta left lying around after open defeacation into the wells.

The water kiosk is a safe source of affordable drinking water in low income areas where individual household connections are not available. The commercial water utilities treat the water before the consumers fetch it. People are advised to use clean containers when fetching water. The technical design of the kiosk also promotes hygiene.

Tap water supplied by the commercial utilities is also treated and therefore not expected to cause any sickness. In cases of possible contamination caused by leakages on broken pipes posing contamination by sewer, for instance, people are advised to boil their drinking water or add chlorine to it.

When people or animals bath, urinate or defecate in a river, excreta, which comprises of faeces and urine, can contaminate the water. People, who fetch drinking water are at a high risk of consuming contaminated water.
In cases where people have no access to safe drinking water, it is recommended that they treat their water with chlorine. Adults who can follow instructions on the chlorine bottles should take responsibility for the treatment of water at household level.

Improper water drinking habits such as the use of dirty hands, container lids and drinking straight from a water container could lead to the contamination of water by germs on dirty hands.

Rain water collected in open vessels below roof tops is prone to contamination from particles on roof tops. The dirty hands of children playing with such water could also cause contamination.
Materials:

a) Two dishes
b) Two 20 litres containers
c) A kiosk model
d) A picture of lady giving child water from football solid waste disposal and stagnant water (FSWDS), picture of rain water and river water
e) A clinic model
f) A bottle of chlorine
g) A fire brazier
h) A pot
i) A cup
j) A model of a nurse
k) Some K100 notes

Process:

1. Facilitator welcomes the participants and introduces himself/herself
2. Participants are divided into two groups. One group is asked to utilise whatever materials they need to illustrate safe and unsafe water sources in their community, giving reasons for each. The other group is asked to illustrate (act) the effects of drinking safe water and its proper usage as well as the adverse effects of drinking unsafe water.
3. The two groups make their presentations after which the facilitator allows for a discussion and thereafter gives them the correct information.

4.2 Football, solid waste disposal and stagnant water (FSWDS): Station 2

GAME 1 (FSWDS1): COMMUNITY WASTE MAPPING & MANAGEMENT GAME

Aim: To guide the participants into describing waste management in their own surroundings and thereby instilling a sense of responsibility towards proper solid waste management

Materials:

a) Flip charts and stand
b) Markers
c) Scoring sheet
d) Record sheet for monitoring purposes

Process:

1. Facilitator welcomes the participants and introduces himself/herself
2. Participants are asked to define waste; to differentiate between solid and liquid waste; as well as to give their understanding of stagnant water
3. The facilitator then provides the correct definitions
4. Participants are divided into pairs or groups of 3, provided with necessary materials and each group is asked to pick one of the papers containing the following: solid waste in the community; solid waste disposal sites in the community; stagnant water.

5. Each group is given 10 minutes in which to present (draw/illustrate with marker and paper) the reality of their community in relation to the topic on the paper.

6. After 10 minutes the groups reconvene and each one presents its drawing for the other participants consent or disapproval until a consensus is arrived at.

7. After all the drawings have been reviewed, the facilitator then probes into what the participants thinks should be done in order to manage waste at the following levels:
   - By themselves as footballers on the pitch
   - By their families at household level
   - By the community as a whole

8. Points are given for each correct answer and the group with the least points qualifies to ‘manage’ the waste on the pitch after the day’s activities.

4.3 Football and hand washing with soap(FHS): Station 3

GAME 1 (FHS1): HANDWASHING ROLE PLAYS

Aim: To enable the participants to value the importance of hand washing with soap and to recognise the effects of neglecting the practice

Materials:

a) Two dishes
b) Two bars of hand washing soap
c) Two containers of water
d) Hand washing pictures for the story

Process:

1. Facilitator welcomes the participants and introduces himself/herself
2. Two volunteer participants are requested to demonstrate how they wash their hands, the facilitator makes a dish, water and soap available
3. Without demonstrating the proper way to wash the hands, the facilitator divides the participants into two groups
4. One group is given pictures and asked to create a story using the pictures. The other group is asked to prepare a role play focusing on: when to wash hands; how to wash hands; and why hands have to be washed with soap.
5. The two groups make their presentations after which the facilitator allows for a discussion and thereafter gives them the correct information
The story depicts handwashing with soap attitudes and practices. Three types of characters are represented in the story.

The first child is playing in the garden;

the second one is defecating in the open.

The third child has just used a pit latrine.
Among the three children, only the third child from the pit latrine washes his hands with soap before handling food. The other two children laugh at him whilst he washes his hands and do not wash their own before eating.

The two children, who didn’t wash their hands contaminate the food they eat ...

and end up with Diarrhoea.

Germs from faeces (after defecation and used as manure in gardens) are the major cause of Diarrhoea hence hands should be washed at three major critical times: before handling food, after using the toilet and also after changing baby’s nappy.
4.4 Football and worm infestation (FWI): Station 4

GAME 1 (FWI1): WORM RIDDLES

**Aim:** To educate participants on the possible ways in which worms enter the body and the effects of the worms

**Materials:**
- a) Flip chart and stand
- b) Markers
- c) Record sheet

**Process:**
1. The facilitator welcomes the participants and introduces himself or herself.
2. The facilitator asks some participants to draw a worm and state where they have seen one or many worms.
3. The facilitator then tells the children to state what he/she is representing after each of the following riddles:
   - When you play in the soil I remain on your dirty hands and if you don’t wash me off I will enter your body when you eat food. Who am I? (WORM)
   - Since you don’t like putting on shoes or slippers when you play outside, I enter your body through your feet. Who am I? (WORM)
   - I have a hole for you to use when you want to relieve yourself but you don’t like using me, instead you prefer to help yourself in open space where chickens can help themselves on your waste and the worms develop from your waste. Who am I? (TOILET)
   - You urinate and defecate in me, then you come to play and bath in me and worms and snails enter your body? Who am I? (RIVER)
   - I am the disease you get when you bath in contaminated water. Who am I? (BILHARZIA)
4. After the riddles the facilitator explains how worms enter the human body and their effects.
5. Participants are therefore asked what they will do to avoid getting worms.

GAME 2 (FWI2): WORM INFESTATION AND CYCLE GAME

**Aim:** To equip the participants with knowledge on worm infestation and hence enable them to prevent further infestation

**Materials:**
- a) Station hardware
- b) Pictures on worm infestation cycle
- c) Record sheet
- d) Pictures showing possible/impossible worm transmission routes and the outcome
Record sheet for monitoring purposes

**Process:**

1. Facilitator welcomes the participants to the station and introduces himself/herself.
2. The facilitator provides pictures to the participants and asks them to place them in the proper sequence in which the infestation takes place.
3. Once the participants have placed the pictures, he/she guides them into a discussion and provides the correct order and information on worm infestation cycle.

**Football and toilet usage (FTU): Station 5**

**GAME 1 (FTU1): TOILET SCORE AND SONG GAME**

**Aim:** To educate participants on the importance of using a proper toilet and the adverse effects of open defecation

**Materials:**

a) Toilet score facility or goal post  
   b) Football  
   c) Toilet paper  
   d) Record sheet

**Process:**

1. Facilitator welcomes the participants and introduces himself or herself
2. Participants are introduced to the toilet score facility and the facilitator explains that only those, who correctly interpret and demonstrate the message in the song, will have a chance to score. The musical artist performs his song with a message on proper use of toilets, avoidance of open defecation and the adverse effects of not doing so.
3. While the song proceeds, participants are invited to demonstrate what they hear in the song, whenever a correct demonstration is achieved, the singer pauses and allows the participant to score. The person with the highest number of successful scores receives a roll of tissue.
4. After the song, the facilitator delivers basic information on proper toilet usage to the participants.

**GAME 2 (FTU2): TOILET MAPPING GAME**

**Aim:** To enable the participants to assess whether they have positive attitudes towards proper toilet usage and hence assist them to develop better practices
Materials:

a) Flip charts and stand  
b) Markers  
c) Scoring sheet  
d) Record sheet for monitoring purposes

Process:

1. Participants are welcomed to the station and the facilitator introduces himself/herself.
2. Participants are asked to give their definition of a proper toilet and improper toilet.
3. The facilitator then provides the correct definitions.
4. Participants are divided into pairs or groups of 3, provided with necessary materials and each group is asked to give an illustration of the types of toilets/ defecation places that are found in their community.
5. Each group is given 10 minutes in which to prepare their drawing and to give the disadvantages and advantages of each facility.
6. When the groups reconvene, each one presents its drawing and explanations for the other participants consent or disapproval until a consensus is arrived at.
7. After all the drawings have been reviewed, the facilitator then provides the correct information.

The story illustrates how worm infestation occurs.

When children eat soil or put dirty fingers in their mouths, they can ingest roundworms.

When they walk barefooted, they can also pick up hookworms. Children are also infested when they eat unwashed foods grown on soils contaminated by worm eggs.
Worm infestations often cause serious health problems and impact a child’s ability to attend and perform well in school. Worms take up some of the food children eat and affect absorption of the food hence robbing them of nutrients. This impact of worms is illustrated in the previous pictures.

This picture illustrates deworming at the clinic which relieves children of the worms.

The last picture shows children that are now free from worm infestation and therefore able to actively play with their friends.
“Don’t give unsafe water, unmanaged waste, contamination, worms and improper toilets a chance.”

William Njobvu
Football Player
Zambia National Football Team