



WASH in Schools Schools With Water, Sanitation and Hygiene



Dushtha Shasthya Kendra (DSK)

WASH in Schools

Schools with Water, Sanitation and Hygiene

DSK has been implementing WASH components in schools to improve safe drinking water supply, hygienic sanitation facilities and personal hygiene for school children through an innovative approach - "School Sanitation and Household Hygiene Education (SSHHE)" since 2007 in slum areas of Dhaka city. DSK has been implementing SSHHE in 27 urban primary schools and 12470 school children (boys and girls) have been covered under Plan Bangladesh support. Safe drinking water and hygienic sanitation facilities for all school children of 27 schools have been ensured. Through joint initiative of student forum and the resource teachers' hygiene promotion have been continuing in schools as well as community. Significant improvements on personal hygiene knowledge and practices have been observed among the school children. More significantly a partnership has been established among School (Education department, SMC, teacher and student), Community (CDF, LGI and family) and NGOs in the programme areas. Environmental situation of the schools have been improved, school authority is more responsive to WASH and enabling learning environment in 27 SSHHE schools.

Current Scenario:

Children bear the brunt of the global drinking water and sanitation crisis-the cause of 80% of the sicknesses in the developing world. Worldwide, 1.1 billion people have no access to safe drinking water and 2.6 billion lack sanitation. But the globe's largest public health problem remains solvable through steady, targeted approaches-and one of the



Improved sanitation has positive impacts on economic growth and poverty reduction. According to a recent WHO study, every dollar spent on improving sanitation generates an average economic benefit of \$7. The economic cost of inaction is astronomical. Without improving sanitation, none of the other Millennium Development Goals, to which the world has committed itself, will be achieved.

most important of them is provision of safe drinking water, sanitation and hygiene promotion (WASH) for school children and community as a whole. Safe water and sanitation are essentials to protect children's health and their ability to learn at school. In this sense, they are as vital as textbooks to a child's education. In Bangladesh over 110,000 under five children die from diarrhea each year and about 65 million diarrhea episodes occur annually and 90% of them are children. The prevalence of diarrhea disease among the children is almost double in urban slums. The high prevalence of diarrhea is because of unsafe drinking water, unhygienic sanitation facilities and bad hygiene practices.

50% of the developing world's schools have no access to safe water. 75% of the developing world's schools do not have adequate sanitation facilities. It's as basic as reading, writing, and arithmetic. School children need safe drinking water, sanitation facilities and hygiene education to be able to learn.

There are 78,126 primary schools in Bangladesh, serving 17.6 million children. Over 30% schools have no safe drinking water and sanitary toilet facilities. Almost cent percent schools have no proper hygiene education despite little mention in school curriculums.

Schools that lack access to basic water supply and sanitation services will have an increased incidence of major childhood illnesses among their students. Poor health is an important underlying factor for low school enrollment, absenteeism, poor class room performance, and early school dropout.

Hygiene, Sanitation, and Water in Schools projects can create an enabling learning environment that contributes children's improved health, welfare, and learning performance.

Principles of Hygiene, Sanitation, and Water in Schools

Since 1992, DSK has been implementing community WASH programme in urban slums. Main focus of the programme was to provide water supply, sanitation facilities and hygiene promotion to the poor slum communities. Since its WASH interventions more than two hundreds slums have been provided safe water supply, hygienic sanitation facilities and hygiene promotion. Initially Schools were not focused for WASH interventions. From its

A study revealed that without having adequate facilities of safe drinking water at school premises the student lost about 30% brain memories. Another study has shown (UNICEF Bangladesh) that about 30% of the primary schools do not have adequate and safe water and sanitation facilities in Bangladesh. In those schools about 3 million children are deprived from safe drinking water and sanitation services. Another study revealed that total sanitation coverage and improved water facilities reduced diarrhea by 99%, dysentery by 90%. As a result children's schooldays lost due to illness fell from 16 to 7 days per year.

experience DSK felt that along with community WASH interventions must be targeted towards school children.

The basic principles that underlie successful hygiene, sanitation, and water in schools projects are similar to those that underlie sustained water and sanitation projects in communities. However, hygiene, sanitation, and water in schools have specific characteristics, and the basic set of principles must be adapted to address.

The demand creation and provision of safe water and sanitation facilities is a first step towards a healthy physical learning environment. However, mere provision of the facilities doesn't make them sustainable nor do produce the desired impact either. It is the use of the facilities that facilitates healthy living environment. In school, hygiene education aims to promote practices that will help to prevent water and sanitation related diseases. It will lead to healthy behavior in the future generation of adults.

Children are most vulnerable to environmental health hazards and are subsequently also the worst sufferers. Schools will partly determine children's health and well being by providing a healthy or unhealthy environment and by developing useful life skills on health and hygiene.

Although water and sanitation facilities are being recognized as fundamental for hygiene behavior and children's well being, in practice, many schools are confronted with extremely bad sanitary conditions. Conditions vary from inappropriate and inadequate sanitary facilities to the outright lack of toilets and safe water for drinking and sustainable hygiene practices. This even contributes to absenteeism and the dropout rates of girls.

Schools can be a key factor for initiating change. Children are often eager to learn and willing to absorb new ideas. New hygiene behavior learned at school can lead to life long positive habits. Teachers can function as role models, not only for the children but also within the community. School children can influence the behaviors of family members - both adults and younger siblings - and thereby positively influence the community as a whole.

A focus on school sanitation stems from the fact that children have a right to basic facilities such as school toilets, safe drinking water, clean surroundings, friendly environment and knowledge and information on

hygiene. If these conditions are created, children come to school, enjoys learning, learn better and take back to their families, especially siblings, concepts and practices on sanitation and hygiene. In this way investment in education is more productive. Such conditions have an even greater positive outcome for girls who often stay away and dropout of school which do not have toilet

Rainwater Harvesting at Suravi School, Baniabadh



facilities.

Sanitation is a way of life. It is quality of life that is expressed in clean home, the clean neighborhood and clean community.

The major objectives of School WASH are to develop awareness of the school children about health, hygiene and sanitation, encourage school children to examine their environment critically and to act in a manner which would make it more hygiene and sanitary and to use schools as "education and information centers" for safe water, sanitation, health and hygiene which would link teacher to child, child to child, child to parents and parents to community.

Based on the experience and felt need DSK adopted a new concept of School WASH in "School Sanitation and Household Hygiene Education - SSHHE". 27 Primary schools in Dhaka city slums areas have been selected for SSHHE interventions. 12470 students are covered under SSHHE.

The focus of the programme is Primary School Children because they are eager to learn at the early stages of life, they have important roles in household chores, they can become agent of change and they are ready for initiatives guided in the schools by the school teachers and their peer groups.

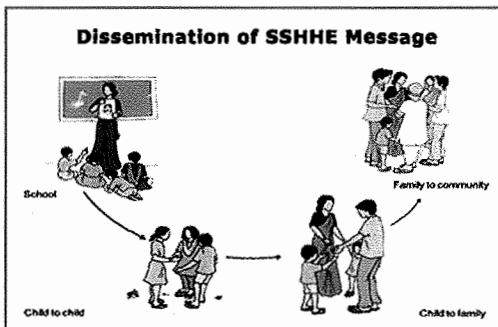
What is School Sanitation and Household Hygiene Education (SSHHE)

SSHHE is Child - to - Child learning and doing approach to develop partnership between teachers and children to promote health and hygiene practices. To help develop such a partnership teachers can guide children through a series of activities to link what they learn in the classroom with what they learn at home and in the community.

The School Sanitation and Household Education Programme create a good environmental sanitation and hygiene practices in the school and linking school and community. It is essential to develop the competences of the children on life skills for SSHHE action. Teachers should create a co-operative, family type atmosphere in the classroom. They will need to be well organized and try out new ideas. By building solid, close relationships with the community the parents will recognize the benefits for their child learning in a school. This will mean that children will enjoy coming to school and will learn better.

School sanitation and hygiene education is a comprehensive programme through which children learn and practice key hygiene behaviors, share it with their siblings and friends and influence parents and the community. School children can spread important health messages and practices from school to home and are potential agents of change within their homes and communities. If they learn and practice good health knowledge and skills now and develop caring attitudes, they are likely to carry these forward to

the next generation.



SSHHE is a partnership among the school (school management committee, teachers and staff and student), community Development Forum (CDF) and LGI and family) and NGOs through which improve hygiene behavior is practiced.

Why is it important to focus on schools? After the family, schools are the most important places of learning for children; they have a central place in the community. Schools are a stimulating learning environment for children and stimulate or initiate change. If sanitary facilities in schools are available, they can act as a model, and teachers can function as role models. Children are more receptive to new ideas and can more easily change their behavior. They have important roles in the household, taking care of younger brothers and sisters.

Step by Step SSHHE implantation

Learning Steps	Life Skills
Step – 1: Identifying a local WASH issue and understanding Children recognize a WES problem and understand the main health messages	Critical thinking Decision making Communication Problem solving
Step – 2: Finding out more about the WASH issue Children study to find out more about the topic at home, in the community, and at school	Communication Critical thinking Empathy
Step – 3: Discussing what's been found out and planning the Action Children share the finding and plan to solve the problem	Communication Interpersonal relationship skills Problem solving
Step – 4: Taking Action Children plan and take action to help prevent the problem	Communication Interpersonal relationship skills Problem solving
Step – 5: Evaluation: discussing result Children evaluate their action and continue taking actions	Problem solving Decision making Communication
Step – 6: Doing it better Children discuss how they can be more effective for next time and sustain their action s	Communication Interpersonal relationship skills Problem solving

Goals

School Sanitation and Household Hygiene Education is a comprehensive programme to ensure child friendly water supply, toilet and hand washing facilities in the schools and promote behavioral change through hygiene education. SSHHE not only ensures child-right to have healthy and clean environment but also leads to an effective learning and enrollment, particularly girls and reduce diseases and worm infestation. The goals of SSHHE are:

- * Create better and healthy environment for children at schools for learning
- * Development of life skills among children

Objectives

The main objectives of the SSHHE Programme are:

- * Create hygiene awareness and promote sustainable behavior changes related to hygiene among teachers and children in schools; and community.
- * Ensure safe drinking water and sanitation facilities for the school children
- * Reduce diseases and worm infestation among school children
- * Ensure participation of student, teacher and management committee in SSHHE activities
- * Create WASH learning and practice environment from school children to family and community
- * To create an environment for realization of child rights (Survival, protection, development, participation)
- * Environmental cleanliness in and around the schools
- * Promote quality and joyful learning

Strategies

- * Children learn hygiene, practice and monitor
- * Capacity building and institutional strengthening
- * School and Community participation and ownership
- * Provision of sustainable water and sanitation facilities
- * Encourage innovation
- * Effective hygiene education (classroom hygiene education by trained teachers
- * Establishing children as agent of change - changing themselves, friends, family and the community.
- * School as resource center and setting a model for change
- * Joyful learning methods - Child friendly
- * Involve govt. (Education department) and Local Govt. Institute

Baseline information of SSHHE Schools

At the beginning of the SSHHE initiative school children and teachers did establish a baseline based on the WASH facilities and DSK facilitated the process. Following were the key findings of the schools:-

- * Most of the schools had no adequate sanitation facilities, no regular cleaning of toilets and condition was unhygienic, five schools had no toilet facilities. Most of the toilets had no water facilities inside.
- * Only 17 schools had drinking water facilities at school compound and other schools collect water from outside the school campus. Schools generally use DWASA supply water system which was highly contaminated with bacteria. School children drink water without treatment.
- * Inadequate maintenance arrangements lead to facilities falling into disrepair and quickly out of use.
- * No school had solid waste management system, school compound unclean. Most of the schools had no proper drainage system.
- * School had no or unused hand washing facilities.
- * Poor knowledge and practices of key personal hygiene specially hand washing among student and the staff.
- * No proper hygiene education sessions in class rooms.

SSHHE implementing steps

DSK has been implementing SSHHE in 27 urban schools in slum areas of Dhaka city under Plan Bangladesh support. The school children mostly come from the slum and low income community. The schools are managed by the department of primary education (govt.) and NGOs. Each school has active management committees with community representatives. DSK has given major focus on following areas under SSHHE:-

1a. Life Skills-based Hygiene Education



Hygiene education in school Assemblies and Classrooms

The life skills education approach tried to focus on real life situations, involving problem solving, learning to understand (analyze) situations and negotiations, leading to informed decision making and actions. The participation of children and participatory methods are used in life skills education.

The life skills-based hygiene education has been developed over the period. It helps children develop essential life skills that enable them to take greater responsibility for their own lives. Life skills-based hygiene can help children to acquire and maintain healthy lifestyles and conditions through the development of knowledge, attitudes, and especially skills, using a variety of learning experiences, with an emphasis on participatory methods. Life skills-based education essentially tries to center hygiene practices in children's daily reality, while helping children acquire both knowledge of appropriate hygiene behaviors and the skills to use them.

- * Establish clear objectives, performance indicators, and monitoring and evaluation processes.
- * Build on existing beliefs and community practices, and seek effective and sustained use of water supply, sanitation, and hand washing facilities and hygiene practices.
- * Adopt a child-centered approach that takes into account the ways children learn and their everyday reality as well as the fact that classes in many developing schools include children of different ages and so require the use of flexible hygiene education methods.
- * Focus on developing skills and attitudes, because knowledge does not automatically translate into practice.
- * Plan on implementing hygiene education over the long term, rather than as a one-off program, to ensure that knowledge is translated into the use of (new) hygiene practices.

1b. Student Forum: Each school has formed a children hygiene group called "Student Forum". Twenty seven (27) Student Forums have been formed by the school through facilitation of DSK. The forum works as change agent in schools, families and the community. It establishes partnership with school children, non school children/ non SSHHE Student at community (mohalla children group) where forum members come from school. In addition to being the beneficiaries, the children are also active partners in spreading the message. In Child-to-Child approach they are agents of change among their peers and establish links between school and home to improve sustainable hygiene behavior.

DSK provides orientation to each "Student Forum" in each year about key hygiene messages. Total 81 orientations have been so far conducted with participation of 625 Forum members since 2007.

180 sessions for hygiene have been conducted for non schoolchildren/non SSHHE student in 6 clusters (slums). Total 1800 non school children have received hygiene message by the school children.



Role of Forum members

- * Monthly meeting about their action
- * Monitoring and record WASH specially hygiene behaviors
- * Community level planning along with non school children, sharing with community leaders
- * Form "Mohalla Children Group" (five from Student Forum and five from non school children/ non SSHHE school), to disseminate messages to community children.
- * Message dissemination to family members.

1c. School teacher: School teachers have been trained as facilitators to disseminate key hygiene messages at class room during schooling. They are resource teachers. Resource teachers have yearly lesson plan for SSHHE. They teach the SSHHE contents including key hygiene in Social Science classes using interactive pictorial tools that the program has prepared for that purpose.

DSK has trained twenty seven (27) school teachers as resource teacher (one from each school) on SSHHE especially on hygiene message dissemination. Each year school teachers have been provided with refreshers; training was imparted to same teachers who conduct class room sessions. Officials from education department also did accomplish session for teachers at the training and encourage teachers to implement SSHHE in schools. Dhaka district education officials were present in the training sessions for the research teachers.

1d. Hygiene behavior domain and hygiene messages

In hygiene promotion the primary concern is to target specific behaviors that are important in preventing faecal - oral disease transmissions. Hygiene behaviors that may effect disease transmission can be broadly classified into five clusters called 'behavior domains'. Each of the domains involves a series of hygiene practices. The prioritization is done by school children. It needs to mention that not only hygiene promotion but also selection of target behavior, design of messages and campaigns are finalized by active participation of school children. Following messages have been disseminated to the children-

Behavior Domains	Hygiene Messages
Disposal of human feces	<ul style="list-style-type: none">• Use sanitary latrine• Use slipper at the time of toilet• Clean and repair the latrine regularly
Water and personal hygiene	<ul style="list-style-type: none">• Wash hand with soap and water before eating, feeding and food preparation• Clean teeth at least two times every day• Cut nails every week,• Take bath with safe water everyday
Safe water use and protection	<ul style="list-style-type: none">• Drink safe water• Use safe water for all domestic purposes• Cover water all the time
Food preparation and handling	<ul style="list-style-type: none">• Food, utensils and food preparation surface should be kept clean• Cover food all the time• Not eat rotten food
Domestic and environmental hygiene	<ul style="list-style-type: none">• Clean the court yard and surroundings of the school and house every day• Keep the waste in a fixed place

Under SSHHE programme hygiene promotion messages were developed by children through consultations among themselves. Teachers and DSK facilitate the whole process. Children prioritize the hygiene messages, demonstrate at school and community. One or two messages (hygiene, safe water, sanitation, personal; hygiene, solid waste management) transmitted to target students in every cycle. Every cycle has six steps. When 80 % students have reached the practice level with these messages then next set of message dissemination is started.

2. Water Supply in Schools

Provision of safe drinking water at school is the key component of DSK's SSHHE initiative. School children and teachers have developed baseline situation with DSK facilitation. It was found that all the schools do not have safe drinking water sources at the beginning. Out of the total 27 schools 10 have no drinking water facilities at the school compound. After SSHHE intervention 27 schools now have safe drinking water facilities at the school compound. Discussion and participation of School Management



Committees, School teachers and Students and DSK have provided following facilities for safe drinking water:

(i) Installed six rain water harvesting system in six SSHHE schools with capacity of 25000 litters of four systems and other two are smaller. The system runs with an extra ultra-violet mini treatment device. 12470 students, teachers and staff are having safe drinking water during schooling.

(ii) DSK has provided 36 "Proshika Water Filter" in schools for treatment of school water for drinking purposes. Existing 26 school drinking water supplies have been renovated upgraded and separate water supply points for students have been developed.

(iii) Improvement of available water sources to ensure provision of safe and adequate water for school children for drinking water, hand washing, cleaning, and other uses.

(iv) A water quality monitoring procedure has been in place. Bacteriological contamination of water sources in five points/ quarter have been tested at ICDDR, B laboratory.

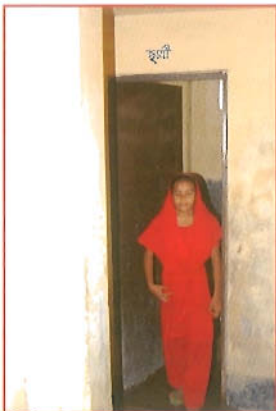
Water status (baseline vs current)

Facilities	Baseline (2007) No school		Present status (March 2010) no of school	
	Water supply (in campus)	No water supply (out campus	Water supply (in campus)	No water supply (out campus
Water supply	17	10	27	
Water supply New Construction by DSK	0	0	06	
Water Filter	0	0	26	

100% students have access to safe water

3. Sanitation facilities in Schools:

Improvement or development of school sanitation infrastructure is one of the components of SSHHE. 06 new toilets have been constructed and 12 toilets have been renovated providing hygiene standards along with other required facilities. Separate urinal facilities have been provided to 06 schools. Followings were major consideration during toilet construction and improvement-



" The latrine chambers were constructed considering the number of the children (boys, girls) and staffs of the school.

" Place of toilet within school compound convenient for both boys and girls.

" Privacy and special needs for girls students.

" Available water supply in toilets to ensure the hygiene practices.

" Adequate capacity of septic tank and soak pit with environment safety.

" The height of the plinth level of the latrine maintained considering the last highest flood level.

" Hand washing facilities inside toilets (with soap)

Sanitation status (baseline vs present)

Facilities	Baseline (2007) no. school		Present status (March 2010) no. of school	
	Yes	No	Yes	No
Toilet facilities	22	05	27	
Hygiene status	17	05	27	
New Toilet construction by DSK	0	0	06	
Toilet Renovation	0	0	12	

4. Solid waste and Waste water Management

In all SSHHE schools, waste collection drums have been provided to dump school solid waste at school compound. All schools run proper management of waste and monitored by the student forums. All schools have improved drainage system provision which was made under SSHHE initiative.

5. Establish SSHHE Corner in Schools

Establish SSHHE corner displaying key information and document related to WASH is part of the SSHHE and till now 26 display corners have been established in twenty six (26) schools. Periodically the corners have been decorated with visual documents by the "student forum" with the help of DSK.



6. Participation and partnership

SSHHE is a partnership among the school (school management committee, teachers and staff and student), community (CDF and LGI and family) and NGOs through which hygiene practices have been improved.

All the school management committees have been oriented on SSHHE; teachers have been participated in the programme. CDF and local elected ward commissioners also have been involved in the process of SSHHE implementation. Officials of Department of Primary Education have also involved and expressed interest to scale up the learning to other schools.

Monitoring

The "Student Forum" has developed monitoring system to monitor the progress and gaps in order to take corrective measures and improve the quality of output. The monitoring system under School Sanitation and Household Hygiene Education programme focuses on knowledge and practices of personal hygiene, physical progress of water and sanitation facilities, use and maintenance. Monitoring is done through class room interview, physical observation. Apart from student initiatives DSK also monitors the followings:

- * Hygiene knowledge and practices among school children
- * Effective use and maintenance of WASH facilities
- * Clean environment

Generally monitoring has been conducted every year covering one/two issues after the end of one particular cycle.

Hygiene knowledge status (monitoring in nine Schools)

Events	Baseline (2007)		Present (June, 2009)	
	% of student	% community children	% of student	% community children
Hand washing in 6 times	35 to 43	20 to 25	73 to 90	69 to 92
Safe water	10 to 50	13 to 35	70 to 92	78 to 94

Results

Following are the key achievements over the period:

1. Enabling learning environment has been improved with WASH facilities.
2. All SSHHE schools have safe drinking water supply facilities and treatment of supplied water. Accessibility to safe drinking water by the school children has been ensured.
3. All SSHHE schools children now have access to sanitized toilets along with water supply and hand washing facilities. The toilets are now environmentally safe.
4. School compounds are now comparatively clean, solid waste and waste water management have been established in the schools.
5. Trained "resource teachers" are available in all SSHHE schools, who have been caring out classroom hygiene education through innovative participatory tools.
6. School children have update hygiene knowledge. Key hygiene practices specially hand wash and personal cleanliness have been greatly improved.
7. Partnership among school children and non school community children, community development forum, LGI and community has enhanced.
8. Participation of govt. education department in SSHHE activities was a good start and they have expressed further interest to scale up such good practices in other schools.
9. Key health and hygiene information and behaviors flow to homes, hygiene practices also has been improved at family level.
10. Families and communities are provided with finance and other support for WASH activities at community level.

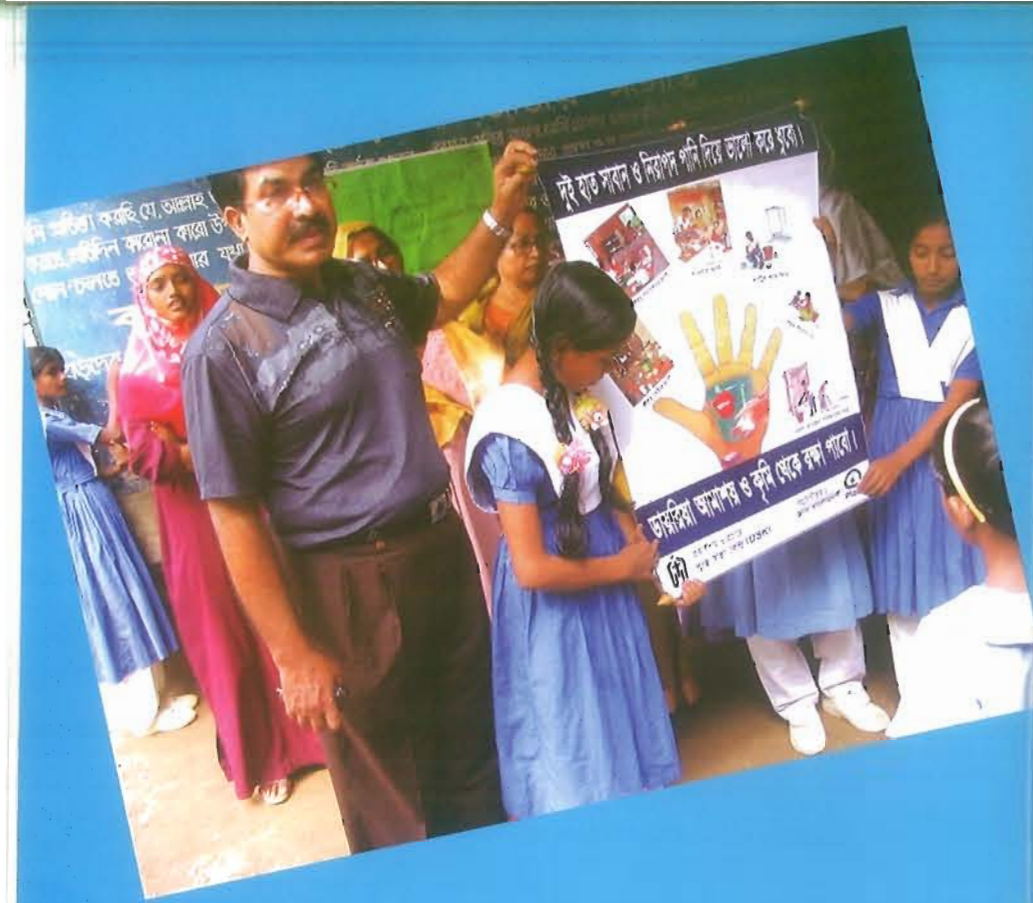
Lessons Learned

The success of SSHHE programme depends on effective teachers training and active participation of children, teachers and parents.

- * Dissemination of knowledge about WASH in schools was well received by all stakeholders and it triggered space for joint actions.
- * Children are effective change agents both at schools, households and community levels.
- * WASH facilities at school create enabling learning environment.
- * Without adequate water in toilets, it can not be kept clean.
- * Availability of grant was and remains as important catalytic conduit.
- * School WASH provides a big push to home/community WASH programmes.
- * Stakeholder participation engaging SMC, teachers, CDF and student is important in successful school WASH initiatives.
- * Government education department officials have expressed their intention to expand school sanitation initiatives in other schools. So possibility of leverage effect is real.
- * Understanding about girl attendance increase and reduction in prevalence of wash related diseases shall be further researched in near future.

List of SSHHE Schools (schools in Mirpur, Dhaka)

No	Name Of School	No of Student			No of Teacher		
		Girls	Boys	Total	Female	Male	Total
1	Surovi School ,Muktijodha - 08	82	98	180	03	04	07
2	Vasantek Govt: Primary School-15	446	415	861	11	01	12
03	Insania Primary School-15	120	80	200	05	02	07
04	Balughat Govt: Primary School-15	344	335	879	13	01	14
05	West Vasantek Reg: Primary School	312	248	560	04	01	05
06	Dhamal Court Govt: Primary School	409	437	846	08	02	10
07	Shishu Mangal Govt: Primary School	242	250	492	09	01	10
08	Manikdhi Govt: Primary School-15	253	274	527	03	05	08
09	Kazifuri Govt: Primary School-08	493	418	911	03	05	08
10	Nababerbag Govt: Primary School-08	326	253	579	02	04	06
11	Surovi School ,KTC -01	70	98	168	03	04	07
12	Surovi School ,Block- A	214	205	419	04	03	07
13	Surovi School ,Block- E	285	236	521	06	03	09
14	Surovi School ,Block- D	290	231	521	02	07	09
15	Shahidbag Reg: : Primary School-02	223	180	403	04	00	04
16	Banofool Reg: : Primary	161	145	306	02	02	04
17	Sultan Mollah Primary & High School	90	70	160	07	05	12
18	Khalilur Rahman Reg: Primary School	219	157	376	01	03	04
19	Arban School,Bawniabandh Block -A	159	151	310	08	00	08
20	Abdul Mannan Primary School	237	182	419	03	01	04
21	TMI School	125	179	304	03	02	05
22	Arban School,Bawniabandh Block -C	169	142	311	07	00	07
23	Darussalam Madrasa ,KTC -01	83	95	178	01	04	05
24	Grameen Shikha School	46	24	70	02	00	02
25	Arban School,Bawniabandh Block -D	154	152	306	06	00	06
26	Shenpara Govt: Primary School	600	593	1193	15	4	19
27	Surovi School, Geneva Camp	225	245	470	00	7	7
	TOTAL	6377	5893	12470	135	71	206



DSK Dushtha Shasthya Kendra
House- 741, Road -09, Baitul Aman Housing Society,
Adabor Dhaka 1207, Bangladesh
Tel: +88-02-9128520, 8122861, 8159656, 8120965, Fax: +88-02-8115764
Email: info@dskbangladesh.org, Website: www.dskbangladesh.org
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