

STRENGTHENING HEALTH AND NUTRITION IN ECD CENTERS TO IMPROVE NURTURING CARE



FACILITATOR MANUAL

PILOT IN URBAN DISTRICTS OF ACCRA, GHANA (2025)



This pilot manual was developed with financial support from The Bainum Family Foundation and with technical contributions from the following teams:

- Adentan Municipal, Ayawaso East Municipal, and Ayawaso West Municipal teams of health, nutrition, school health education program, social welfare, education and agriculture, of Accra, Ghana
- Greater Accra Regional Directorate of Health
- Ghana Health Service Family Health Division
- PATH.

Key content for the training was developed as a result of national and global landscaping followed by a co-creation meeting with district, regional and national health officers conducted in 2024.

Cover pictures were taken during the landscaping study with the permission of the ECD center staff.

TRAINING OBJECTIVES

By the end of the training, **creche and kindergarten (KG) staff should be able to:**

1. Monitor children for basic health and development & ensure a healthy environment
2. Schedule & support annual health visits from their respective health center or CHPS
3. Develop & put in practice a nutrition policy for creche and KG
4. Educate children and parents on adequate health, development and nutrition.

By the end of the training, **health staff should be ready to:**

1. Plan & conduct school health services to each ECD center (creche & KG) annually
2. Record and use data in pilot school health register for creche and KG level
3. Support ECD centers in activities that contribute to Nutrition-Friendly Schools Initiative.



TRAINING PARTICIPANTS AND TRAINERS

Participants:

- Selected staff from ECD centers (max 2 people per center)
 - *Note that affordable, community-based and public ECD programs are prioritized.*
- Core team from each relevant **health facility, i.e., CHPS, health center or hospital** (max 2 people per facility)
- District Assembly representative (max 1 person)

Trainers & supervisors:

- GHS (Family Health, Nutrition); GES (SHEP);
- Regional health, nutrition, SHEP, social welfare and education officers
- District health, nutrition, SHEP, social welfare, environmental health and education officers

STRENGTHENING HEALTH & NUTRITION IN ECD CENTERS

TRAINING AGENDA

DAY 1	ACTIVITY	FACILITATOR	TOOLS
8:00 – 8:30	Preparing the room Arrival and registration Tea and snacks		Agenda, supplies Registration lists
8:30 – 9:15	Opening & welcome message How this training supports nurturing care for early childhood development Training objectives Introduction of participants Forming teams & preparing for joint work		Poster/s on Nurturing Care for ECD (both room sides)
9:15 – 10:15	Baseline results		Baseline summary
10:15 – 11:00	Overview of school health guidelines		Summary of School Health guidelines (2005)
11:00- 11:30	Where are the gaps in our services?		
11:30- 12:30	A healthy environment in the ECD center (part 1)		Environmental checklist (adapted from SHG 2005)
12:30 – 13:30 LUNCH			
13:30- 14:30	A healthy environment in the ECD center (part 2)		Environmental checklist
14:30 – 15:30	Health activities at admission		<ul style="list-style-type: none"> • Child School health record (adapted from SHG 2005) • Maternal and Child Health Record Book (MCHRB)
15:30 – 15:45	Round up and closing		

DAY 2	ACTIVITY	FACILITATOR	TOOLS
8:00 - 8:45	Registration & tea Game & recap		
8:45 – 10:00	Conducting annual school health visit		<ul style="list-style-type: none"> • Summary of SH guidelines (2005) • Examination checklist • Referral form
10:00 - 10:45-	Referrals and registers		<ul style="list-style-type: none"> • Environmental checklist • School health registers • Monthly report
10:45 – 12:30	Routine health monitoring in the ECD center		<ul style="list-style-type: none"> • Summary of School Health guidelines (2005) • Child school health record • School health register
12:30 – 13:30 LUNCH			
13:30-14:30	Overview of Nutrition Friendly School guidelines		<ul style="list-style-type: none"> • Summary of Nutrition-Friendly School Guidelines
14:30 – 15:30	Planning for healthy meals and snacks (part 1)		<ul style="list-style-type: none"> • MCHRB • Visual food guide
15:30 – 15:45	Round up and closing		
DAY 3	ACTIVITY	FACILITATOR	TOOLS
8:00 - 8:45	Registration & tea Game & recap		
8:45 – 10:30	Planning for healthy meals & snacks (part 2)		<ul style="list-style-type: none"> • MCHRB • Visual food guide • Sample menu • Meal planner
10:30-11:30	Developing a school nutrition policy		<ul style="list-style-type: none"> • NFS Guideline summary • Sample policy
11:30 – 12:30	Educating parents & children on health and nutrition		<ul style="list-style-type: none"> • Children’s books (2) • PTA scripts • Health promotion register
12:30 – 13:30 LUNCH			
13:30 – 15:00	Planning: Next steps for 6 months		<ul style="list-style-type: none"> • Planning guide
15:00 – 15:45	Round up, closing remarks and plans Admin		



MATERIALS TO PREPARE FOR THE TRAINING

All the materials should be printed 3 working days before the training

MATERIALS TO PRINT

N	MATERIAL
1	Registration forms
2	Training objectives & agenda
3	Nurturing Care for ECD poster/s
4	Baseline survey summary
5	Summary of School Health Guidelines (2005)
6	Summary of Nutrition Friendly Schools Guideline (in revision)
7	Environmental checklist
8	Physical examination steps
9	Tumble E chart
10	Child school health record
11	Referral form
12	School health register (Health Center-based)
13	School Health Promotion register (School-based)
14	Monthly nutritional report
15	Sample menu
16	Meal planner
17	Nutrition policy sample
18	Maternal and child health record book (MCHRB)
19	Children's book: What did you bring to school today?
20	Children's book: Foods with superpowers
21	Visual food guide
22	Scripts for parent meetings
23	Visual food guide
24	Action plan

OTHER MATERIALS

N	MATERIAL
1	Weighing scale (for child to stand on)
2	Measuring meter (simple, can be glued to the wall.)
3	Superglue
4	Pens and notebooks
5	Sticky tape, to hang posters on the wall
6	Paper scissors
7	Flipchart paper
8	Folder for participant materials
9	Colorful permanent markers (set of blue, red, green)
10	Voting stickers (any small stickers, can be something fun)
11	A4 paper (for name tags)

MATERIALS THAT SCHOOLS AND HEALTH CENTERS WILL NEED TO BRING

***Request in advance of training. Send a reminder 3 days before the training.**

N	MATERIAL	DESCRIPTION
1	Notebooks in which the school records health activities (if exists)	1 from each school
2	Notebook in which the health facility records school health activities	1 from each health center
4	School nutrition policy (if exists)	1 from each school that has such policy

AFTER THE TRAINING, PROVIDE EACH HEALTH FACILITY AND EACH SCHOOL WITH A SET OF THE FOLLOWING MATERIALS, TO USE DURING THE YEAR:

HEALTH CENTER	SCHOOL (ECD CENTER)
<ol style="list-style-type: none"> 1. School health register (5) 2. Tumble E chart (25.4cm x 45.7cm, heavy paper) (1) 3. Environmental checklist (10) 4. Physical examination steps (2) 5. Referral form (10)* 	<ol style="list-style-type: none"> 1. School health promotion register (1) 2. Children’s books (2 of each book) 3. Visual Food Guide (1) 4. PTA scripts (2) 5. Measuring meter and superglue 6. Environmental checklist (1) 7. Child health record (10)* 8. Monthly meal planner (2)*
<p>*Note: Adjust N of copies according to the need and budget.</p>	



ACTIVITIES STEP BY STEP

DAY 1, ACTIVITY 1

TIME: 8:00 – 8:30

NAME	TOOLS TO PREPARE	FACILITATOR
PREPARE THE ROOM REGISTER THE PARTICIPANTS	See tools under 2) and 3).	

ACTIVITY STEPS

1. Organize the training room into working tables, so that maximum 6 people could sit around each table.
2. Hang 2 Nurturing Care posters, on 2 sides of the room where these will be most visible. Distribute the following materials:
 - 1) Pen & notebook for each person
 - 2) Training objectives & agenda for each table.
3. Set up a table where you organize the remaining copies of materials, in the following order, to be used during the training:

- 1) Baseline survey summary
- 2) Summary of School Health Guidelines (2005)
- 3) Maternal and child health record book (copies of specific pages)
- 4) CHPS-based School health register
- 5) School-based School Health register
- 6) Child school health record
- 7) Environmental checklist
- 8) Examination checklist
- 9) Referral form



- 10) Summary of Nutrition Friendly School Guidelines (2019; in revision)
- 11) Nutrition policy sample
- 12) Children’s book “What did you bring to school today?”
- 13) Children’s book “Foods with superpowers”
- 14) Visual food guide
- 15) Meal planner
- 16) Sample menu
- 17) PTA /parent meeting scripts on health and nutrition

4. Welcome arriving participants and invite them to register as per office practice. Then invite them to take some tea and refreshments. Provide information on logistics.

DAY 1, ACTIVITY 1

TIME: 8:30 – 9:15

NAME	TOOLS TO PREPARE	FACILITATOR
OPENING	Papers and markers for name tags	
OBJECTIVES		
FORMING TEAMS		

ACTIVITY STEPS

1. Open the training and welcome the participants in a manner that is customary (protocol, prayers etc.).
2. Point to the Nurturing Care posters and explain the following:
 - a. In 2018, the World Health Assembly endorsed Nurturing Care for ECD framework.
 - b. The framework focuses on the youngest children, before they start Grade 1.
 - c. This is because children’s experiences in the first years of life are a foundation for all their future development.
 - d. The WHO says that for children to develop well, they need 5 things, in their first years: good health, adequate nutrition, safety and security, opportunities for learning and responsive care.
 - e. We want to make that that these 5 things are available to children not just in their homes but also in the ECD centers (creches and kindergartens) where they often spend many hours.
 - f. This training tries to strengthen children’s access to adequate **health** and **nutrition**, **as well as support their safety**, while they **play and learn** and **receive care** in the ECD centers.
3. Invite the participants to find the training objectives and agenda on their table, and request 2 participants (one from ECD center and one from health center) to read the objectives aloud.
4. Check for understanding of the objectives, by asking some other participants to rephrase them in their own words.
5. Jointly do a quick review of key themes and activities on the 3-day agenda.
6. Ask the participants what they think about the training objectives and agenda, and what their expectations are.



7. Explain: We will work in teams during this pilot. That means that close-by ECD centers will be collaborating with each other and with their nearby Health Center or CHPS. We will start the collaboration already in this training.

8. Invite staff from 2 close-by ECD centers to sit together at the same table.

9. Then make sure that at least one health staff that is linked with these centers, sits at the same table. Continue until all the teams are formed.



10. Reinforce that the bonds and collaborations they will form here, should continue when they return from this training.

11. Ask each table (team) to do the following:

- a. Write their name tags (that will stand on the table)
- b. Talk to each other and find one thing all have in common (it cannot be something obvious, like all are women)
- c. Then, find out one thing that is different or special about each person
- d. Finally, come up with the team name/symbol and write/draw it and place in the middle of the table.

12. Ask each team to tell their name to the other groups.





DAY 1, ACTIVITY 3

TIME: 9:15 – 10:15

NAME	TOOLS TO PREPARE	FACILITATOR
BASELINE RESULTS	Baseline summary	

ACTIVITY STEPS

1. Explain the objectives of the baseline that has been conducted. **Confirm that every ECD center in the room has received a baseline visit.**
2. Ask each team to think for a minute and then mention one result they imagine the baseline has found, across most of the centers. You can ask 3-5 teams. Thank the participants.
3. Distribute the summary of the baseline results, to each pair of participants. Invite the teams to review the summary together and do the following:
 - a. Mark some of the findings that they expected to see, with **a star** 
 - b. Mark some of the findings that are a bit surprising to them, with **a surprised face** 
4. Invite one team to share the results of their discussion. Each following team should only add what has not yet been shared.
5. Summarize what the groups have shared. Point out some other findings that few or no one has mentioned.
6. Ask 2-3 volunteers to reflect on what these results suggest for future action. Explain that this training will support them to achieve positive changes in some of these areas.

AEROBIC BREAK AT 10:15 (Imitate 3 different animals and their movements)



DAY 1, ACTIVITY 4
TIME: 10:15– 11:00

NAME	TOOLS TO PREPARE	FACILITATOR
REVIEW OF SCHOOL HEALTH GUIDELINES (2005)	School Health guidelines summary	

ACTIVITY STEPS

1. Explain that whatever we do in ECD centers / schools, should be informed and guided by relevant national policies and guidelines. This is how we can achieve impact, because then schools, health centers and district staff will work for the same objectives and same core activities.
2. Ask: Who knows what key guidelines guide school health activities? (School Health Guidelines, from 2005)
3. And what guidelines guide nutritional interventions at school? (School feeding guidelines; Nutrition Friendly school guidelines.)
4. Explain that the pilot does not have the mandate to address **school feeding**, but it can help schools better implement **school health** and **nutrition friendly school** guidelines.
5. Ask each team to brainstorm and write down 3 things they already know about school health guidelines. After 5 minutes, invite first team to share. Each following team should only bring up points that have not been shared.
6. Summarize concisely what the participants shared. Commend them on good knowledge of the guidelines!
7. Distribute **school health guidelines summary** to each participant. Ask the teams to review the summary, and to identify 3 things that were NOT MENTIONED by them or by any other team earlier.
8. Invite each team to present their findings after 5-10 minutes. Again, each team should only share what the previous team has not mentioned.
9. Summarize the results. Ask: Have you found things you did not know were in the guidelines? Discuss jointly, and reinforce the need to be familiar with relevant guidelines.



***When you know what is in the guidelines,
you can appeal to your district assembly to demand certain services!***

DAY 1, ACTIVITY 5
TIME: 11:00 – 11:30

NAME	TOOLS TO PREPARE	FACILITATOR
WHERE ARE THE GAPS?	No tools	

ACTIVITY STEPS

1. Explain: Now that we know what the baseline found and what the school health guidelines tell us, we can decide where to focus your energies, as ECD centers and CHPS/ health centers.
2. Ask each team to discuss these questions during 15 minutes:
 - a. What do you see as main priority, to promote **good health** in your ECD center? Why?
 - b. What do you see as main priority, to promote **good nutrition** in your ECD center? Why?
 - c. How could your nearby CHPS /Health center **support you**?
3. Invite each team to share and justify their health and nutrition priorities. Summarize in the end and praise the teams for hard work.



DAY 1, ACTIVITY 6
TIME: 11:30 – 12:30

NAME	TOOLS TO PREPARE	FACILITATOR
A HEALTHY ENVIRONMENT IN THE ECD CENTER	Environmental checklist (adapted from SHG 2005)	

ACTIVITY STEPS

1. Explain that we will now start looking at health-related activities in ECD centers more closely. We will later do the same for nutrition activities.
2. Ask everyone to look at page 2 of School Health Guidelines summary. What are **three main school-led health activities** you can see?
3. Reinforce that one of the first steps schools are asked to do, is **to create a healthy school environment**.
4. Ask the teams to brainstorm and identify some specific things that would make an ECD center a safe and healthy environment for children. Each team can then share one idea.
5. Next, distribute the **healthy school environment checklist**, to each team (one per pair). Ask if anyone has seen such a checklist before. Who uses it normally and when?
6. Inform that this checklist has been “lifted” from School health guideline (2005), but has been updated with some additional information, based on newer priorities of GHS, such as those in NFS Guidelines. Can someone see these additional items?

Point out that additional items refer to:

- Prevention of accidents
- Checking that sanitation (toilets and taps) actually works
- Promotion of healthy snacks
- Breastfeeding promotion at creche.



Inform that this is not a final version. We can pilot it in our centers and provide feedback, so that it becomes a better tool for Ghana Health Services to use.

7. Ask each team to carefully read through Environmental Checklist and check that everyone has the same understanding of
 - what each item means, and
 - how the checklist will be scored.

8. After 10-15 minutes, invite each team to share their thoughts on the tool. They should bring up anything that was unclear, for the whole group to discuss and clarify.
9. Discuss with the participants: When the checklist talks about a functioning handwashing station, does it matter if children wash hands under running water or in a bowl?

Ask the volunteers to provide arguments for either answer.

In the end state the following:



- *Children (and adults) need to wash hands with running water, even if it just a pitcher with water*
- *This is because water in the bowl is unclean from children who washed hands before.*
- *Unclean water can spread trachoma and other diseases.*

LUNCH

DAY 1, ACTIVITY 7
TIME: 13:30 – 14:30

NAME	TOOLS TO PREPARE	FACILITATOR
A HEALTHY ENVIRONMENT IN THE ECD CENTER (cont.)	Environmental checklist (adapted from SHG 2005)	

ACTIVITY STEPS

1. Ask the participants to divide now into teams by school and by CHPS (each school, each health center separately). Give each agency 15 minutes to self-rate on the tool (Environmental Checklist), by circling the conditions they think they have, and then attributing to themselves a score.

Note: Health center/CHPS staff should do this activity for the last ECD center they have visited.

2. At the end of the exercise, ask how the (self) evaluation went:

- a. Which section was easy to have a good score? Why?
- b. Where did you struggle somewhat?



3. Jointly identify **3 areas of school environment** where most schools had challenges. Discuss them one by one: What exactly is challenging?
4. Then brainstorm together, **what could be some of the solutions**. First identify the **solutions that are within school control**. Then list a few that may depend on others such as district assembly.
5. Conclude by saying that while formally it is health staff and environmental officers that will evaluate school health environment once a year, the schools should use the checklist to do **their own self-evaluation and self-improvement**, especially as they prepare for a new year or term.

AEROBIC BREAK AT 14:30 (Imitate 3 different transports and their movements)

DAY 1, ACTIVITY 8
TIME: 14:30 – 16:30

NAME	TOOLS TO PREPARE	FACILITATOR
HEALTH ACTIVITIES AT ADMISSION	<ul style="list-style-type: none"> • Child School health record (adapted from SHG 2005) • Maternal and Child Health Record Book (MCHRB) (selected pages) 	


ACTIVITY STEPS

1. Inform: Now that we have worked to create a healthy school environment, we need to turn our attention to the children that are coming into our school.
2. Brainstorm in plenary: What do you (an ECD center) typically do at admission, to promote child health?
3. Summarize all the activities, which should usually include:
 - a. Asking parents to fill out some type of child school health record (or medical history form, as some schools call it)
 - b. Checking the MCHRB of the child for completed vaccinations.
4. Distribute a copy of the **Child school health record** to all the participants. Explain that this record originates from the School Health Guidelines 2005, but has been formatted to be more user-friendly and expanded to include some other items.
5. Ask the teams to review the child school health record for a few minutes and answer the following questions:
 - 1) Why does the record have 3 parts? What is the purpose of each part?
 - 2) What do you think the **follow up sections** in part 2 are for?
 - 3) Which of this information do you already collect with your own child school health records, if any?
 - 4) And what information do you normally not collect?
6. Ask each group to share, and summarize the results. Explain any questions the participants might have re 1) and 2).



7. Then discuss one by one, the need for the items normally not collected: Why should each of this information be collected?

Listen, summarize, and add if needed, for example:

 a. *Vitamin A and deworming* are very important to address lack of vitamins and anemia in small children. Vitamin A should be given every 6 months from 6 months of age, and deworming should be done every 6 months from 12 months of age, **up to 5 years**. But unfortunately, many children do not receive these when they stop coming to a health center after 1 year.



- b. *Monitoring child's development milestones* to check for any delays is important.

All children develop differently, for example, some start walking earlier and others later. We consider that child has a delay if s/he does not reach one or more milestones expected **both at her current and at her earlier age**.

For example, if a 1-year-old child is not yet taking steps (a normal milestone for 1-year-olds), we can wait for a couple of months. However, if the child is also not yet sitting (a milestone expected by 9 months), this is a delay and a child needs to see a doctor.

When children's developmental delays are discovered too late, they may have a much harder time improving. But if we notice a delay or a disability in the first years of child's life, there are often activities and exercises we can do to reduce or even remove the problem altogether.

In the end, stress that both the ECD center and the family have a responsibility to make sure that these health services are provided to all children under 5 years.

AEROBIC BREAK AT 15:30 (Walk, then run, then jump backwards, sideways, forward)

- Distribute copied and stapled pages from the Maternal and Child Health Record Book (MCHRB) to each team. Start by asking them to show which pages ECD centers routinely check (Vaccines, p.51).

And where would you write this information down, in the child school health record? (Under Immunization – Page 2 of child school health record).

- Now, ask each team to find the following, in the MCHRB:

- Where can they find information on Vitamin A? (p.52)
- Where can they find information on deworming? (p.52)
- Where can they find information on developmental milestones? (p.58-59)
- What are key milestones to check for, in a 1-year-old? (p.59)
- And in a 3-year-old? (p.59)



- Ask if any ECD centers present here already **monitor children for key milestones**, during the school year. Invite those with experience to share.

- Emphasize the advantage of having the milestones in the Maternal Child Health Record Book – this means that both teachers and parents can monitor children’s development, and act early if some delay is suspected.

- Ask the participants for ideas of what would be the best way to check for these milestones, at the beginning of the year. For example, discuss the following options:

- Would you ask the parents to check relevant milestones in the MCHRB at admission, and then simply confirm with your observations?



- Or should teachers be the first to check (observe) children over some days or weeks, and then discuss the milestones they observed, with parents?

- Let each ECD center select the strategy they would like to try in their center, after the training. You can register the selection by a show of hands.

- Brainstorm all together: How can you support the parents who get anxious if they see their child not achieving some milestones for their age?**

Answers might include:

- Explain that all children develop differently and it is ok not to reach all milestones at a given time*
- Help them check milestones for earlier age, to rule out a delay.*

...

Ask a volunteer to summarize health activities that should be done at admission.



If something is missing, please add from the list:

- 1) Ask parents to fill out the info on Part 1 of child school health record (or equivalent on school's own form)
- 2) Teacher should use MCHRB to fill out info on Part 2 of child school health record
- 3) For developmental milestones, ask parents to check and then discuss, or vice versa
- 4) For children that have incomplete vaccines, Vitamin A or deworming, or delayed milestones, ask family to go to the health center within a month to receive the needed services.
- 5) Once parents completed the services, write "Completed" & the date, in **the follow up section**.

Round up & closure:

1. Distribute small pieces of paper to the participants. Ask them to write, on one side, one new thing they learned today, and on the other side, one question or comment they have, after today's sessions.
2. Thank the participants!

Ask the participants to leave all the materials on their table, for use the next day.

Review the comments and prepare a summary and responses to the questions for the next day.



DAY 2

DAY 2, ACTIVITY 1

TIME: 8:00 – 8:45

NAME	TOOLS TO PREPARE	FACILITATOR
REGISTRATION & TEA RECAP	Summary of comments from yesterday	

ACTIVITY STEPS

1. Welcome arriving participants and invite them to register for the day. Then offer them to take some tea and refreshments.
2. After a while invite everyone to stand in a circle.
3. Remind the participants that one of the activities to be promoted in all schools, according to the guidelines, is physical activity. So we will start implementing it already here!

We are now in the garden and will want to pick up some produce to take home. Be the first one to give instructions, and then ask volunteers to continue:

- *Let's jump and knock down some mangos from the tree! (Start jumping, and encourage the others to do so as well)*
- *Let's pluck some groundnuts (Bend down and start plucking, and others should do the same)*

Let others suggest and role play more actions to pick the goodies!

In the end, ask if they think the children in their ECD center will like this game 😊.



4. Ask a volunteer to remind everyone what we did yesterday. Add the others if anything was forgotten.
5. Share the summary of the notes from yesterday:
 - a. What most participants found new
 - b. Questions or comments raised.
6. Respond to questions or comments as needed.

DAY 2, ACTIVITY 2

TIME: 8:45 – 10:45

NAME	TOOLS TO PREPARE	FACILITATOR
CONDUCTING ANNUAL SCHOOL HEALTH VISIT	<ul style="list-style-type: none">• School health guidelines summary• Child school health record• Physical examination steps	

ACTIVITY STEPS

Introduction (8:45 – 9:15)



1. Direct the participants to page 34 of the Maternal and Child Health Record Book, to check the recommended frequency of times the parents should take the child to the health center.
2. Ask: Do you think most parents follow this advice? (No, most parents only take the child to the health center in the first year of life.)
3. Explain that school health visits are one strategy to address reduced visits of families to health facilities, by bringing the services directly to children. At the same time, we as providers should encourage parents to follow the recommendation in the MCHR.B.

...

4. Ask one health staff to describe how they normally conduct school health visits **for youngest children (creche and KG)**. Use the following questions to prompt the speaker:
 - a. *In how many KGs / creches have you done a school health visit last year?*
 - b. *What do you do on a typical visit?*
 - c. *How does the school support you to prepare children for your visit?*
 - d. *How does the school support you during the visit?*
 - e. *How do parents collaborate (if they do)?*
5. Ask if anyone has a different experience with school health visits, and invite them to speak. In the end, summarize what was shared.

Discuss a case when some private ECD centers or the parents do not collaborate with a school health visit. Ask what health nurses do in such cases.



Then share some suggested solutions, if needed:

- Social Welfare and Education authorities should alert ECD centers before issuing them a license, that school health visits are a government program covering all children, and both public and private schools are expected to collaborate with health staff.
- Parents should be educated about school health visits, their importance and activities, at admission, and can be asked for written consent at that time.
- If school still does not collaborate, health unit should report the matter to their district supervisor for the follow up at the level of district assembly.



6. Invite the teams to refer to their **Summary of the school health guidelines**, and review the Health sector-led activities, on page 3 and 4. Give them 5-10 minutes.
7. Then review in plenary:
 - a. What are three activities that should happen during a school health visit?
 - b. And what are two additional activities?
 - c. How should a school visit be scheduled?
 - d. How should parents be engaged?
 - e. What should happen on the day of the visit?
8. Remind the participants about what baseline results revealed about school health visits. For example, most recent school health visits only included vaccination. **Can this be seen as a lost opportunity to provide other school health services?**
9. Ask each team to briefly reflect and suggest one specific way **to improve school health visits**, based on what they saw in the guidelines and the baseline results. Thank the participants.

Physical examination (9:15 – 10:45)



1. Ask: Which school health visit activity did we discuss and even practice yesterday? (checking for **healthy and safe school environment**).
2. Explain that today we will look at another activity that is also a part of a school visit, namely, a **physical examination**.
3. Distribute **physical examination steps** to each team. Explain that these are part of the school health guidelines, but were slightly revised for this pilot. Give them 5 minutes to review.
4. Invite one Health Center staff (ideally informed in advance) to use the examination steps, and **explain and demonstrate** to everyone how each activity would be done.



They can use a volunteer as a child, and another volunteer as a parent, to demonstrate a typical physical assessment.

They should start by explaining the activity to the child/ren (and the parent/s) in a child-friendly manner.

Note that some steps listed in the document may be new to health staff, like using Tumble E chart.

Ask them to follow the instructions for now, and we will discuss any new steps later.

5. Ask: Where should the health nurse record the results of the physical assessment?

If the participants are not sure, ask them to look at the **child school health record, part 3**. This is where health staff should be recording the results of the physical exam, according to the School Health Guidelines.

AEROBIC BREAK AT 10:00 (Let's find different ways to stretch, to become longer!)

6. Now, invite the **health staff** to discuss openly and frankly:



- a. Do you usually do the physical exam by yourself or with other colleagues (such as other nurse, an ENT or an eye specialist)?
- b. How long time does physical exam normally take (per child)? And per class?
- c. Do you sometimes have to shorten or skip the steps, for lack of time?
- d. Do you normally have all the equipment? If not, what do you normally do?
- e. Do you normally plot height and weight results in the child's MCHR? If not, what makes this difficult?
- f. Do you normally do each examination in privacy or with several children present?
(Remind that Patient charter guarantees right to privacy, irrespective of age).
- g. Do you talk with children during assessment, to put them at ease?
- h. What do you do if a parent cannot be present during assessment?
- i. What could make it easier for you to conduct physical assessment? (More staff? Fewer steps?)

Summarize concisely what the teams shared.



Take note of any steps in the physical examination list that may need to be adjusted, to make them more doable during a school health visit.

7. Discuss **some potential solutions** for when the equipment is lacking:

For example, instead of carrying altimeter, schools could have a measuring tape attached to one of the walls, and health staff could use it to measure children’s height.

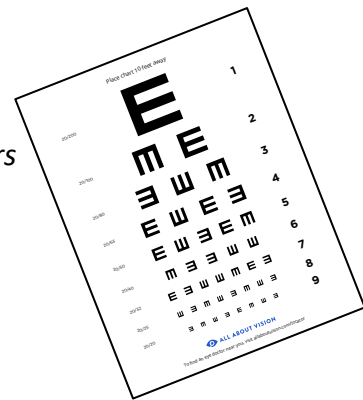
Provide a volunteer with a measuring tape and ask to demonstrate how exactly it should be attached to the wall (where **zero** should start from), for the measurements to be correct. Brainstorm on best ways to attach the tape. **Distribute one tape and one superglue tube to every ECD center.**



Discuss options for scales as well, for example, can a scale be shared between schools?

8. Explain about the use of **Tumble E chart** if still needed:

- a. *This is an appropriate tool for children aged 3-5 years who do not yet read*
- b. *It should be printed in size 25.4cm x 45.7cm*
- c. *It should be placed 3 meters away from the child*
- d. *The child needs to practice first how to show the “legs” of the “E” with his/her fingers (“up, down, to the window, to the door”)*
- e. *Physical assessment steps contain criteria for assessment of vision for 3-, 4- and 5-year-olds.*



DAY 2, ACTIVITY 3
TIME: 10:45 – 11:45

NAME	TOOLS TO PREPARE	FACILITATOR
REFERRALS AND REGISTERS	<ul style="list-style-type: none"> • Referral form • School health register (health center-based) • School health promotion register (school-based) • Monthly Nutrition Report 	

1. Ask health staff for their current practices around referrals:
 - a. Which types of cases have they referred in the past, from school health visits? (Ask each team to share)
 - b. What form, if any, do they use, for referrals?
 2. Share the **referral form** adapted from school health guidelines, and ask the teams to review what key information is there.
 3. Ask the whole group if anything should be added or removed, in their mind. Summarize and note down the feedback.
 4. Explain that for those that do not yet use a specific referral form, it is recommended to use using this form during school health visits.
- ...
5. Ask one **health staff** to demonstrate the notebook they use to record results of the **school health visit**. They should explain what they typically write down. One team starts and the other teams can comment if they record something differently.
 6. Ask them to show how this information then “feeds into” the **Monthly Nutritional Report**.
 7. Summarize the predominant way to record school health visits.



8. Now, turn to the **schools**. Ask them to demonstrate or explain any registers they keep that document **school health activities**. For example, registers of school health visits and health promotion activities etc.
9. Remind what the baseline results showed. Summarize current school health record keeping practices in schools.

...

10. Inform that the GHS has a plan to develop a **school health register**, which could be used by CHPS and Health Centers to record their activities in schools.



11. Explain that in response to this need, we will pilot a model of a school health register, for creche and KG level. We will then collect feedback for the GHS on how it worked.
12. Share the **pilot registers (one register for CHPS and another register for schools)** with each team, and ask them to review the structure and the content of each register.
13. Draw attention to the fact that **there are 2 registers – one for health staff and one for schools**. Ask them to compare what are the similarities and differences between 2 registers.
14. After about 10 minutes, ask the teams to share their impressions about the registers. Collect feedback from each team.
15. In the end, ask a **volunteer (from health)** to describe step by step how they would actually use the proposed register, on the school visit day. As they speak, ask probing questions like the ones below:

- **When** would you record the information in the register? (During the school visit?)
- What will be the primary data source for **physical exam** data? (individual child record forms and referral forms)
- What will be the primary data source for **environmental assessment?** (environmental checklist)
- What will be written in the **last column?** (recommendations).
- How will you know what to write there? What could be some expected recommendations?
- How will this information help you fill in Monthly Nutrition Report?



16. Now, invite **another volunteer (from one school)** to speak about the proposed school-based register and how they would most likely use it. As they speak, ask the following probing questions:

- How often will you conduct health promotion activities? (Refer them to page 2 of school health guidelines summary – monthly for children, quarterly for parents.)
- How will you register these activities in the register? Walk us through it.
- What could appear under **tools**? (ex., environmental checklist, a game, a storybook)
- What could be written under **results**? (ex., children learned 3 main food groups; parents learned content of MCHRB etc.; referrals made)

17. Thank the participants, and encourage them to try and use the respective tools during the project, so that PATH and GHS can learn from them and improve the tools.



AEROBIC BREAK AT 11:45 (Make a train; move slow and fast; move backwards)

DAY 2, ACTIVITY 4
TIME: 11:50 – 12:30

NAME	TOOLS TO PREPARE	FACILITATOR
ROUTINE HEALTH MONITORING AT ECD CENTER	<ul style="list-style-type: none"> • Child school health record • Referral form 	

ACTIVITY STEPS

1. Ask the schools to share **if they also monitor child health routinely**, and not just at admission and during school health visits.

Invite 2-3 volunteers to share how they do **routine health monitoring**, how frequently, and what kinds of things they are checking for.



2. Invite the teams to review the table on page 2 of **School Health Guidelines summary**, that talks about routine child health check-ups (items 11 to 15).

3. Discuss what they found. Ask:

- a. Which of these activities do you already do and which – not always?
- b. Do you do health check-ups **publicly or individually** (for example, observing child indirectly or when other children are not nearby)? Which approach is better in ECD program, in your opinion, and why?



Note that individual approach is better, to avoid embarrassing the child.

- c. What would you consider a **behavior or a mood problem**? Discuss and demonstrate:
 - What would *excessive anger* look like?
 - And *excessive fear*?
 - And *excessive sadness*?
 - And *keeping away from others*?
- d. When should you consider the problem to be **serious enough** to be reported to parents? (When it lasts for at least 2-3 days, and visibly affects the child’s participation in a group.)

Teachers should also ask the health providers for guidance, since some issues can be signs of autism or other conditions.

4. Finally, show to the participants that, when persistent problems are found, they should be recorded in 2 places:
 - 1) Child's school health record, part 2
 - 2) School health promotion register (under routine health check activity).

LUNCH

DAY 2, ACTIVITY 5
TIME: 13:30 – 14:30

NAME	TOOLS TO PREPARE	FACILITATOR
REVIEW OF NUTRITION FRIENDLY SCHOOL GUIDELINES SUMMARY	NFSI guidelines summary (updated) Paper ball	

ACTIVITY STEPS

1. Explain that for the next few sessions we will be focusing on nutrition.
2. Remind that whatever we do in schools, should be informed and guided by relevant national policies and guidelines.
3. Ask: What guidelines guide nutritional interventions in school? School feeding guidelines; **Nutrition Friendly School Initiative Guidelines** (2019).



Explain that the project does not have mandate to address issues of school feeding and food caterers certification and training, but it can help implement school health and nutrition friendly school guidelines at creche and KG level.

Note that NFS Guidelines are also being revised now. The summary we will share with you today reflects most these recent revisions, as presented in NFSI training manual.

4. Ask each team to brainstorm and write down 3 things they already know about **Nutrition-Friendly School Guidelines**. After 5 minutes, invite the first team to share. Each following team should only bring up points that have not been shared.
5. Summarize concisely what the participants shared. Thank them for impressive knowledge of the guidelines!
6. Distribute a summary of **Nutrition Friendly School Guidelines**. Ask the teams to review the summary, and to identify 2 points that were not mentioned earlier during brainstorm.
7. Invite each team to share their findings after 15 minutes. Summarize the results.



8. Stand in a circle. Let's review the Guidelines by playing a game! Throw the paper ball to different participants, and ask them short questions based on the guidelines, for example:
- 1) Mention at least one of the problems the Guidelines aim to address.
 - 2) How many components does the NFSI have?
 - 3) Is developing its nutrition-friendly school policy a task only for private schools?
 - 4) What 3 types of foods should be avoided, in schools? (they begin with "high...")
 - 5) What is the last (5th) component in the NFSI?
 - 6) Who should the school collaborate with, for the 5th component to happen?
 - 7) How frequently should fruit and veg days be held?
 - 8) And how frequently should protein days be held?
 - 9) Are these days just about eating? If not, what else should happen then?
 - 10) What is hygiene day all about?
 - 11) What do guidelines say about physical activity?
 - 12) Are schools expected to run gardens to feed themselves? Or do they have another purpose?

If participants are not sure about some question, they can throw the ball to someone else to answer on their behalf.

When you know what is in the Guidelines, you can appeal to your district assembly and demand certain services!



DAY 2, ACTIVITY 6
TIME: 14:30 – 16:30

NAME	TOOLS TO PREPARE	FACILITATOR
PLANNING FOR HEALTHY MEALS AND SNACKS	<ul style="list-style-type: none"> • NFSI guidelines summary • MCHRB • Visual food guide 	

ACTIVITY STEPS



1. Ask each team to think and to come up with **3 meals that children eat most commonly in their school** (that are provided by the school).

2. Let each team share their 3 most common meals, while you write them down. Summarize the results. *You can also remind the participants what Baseline showed about most common meals.*

3. In the end, ask:
 - a. Are you satisfied with nutrition these meals provide? Please explain.

 - b. And do children like these meals? If not, what could perhaps be changed?

4. Do the same activity with **meals or snacks sent from home**: Ask each team to list 3-5 most common meals or snacks parents pack for their children. Summarize the results. *You can also remind the participants what Baseline showed.*



5. Ask if the teams are generally happy with the meals and snacks sent from home, and why.



6. Ask the participants: NFSI guidelines talk about both **meals and snacks**. What is the difference?

7. Ask the participants to locate pages 37 and 38 of the MCHR Book and check:
 - a. What are the **common recommendations** they can see, about meals and snacks? *(3-4 meals, and 1-2 snacks in between)*
 - b. What does it tell us about **difference between meals and snacks**? *(Snacks are small additional feeds in between large meals.)*
 - c. Why do you think it is **not enough for children to have meals**? Why do they also need snacks? *(Because their stomach is small and digests food fast, so they get hungry soon, and need something to “carry them over” until the main meal).*

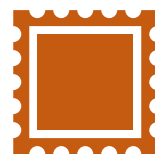


AEROBIC EXERCISE OF YOUR CHOICE!

8. Ask: Where in the MCHRB can we find information on what is **nutritious meal or snack**? *(4-star diet on page 17).*
9. Give participants 5-10 minutes to look through the 4-star diet on page 17 and identify relevant information.
10. Summarize: Each healthy food that we eat, gives or does something to our body. Here is a quiz for all of us to take part in!
 - a. *What do the staple foods like grains and yam, give us? (energy)*
 - b. *What do fruits, vegetables and greens do to our body? (protect it from getting sick)*
 - c. *And what do beans, lentils, eggs, milk products, fish and meats do to our body? (They make us grow and make our brain work faster and better)*

Note that egg is considered to be a “super-food”, as it plays a very big role in child’s brain development.

11. Distribute a **visual food guide** to the teams (1-2 per table). Give participants 5 minutes to look through **the pages of the visual guide on 3 food groups** and then invite volunteers to summarize what foods belong in each group.



12. Explain that the visual guide contains the same information as in the guidelines and the MCH health record book, but in photos, to make things more visual and clearer.
13. Ask: Why does the MCHRB talk about 4-star diet and the visual guide talk about 3 food groups? What happened to the 4th star?

Discuss how both legumes and animal-source products are proteins, and therefore were joined into the same group, in the guide. Many families may only be able to afford one type of protein per day and not both.

14. Brainstorm briefly how schools can use the visual guide. Note down the ideas.

AEROBIC REAK: WRITE YOUR FIRST AND LAST NAME WITH YOUR BODY!

15. What types of snacks do the NFSI guidelines tell us **to avoid**? (*those with high sugar, high salt, or high fat content*)

16. Give participants 5 minutes to look through the **last part of the visual food guide, on snacks**, and see what are some common unhealthy snacks, and what could be some substitutes or healthy snacks.

17. Invite some volunteers to share if anything was surprising to them.

18. In the end, share the following points regarding healthy and unhealthy snacks:

- Some snacks become less healthy when they are **deep fried in fat**. Deep frying can increase diabetes and heart disease. Baking, boiling or steaming is always better, even though it may be less convenient.
- Chips and popcorn, among others, have **too much salt**, which can lead to high blood pressure.
- Fizzy drinks and many commercial cookies and pastries have **too much sugar**, which can eventually lead to diabetes, heart disease and some cancers.
- **Ultra-processed** foods (foods we cannot create from scratch in our kitchen, such as commercial breakfast cereals, instant noodles, sausages, most fast food) have chemical additives which lead to several diseases mentioned above as well as to low cognitive functioning and poorer mental health.
- **It is ok to have even unhealthy foods once in a while. The problems occur when such foods are eaten daily or even more frequently.**
- We can look for **healthy substitutes** for unhealthy meals and snacks.



19. OPTIONAL / IF TIME ALLOWS: Explain that we will play two games now, to help us practice what we just learned.

Let's first check how well we learned the three food groups!



Game: The infiltrators

1. Stand in a circle. Ask everyone to think of one food item. Encourage to think of food from a certain food group.
2. Quickly walk through the circle and quietly check with each person what food s/he decided on. Ask to think of a different food if there is repetition.
3. Call on a food group and give them a special task (see below).
4. After 1 minute ask the "foods" in the middle to stop. Ask for their names.
5. Ask everyone: Are there any "infiltrators" that do not belong in this food group?
6. Any found "infiltrators" leave, while the rest continue their task for a minute.
7. Move on to a new task.

Instructions for special tasks:

- All the foods that **protect us**, jump in the middle of the circle! Keep jumping!
- All the foods that **make us smart**, please come and walk like crabs in the middle of the circle!
- All the foods that give us **energy and strength**, please fly into the middle of the circle, and continue flying!

And now let's check what we have learned about healthy and unhealthy snacks!

Game: Let's replace it!



- 1) Make 2 lines.
- 2) Tell which line will be healthy snacks and which - not so healthy snacks. Everyone in both lines has to decide what specific snack they are.
- 3) Now mix up the lines. Ask each "not so healthy snack" to walk around and find and pair up with a "healthy snack".
- 4) In the end, ask each pair to present themselves.
- 5) Ask everyone to check and confirm if each pair has a "not so healthy snack" and a "healthy snack".

Invite the teams to use these games either with children or with parents, during the school year.

Round up and closure:

1. Distribute small pieces of paper to the participants. Ask them to write, on one side, one new thing they learned today, and on the other side, one question or comment they have, after today's sessions.
2. Thank the participants!

Ask the participants to leave all the materials on their table, for use the next day.

Review the comments and prepare a summary and responses for the next day.



DAY 3

DAY 3, ACTIVITY 1

TIME: 8:00 – 8:30

NAME	TOOLS TO PREPARE	FACILITATOR
REGISTRATION & TEA RECAP	Summary of comments from yesterday	

ACTIVITY STEPS

1. Welcome arriving participants and invite them to register for the day. Then invite them to take some tea and refreshments.
2. Invite everyone to stand in a circle.
3. Remind the participants that one of the activities to be promoted in all schools, according to the guidelines, is physical activity. So today we will have another active game!



Stand in a circle. Begin by showing the movements of some jobs or tasks (for example, playing soccer, washing clothes, boxing). Everybody should copy your movements for a few times. Ask: Do you know who I am? The person who answers first, starts the movements for the next job, and everyone copies her/him.

4. Ask a volunteer to remind everyone what we did yesterday. Add if something was forgotten.
5. Share the summary of the notes from yesterday:
 - a. What most participants found new
 - b. Questions or comments raised.
6. Respond to questions or comments as needed.

DAY 3, ACTIVITY 2

TIME: 8:30 – 10:30

NAME	TOOLS TO PREPARE	FACILITATOR
PLANNING FOR HEALTHY MEALS AND SNACKS (PART 2)	<ul style="list-style-type: none">○ Sample menu○ Meal planner○ Flipchart paper and markers○ Voting stickers	

ACTIVITY STEPS

1. Ask if the teams still remember the 4-star diet and the 3 food groups, as well as healthy and unhealthy snacks. Ask a few questions to check.
2. Reinforce that **we want each school meal to have something from every food group:**
 - **Energy group**
 - **Protective group**
 - **Body- and brain-building group,**



so that they would satisfy children’s nutritional needs.

...

3. Distribute a **sample menu** to the teams. Explain that this sample menu was prepared drawing on the baseline results.
4. Ask the teams to look at the menu and identify foods from each of 3 food groups, in each meal. If needed, they can propose some improvements to the meals, to ensure that they have all 3 food groups.
5. Let the teams work for 15 minutes and share the results.



- Distribute a **monthly meal planner** to each team. Review its structure together.
- Ask each team to create a realistic menu for 5 days, using a meal planner.

Remind the teams to think of affordable options, as they work on the menu.

They can use the food guide to help them.



Public schools should also propose their menus, based on what they see being served by the caterers.

- After 10 minutes, let each team present and justify their 5-day meal plan. They should also talk about how cost was a factor in their decisions.
- Praise the teams. Discuss the idea of using a written meal plan in their school, be it private or public school.

...

- Now, invite the teams to think about **meals and snacks that parents send from home**.



The task is the following: Each team should prepare a message that will go out to all the parents, to encourage them to send healthier meals or snacks.

You have 3 options:

- Write a letter
- Make a drawing / poster
- Record a message (to be sent on WhatsApp).

If many of your parents are illiterate, consider option 2 or 3.

- **Be short!**
- Tell parents **why** they should start sending more healthy meals or snacks to school.
- Ask parents for **specific actions** (send A on days B and C).
- If possible, try to address 1-2 **barriers** parents may have to switch to healthier meals (cost, convenience).

11. Give a flipchart page and a marker to each team for writing or drawing the message. The recording teams can prepare and then record the message on a phone.



12. Give teams 20-30 min.

13. Next, invite the **writing and drawing** teams to share their messages. Let the participants walk around and vote with stickers for 3 letters they find most convincing. **Teams cannot vote for their own letter!**

14. Then do the same with **recorded messages**. Create papers with number for each recorded message, and let participants glue the stickers on the message they liked best!

15. Identify 3 messages with most stickers. Discuss what made these messages so good. What did participants see in them?



16. Encourage school teams to use these ideas to craft their own message to parents!

AEROBIC BREAK AT 10:30 (Let's draw circles with different body parts!)

DAY 3, ACTIVITY 3
TIME: 10:35 – 12:30

NAME	TOOLS TO PREPARE	FACILITATOR
DEVELOPING A SCHOOL NUTRITION POLICY	<ul style="list-style-type: none"> • NFS Guidelines summary • Sample nutrition policy 	

ACTIVITY STEPS

1. Remind that one of the actions recommended in the NFS Guidelines is for each school to develop its guiding principle or policy. Having such a **written** policy will help each school to become a truly nutrition-friendly school.



Inform that both public and private or community schools are recommended to have a nutrition policy. Even if school feeding program determines the menu, the school can have influence on other aspects of nutrition policy, and even provide inputs into school menu.

2. Ask if any of the schools present here already have a nutrition policy. If so, could you share what it includes and how you have used it?
3. Listen carefully and summarize experiences to date.
4. Share an example of **school nutrition policy** with each team. Let them review it for 5 minutes and then discuss what participants think about it.
 - Is anything surprising to you?
 - How much of this is feasible in your own school?
5. Explain: It is important for the schools to consider their own reality, when developing their policy.
6. Ask each school team to **draft a school nutrition policy for their own school**. Health staff should join the school teams and support. The teams have 30 min.
 - *Provide large sheets of paper and colorful markers for writing policy.*
 - *Suggest that the policy should have 10 points or less, and should use a clear language.*
 - *Each point should have a little drawing or symbol that illustrates the point.*



7. Ask each team to hang their policy – indicate spaces on the wall where to hang the policies. Then, invite everyone to walk around, to read the policies, and to vote for the 3 they find most clear and effective. **Teams cannot vote for their own policy!** Give 3 stickers to each person, to glue on the “best” policies. 😊

8. In the end, review the 3 policies with most “votes”. Discuss:



- What do these policies have that makes them clear and effective?
- Do they address key points recommended in the NFS guidelines?

9. Appreciate the participants. Invite each team to return to their own draft policy and make tweaks / changes that they think would be needed.

...

10. Discuss what experience the schools have had so far working with **street vendors and school staff that sell outside or inside of schools.**



- Do you allow vendors inside your schools or next to the school?
 - Do the vendors pay something for selling goods on the school compound?
 - Do you check what they sell?
 - Were you able to influence what they sell? Can you share your experiences?
 - Do any school staff sometimes sell some goods to children? If so, what do they sell? How do the goods they sell align with nutrition-friendly school guidelines?
11. Discuss if **district assemblies** have a role in controlling the sale of sweets and fizzy drinks near schools, such as producing and enacting by-laws.



Ask: Would you advocate together with your district assembly for by-laws against fizzy drinks and sweets next to schools?

12. Summarize and invite other schools to try some of the discussed strategies to **engage street vendors and school staff to sell healthier snacks**, and report back on what worked, in a few months.

LUNCH

DAY 3, ACTIVITY 4
TIME: 13:30 – 15:30

NAME	TOOLS TO PREPARE	FACILITATOR
EDUCATING CHILDREN AND PARENTS ON HEALTH AND NUTRITION	<ul style="list-style-type: none"> ○ 2 Children’s books ○ PTA scripts 	

ACTIVITY STEPS

Activities with children (13:30-14:30)



1. Remind that one of the health promotion activities is **educating both children and parents** about good health and nutrition.
2. Ask: **What are some of the health and nutrition practices we want to teach to children in creche and KG?**

Ask each team to brainstorm all together and make their list of 5 most important health and nutrition behaviors they would like young children to learn.

3. Ask each group to share their list. Write down each new practice. If the practice is mentioned more than once, put a tick next to it. In the end, identify 5 most important practices that most teams agree children should be taught.
4. Ask the teams to describe or even demonstrate one recent **learning activity** on health or nutrition they carried out with the children, related to one of these 5 practices.

It can be a song, a game, a story, an art activity, a conversation or some practical task they did with children, to teach them about nutrition or some health issue.

5. Summarize the types of activities that were shared, and praise the teams for creativity. Emphasize that children learn best when they:
 - a. Move or do something (make, build, collect etc,)
 - b. Listen to stories
 - c. Play, laugh and have fun!
6. Ask the teams what is the **recommended frequency** of such **nutrition and health activities with children**, according to school health guidelines. (At least once a month).



That means that there should be a minimum of 10-11 planned activities per year. This is not counting daily opportunities to reinforce healthy habits and good nutrition.

7. Ask the teams where they look for ideas for health and nutrition activities. Write down the key resources, and share more ideas if you can.
8. Introduce **2 children’ story books**. Explain that these were developed to support ECD centers to promote healthy eating habits at home and at school, and that we would like to pilot them with the schools.
9. For the first book, **“What did you bring to school today?”**, ask everybody to follow by looking at a storybook on their table and read a story to them with expression, showing pictures and asking questions. Be a good role model of storytelling!

In the end, ask:

- 1) How do you think the children will react to this story?
- 2) What is this story teaching them?
- 3) What are 1-2 activities you can do with the children, after reading the story?
- 4) How could you get the parents to read this story?



Summarize the responses.

10. For the second book, **“Foods with superpowers”**, ask the participants to do the same activity in the team, where one person impersonates the teacher and the rest the children, and they read the story together.
11. In the end, discuss the **same four questions** as above, in the large group.
12. Summarize and note down key ideas for improvement.



AEROBIC BREAK AT 14:30 (Let’s make a circle and invent new ways of silly walking!)

Activities with parents (14:30-15:30)



1. Brainstorm: And what are some of the things you want parents to know, with regard to child health and nutrition? And what are parents themselves interested in? Make a list of 6-8 topics based on teams' ideas.
2. Ask each teams to think back to one **educational activity on health or nutrition** they recently did **with parents**, and prepare to share with others.

Please mention whether you just talked to the parents or did something else – played a game with parents, shared a handout with suggestions etc.

3. Invite the teams to share briefly. Summarize the activities presented and point out the different teaching strategies the schools used.
4. Explain that parents, just as children, **learn best when learning is active**. They **learn least when they just listen**. Knowing this, what activities could we do with parents, to promote certain health or nutrition practices?
5. Brainstorm, write down and summarize the ideas shared. If needed, add some best practices:

- Ask parents to share how they themselves learned some healthy habit
- Play one of the learning games we played here, with parents
- Ask parents to go “treasure hunting” in the Mother Child Health Record Book, to discover some specific information there.
- Read a children’s story with parents and ask to talk about it with children at home
- Ask parents to make a plan for 5 healthy snacks, for a week
- Invite parents to help with event and ask to bring healthy snacks.



6. Ask what the recommended frequency of educational activities for parents should be.

Point out that **nutrition friendly school guidelines recommend using quarterly PTA meetings** for parental education on health and nutrition. Is it realistic? Why?

7. Ask: Are there **other contacts with parents** that could be used for health education, besides PTA meetings? Ask each team brainstorm and come up with **3 additional ways to reach out to parents**. Invite teams to share their ideas.

8. Distribute **PTA scripts** to the teams. Explain that these are some ideas of activities that schools could do with parents on health education during PTA or any other meetings or contacts. **They can pick one activity to do per meeting, or come up with their own.**
9. Assign each team to quickly read through one of the scripts and be ready to present to others.
10. Ask each team to share the key points of their script (topic, activities).
11. Then ask each team to pick one script and propose how they would summarize key ideas into whatsapp message. The message should include:

- 1-2 key sentences
- 1 task for home
- Follow up to share what they did / learned, on the chat



After 5-10 minutes, invite 3 volunteer teams to share. Discuss what was done well and what could be improved.

12. Check if participants still remember where they will register their educational activities with children and with parents. (In the **school health promotion register**). the participants!



DAY 3, ACTIVITY 5
TIME: 15:30 – 16:30

NAME	TOOLS TO PREPARE	FACILITATOR
NEXT STEPS	Action plan for school teams and health staff	

ACTIVITY STEPS



1. Inform: We have reached the end of the training! Let’s congratulate ourselves and each other, because we worked hard!
2. Please answer in writing these 4 questions, as a training evaluation. Use A4 paper sheet.
 - 1) *What was one new thing you learned, in this training?*
 - 2) *Is there anything you would like to try in your personal or family life, after this training? Please explain.*
 - 3) *What is one change you want to see in your workplace, as a result of this training?*
 - 4) *What would you have done to make this training better, next time?*
3. Please submit your evaluations. They can be anonymous.

Planning steps for ECD Centers and Health providers



1. Explain: We will now have to put this training in practice, and to see if it brings results. To know if there are results, we will collect endline data in the end of the pilot.
2. Sit the participants by **school teams** and **health teams**.
3. Distribute and explain **the action plan to each team**. Give each **school team** and each **health team** 30 minutes to fill out the plan with their initial ideas.
4. Circle around the room and support the teams. In the end, ask each team to share 2 points from their plan. Take photos of each plan, and let each team take the plan with them.
5. Explain that after this training the schools and the health teams will be supported through mentoring and through several refresher meetings. These activities will aim to help schools and health teams reach their objectives around better health and nutrition in ECD centers.



ACTION PLAN FOR BETTER SCHOOL HEALTH AND NUTRITION AT ECD LEVEL

YOUR INSTITUTION: _____

DISTRICT: _____

OBJECTIVE 1:	OBJECTIVE 2:	OBJECTIVE 3:
ACTIVITIES (1-3) / BY WHEN:	ACTIVITIES (1-3) / BY WHEN:	ACTIVITIES (1-3) / BY WHEN:
RESPONSIBLE:	RESPONSIBLE:	RESPONSIBLE:
TOOLS & RESOURCES:	TOOLS & RESOURCES:	TOOLS & RESOURCES: