

# Preventing & Treating Diarrhoea

*Informed choices save young lives and secure  
the future of your family!*



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## Acronyms

<b>BCC</b>	Behavior Change Communication
<b>CBO</b>	Community Based Organization
<b>CDC</b>	Center for Disease Control and Prevention
<b>CHW</b>	Community Health Worker
<b>FBO</b>	Faith-Based Organization
<b>GOK</b>	Government of Kenya
<b>IEC</b>	Information, Education and Communication
<b>IPC</b>	Inter-personal Communication
<b>MOH</b>	Ministry of Health
<b>PSI</b>	Population Services International
<b>SGC</b>	Small Group Communication

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# Introduction: Using the *Education through Listening* facilitation approach

## Getting started

This Small Group Communication (SGC) tool is supporting the national campaign and communication strategy of promoting behaviours that will prevent and properly treat diarrhoea to save Kenyan lives. This tool is designed to support facilitators of group sessions. Within each Module the facilitator is provided with Session Scripts, Ideas for Role Plays and Group Activities, plus Picture Codes. A Quick Reference Guide appears at the end, offering information and some technical facts to help facilitators in updating and refreshing their knowledge of this topic.

Facilitators can choose to use these interactive elements in any combination they feel will best help them in guiding lively and effective sessions with the community. No matter which part or parts of this SGC tool the facilitator is using, the Education through Listening approach is to be followed.

## Using the Education through Listening facilitation approach

The communication strategy of this tool is based on the Education through Listening (ETL) approach. With the ETL approach, each session will be audience-centred and participatory.

“People are more likely to listen when they feel listened to”

**Carl Rogers**

This statement captures why the Education through Listening (ETL) approach is effective and how this behaviour change communication strategy is being implemented. Participation is key.

By forming positive interpersonal relations and using open-ended questions, dialogue is encouraged and the participants will relax and share with others how they have experienced challenges and successfully overcome barriers. Adult learners best listen, absorb and retain information—plus begin the important process of using their knowledge to change their behaviour—when the atmosphere of the group session is empathetic, affirming plus supportive and firmly based on reflective listening and respectful rapport.

The sessions are forums for the facilitator to partner with the community, assisting them to clarify their barriers to practicing a desired behavior and in building confidence in their abilities to adapt solutions. These are not lectures or forums for the facilitator to educate or pass on information to the community—unless this is requested by the group. These discussions can and usually do evolve in many ways, and too many to be scripted. Therefore this guide aims to equip the facilitator with some OARS – or skills and techniques to use in steering the group discussions. These involve using

- **Open ended questions** to initiate and guide the discussion
- **Affirmations** to encourage participation and self-confidence
- **Reflective listening** to clarify what was said and what was meant
- **Summary** of the key discussion points with a key question raised to enable the participants to come up with a plan of action

Repeated here for emphasis, is the need to end each session with a Summary and Call to Action. Always summarise what was discussed and ask the key question from which the participants outline what they need to do, and when, to achieve the desired behaviour. Always plan a follow-up session too.

While each group session will likely be different from the others, the underlying technique does not change and there are distinctive qualities that can be observed throughout any session facilitated using the ETL approach. These distinctive qualities form the basis of the ETL approach

**Establish rapport** – Begin each session by introducing yourself and asking the participants to do so too. Discuss and set ground rules (e.g. turn-off cellphones, be on time, etc) and establish how much time each session will need. The facilitator is to be a partner in the sessions and not the expert. Build rapport by acknowledging that each participant has valuable experience and knowledge to share from their observations or experiences in living and dealing with the situation/problem in their community.

**Ask for permission** – Adopting a behavior is a choice of the participants; and thus a need to establish their consent to participate is important. Ask how much time the participants will avail for the discussion and if they would like more information.

**Open-ended questions** – Use questions that start with “how” or “why” to encourage the participants to share their personal stories and experiences. For example, ask the “How did you treat diarrhoea?” instead of “Did you treat diarrhoea?” Practice the skill of asking open-ended questions and it will become easier to use this discussion prompting approach.

**Affirmation** – We all have a need to be affirmed. It builds our confidence in our abilities and will encourage more sharing. Encourage people who participate and share their stories and ideas and those who are practicing behaviors or thinking about it by clapping, restating what they shared, or by nodding in agreement.

**Drawing information** – The facilitator does more listening than talking, resisting the temptation to offer the answer or solution but rather asks others to share their thoughts, experiences and ideas from which more often than not the information or a solution will emerge.

**Engage role models** – Encourage those who are doing the desired behavior to share their experiences. This is social support for others to see others in similar circumstances having overcome particular challenges. Give them genuine affirmation for the qualities they have expressed - their ingenuity in overcoming barriers, resourcefulness, knowledge, courage and hard work in caring for their families and themselves as good mothers, fathers or caregivers.

**Roll with resistance/deflect arguments** – For some people, given the choice of changing their behavior or not, they may choose to justify the behavior they currently are engaging in. To prevent a session turning into an argument, the maxim ‘we begin to believe what we hear ourselves say’ holds true, therefore it is counterproductive to have lengthy sessions on reasons why it is difficult to practice a behavior.

**Here are some ways to roll with resistance**

1. Don’t even try to answer the question or respond to a negative comment: throwing the question back to the audience will get the group problem-solving, and can even put positive pressure on the person in the future.

For example, when discussing treating of drinking water

**Participant** “I don’t have enough time to treat water for everybody in our household”

**Facilitator** “This is an interesting problem... Is there anybody here who had this problem but was able to overcome it? What did you do?” If there is nobody, then you can say: “It seems like a lot of people are confused by this problem. Let’s put our heads together and come up with some ideas on how to get around it!”

2. Questioning, asking for clarification and elaboration, even using exaggeration, may help.

For example, when discussing hand washing with soap

“So you feel that hand washing with soap is something that’s special – do you mean you feel that you should wash with soap only when you’re going to a special event or place, like to church or to a wedding? Is it the smell of the soap... like perfume? Or is it the color of the soap...?”

3. Humor if used well can lighten the mood and give a less serious perspective to challenges.

For example, when discussing who should drink safe treated water

**Participant** “Getting everyone to drink only safe treated water— every day— is unrealistic; instead people should drink something else besides water...”

**Facilitator** “Do you mean they should drink less treated water and drink more tea, sodas or beer instead? Wow, I expect that would become so popular that everyone would want to do it! Interesting suggestion, but could we first discuss more of the solutions we are able to control?”

4. Offer new perspectives but don’t impose on them... For example “Could you also consider what experts have said about this...?”

5. If most are keen on an argument and it is not focused on getting a solution, end the dialogue. For example, say, “Lets talk about this for 5 more minutes and move on...”

**Reflective listening** –By reflecting back exactly on what was said or especially where a challenge is raised, reflecting both sides of what was said, by restating what was said and what it implies is ‘reflective listening.’ Here’s an example

**Participant** “I don’t treat our drinking water because that is difficult to do.”

**Facilitator** “I hear you saying that you have a desire to treat your household’s drinking water as you have even managed to do it before. Are you saying you don’t treat your drinking water because you tried to do it and were unable to?”

**Summary and Call to Action-** Summarise what was discussed and ask the key question from which the participants outline what they need to do and when in order to achieve the desired behavior. Plan a follow up session.

**REMEMBER** Mastery of this ETL approach takes time—the more you practice, the better you’ll get!

### **How to use this SGC tool**

Before facilitating a group session, please read and review the contents in this SGC tool. Understanding the purpose of these sessions, as given in the **Introduction** and being prepared and familiar with the **Facilitator's notes** plus certain facts and particularly the **Common Barriers** to behaviour change uptake as noted in the **Quick Reference Guide on Diarrhoea in Kenya** will enable you to guide discussions and clarify questions or queries that arise.

**Remember:** you are not expected to be an expert on this topic and if technical or medical question arise, use such opportunities to offer to invite an expert to discuss these issues with the group at a later date.

Each **Module** provides **Facilitator's notes** for the **Session Scripts, Picture Codes** and **Suggested Activities and Role Plays**. Read and review these so that you're familiar and comfortable with the topic you will be leading in the group sessions.

The **Session Scripts** and **Picture Codes** are divided in two or more Parts with short summarising activities suggested at various intervals to help ensure the group is progressing together—and no one gets left behind!

Please also take note of the **Message Take-Out** phrases that are included in the Introduction and repeated within each Part of the **Session Scripts** and **Picture Codes**. These are key phrases to help remind facilitators of the directions to be prompting and guiding the participants to take in the discussions in order to increase their understanding and raise their self-confidence with the topic so that they're empowered and committed to adopting behaviour change.

**Group Activities and Role Plays** are included within the **Session Scripts** and are optional, depending on the time you have with the group.

Each Part of the **Session Scripts** and **Picture Codes** has a specific Topic followed by sub-topics for each Step. These are to help you guide the focus of the discussions.

The **Facilitator's notes** offer step-by-step guidelines for the sessions. **Getting Started** helps the facilitator do just that and **Ice Breakers** suggest how to introduce the Session's topics to the group.

Each Module and the accompanying Picture Codes for that Module are to be completed in one group session. These all are concerned with the Key Message or title and theme of the Module.

**Always complete the entire Module in one day.** If time permits, continue with Module 2. If time does not permit Module 2 to be presented on the same day as Module 1, try to schedule it for the next day or soon thereafter.

When using the **Picture Codes** to prompt discussions, place this SGC tool in a position so the entire group can easily view the illustrations and you can easily glance at and read the notes and questions on the opposing page that's been folded behind too. This part of this SGC tool that should be continuously referred to by the facilitator.

The **Facilitator's Notes** provided on the opposing page of each Picture Code offers help in prompting discussions and activities among the group. The questions appearing in the **Start the Discussion** section for each Picture Code are offered to help in prompting a discussion. Feel free to add to or change these prompting questions so they best fit the socio-cultural settings of the group members.

Finally, before facilitating a group session, try to visit the venue to decide how to arrange the seating of the group, collect the props and supplies you'll be needing. Once again, and just before facilitating a group session, review the **Quick Reference Guide** and read the **Facilitator's Notes** in the Session Scripts and Picture Code so that you're familiar and comfortable with the contents. Being prepared makes these sessions enjoyable and successful!

**Let's get started!**

# Introduction

## Module 1. Preventing Diarrhoea: Understanding the Causes and Ways to Prevent and Treat Diarrhoea

### Module 1. Kuzuia maradhi ya kuharisha: Kuelewa chanzo, njia, na namna ya kutibu za kuzuia maradhi ya kuharisha

**Theme** *Understanding the causes of diarrhoea and how taking action to prevent it improves health and saves lives!*

## Module 2. Treating Diarrhoea: Understanding how to treat diarrhoea and the urgency of treating young children with diarrhoea

### Module 2: Kutibu maradhi ya kuharisha: Kuelewa namna ya kutibu maradhi ya kuharisha, hasa matibabu ya haraka kwa watoto wadogo.

**Theme** *Every caregiver of young children should know how to urgently and correctly treat diarrhoea among children of ages 5 years and younger. Every household should have ORS treatment available and know how to use it properly by mixing it only with safe treated water*

#### Why this theme or topic?

Diarrhoea is affecting the lives of many Kenyans. In Kenya there exists a high prevalence of water and sanitation related diseases causing many people—young children in particular—to fall ill or even die.

Diarrhoea is caused by contaminated water, contaminated food and unhygienic practices. Understanding the causes and learning how to avoid becoming contaminated is not enough to prevent diarrhoea. Diarrhoea can only be prevented by applying this knowledge in making informed decisions and practicing these decisions by learning new skills to improve our daily hygiene behaviors. By preventing diarrhoea and stopping the spread of diarrhoea, many Kenyans will prosper from improved health and many lives will be saved.

The Group Sessions in this Module reinforce the campaign by focusing on the use of water treatment for all drinking and cooking water as an accepted social norm—the belief and accepted behaviour that everybody in the household should only drink safe treated water every day of the year. Further, these Sessions focus on the importance of hand washing with soap to prevent contamination and the spread of diarrhoea. Participants should leave these sessions believing that every man, woman, girl, boy and baby in the community—everybody!—is going to do whatever it takes to drink only safe treated water and practice proper hygiene by washing hands with soap every day of the year to prevent diarrhoea and save lives!

#### Why are we so worried about stopping diarrhoea?

Kenya is tired of losing time, productivity, money, and the lives of people—particularly young children—to Diarrhoea. Unlike other health problems that we struggle with, diarrhoea can be PREVENTED and TREATED! We know that Water Treatment works! We have ORS that effectively stops dehydration of people suffering from diarrhoea—especially young children that dehydrate very fast! Nobody has to get diarrhoea or die from having it anymore!

#### Why is it important to prevent diarrhoea among under-5 year old children?

When a child under the age of 5 years gets diarrhoea, their little bodies lose fluids quickly and they become dehydrated. This is a very dangerous condition that can get worse very fast and can even cause death. Diarrhoea is always a sign of sickness, always serious, and should always be treated as an emergency.

#### Who are we talking to?

Caregivers of small children are a priority audience for these sessions because diarrhoea kills more children than older people. However, entire households and communities need to get involved in this discussion. Churches or chief's barazas might be good places to start. The most effective sessions on using only safe treated drinking water and practicing proper hygiene will include many members of the community, bringing together those who can help each other and create social pressure for others to conform.

#### Props & Supplies needed for Module 1.

- Part 1. • Flip chart paper and marker pens /or chalkboard and chalk
  - Calculator - or cellphone with one
- Part 2. • Flip chart paper and marker pens /or chalkboard and chalk
  - Calculator - or cellphone with one
  - Glass of water, and some salt
  - Water treatment samples – Pur, Aquatabs or WaterGuard

#### Props & Supplies needed for Module 2.

- Part 1. • Flip chart paper and marker pens /or chalkboard and chalk
  - Packet of ORS treatment
  - Glass for water, and some safe drinking water
  - Water treatment samples – Pur, Aquatabs or WaterGuard

# Module 1. Preventing Diarrhoea: Understanding the Causes and Ways to Prevent and Treat Diarrhoea

Theme Understanding the causes of diarrhoea and how taking action to prevent it improves health and saves lives!

## Session Scripts

### Part 1. Assessing the community's diarrhoea burden

### Sehemu ya Kwanza. Kuchunguza uzito wa maradhi ya kuharisha katika jamii

#### Step 1. Getting started in talking about diarrhoea

##### Facilitator's notes

**Break the ice...** Begin by introducing yourself and ask the members of the group to do the same. Ask for the group's permission to talk about diarrhoea and establish how much time you'll have with them for today's sessions.

Tell the group: *Our sessions today are going to be different from others you may have had. I'm here to listen to you and we will be listening to each other. Listening to each other's experiences or stories and sharing what we know with one another is a great way to learn.*

##### Begin the discussion...

Are you ready to begin? Let's explore how diarrhoea may be a concern in your household and in your community.

- *How is diarrhoea affecting your community?*
- *Which diarrhoea diseases are affecting this community?* Write these on the flip chart paper. If not mentioned prompt for typhoid, cholera, food-poisoning, etc.
- *Has anyone here ever suffered from any of these diseases?* Count raised hands.
- *Who here has had a case of diarrhoea in this past year?* Ask them to stand. Count them, calculate percentage of group, and write this number on a flip chart.
- *Who here had a child who had diarrhoea in this past year?* Ask them to stand. Count them, calculate percentage of group, and write this on a flip chart.
- *Is there anybody who hasn't had diarrhoea?* Have them stand up.
- *Je, maradhi ya kuharisha yanaathiri vipi jamii yenu?*
- *Je, ni aina gani ya maradhi ya kuharisha yanaathiri jamii hii?*
- *Je, kuna yeyote ambaye ameugua maradhi haya?*
- *Je, nani hapa ameugua maradhi ya kuharisha hivi karibuni?*
- *Je, nani hapa ana mtoto ambaye ameugua maradhi ya kuharisha hivi karibuni?*

**AFFIRM** and celebrate! Ask these people to stand as the group claps for them!

##### Continue...

- *What are some of the problems caused by diarrhoea? Please tell us of your experiences or what you have learned from others.*
- *Who is most at risk if they get diarrhoea?* Establish children under 5 as most at risk

##### Endelea...

- *Je, nani hapa hajaugua maradhi ya kuharisha?*
- *Je, maradhi ya kuharisha husababisha shida gani? Tafadhali tueleze hadithi yako ama kile umejifunza kutoka kwa wenzako.*
- *Je, nani yuko katika hatari kubwa anapouguua maradhi ya kuharisha?*

**AFFIRM** the group's participation in talking about their experiences and sharing their opinions.

##### Message Take-Out

Participants should leave these sessions saying...

- *Diarrhoea can have serious consequences for small children. It can even cause death!*
- *I know consuming contaminated water and food plus improper personal and household hygiene practices are the main causes of diarrhoea.*
- *I want to protect my household from diarrhoea so we can be healthier and save money too!*
- *I want to prevent diarrhoea in my household and in my community so we can be healthy, more productive plus save money!*
- *We can prevent diarrhoea when every person understands the causes and is willing to practice prevention by only drinking and cooking with treated water and washing hands with soap before cooking, feeding or touching a young child, eating and after using the toilet.*



## Step 2. Estimating the cost of diarrhoea to households

### Facilitator's notes

**Get permission...** Ask if the group is willing to continue this discussion by estimating the cost of diarrhoea—starting with the individual and household cost of having diarrhoea and then estimating the cost of diarrhoea to the entire community?

**Personal experiences...** A few minutes ago some people stood up when asked if they ever had diarrhoea, or if their child ever had diarrhoea. Let's listen to their stories and learn from their personal experiences as we estimate how much diarrhoea is costing households in this community in the past year.

- **Call up 2 volunteers:** one who had diarrhoea and one whose child had diarrhoea.
- Ask the following questions, and take notes on the flip chart:

#### Tell us the story about...your experiences

1. What happened when you had diarrhoea?
2. How many days were you sick? How did you feel?
3. Did you get treatment? Where? How much did the treatment cost?
4. How much did transport cost to get the treatment?
5. Was one medicine enough?
6. Did you have to eat special foods while you were sick? What were they? Did they cost more than your usual foods? How much more?
7. Were you able to work? About how much money a day do you think you lost by not being able to work or do chores at home?
8. Were there any other consequences? Worry? Fear?
9. How many times did you have diarrhoea since last year at this time?
10. How many times did others in your household have diarrhoea in the past year? How much money was lost and spent with each bout of diarrhoea?

#### Tueleze hadithi yako

1. Nini kilifanyika uliposhikwa na maradhi ya kuharisha?
2. Uliugua kwa muda gani? Je, ulikuwa unahisi vipi?
3. Je, ulipata matibabu? Wapi? Yalikugharimu pesa ngapi?
4. Je, ilikugharimu pesa ngapi kupata gari la kukupeleka hospitali?
5. Je, dawa aina moja ilitosha?
6. Je, ulikula chakula maalum wakati ukiwa mgonjwa? Je, kilikuwa nini? Je, kilikugharimu pesa nyingi? Je, ilikuwa pesa ngapi zaidi?
7. Je, uliweza kufanya kazi? Je, unafikiri ulipoteza pesa ngapi kwa vile hukuweza kufanya kazi?
8. Je, kulikuwa na shida gani nyingine? Ulikuwa na wasi wasi? Hofu?
9. Je, kulinganisha na wakati kama huu mwaka uliopita, umeugua maradhi ya kuharisha mara ngapi?
10. Je, katika mwaka uliopita, ni wangapi katika jamii yako wameugua maradhi ya kuharisha? Je, mmepoteza kiasi gani cha pesa kila mtu alipouguua maradhi ya kuharisha?

#### Summarize the information to the volunteer...

So if I've understood you correctly you were...

Kama nimekuelewa vizuri, ulikuwa ...

- Sick for \_\_\_\_ days and lost KES \_\_\_\_ per day to equal KES \_\_\_\_\_
- Paid KES \_\_\_\_\_ for transport to get a lab exam and buy the treatment
- Paid KES \_\_\_\_\_ for treatment and a lab exam
- Spent an extra KES \_\_\_\_\_ on food

#### Calculate total cost of diarrhoea to the household...

1. For you: Total amount lost or spent on one bout diarrhoea: KES \_\_\_\_\_  
You had diarrhoea \_\_\_\_\_ times last year: Total cost: \_\_\_\_\_
2. For other household members: Total amount lost or spent on one bout diarrhoea: KES \_\_\_\_\_ Others in household had diarrhoea \_\_\_\_\_ times last year. Total cost: \_\_\_\_\_
3. Household Total: This means you and your household personally lost about KES \_\_\_\_\_ to diarrhoea in one year!

#### Gharama ya kutibu maradhi ya kuharisha katika jamii ...

1. Kwako: Kiasi cha pesa ulitumia wakati uliugua maradhi ya kuharisha: Shilingi \_\_\_\_\_  
Uliugua kuharisha mara \_\_\_\_\_ mwaka uliopita. Gharama yote: \_\_\_\_\_
2. Kwa jamii yako: Kiasi cha pesa ulizotumia jamaa alipouguua maradhi ya kuharisha: \_\_\_\_\_  
Jamaa wengine waliugua maradhi ya kuharisha mara \_\_\_\_\_ mwaka uliopita. Gharama yote: \_\_\_\_\_
3. Gharama ya jamii nzima: Hii inamaanisha kuwa wewe na jamii yako mlitumia kiasi cha Shilingi \_\_\_\_\_ kwa mwaka mmoja!

#### Repeat with the parent of the child under-five years

##### Tell us the story about... your experiences

1. What happened when your child had diarrhoea? ?
  2. How many days was your child sick? How did your child feel? Why is it so dangerous for a young child to get diarrhoea? Prompt for and emphasis that diarrhoea can quickly cause dehydration and death in children under 5 years! How did you feel when your child was sick?
  3. Were you able to work? About how much money a day do you think you lost by not being able to work or do chores at home?
  4. Did you get treatment? When? Where? How much did this cost?
  5. How much did transport cost to get the treatment?
  6. Was one treatment enough? What did you do?
  7. Did you have to give your child special food or beverage while the child was sick? What were they? Did they cost more than your usual foods? How much more?
  8. Were there any other consequences? Worry? Sleepless nights? Fear?
  9. How many times has your child/children had diarrhoea since last year at this time?
  10. How many times did others in your household have diarrhoea in the past year? About how much money was lost and spent with each bout of diarrhoea?
1. Nini kilitendeka mtoto wako alipouguua maradhi ya kuharisha?
  2. Je, mtoto wako aliugua kwa siku ngapi? Je, mtoto wako alihisi vipi? Je, ni hatari ipi iliopo mtoto wako anapouguua maradhi ya kuharisha? Je, ulihisi vipi mtoto wako alipokuwa anaugua?
  3. Je, uliweza kufanya kazi? Je, ulipoteza kiasi gani cha pesa kwa kukosa kwenda kazini au kufanya kazi pale nyumbani?
  4. Je, ulipata matibabu? Lini? Wapi? Je, ilikugharimu pesa ngapi kutibiwa?

5. Je, ilikugarimu pesa ngapi kulipia gari kwenda hospitali?
6. Je, dawa aina moja ilitosha? Ulifanya nini?
7. Je, ulimpa mtoto chakula au kinywaji maalum alipokuwa mgonjwa? Ulimpa nini? Je, kilikugarimu pesa zaidi? Pesa ngapi zaidi?
8. Je, matukio yake yalikuwa yapi? Wasi wasi? Kukosa usingizi? Hofu?
9. Je, mtoto/watoto wako ameugua maradhi ya kuharisha mara ngapi kutoka mwaka uliopita?
10. Je, jamaa yako wameugua maradhi ya kuharisha mara ngapi katika mwaka uliopita? Je, umetumia kiasi gani cha pesa kila mtu alipouguua maradhi ya kuharisha?

### Summarize the information to the volunteer

So if I've understood you correctly...

*Kama nimekuelewa vizuri, ulikuwa ...*

- Your child was sick for \_\_\_\_ days and you lost KES \_\_\_\_\_ per day for not working
- You paid KES \_\_\_\_\_ for transport to take your child to the clinic
- You paid KES \_\_\_\_\_ for treatment and KES \_\_\_\_\_ for other examinations
- You spent an extra KES \_\_\_\_\_ on special food or beverages
- Plus your family was worried, etc.

### Calculate the cost of diarrhoea to the household...

1. For your young child: Total amount of money lost or spent on one bout diarrhoea: KES \_\_\_\_\_  
Your young child had diarrhoea \_\_\_\_\_ times last year: Total cost: \_\_\_\_\_
2. For other household members: Total amount of money lost or spent on one bout diarrhoea: KES \_\_\_\_\_  
Others in household had diarrhoea \_\_\_\_\_ times last year. Total cost: \_\_\_\_\_
3. Household Total: This means you and your household personally lost about KES \_\_\_\_\_ to diarrhoea in one year!

### Gharama ya kutibu maradhi ya kuharisha katika jamii ...

1. Kwa mtoto wako: Kiasi cha pesa ulitumia wakati uliugua maradhi ya kuharisha: Shilingi \_\_\_\_\_  
Mtoto wako aliugua kuharisha mara \_\_\_\_\_ mwaka uliopita. Gharama yote: \_\_\_\_\_
2. Kwa jamii yako: Kiasi cha pesa ulizotumia jamaa alipouguua maradhi ya kuharisha: \_\_\_\_\_  
Jamaa wengine waliugua kuharisha mara \_\_\_\_\_ mwaka uliopita. Gharama yote: \_\_\_\_\_
3. Gharama ya jamii nzima: Hii inamaanisha kuwa wewe na jamii yako mlitumia kiasi cha Shilingi \_\_\_\_\_ kwa mwaka mmoja!

## Step 3. Estimating the cost of diarrhoea to this community

### Facilitator's notes

**Get permission...** We've been listening to the personal experiences and estimating the household costs of having diarrhoea. May we now estimate how much diarrhoea is costing all the households in this community in the past year?

### Summarize...

As needed adjust and add to the costs recorded on the flip charts from the two volunteers to reach a consensus as these questions are discussed:

- Were the experiences of these two members of our group more or less what you have or would expect to experience? Please explain the similarities or differences.
- Did anybody in this community lose a child to diarrhoea in the past year? About how many lives were lost to diarrhoea in this community in the past year?
- About how much money did losing one life cost the household?

### Maliza kwa...

- Je, matukio ya hawa wawili ni mambo ambayo tumepitia, ama tunaweza kupitia? Hebu eleza kama matukio yanafanana au ni tofauti.
- Je, kuna mtu yeyote katika jamii hii ambaye amepoteza mtoto wake katika mwaka uliopita kutokana na maradhi ya kuharisha? Takribani watu wangapi wamepoteza maisha kutokana na maradhi yakuharisha katika mwaka uliopita?
- Je, kumpoteza mtu mmoja kuliigharimu nini familia?

### Calculate the cost of the community's diarrhoea burden...

Using these agreed costs, let's estimate the cost of diarrhoea to this community...

- About how many households are in this community? \_\_\_\_\_ Households
- Using the figures we just heard, diarrhoea costs about KES \_\_\_\_\_ per household a year
- Losing a life of a young child costs about KES \_\_\_\_\_ How many lives were lost to diarrhoea in this community in the past year?

Calculate: \_\_\_\_\_ households X KES \_\_\_\_\_/each = KES \_\_\_\_\_

Add: Cost of lives lost due to diarrhoea in a year: \_\_\_\_\_

That means this community lost about KES \_\_\_\_\_ to diarrhoea in one year!

- What could the community do with this money it saved by preventing diarrhoea?

### Message Take-Out

Participants should leave these sessions saying...

- Diarrhoea can have serious consequences for small children. It can even cause death!
- I want to protect my household from diarrhoea so we can be healthier and save money too!
- I want to prevent diarrhoea in my household and in my community so we can be healthy, more productive plus save money!

## Session Scripts - Part 2 Understanding the causes of diarrhoea

### Kuelewa chanzo cha maradhi ya kuharisha

#### Step 1. Understanding the causes of diarrhoea

##### Facilitator's notes

**Get permission...** Continue by asking a participant to summarize the discussions of Part 1. Ask the other participants if they think many people in the community feel the burden of diarrhoea within their households?

Ask the group if they're ready to explore the **causes** of diarrhoea in their households and the community?

##### Begin the discussion...

First review the list of diarrhoea diseases the group made and talked about at the beginning of Part 1. Showing this list on the flip chart, ask:

##### Exploring the causes of diarrhoea...

- **What causes diarrhoea diseases? How? Why?**
  - **Nini husababisha maradhi ya kuharisha? Vipi? Kwa nini?**
- Referring to the list of diarrhoea diseases on the flip chart, write possible causes in a column next to each of these. Prompt for **drinking and cooking with contaminated water, not washing hands, lack of hygiene practices, improper sanitation**, etc.
- **How does untreated or contaminated water cause diarrhoea diseases? How does this happen? When and where? Who does this happen to?**
  - **How does the lack of hygiene cause diarrhoea diseases? How does this contamination happen? When and where? Why does this happen?**
  - **How does the lack of sanitation cause diarrhoea diseases? How does this contamination happen? When and where? Why does this happen?** Prompt for improper use of latrines and waste management.
  - **You know young children ages 5 years and under are particularly at risk if they get diarrhoea. How do young children get contaminated with germs that cause diarrhoea? When and where? Why does this happen?**
  - **What are the links between understanding how diarrhoea is caused and preventing diarrhoea?**
  - **What are your sources for drinking water?**
  - **Are there any that are safe?** Count how many in the group **think** their water sources are safe.
  - **How can you tell safe water from contaminated water?**  
Emphasize clear water is not necessarily clean—you cannot tell if water has disease-causing germs in it just by looking at it.

- **Nini husababisha maradhi ya kuharisha? Vipi? Kwa nini?**
- **Je, ni vipi ambavyo maji ambayo hayajatiwa husababisha maradhi ya kuharisha? Je, hii hutendeka vipi? Lini na wapi? Je, nani huathirika?**
- **Je, ni vipi ambavyo kutozingatia usafi husababisha maradhi ya kuharisha? Je, uchafuzi hufanyika vipi? Wakati gani na wapi? Je, mbona hili hutendeka?**
- **Vipi ambavyo ukosefu wa vyoo husababisha maradhi ya kuharisha? Je, uchafuzi huu hutendeka vipi? Wakati gani na wapi? Je, mbona hili hutendeka?**
- **Unajua kuwa watoto walio chini ya miaka 5 wako katika hatari kubwa ya kuugua kutokana na maradhi ya kuharisha. Je, watoto wadogo hupata vipi viini vinavyosababisha maradhi ya kuharisha? Wakati gani na wapi? Je, mbona hili hutendeka?**
- **Je, kuna uhusiano gani kati ya kuelewa jinsi maradhi ya kuharisha husababishwa, na jinsi ya kuzuia maradhi ya kuharisha?**
- **Je, nyinyi hutoa wapi maji yenu ya kunywa?**
- **Je, kuna mahali palipo na maji salama?**
- **Je, unaweza kutofautisha maji safi kutokana na maji yaliyochafuliwa?**

**Demonstrate...** Show the group a glass of water that one participant previously had stirred salt into it—without the others seeing. Ask **the group to look at it and decide if it is 'clean'**.

##### Continue by asking...

- **How does water get contaminated? Je, ni vipi ambavyo maji huchafuliwa?** Ask the group to list ways in which their water sources—wells/bore holes, taps—could get contaminated: e.g. things dropping in, seepage from nearby latrines, unwashed hands and containers used to draw the water, etc.

Write list on flip chart. Discuss and clarify these points.

**Note: If needed, use the picture codes to prompt the group discussion.**

##### Message Take-Out

Participants should leave these sessions saying...

- **Diarrhoea can have serious consequences for small children. It can even cause death!**
- **I know consuming contaminated water and food plus improper personal and household hygiene practices are the main causes of diarrhoea.**
- **I want to protect my household from diarrhoea so we can be healthier and save money too!**
- **I want to prevent diarrhoea in my household and in my community so we can be healthy, more productive plus save money!**

## Session Scripts - Part 3. Creating household and community solutions to prevent diarrhoea—particularly to protect young children!

### Miundo msingi ya kuhakikisha watoto wadogo wanalindwa kutokana na maradhi ya kuharisha katika jamii!

#### Facilitator's notes

**Get permission...** Ask the group if they're ready to explore ways of preventing diarrhoea in their households and in their community?

Begin Part 3 by asking one participant to summarize the discussion of Part 2, and get others to name some of the causes of diarrhoea.

#### Step 1. Identifying barriers to prevention behaviours

1. **What are the ways to prevent diarrhoea?**

Write this list on a flip chart—prompt for correct use of treated water for all drinking and cooking needs, hand washing with soap after using the toilet, changing baby's nappy, before cooking or feeding, etc., plus proper hygiene when cooking, eating/feeding a young child, and good sanitation practices.

Pointing one at a time to the ways to prevent diarrhoea listed on the flip chart, ask:

2. **What behaviours will make this effective in preventing diarrhoea? Who must do this? When? How will this be done? What will best ensure this is done?** Write these behaviours on flip chart next to each of the ways listed to prevent diarrhoea.

3. **How important is preventing diarrhoea to you? To others in your household? If you live in a diarrhoea-free household, how will this achievement change your life?**

4. **To prevent diarrhoea in your household, you may need to convince others use soap when hand washing and to only drink and cook with safe treated water. What are you willing to do to make this happen? How will you do it?**

1. *Je, ni njia zipi za kuzuia maradhi ya kuharisha?*

2. *Je, ni tabia zipi ambazo zitasaidia katika kuzuia maradhi ya kuharisha? Je, ni jukumu la nani? Je, hili litatendeka vipi? Je, ni jambo lipi tutafanya kuhakikisha linatendeka?*

3. *Je, kuzuia maradhi ya kuharisha kuna umuhimu gani kwako? Je, kwa wengine nyumbani kwako? Kama jamii yako haiugui maradhi ya kuharisha, hili litaletaje mabadiliko katika jamii yako?*

4. *Ili kuhakikisha kuwa jamii yako hawaugui maradhi ya kuharisha, itakubidi uwaelimishe umuhimu wa kuosha mikono kwa maji na sabuni, kunywa na kupika kwa kutumia maji yaliyotibiwa pekee. Je, utafanya nini ili kuhakikisha hili linatendeka?*

**FULLY AFFIRM all who want to achieve this!!**

#### Step 2. Finding positive role models!

1. **Is there anybody here who lives in a house where every person in the household only drinks safe treated water every day of the year?** Ask them to raise their hand.

2. **Is there anyone here with a child under 5 years who has ensured the water the child has to drink today is safe?** Ask these participants to stand up.

1. *Je, kuna yeyote hapa ambaye jamii yake hunywa maji yaliyotibiwa pekee?*

2. *Je, kuna yeyote hapa aliye na mtoto wa chini ya miaka 5, na leo amempa mtoto huyo maji yaliyotibiwa?*

**FULLY AFFIRM these people with clapping and cheers!**

**Call them to the front and ask them to share their stories...**

- *When did you start making sure the water for your young child was safe?*
- *How much water is treated or boiled in a week? How and when is this done?*
- *How much does it cost to treat or boil enough water for a week?*
- *What challenges did you have to overcome to have safe water? How did you overcome these?*
- *Je, lini ulianza kuhakikisha kuwa maji unayompa mtoto wako ni safi?*
- *Je, wewe hutibu kiasi gani cha maji kila wiki? Je, hili hutendeka wakati gani na vipi?*
- *Je, inakugharimu nini kutibu maji kwa wiki moja?*
- *Je, ni changamoto zipi ulikumbana nazo ili kupata maji safi? Je, ulitatusa vipi na changamoto hizi?*

**FULLY AFFIRM and give each person a T-shirt, cap or lesso.**

**Personalise the experience...** Now ask one or two to remain in front to share a bit more about their experiences.

1. **How and what did you learn that convinced you it was important for your young child/children to only drink and eat food prepared with safe water?**

1. *Ulijifunza nini ambacho kilikushawishi kuwa ni muhimu sana kwa mtoto/watoto wako kunywa na kula chakula kilichotayarishwa kwa maji yaliyotibiwa pekee?*

**AFFIRM and emphasise:** Yes, that's right! When a child under the age of 5 years gets diarrhoea, their little bodies lose fluids quickly and dehydration occurs. This is a very dangerous, and can cause death.

2. **After the water has been treated or boiled, do you protect your safe water from getting contaminated again? How do you do this?**

3. **Are there any challenges or disadvantages to treating your drinking and cooking water?** Prompt for cost, smell/taste, extra work, planning, etc. **How do you solve these?**

4. *Why do you feel it's worth it to solve these challenges so you can use safe treated water in your household—particularly for your young child?*
5. *Since you decided to protect your young child/children plus others in your family by always using safe water, what positive changes have you noticed in your household? Please tell us about these.*
2. *Baada ya kuchemsha au kuyatibu maji, wewe huhakikisha kuwa hayachafuliwi tena? Je, wewe hufanya nini?*
3. *Je, wewe hukumbana na changamoto zipi unapochemsha au kuyatibu maji yako? Wewe, hutatua vipi changamoto hizi?*
4. *Nini imepelekea wewe kuona kuwa ni lazima kutatua changamoto hizi ili uweze kuwa na maji safi pale nyumbani-hasa kwa mtoto wako?*
5. *Je, ni mabadiliko yapi uliyoona baada ya kuamua kutumia maji yaliyotibiwa pale nyumbani? Hebu tuambie zaidi kuhusu mabadiliko haya.*

### FULLY AFFIRM with clapping and thanks!

#### Step 3. Finding solutions to barriers of prevention behaviours

Show the flip chart from Step 1. Ask a participant to read out the lists of ways to prevent diarrhoea and the behaviours needed to do these effectively. Ask the group to add more prevention methods and the behaviour needed to make that happen. Add these to the flip chart.

#### Small group activities...

Divide the participants into four (4) small groups. Assign one topic to each group: Safe Water; Hand Washing; Hygiene; Sanitation.

Each group will assign someone to write their notes on a flip chart paper and one or two others to present these to the full group. Ask each group to look at the methods and behaviours needed to prevent diarrhoea as listed on the flip chart that relates to their topic and to discuss these questions. Time: 15 to 20 minutes.

1. *What barriers or challenges are there in practicing each behaviour that will help prevent diarrhoea?*
2. *Who or what creates the barrier or challenge to practicing this behaviour?*
3. *What can be done to overcome or solve this challenge?*
4. *How will this be done? What will best ensure this is done?*
1. *Je, ni changamoto zipi wewe hukumbana nazo wakati unajaribu kuzuia maradhi ya kuharisha?*
2. *Nini au nani husababisha kuwepo kwa changamoto hizi?*
3. *Je, nini kinaweza fanywa ili kuepuka au kutatua changamoto hizi?*
4. *Je, hili litatendeka vipi?*

#### Small group reporting...

Ask each group to give their report in 3 to 5 minutes. Facilitate questions from the participants and answers after each group report.

### FULLY AFFIRM all members for their participation

#### Step 4. Comparing the costs of having and preventing diarrhoea

Compare the process and cost of making the water safe & hand washing with soap against the consequences and costs of diarrhoea as previously mentioned by the community.

1. *How much does soap cost?* How many bars of soap are needed in a month for an average household? Quickly calculate about how much it will cost per household/per month to buy and use soap.
2. *How much does water treatment cost?* How much water treatment is needed in a month for an average household? Quickly calculate about how much it will cost per household/per month to buy and use water treatment.  
Now compare this with the household cost for one month of having bouts of diarrhoea Divide household total estimated in Part 1 by 12.
3. *How does this cost comparison affect you?*
  - *How many of you think using soap for hand washing to prevent diarrhoea in your household is important and a good use of money?* Count raised hands
  - *How many of you think using water treatment to prevent diarrhoea in your household is important and a good use of money?* Count raised hands
  - *How many think most of the community will feel this way?* Count again
  - *What will you do to convince others in your own household to want to achieve this? In the community? When?*
1. *Je, sabuni hukugharimu pesa ngapi?*
2. *Je, kutibu maji hukugharimu pesa ngapi?*
3. *Je, gharama hii hukuathiri vipi?*
  - *Je, wangapi kati yenu wanaona kuwa kutumia sabuni kwa kuosha mikono husaidia katika kuzuia maradhi ya kuharisha pale nyumbani na ni njia nzuri ya kutumia pesa?*
  - *Je, wangapi wanaona kuwa kutumia maji yaliyotibiwa kwa kuzuia maradhi ya kuharisha pale nyumbani ni matumizi mazuri ya pesa?*
  - *Wangapi kati yenu wanaona kuwa jamii nzima itakuwa na maoni sawa nawe?*
  - *Je, utafanya nini ili kuwashawishi familia yako kufuata unavyofanya? Na jamii nzima? Lini?*

## Summarise Actions to Prevent Diarrhoea

Ask a couple of participants to summarise this session on ways to prevent diarrhoea and to mention some of the tips that have been discussed. Prompt for or emphasise these points:

- **Use cleanest available source** when collecting drinking water *Chota maji yako kutoka mahali safi*. Safety should be made a priority over convenience for drinking water.
- **Always purify drinking and cooking water** by using PUR or Aquatabs and other chlorine treatments or boiling and filtering the water in areas where there is no safe water. *Hakikisha unatibu maji yako* kwa kutumia dawa aina ya PUR ama Aquatabs ama aina nyingine ya chlorine, au kwa kuchemsha au hata kuyachuja – hasa katika maeneo ambayo hakuna maji safi. This is especially important for small children as they are less resistant to germs than adults. Emphasise that the taste from treatment can be minimized by ensuring use of the correct dosage, mixing thoroughly and leaving it overnight.
- **Boiling water kills germs** but this must be done correctly. Water should be brought to boil—and boiled for at least 30 minutes—then cooled before drinking. *Kuchemsha hua viini katika maji, lakini lazima maji yachemshwe vizuri – kwa dakika thelathini.*
- **Properly store and hygienically use** safe boiled or treated water to prevent contamination once it's been purified. *Hakikisha kuwa maji ambayo yamechemshwa yamehifadhiwa vyema* ili yasipate kuchafuliwa tena.

**Storing Water Safely:** Store drinking water separately from other domestic water within a clean and covered narrow mouth water container. After cleaning the containers, place them in the sun (the heat and light of the sun helps to kill the germs). Pour drinking water from the storage container instead on dipping into it and always use only clean cups or glasses.

- **ALWAYS wash hands with soap** *Hakikisha kuwa unaosha mikono kwa sabuni*. (or ash) and water to remove disease organisms from hands, preventing their spread to the mouth. ALWAYS wash hands before starting to cook, eat or feed a child, after cleaning the child's nappy or going for long call.
- **ALWAYS wash hands** thoroughly with soap before collecting water, before treating water to be used for drinking and cooking and before cooking food. *Hakikisha kuwa unaosha mikono kabla ya kuchota maji, kuyatibu na kabla ya kupika.*
- **Caregivers of children ages 5 years and younger** need to give highest priority to practicing correct hand washing whenever they are touching and feeding young children and ensure young children always consume safe water to avoid contaminating or passing diarrhoea

to the young child or baby. *Mtu yeyote anayewaangalia watoto walio na umri wa chini ya miaka 5* wanahimizwa kudumisha hali ya juu ya usafi kwa kuosha mikono.

**Conclusion...** We agreed we're ready to take action to prevent diarrhoea in our households and we'll be encouraging others to do the same.

We agreed to use what we know and have learned to create solutions to overcome any challenges or barriers we have so we can successfully prevent diarrhoea—particularly among young children.

*We agreed our goal is to prevent diarrhoea to enjoy better health and save lives!*

### Message Take-Out

Participants should leave the session saying:

- *Diarrhoea can have serious consequences for small children. It can even cause death!*
- *I know consuming contaminated water and food plus improper personal and household hygiene practices are the main causes of diarrhoea.*
- *I need to do my part to prevent diarrhoea in my home.*
- *I want to protect my household from diarrhoea so we can be healthier and save money too!*
- *I want to prevent diarrhoea in my household and in my community so we can be healthy, more productive plus save money!*
- *We can prevent diarrhoea when every person understands the causes and is willing to practice prevention by only drinking and cooking with treated water and washing hands with soap before cooking, feeding or touching a young child, eating and after using the toilet.*

## Module 1.

### Picture Codes

#### Part 1. Exploring sources of contamination that cause diarrhoea

#### Sehemu ya Kwanza. Chanzo cha uchafuzi unaosababisha maradhi ya kuharisha

##### Facilitator's notes

**Ice Breaker...** Begin by affirming the group's active participation and interest in exploring more about the sources of contamination, how it occurs and causes diarrhoea.

Ask them if they are ready to look at some illustrations and together explore and discuss what we see?

**Show the Picture:** Women at the river

##### Start the discussion...

1. *What's going on in this scene?*
  2. *How is the river water being contaminated?*
  3. *How could this contaminated water affect these people? How might other people become affected by this contaminated water?*
  4. *Many young children get diarrhoea, and this can be serious. Using what we see here, will someone tell us a story about how a under-5 child might get contaminated from this water?*
  5. *Could something like this happened here? To you or others? Please tell us about cases you have heard of or experienced.*
  6. *What can be done here to solve these problems that are causing diarrhoea?*
1. *Je, nini kinachoendelea katika picha hii?*
  2. *Je, ni vipi ambavyo maji ya mto yanachafuliwa?*
  3. *Je, ni vipi ambavyo maji haya machafu yatawaathiri watu hawa? Je, ni vipi ambavyo watu wengine wataathirika na maji haya yaliyochafuliwa?*
  4. *Watoto wengi huugua maradhi ya kuharisha na ni hatari sana. Kwa kutumia picha hii, nani atatueleza jinsi ambavyo mtoto wa chini ya umri wa miaka 5 ataathirika kutokana na maji haya?*
  5. *Je, jambo hili linaweza kutendeka hapa? Kwako wewe ama wengine? Hebu tueleze kuhusu hadithi yako ama ya mtu mwingine.*
  6. *Je, jambo gani linaweza kufanywa ili kutatua shida zinazosababisha maradhi ya kuharisha?*





## Module 1. Picture Codes

### Facilitator's notes

Here's another one...let's discuss what we see, ok?

### Part 1. Exploring sources of contamination that cause diarrhoea

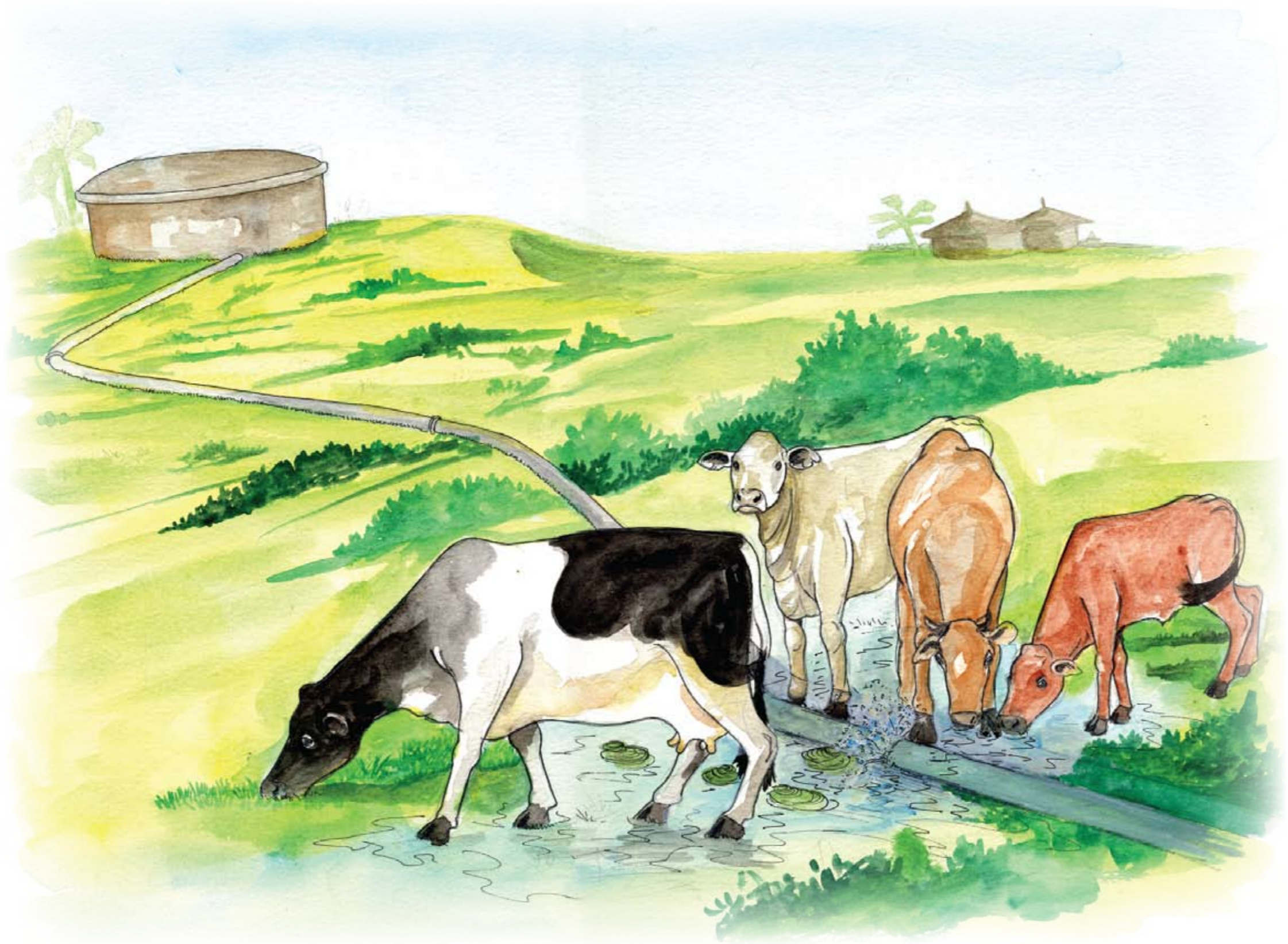
*Sehemu ya Kwanza. Chanzo cha uchafuzi unaosababisha maradhi ya kuharisha*

**Show the picture:** Cows drinking water of broken pipe

#### Start the discussion...

- 1 *What's going on in this scene?*
- 2 *Has something like this ever happened here? Please explain.*
- 3 *What problems could this situation cause and who might be affected?*
- 4 *What can we do about these problems?*
- 5 *What could be done here to solve a problem like this one that could be causing diarrhoea? Who would take action?*

1. *Je, nini kinatendeka hapa?*
2. *Je, jambo kama hili lishatokea hapa? Tueleze zaidi.*
3. *Je, hali hii inaweza kuleta shida gani, na ni nani huathirika?*
4. *Je, tunaweza kufanya nini kutatua shida hizi?*
5. *Je, jambo gani tunaweza kufanya ili kutatua shida kama hii ambayo inasababisha maradhi ya kuharisha? Je, ni jukumu la nani?*



## Module 1. Picture Codes

### Facilitator's notes

Now let's discuss what we see in this picture.

### Part 1. Exploring sources of contamination that cause diarrhoea

**Sehemu ya Kwanza. Chanzo cha uchafuzi unaosababisha maradhi ya kuharisha**

**Show the picture:** Kids playing in contaminated water near woman collecting water from a well

#### Start the discussion...

1. *What's going on in this scene?*
  2. *What could the woman be thinking?*
  3. *What problems could these situations cause? How might other people become affected by these actions?*
  4. *Could something like this happen here? To you or others? Please explain.*
  5. *If something like this happens here, what could be done to solve these problems?*
  6. *When we make decisions—particularly the ones that involve and affect others in our community—how do we make sure we follow up on what we have decided?*
1. *Je, nini kinachoendelea hapa?*
  2. *Je, mwanamke huyu anafikiria nini?*
  3. *Je, ni shida gani husababishwa na hali hii? Je, vipi ambavyo watu wengine wataathirika na matendo haya?*
  4. *Je, jambo kama hili linaweza kutendeka mahali hapa? Kwako wewe au wengine? Tafadhali fafana.*
  5. *Je, jambo kama hili likitendeka hapa, utafanya nini ili kutatua shida hizi?*
  6. *Tunapofanya uamuzi-hasa uamuzi unaowahusu watu wengine katika jamii-ni vipi ambavyo sisi huhakikisha kuwa tunatimiza yale tunayoamua kutenda?*



**Part 2. Exploring ways to prevent contamination that causes diarrhoea**  
**Sehemu ya pili. Kuchunguza namna za kuzuia uchafuzi wa maji unaosababisha maradhi ya kuharisha**

**Facilitator's notes**

Continue by affirming the group's active participation and knowledge on so many ways contamination occurs and how to prevent such contamination that is causing diarrhoea.

**Show the Picture:** Child drinking contaminated water from glass

**Start the discussion...**

1. *What's going on in this scene? What is being magnified?*
  2. *Could something like this happened here? To you or others? Please explain.*
  3. *What problem/s could this situation cause to this young child? How might others people become affected by this?*
  4. *If something like this happened here, what could be done to solve this problem?*
  5. *When we make decisions—particularly the ones that involve and effect others in our household—how do we make sure we follow up on what we have decided?*
  6. *What roles will others in the household have?*
1. *Je, nini kinachoendelea hapa? Nini kinaangaziwa?*
  2. *Je, jambo kama hili linaweza kutendeka hapa? Kwako wewe au wengine? Tafadhali fafanua.*
  3. *Je, ni shida zipi ambazo hali hii inaweza kuwasababishia watoto wachanga? Je, ni vipi ambavyo watu wengine pia wataathirika?*
  4. *Je, jambo kama hili likitendeka hapa, utafanya nini ili kulitatua?*
  5. *Tunapofanya uamuzi-hasa uamuzi unaowahusu watu wengine katika jamii-ni vipi ambavyo sisi huhakikisha kuwa tunatimiza yale tunayoamua kutenda?*
  6. *Je, nini jukumu la watu wengine katika jamii?*



## Module 1. Picture Codes

### Facilitator's notes

Here's another picture.

**Show the Picture:** Treating and purifying drinking water

### Start the discussion...

1. *What correct practices of treating water do you see in this picture?*
2. *How many here are using one of these methods to make sure you have safe drinking and cooking water in your house? Count of the raised hands and AFFIRM by clapping!*
3. *What do you like about the approach or method you are using to make sure you have safe drinking and cooking water in your house*
4. *If you are not using one of these methods now, please tell us what you are doing to treat or purify your water or describe two or more reasons why you're not treating or purifying your water. Is something making this too difficult to do?*
5. *If you are not using one of these methods now, would you be interested in trying to treat or purify your household drinking and cooking water for a month to see the difference that would make to everyone's health? How could you make this happen?*
6. *Do others face similar barriers or challenges in treating or purifying water for their households? What can be done about these problems that may be causing the high incidence of child death from diarrhoea in Kenya?*

## Part 2. Exploring ways to prevent contamination that causes diarrhoea

**Sehemu ya pili. Kuchunguza namna za kuzuia uchafuzi wa maji unaosababisha maradhi ya kuharisha**

1. *Je, ni njia zipi muhimu za kutibu maji zinaonyeshwa hapa?*
2. *Je, ni wangapi kati yenu wanatumia mojawapo ya njia hizi kuhakikisha kuwa wana maji safi ya kunywa na ya kupikia pale nyumbani?*
3. *Je, ni njia gani unayotumia kutibu maji nyumbani kwako, na kwa nini unaipenda?*
4. *Ikiwa hutumii njia yoyote ile kutibu au kusafisha maji yako, hebu tueleze sababu moja au zaidi kwa nini huyatibu maji yako. Je, unapata ugumu wowote?*
5. *Ikiwa hutumii mojawapo ya njia hizi, je, ungetaka kujaribu kuyatibu au kuyasafisha maji yako ya kunywa au ya kupikia kwa muda wa mwezi mmoja ili uone tofauti katika afya ya jamii yako? Je, vipi utaweza kufanya hivi?*
6. *Je, kuna wengine ambao hupata changamoto katika kusafisha au kuyatibu maji katika jamii? Je, nini kinachoweza kufanywa kuhusu changamoto hizi, ambazo zinaweza kusababisha maafa ya watoto kutokana na maradhi ya kuharisha?*





## Module 1. Picture Codes

### Facilitator's notes

Now let's discuss what we see in this picture.

**Show the Picture:** Treating and properly storing drinking water.

### Start the discussion...

1. *What correct practices of storing treated water do you see in this picture?*
2. *How many are properly storing your treated water in your house? Count the raised hands and AFFIRM by clapping!*
3. *Please describe how you are properly storing your treated water and tell us how you're doing this and two or more points about why you are using that approach.*
4. *If you are not properly storing your treated water now, please describe why you're not doing this? Would you be interested in trying to properly store your household's treated water for a month to see the difference that would make to everyone's health?*
5. *What can we do about these problems related to properly storing treated water so that we reduce the high incidence of child mortality from diarrhoea in Kenya?*

## Part 2. Exploring ways to prevent contamination that causes diarrhoea

**Sehemu ya pili. Kuchunguza namna za kuzuia uchafuzi wa maji unaosababisha maradhi ya kuharisha**

1. *Je, ni njia ngapi muhimu za kuhifadhi maji zimewasilishwa katika picha hii?*
2. *Je, wangapi kati yenu wanahifadhi vyema maji yaliyotibiwa?*
3. *Hebu tueleze jinsi unavyoyahifadhi maji yaliyotibiwa. Mbona unatumia njia hizi kuhifadhi maji?*
4. *Ikiwa huyahifadhi vyema maji, yako yaliyotibiwa, tafadhali tueleze sababu ya kutofanya hivi? Je, ungependa kujaribu kuhifadhi maji yaliyotibiwa pale nyumbani kwa muda wa mwezi mmoja ili uone tofauti katika hali ya afya ya jamii yako?*
5. *Je, tunaweza kufanya nini kuhusu shida zinazotokana na kutohifadhi maji yaliyotibiwa, ili kupunguza vifo vya watoto kutokana na maradhi ya kuharisha nchini Kenya?*



## Role Play suggestion

Divide the participants into two groups and ask two or three members of each group to act out one of the following scenarios in front of their group. The actors are to try to start a discussion with the other members—role-playing as the ‘community’. The aim is for the actors to convince or influence their community to take action within their households to prevent diarrhoea. Each group will watch the other group perform and then all participants will talk about the two role plays.

**1st Scenario** A woman has just learned that the latrine is contaminating the community’s main water source! People in her household have gotten sick from this, and so have others in the area. Many people in her neighbourhood use the latrine and it’s dirty, leaking and not properly maintained. Her partner has warned her that she will stir up trouble if she tries to get others to clean up the latrine. How can she convince him and her neighbours to get involved?

**2nd Scenario** A mother and father with two young children have just read a public health flyer warning them of the urgent need to ensure all under 5 year old children are only drinking safe and treated water—and hands of every caregiver are regularly washed with soap throughout the day, every day—to prevent diarrhoea and possible death! This family’s only source of water is a communal borehole that’s not well protected and generally very dirty. The latrine they use is shared by others too. Act out the conversation they have with their neighbours after reading this flyer.

## Talk about it...

- 1 Which comments or statements were most effective in convincing the others to be concerned about the contaminated water and proper hygiene? Why were these so effective?
- 2 Did you hear any solutions to the problem of the contaminated water and hand washing being offered? What were these and how effective would they be in preventing diarrhoea?
- 3 Beyond the solutions proposed in these two scenarios, what are some other ways to prevent people from contamination that might cause diarrhoea??
- 4 What would you do to protect your young children from drinking or eating food cooked with contaminated water if you knew your household’s source of water was contaminated? What are some of your reasons for choosing to prevent diarrhoea in this particular way?
- 5 What would you do to protect your young children from getting contaminated by unclean hands? What are some of your reasons for choosing to prevent diarrhoea in this particular way?
- 5 When a group or household makes decisions, how can they make sure they actually do what they’ve decided?

## 2. Role play - Conducting a baraza to launch the Diarrhoea Prevention Community Campaign

Ask the participants to count off 1 to 4 repeatedly until every member has a number. Ask all 1s to form a group; all 2s; etc. Count off higher or lower depending on the size of the full group. Give each group a specific role to play in the Baraza—making sure they do not let other groups know what their particular ‘roles’ are.

The goal of this Role Play is to prompt the participants in thinking about how they can communicate their plans and motivate others in the community to get involved in their Diarrhoea Prevention Community Campaign.

## Here are some suggested roles:

- a. Group 1: They’re planning and leading the local Diarrhoea Prevention Community Campaign
- b. Group 2: They’re Community Elders/ area Chef and Assistants
- c. Group 3: They’re a group that’s not interested in participating in this local Diarrhoea Prevention Community Campaign. Each person in the group must have a reason for being reluctant. (e.g. cost of water treatment, cost of soap, lack of water, some of their household members believe its not realistic, etc.)
- d. Group 4: They’re a group that’s interested in participating in this local Diarrhoea Prevention Community Campaign. Each person in the group must have a reason for being interested. (e.g. lost a child to diarrhoea, high cost of a bout of diarrhoea, repeated a level of schooling due to chronic diarrhoea, etc.)

## Now conduct the Baraza!

After each group has voiced their comments, thank the participants and talk about what happened.

1. How realistic were these comments?
2. How did the Leaders of the Diarrhoea Prevention Community Campaign handle the reluctant group?
3. Did any particular comment sway the opinions of others toward wanting to support the Diarrhoea Prevention Community Campaign? Which comments were these? Why were these listened to more than other comments?
4. If this was a real Baraza, what could the leaders of the Diarrhoea Prevention Community Campaign have done to convince more community members to get involved?
5. Will this Role Play help you in planning your Diarrhoea Prevention Community Campaign? How?

## Message Take-Out

Participants should leave the session saying:

- *Diarrhoea can have serious consequences for small children. It can even cause death!*
- *I know consuming contaminated water and food plus improper personal and household hygiene practices are the main causes of diarrhoea.*
- *I need to do my part to prevent diarrhoea in my home.*
- *I want to protect my household from diarrhoea so we can be healthier and save money too!*
- *I want to prevent diarrhoea in my household and in my community so we can be healthy, more productive plus save money!*
- *We can prevent diarrhoea when every person understands the causes and is willing to practice prevention by only drinking and cooking with treated water and washing hands with soap before cooking, feeding or touching a young child, eating and after using the toilet.*

## Final Summary

Please turn to the Facilitator’s Notes on inside of the Back Cover

## Module 2. Treating Diarrhoea: Understanding how to treat diarrhoea and the urgency of treating young children with diarrhoea

### Kuelewa jinsi ya kutibu maradhi ya kuharisha, na umuhimu wa kutibu watoto wadogo wanaouguwa maradhi ya kuharisha kwa haraka

**Theme** Every caregiver of young children should know how to urgently and correctly treat diarrhoea among children of ages 5 years and younger. Every household should have ORS treatment available and know how to use it properly by mixing it only with safe treated water

#### Part 1. Diarrhoea kills! Assessing the risk in the community

##### Facilitator's notes

**Ice Breaker...** Begin by asking a participant to remind the group of their agreed goals: *to prevent diarrhoea in our households by encouraging others to do the same—overcoming barriers to behaviours in preventing diarrhoea—particularly among children ages 5 years and younger.*

**AFFIRM and emphasise...** *That's right. We want to prevent diarrhoea in our households—so we can enjoy better health and save lives! May we talk about diarrhoea treatment—and how best to urgently treat young children when they get diarrhoea?*

##### Step 1. Start the discussion...

*We all know many people and young children get diarrhoea. In many cases this becomes a critical condition, and many even die.*

1. *Has this ever happen here? Please briefly tell us about the cases you have heard of—or experienced.*
  2. *What in your opinion could have been done to prevent these critical conditions and deaths?* List on a flip chart paper what the participants say could have been done. Make a list for young children and another for other people
1. *Je, jambo hili limewahi kutokea hapa? Hebu tueleze kisa ambacho umewahi kushuhudia/kusikia.*
  2. *Kwa maoni yako, ni vipi ambavyo maafa na hali hizi za kuhatarisha zinaweza kuepukika?*

##### Step 2. Personalise experiences with young children having diarrhoea

*Ask one or two of the participants who had a young child with diarrhoea to come to the front and tell the group a bit more about their personal experiences.*

1. *How old was your child when he or she got diarrhoea? How did you child get diarrhoea and what symptoms occurred?*
  2. *What did you do? How did you know about that treatment? When did you start the treatment?*
  3. *Why is it more serious when young children get diarrhoea? Please tell us about cases you have heard of or experienced?* Prompt if needed: this can become serious fast because many do not get immediate treatment to help replenish their body fluids.
1. *Je, mtoto wako alikuwa na umri gani alipouguwa maradhi ya kuharisha? Nini kilisababisha mtoto wako kupata maradhi ya kuharisha? Alikuwa na dalili zipi?*
  2. *Ulifanya nini? Ulijua vipi kuhusu matibabu. Ulianza lini matibabu haya?*
  3. *Ni hatari gani iliyoko kwa watoto wachanga kuugua maradhi ya kuharisha? Tafadhali tueleze kuhusu kisa ambacho umewahi kushuhudia?*

##### Step 3. Understanding current diarrhoea treatment practices

1. *Who needs to know how and when to treat diarrhoea—particularly in young children?* List these people on a flip chart paper, prompting for: all caregivers of young children—parents, siblings, grandmothers, helpers, etc.
2. *What must we do to correctly treat diarrhoea in young children so that we save lives?* List these actions on a flip chart paper

3. *How many of you have heard about using ORS to treat diarrhoea and prevent dehydration?* Count the raised hands and AFFIRM with clapping!
  4. *How many of you have used ORS to treat diarrhoea?* Count the raised hands and AFFIRM with clapping! **Show packet of ORS.**
  5. *Can someone who has used ORS tell us what it is, how you use it and when?*
  6. *Why is it so important to use ORS immediately in young children? What can be done to make sure this happens?*
1. *Je, nani anafaa kujua wakati na namna ya kutibu maradhi ya kuharisha – hasa katika watoto wachanga?*
  2. *Je, tunatakiwa kufanya nini ili kutibu maradhi ya kuharisha katika watoto wachanga ili tuweze kuokoa maisha?*
  3. *Je, ni wangapi mmesikia kuhusu ORS ambayo hutibu maradhi ya kuharisha na hurudisha maji mwilini?*
  4. *Ni wangapi mmetumia ORS kutibu au kuzuia maradhi ya kuharisha?*
  5. *Yeyote ambaye ametumia ORS atueleze, ni nini hasa, jinsi ya kuitumia na wakati gani?*
  6. *Ni umuhimu gani uliopo katika kutumia ORS kwa watoto wachanga? Utahakikishaje kuwa hili linatendeka?*

##### Summarise best practices listed on the flip chart, adding if needed:

- *Diarrhoea kills children by draining fluids from their bodies*
- *Keep ORS at home and use ORS immediately—you don't have to wait!*
- *ORS helps to replace fluids and minerals lost due to diarrhoea*
- *ORS is free in all government facilities and available in shops—start using it at home at first signs of diarrhoea!*
- *If the diarrhoea continues for more than a day or two, go to the clinic and ask for ORS and Zinc*
- *Zinc helps build the body's immunity and stops diarrhoea more quickly*
- *Give additional fluids such as soups, but avoid milk, except breast milk*
- *Continue breastfeeding and feed more often*

##### AFFIRM the participants interaction by asking everyone to clap!

##### Message take-out

- *I'm confident about using ORS immediately if my baby or young child gets diarrhoea*
- *I know where to get ORS and can get some packets for our household—just in case.*
- *I'm confident I can show and convince all caregivers of our young children in my household how to correctly use ORS, using only safe treated water, and to do so immediately if our young children get diarrhoea!*

## Module 2.

### Part 2. Solutions for urgently treating diarrhoea— particularly among babies young children

#### Jinsi ya kutibu maradhi ya kuharisha kwa haraka-hasa kwa watoto wachanga na wadogo

##### Facilitator's notes

**Ice Breaker...** Ask a participant to summarise what was discussed in Part 1—the benefits of understanding diarrhoea treatments and of knowing what to do if we get diarrhoea—and particularly when a young child gets diarrhoea.

Ask if the group is willing to talk about how best to be sure that diarrhoea will be correctly and urgently treated—particularly if your baby or young children get diarrhoea?

##### Step 1. Exploring barriers to immediate treatment of diarrhoea

Are there any barriers or challenges in treating diarrhoea immediately in your households or in this community? What are some of these? *Je, kuna changamoto zozote katika kutibu maradhi ya kuharisha pale nyumbani ama katika jamii yako? Changamoto hizi ni zipi?* List these on a flip chart paper, prompting for the following

- Getting or availability of ORS
- Having Safe Water available and ready for use
- Timing: sometimes diarrhoea begins in the night
- Can't leave other children alone and take baby to the clinic
- Lack of money for transport to take child to clinic or to get ORS
- Kupata dawa ya ORS
- Uwepo wa maji safi kwa matumizi
- Kuchunguza wakati ambapo kuharisha huanza (wakati mwingine huanza usiku)
- Huwezi kuwaacha watoto wengine peke yao ili umpeleke aliyegua kliniki
- Ukosefu wa pesa za kumpeleka mtoto kliniki au kununua dawa ya ORS

##### Start the discussion...

Let's review this list and talk about solutions. What can be done to solve these life threatening problems that are caused by diarrhoea—particularly for young children? *Hebu tuangalie orodha hii na tutafute suluhisho. Je, nini tunaweza kufanya ili kupata suluhisho kwa shida zinazosababishwa na maradhi ya kuharisha-hasa katika watoto wachanga?* Brainstorm and list these on a flip chart paper, prompting for the following

- Keep ORS sachets in your house—just in case!
- Keep safe treated water in your house—just in case!
- Ask a neighbour in advance if they are willing to look after the other children in your house—just in case!
- Keep some money for transport in a special place—just in case!

##### Step 2. Identifying positive role models or practical solutions

How many of you have solutions you are using to ensure you can immediately treat diarrhoea? *Je, wangapi kati yenu wamehakikisha kuwa wanaweza kutibu mara moja, maradhi ya kuharisha?* Ask one or two of those with raised hands to come to the front to respond to the following questions. If no hands are raised, ask the group to suggest solutions!

Pointing to the list of barriers and solutions on the flip chart ask:

1. **Tell us your story:** What barriers did you face? How did you overcome them?
2. What were your challenges in doing this? As we discussed barriers and solutions to them a few minutes ago, what were you thinking?
3. What advice can you offer to others looking for practical ways to immediately treat diarrhoea?

##### AFFIRM the participants interaction, thank them and ask everyone to clap!

Continue by pointing to the barriers and solutions on the flip chart and asking the group:

4. Has anyone else personally overcome these or other barriers in being able to immediately treat cases of diarrhoea? Please tell us what you are doing?

5. How many of you have some ORS in your house right now? Count the raised hands and applaud loudly!
6. How many of you will start keeping ORS in your house—starting today? Count the raised hands and applaud loudly!
7. What have you heard today that has most convinced you that it's a good practical idea that you can use so you can immediately treat diarrhoea in your household—particularly if you have young children?
  1. Tuambie hadithi yako: Ulikumbana na changamoto zipi? Je, uliwezaje kuzitatua?
  2. Je, ni changamoto zipi ulikumbana nazo? Je, ulikuwa unafikiria nini tulipokuwa tukizungumzia changamoto hapo mbeleni?
  3. Je, ni mawaidha yapi ambayo unaweza kuwapatia wale ambao wanatafuta njia za kutibu maradhi ya kuharisha?
  4. Je, kuna mwingine ambaye ameweza kukumbana na changamoto hizi na kuweza kutibu maradhi ya kuharisha? Hebu tueleze, unafanya nini?
  5. Je, ni wangapi kati yenu mnayo dawa ya ORS nyumbani?
  6. Ni wangapi mtaanza kujiwekea dawa ya ORS nyumbani-kuanzia leo?
  7. Je, ni jambo gani umesikia leo ambalo limekuhamasisha na ambalo utaweza kulifanya ili kutibu maradhi ya kuharisha nyumbani kwako-hasa kama una watoto wachanga?

##### Summarise!

Diarrhoea kills! Ideally everyone should keep ORS readily available and only use chlorine treated safe water when mixing an ORS treatment. The highest priority being prevention of diarrhoea particularly by ensuring all children ages 5 years and younger always only consume safe water.

*Maradhi ya kuharisha huua! Ni wajibu wa kila matu kujiwekea dawa ya ORS nyumbani, na kutumia maji yaliyotibiwa kila unapotchanganya dawa ya ORS. Jambo la muhimu ni kuhakikisha kuwa watoto walio chini ya umri wa miaka 5 wanakunywa maji safi.*

##### AFFIRM the participants interaction, thank them and ask everyone to clap!

##### Message Take-Out

Participants should leave these sessions saying...

- Diarrhoea kills! I will save lives by being prepared to urgently and properly treat diarrhoea—particularly among young children!
- I'm confident about using ORS or another correct treatment immediately if my baby or young child gets diarrhoea.
- I'm confident about showing all caregivers of the young children in my household how to prepare and use ORS or another treatment correctly and immediately if my baby or young child gets diarrhoea.
- I know where to get ORS treatment and I have some packets in my house now—just in case.
- I am confident we can plan and lead a Diarrhoea Prevention Community Campaign and convince every household and community member to get involved so we can prevent diarrhoea and save lives in our community!

## Module 2.

### Picture Codes

#### **Part 1. Exploring solutions for urgently treating diarrhoea— particularly among babies and young children**

#### **Sehemu ya kwanza. Jinsi ya kutibu maradhi ya kuharisha kwa haraka—hasa kwa watoto wachanga na wadogo**

Facilitator's notes

**Ice Breaker...** Begin by affirming the group's active participation and knowledge on how contamination occurs and what must be done to prevent diarrhoea. Ask one participant to summarise the previous session by giving the main points on treatment of diarrhoea.

**AFFIRM and thank him or her and ask if others have other points to add.**

**AGAIN AFFIRM the participants interaction Ask everyone to clap!**

Ask the group if they are ready to look at some illustrations and together explore and discuss what we see?

**Show the Picture** Treating child with diarrhoea using ORS

#### **Start the discussion...**

- 1. What correct practices of treating diarrhoea do you see in this picture?**
- 2. Has anyone here ever given ORS to a baby? How would a caregiver give ORS to a baby that is under the age of one year?**
- 3. When should ORS be given to the person or child with diarrhoea? Why? Prompt for: after every loose stool or poop to replace lost body fluids**
- 4. What are some other ways to treat diarrhoea and how**

#### **urgent are they?**

- 1. Je, ni njia ngapi za kutibu maradhi ya kuharisha zinaonyeshwa hapa?**
- 2. Nani kati yenu amewahi kumpa mtoto wake dawa ya ORS? Je, ni vipi ambavyo mama anaweza kumpa mtoto chini ya mwaka mmoja dawa ya ORS?**
- 3. Je, ni wakati gani ambapo mtoto ama mtu mzima hupewa dawa ya ORS kwa kutibu maradhi ya kuharisha? Kwa nini?**
- 4. Je, kuna njia zipi nyingine za kutibu maradhi ya kuharisha, na je, zinaweza kutegemewa?**

#### **Write a list of these on the flip chart paper. Prompt for:**

DO NOT EAT or drink milk, milk products and avoid sugar, fruit, fats and oils or red meat.

DO EAT starches: ugali, potatoes, rice and yellow vegetables such as carrots, pumpkin plus chick and fish.

Drink extra water and liquids. Mothers who are breastfeeding the baby with diarrhoea should try to breastfeed the baby much more often.

USILE wala kunywa maziwa ama chakula chochote kilicho na maziwa, wala sukari, matunda, chakula chenye mafuta ama nyama.

KULA chakula kama vile ugali, viazi, mchele, karoti, malenge ama samaki.

Kunywa maji kwa wingi. Lazima mama anayenyonyesha aendelee kumnyonyesha mtoto wake kila wakati.



## Module 2. Picture Codes

### Facilitator's notes

Here's another scene. May we talk about taking a child with diarrhoea to the clinic?

### Part 1. Exploring solutions for urgently treating diarrhoea—particularly among babies and young children

**Sehemu ya kwanza. Jinsi ya kutibu maradhi ya kuharisha kwa haraka—hasa kwa watoto wachanga, na wadogo**

**Show the Picture** Taking child to clinic for diarrhoea treatment

**Start the discussion...**

1. **What correct practices of treating diarrhoea do you see in this picture?**
2. **How many of you have heard about using Government Health Services to treat diarrhoea and prevent dehydration—especially in young children? Count raised hands and clap!**
3. **How many of you have used Government Health Services to treat diarrhoea? Count raised hands and clap! Please tell us about your experiences**
4. **If you were the Minister of Health what else would you do to convince all Kenyans to correctly and consistently only drink and cook with treated water and practice proper hygiene to prevent diarrhoea?**

1. **Je, unaona njia ngapi za kutibu maradhi ya kuharisha hapa?**
2. **Je, ni wangapi mmesikia kuhusu huduma za serikali kwa kutibu maradhi ya kuharisha na kuzuia kupoteza maji mwilini—hasa kwa watoto wachanga?**
3. **Ni wangapi kati yenu mmetumia huduma za serikali kutibu maradhi ya kuharisha? Hebu tueleze zaidi.**
4. **Kama ungekuwa Waziri wa Afya, ungefanya nini ili kuwashawishi WaKenya kunywa na kupika kwa kutumia maji yaliyotibiwa, na kuweka hali ya juu ya usafi ili kuzuia maradhi ya kuharisha?**





## Module 2. Picture Codes

### Facilitator's notes

We've talked about the need of making sure we are prepared so we can give urgent treatment to someone in our household if they get diarrhoea—particularly if this happens to a child under the age of 5 years. Let's look at this next illustration and talk about what we need to be prepared to do so we can immediately begin to treat a child with diarrhoea?

**Show the Picture**—Composite: 1 Toilet/latrine with washing station nearby; 2 Safe Water storage in jerry can in kitchen area; 3 Treating child with diarrhoea using ORS; 4 Taking child to clinic for diarrhoea treatment

### Start the discussion...

1. *What preparations made it possible for what you see in each frame to happen? Point to each frame and write each noted planned action on the flip chart.*
2. *How many of you have thought about being ready to treat diarrhoea immediately so that dehydration is prevented and lives are saved—especially when young children get diarrhoea? Count of the raised hands and clap!*
3. *How many of you are already taking action and have planned ahead so you'll be prepared to treat diarrhoea immediately to prevent dehydration and save lives—especially when young children get diarrhoea? Count of the raised hands and clap!*
4. *If you have already taking action and planned ahead, please tell us about what you have done to be ready? When did you do this? How? What motivated these actions?*

## Part 1. Exploring solutions for urgently treating diarrhoea—particularly among babies and young children

**Sehemu ya kwanza. Jinsi ya kutibu maradhi ya kuharisha kwa haraka—hasa kwa watoto wachanga, na wadogo**

5. *If you were the Minister of Health what else would you do to convince all Kenyans to always immediately seek treatment for young children if they're infected with diarrhoea?*
1. *Je, ni matayarisho gani yamefanywa katika kila sehemu kwenye picha hizi?*
2. *Ni wangapi kati yenu wako tayari kutibu maradhi ya kuharisha haraka ili kuzuia kupoteza maji mwilini na maisha kuokolewa—hasa watoto wachanga wanapougua maradhi ya kuharisha?*
3. *Je, ni wangapi wanahakikisha kuwa wako tayari kutibu maradhi ya kuharisha haraka ili kuzuia kupoteza maji mwilini na maisha kuokolewa—hasa watoto wachanga wanapougua maradhi ya kuharisha?*
4. *Je, ikiwa ushajitayarisha kukabiliana na maradhi haya, hebu tueleze nini ulichofanya ili kuwa tayari? Je, lini ulifanya hivyo?*
5. *Kama ungekuwa Waziri wa Afya, ungefanya nini ili kuwashawishi WaKenya kutafuta matibabu mara tu watoto wao wanapoathiriwa na maradhi ya kuharisha?*

### Message Take-Out

Participants should leave these sessions saying...

- *Diarrhoea kills! I will save lives by being prepared to urgently and properly treat diarrhoea—particularly among young children!*
- *I'm confident about using ORS or another correct treatment immediately if my baby or young child gets diarrhoea.*
- *I'm confident about showing all caregivers of young children in my household how to prepare and use ORS or another treatment correctly and immediately if my baby or young child gets diarrhoea.*
- *I know where to get ORS treatment and I have some packets in my house now—just in case.*



## Quick Reference Guide on Diarrhoea in Kenya

### An Introduction to Diarrhoea in Kenya

Around the world, nearly 11 million children die before their fifth birthday each year, and tens of millions more are left with physical and/or mental disabilities - solely because they and their caregivers lack the basic conditions needed for young children to survive and thrive... yet the majority of these deaths and disabilities are preventable. In spite of Kenya's positive development, child mortality in Kenya is still very high. Diarrhoea is a very common cause of Child Mortality in Kenya

In Kenya, there are many diseases caused by drinking untreated water and poor hygiene practices, which cause many people young children in particular to get diarrhoea. Diarrhoea in small children is very serious, and can even cause death. You may know of some of the names of these diseases: cholera, worms, dysentery, amoebas, giardia, and others. Other times you may just have diarrhoea caused by unknown germs.

### What causes diarrhoea?

Diarrhoea is caused when germs get into the body from contaminated water and food or from unwashed hands. For example, drinking and cooking with untreated, un-boiled water and cooking or feeding others with unwashed hands can cause diarrhoea. Disease organisms on hands can enter the body when hands or something touched by hands (like food) come into contact with the mouth. These organisms can then cause diseases such as diarrhoea. (can you insert an illustration on the oral-fecal cycle? I've seen some really cute/funny cartoons about this--really hilarious stuff)

### The key ways to prevent diarrhoea

The best way to prevent diarrhoea is to break the oral-fecal cycle! The World Health Organisation (WHO) has identified several ways to prevent diarrhoea:

- 1. Hand washing: All family members should wash hands thoroughly with soap** at the following times: Before preparing food, before eating, after changing a baby's nappy, and after using the toilet.
- 2. Treating and Correctly Storing all Drinking Water: Treat all drinking and cooking water with a government approved water treatment (such as Waterguard, Aquatabs, Pur) and store drinking water in a clean, covered container.**
- 3. Safely Disposing Human Waste:** Use a latrine, Or bury human faeces safely.

### Why are we so worried about stopping diarrhoea?

Kenya is tired of losing time, productivity, money, and the lives of people especially young children to Diarrhoea. Unlike other health problems that we struggle with, diarrhoea can be PREVENTED and TREATED! We know that Water Treatment works! We have ORS that effectively stops dehydration of people suffering from diarrhoea especially young children that dehydrate very fast! Nobody has to get diarrhoea or die from having it anymore!

### Why is it important to prevent diarrhoea among under-5 year old children?

When a child under the age of 5 years gets diarrhoea, their little bodies lose fluids quickly and they become dehydrated. This is a very dangerous condition that can get worse very fast and can even cause death. Diarrhoea is always a sign of sickness, always serious, and should always be treated as an emergency.

### Signs and symptoms of diarrhoea

The following are signs and symptoms of diarrhoea: Running stomach or watery bowel movements, often accompanied by fever and chills, headache, nausea, listlessness, loss of appetite, anemia. When people have diarrhoea there is always loss of body fluids or dehydration. As a person gets sicker, they can become severely dehydrated and this is **life-threatening!** For children in particular, this can happen very fast and is extremely dangerous!

### What to do if a child gets diarrhoea?

**If a child gets diarrhoea take immediate action!**

- Diarrhoea kills children by draining fluids from their bodies fast!
- Use ORS immediately at home you don't have to wait! Always have ORS at home!
- ONLY mix ORS treatment powder with safe treated water! Always have some treated safe water readily available in your home!
- ORS helps to replace fluids and minerals lost due to diarrhoea
- ORS is free in all government facilities and available in shops start using it at home at first signs of diarrhoea!
- If the diarrhoea continues for more than a day or two, go to the clinic, ask for ORS and Zinc
- Zinc helps build up the body's immunity and stops diarrhoea more quickly
- Give additional fluids at home such as soups
- Continue breastfeeding and feed more often.
- 

### How can I make my home diarrhoea-free?

**It is very possible to make your homestead diarrhoea-free by:**

1. Practicing personal and household hygiene to avoid oral-fecal contamination and the contamination of food, utensils and dishes plus drinking and cooking water
2. Consistently drinking and cooking with only safe treated water
3. Correctly treating and purifying all drinking and cooking water and ensuring this is stored safely and in hygienic conditions
4. Washing hands with soap before preparing food and after handling faeces

*The more of these things you are able to do, the less likely you are to have diarrhoea in your home.*

### How can I make sure my water is safe?

The government of Kenya has several approved ways to make sure your drinking water is safe, and won't cause diarrhoea:

Method	How to use it	Advantages	Disadvantages
Boiling	Bring water to a rolling boil and boil for at least 5 minutes	Many people currently practice boiling Easy Tasteless	More expensive than other methods (must buy fuel) Easy to underboil Water can become recontaminated easily
Chlorine Tabs or Powder	Follow directions on packets Usually put one tab in 20 liters of water, then wait 30 minutes	Kills most germs Very easy to use Continues killing germs-- keeps water from becoming recontaminated Safe, even for babies	More expensive than other methods
Chlorine liquids	Follow directions on bottle, usually add one cap-full of liquid to 20 liters of water, shake, then wait 30 minutes	Inexpensive Easy-to-use Kills most germs Continues killing germs-- keeps water from becoming recontaminated Safe, even for babies	Kills most germs Can have very slight taste
PUR	1 sachet clears and disinfects 10 liters of water Add 1 sachet of powder to 10 liters of water Koroga Koroga with a clean stick for 5 minutes until dirt starts to collect together Allow dirt to settle at the bottom of the container Filter water through a clean cloth to remove dirt--dispose of dirt	Clears and disinfects dirty water Kills worms as well as other germs Safe, even for babies	More expensive than other methods

### Some common barriers to Use of Water Treatments or Water Dawa

**Barrier 1--Taste:** Some people do not believe that such a small amount of water treatment dawa could possibly kill all the germs in a jerrycan, so they add more than one capfull. This can lead to the water tasting bad, or like chlorine.

**Barrier 2 - Fear of safety:** Some people do not like the idea of adding chemicals to the water. They fear it might not be safe for the family to drink. This is untrue. Water treatments actually make the water much SAFER to drink than untreated water. Even small babies can drink water that has been treated! The tiny amounts of chemicals cannot hurt humans--but they are very effective at getting rid of the germs that cause diarrhoea.

**Barrier 3 - Many people think that water that looks clear or tastes sweet is safe to drink.** The truth is that most germs that cause diarrhoea are too small to see with your eyes. Even clear water might not be safe to drink.

**Other barriers in the community?** Always explore with the community any other reasons they may have for not using Water Treatment. It is important to listen to the reasons that people give for not using available Water Treatment or wash their hands and to help them come up with solutions so they will. When these solutions come from their friends and neighbors they are much more likely to be taken seriously.

### How should I store drinking water to keep it safe?

- Store drinking water in clean containers with narrow mouths and keep covered at all times. Covering the opening of the containers will prevent germs from getting inside.
- Store drinking and cooking water separately from the water used for cleaning, laundry and washing hands.
- If it is not possible to only pour the treated water out of its container, make a clean cup with a long handle (no hands should be touching the water!) available for taking water out of the container. This cup should be used by everyone wanting to take water from the container. This will prevent germs from spreading from people's hands into the water that would then spread to other people who drink the water. Don't allow anyone to drink from the dipping cup because germs from the mouth will get into the water!
- Do not allow anyone to put their hands into the container or to drink directly from it.
- Keep animals out of the house and away from water supply.
- Keep bavi and wastewater (especially from latrines) very far away from water to be used for cooking, drinking, bathing or washing.
- Dispose of wastewater by guiding it to a garden or soak pit.
- Using a chlorine liquid or tab keeps water from becoming recontaminated

### **Personal hygiene/hand washing**

Washing hands with soap (or ash) and water removes invisible germs from hands, and prevents these germs from spreading. All mothers, fathers or other people taking care of a young child or baby must practice hygienic behaviours to avoid passing germs to the young child or baby.

WHO and UNICEF suggest that all of us wash our hands at 4 risky junctures:

1. After going to the toilet
2. After cleaning a baby or child's bottom, or changing a nappy
3. Before preparing food
4. Before eating

It's also good to wash hands:

- After handling animals and cleaning animal waste
- After cleaning liquid and solid wastes
- After any work involving cleaning

### **Tips for great hand washing**

- Make soap or ash and a jug of water easily available to wash hands, make sure the washing facility is near the latrine.
- Wash hands by pouring water from a cup or jug over hands, then rub soap, sand, or ash on hands, make sure you clean well under the nails, in between the fingers and above the wrists, and then rinse hands by pouring water over them again.
- Do not share hand-washing water (for example in a bucket or bowl), as this just passes germs from person to person!

### **Good hygiene and sanitation**

**Safe disposal of human bavi and use of latrines is extremely important to prevent diarrhoea.**

- Use a latrine!
- If it is not possible to use a latrine, adults and children should defecate well away from houses, paths, water supplies and anywhere that children play. After defecating, the faeces should be buried.
- Many people think the faeces of children are harmless, but they are NOT! The faeces of babies and small children are 5 to 6 times more dangerous than that of adults. So if they cannot be taken to the latrine, their faeces should be cleaned up immediately and put down the latrine or buried. Don't forget to wash your hands afterwards!
- Keep the faeces of animals away from homes and water sources
- **Safe rubbish disposal can protect people from catching many common diseases including diarrhoea, dysentery, cholera, hepatitis, worm infections and skin and eye infections. Safe rubbish disposal helps to prevent the disease organisms from getting into our environment and subsequently into our bodies.**

## Final Summary to this series of discussions

### Facilitator's notes

*Thanks for being a highly active and interested group. It's been great exploring so many important health concerns with you.*

*Asanteni kwa kuwa kundi la watu wachangamfu. Imekuwa jambo la kufana sana kuzungumza nanyi kuhusu afya.*

- 1. From our many discussions, what stands out as the most important message?*
  - 2. How will the topics we've explored together affect your thinking and actions?*
  - 3. Do you think you'll be able to successfully share any of these messages with your partners and others in your household? Others in your community? Which messages will you share, and how?*
  - 4. Why is sharing these messages with your partner and others in your household important to you?*
  - 5. Are there any other topics you want us to talk about? Let's list these. If possible, do I have your permission to visit with you again? When? Who will I contact?*
- 1. Kutokana na mazungumzo yetu, ni ujumbe gani ambao ni muhimu?*
  - 2. Je, ni vipi ambavyo mazungumzo yetu yatabadilisha fikira na matendo yako?*
  - 3. Je, unafikiri itakuwa rahisi kuwajulisha wenzako kuhusu ujumbe huu? Na jamii yako je. Je, ni ujumbe upi ambao utajadiliana nao? Vipi?*
  - 4. Kuna umuhimu gani katika kuzungumza kuhusu mambo haya kwako wewe na kwa jamii yako?*
  - 5. Je, kuna mambo mengine ambayo ungependa tuzungumzie? Hebu tuyaandike. Je, nina ruhusa kuja kuwatembelea tena? Lini? Nani nitakayezungumza naye kupanga safari hiyo?*



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