



Building national capacity to support inclusive sanitation

As a national program, WASHplus in Kenya builds capacity of national systems to take up and sustain water, sanitation and hygiene (WASH) interventions. The project conducts action research to generate practical knowledge, trains and mentors practitioners to adapt and scale-up the small doable actions approach to improving uptake of good WASH practices.

Thematic areas



A training session.

1. WASH-HIV integration

People living with HIV face a higher risk of getting infected with diseases such as diarrhea and other common illnesses because HIV lowers the body's ability to fight infections, so healthy water, sanitation, and hygiene (WASH) practices are especially important for them follow.

USAID's WASHplus project is working with the Ministry of Health and community groups to promote healthy WASH practices alongside existing interventions for people with HIV and their households across Kenya.

The project is building the capacity of Kenya's public health system in WASH-HIV integration at all levels by training health workers in an approach that encourages small doable actions, which are feasible steps that move people towards an ideal behavior.

2. Inclusive sanitation: CLTS-plus

In line with the government's commitment to community led-total sanitation, WASHplus is developing a "plus" component for CLTS programs. CLTS+ ensures the needs of individuals with unique needs due to illness, disability or age are addressed in sanitation programs. These individuals are mobility challenged in one way or another and require special attention. For instance, toilets need to be modified to make them easier to access for people with disability of the elderly.

WASHplus has trained Ministry of Health staff so that they too can train field practitioners to implement community-led total sanitation plus (CLTS+) interventions.

The training covers integration of small doable actions approach into a child health. Staff are also trained how to identify the needs of mobility challenged individuals and address them through affordable, locally appropriate and effective modifications to standard practices.







Training methods

Trainers of trainers

To reach more people, the WASH-HIV integration training is multi-level. First, public health



officers are trained to be trainers of trainers (TOTs). More than 300 public health officials and NGO workers at the district level have been trained as TOTs. They, in turn, train community health extension workers, who then pass on WASH knowledge and skills to volunteer community health workers (CHWs).

Teach-back

During the training, the "Teach back" methodology is used to facilitate the training. In this kind of training, participants have two roles: as course participants and trainers.

The teach back is very successful in building training skills and internalization of WASH content. It learners retain most of what they are taught and can pass it on to others. This has a multiplier effect and enhances scale-up of interventions.

Teach Back methodology uses the experiential learning cycle that includes structured learning activities such as presentations, group discussions, demonstrations, role plays, practical exercises, exercises, small groups that are similar to is actually done during real-life situations in the communities.

Practical training for partners.

As trainers participants are assessed and given feedback on their performance in terms of content, delivery and use of visual aids.

Reaching households

The TOTs the train community health workers who are now putting their new skills into practice by negotiating directly with households to make small doable improvements.

To date, over 3000 health workers have been trained or sensitized on WASH-HIV integration.

Other USAID-supported programs have integrated WASH into their home-based care programs. Such programs have worked with trainers trained by WASHplus to sensitize peer educators and community home visitors on the small doable actions approach to improve WASH practices among PLHIV and their care givers.

Reaching households

- Over 3,000 health workers have been trained or sensitized on WASH-HIV integration.
- 68 trainers in Western and Nyanza regional and Nakuru County trained on inclusive sanitation.
- 23 teachers early in childhood development centres (ECD) trained in CLTS+ and to prevent open defecation around the schools.



The WASHplus program in Kenya is supported by USAID and implemented by FHI 360. The project works closely with the Ministry of Health's Department of Environmental Health, Community Health Services Unit, and the National AIDS and STI Control program. Other in-country partners include the Ministry of Education, regional water authorities, and UNICEF. Contact: Evelyn Makena, emakena@fhi360.org