

Parents' Involvement in the Implementation of SBM-WINS Program

DOI: 10.5281/zenodo.15670186

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Abstract:

Investigating the level of parental involvement has the potential of creating more inclusive, effective, and community-driven education programs in far-flung communities in Negros Island. In this premise, this study aimed to determine the level of parental involvement in the implementation of SBM-WinS program in a school somewhere in Moises Padilla, Negros Occidental. Data needed for this descriptive paper was collected from 111 public elementary school parents from Kindergarten to Grade 4 using an instrument that has hurdled the rigorous tests of validity and reliability. The analyses that followed showed a very high level of parental involvement in the SBM-WinS Program measured from the areas of water and sanitation, hygiene and deworming, and health education. Moreover, no significant difference was found in the level of parental involvement in the said program based on the same three areas above when grouped according to age and number of children. The opposite, however, came out when the same respondents were grouped according to family income. Lastly, age and family income showed no significant difference in the level of parental involvement in the SBM-WinS program based on health education, but a significant difference was found based on the number of children. The findings of the study underscore the vital role of active parental involvement both at school and at home in ensuring the safety, health, and well-being of children.

Keywords: Hygiene and Deworming, Parent's Involvement, SBM Wins

Introduction:

There is a strong belief in society that parental involvement has a strong positive effect on students' academic performance. Student learning takes place in schools, and the contexts of families and communities play a significant role (Ma, Shen, Krenn, Hu & Yuan, 2016). Students need a positive learning experience to succeed in school: one providing support, motivation, and quality instruction. In connection to Wash in schools focuses on the standards for promoting a clean and safe school environment and correct hygiene and sanitation practices among learners. Reduces morbidity and mortality among school children that stem from poor hygiene and sanitation practices and the lack of safe water and sanitation facilities. Cognizant of DepED Order No. 10 "Policy and Guidelines for the Comprehensive Water, Sanitation and Hygiene (WASH) in Schools (WinS) Program, clean water, functional toilets, and proper hygiene practices in schools are essential to achieving learning outcomes and are integral to school operations and improvement. Leveraging on Republic Act 9155, "Governance of Basic Education Act of 2001, the WinS Three Star Approach (TSA) applies School-Based Management as a pathway for schools and stakeholders to take local action towards improving and sustaining WASH services.

This study delves into the three areas of SBM-WinS: Sanitation, Hygiene and Deworming, and Health Education. Sanitation includes steps to ensure everyone has access to and uses toilets. It also provides ways to separate human excreta from coming in contact with other individuals. Hygiene refers to conditions and practices that help to maintain health and prevent the spread of diseases. DepEd Order No. 10, series of 2016, deworming is done semi-annually, in the presence of health personnel, in coordination with DOH, and with the parent's consent. In a person's tenure, health education has been defined as a program that teaches about how to improve health conditions by providing health literacy to a person or community.

As a public elementary school teacher adviser for 9 years, the researcher has encountered many problems with proper hygiene and sanitation of learners that cause absenteeism and health-related issues like stomachache and vomiting. The researcher also noticed that some parents allow their children to go to school without proper hygiene.

This is the reason why the researcher chose this topic as the subject of his study. He aimed to seek the Level of Parents Involvement in the implementation of the SBM-WinS program to give proper action and recommendations as to the results of this study.

Current State of Knowledge

Synthesis

The concepts and studies about the level of Parents Involvement in the Implementation of SBM WinS Program of public elementary school parents have given the researcher clear insights and rich background for this study. This also contributed to and enabled the researcher to formulate ideas and concepts, particularly in the formulation of introduction and conceptual discussions. The related studies presented provided the knowledge and basis for the researcher to apply what level the Parental Involvement in implementing the said program. Literature has augmented the researcher's existing knowledge, thus increasing the awareness of how this knowledge will be used to formulate questions and statements about the problem.

In the review conducted by the researcher, almost all of the literature and study reviewed bear relevance to the present study. There may be DepEd Orders and memoranda regarding SBM WinS at schools, but most are policies and guidelines. Still, the researcher prefers the UNICEF and Department of Health. The researcher exerted effort to study the results and conclusions of sources taken from foreign studies. The conceptual sources were online and manual books and articles essential to this study.

Upon reading all of these sources, the researcher learned that Level of Parents Involvement in the Implementation of SBM WinS Program is a challenge for all school administrators, teachers, parents and students to comply with without hesitation. As the endeavors, steps, and strategies formed by the researchers and authors are quite motivating and encouraging, the researcher is convinced that his study can help properly implement this policy at school, which must be obediently observed. All the sources (both foreign and local) cited above are a good basis for supporting the implications to be given in interpreting the data after the conduct of the study.

Theoretical Framework

This study is anchored to Level 2 of the Parental Involvement process model. According to Dempsey and Sandler (1995), this level defines some parental involvement mechanisms during their participation in children's education, which are Modelling, Reinforcement, and Instruction. To conclude, all these educational theories allow us to have a broader view of the importance of the connection between home-school actions as a benefit for children. Moreover, it will enable us to attribute a value to the role of parents as active actors in learning, which is believed not to have a great impact because of the belief that educational training is an exclusive task of the school, but with these theoretical bases it can be inferred that this idea is erroneous and that currently, it is a need.

Objectives of the Study

This study aimed to determine the level of parental involvement in the implementation of the SBM-WinS program in a public elementary school in a third-class municipality during the school year 2023-2024, as basis for an action plan.

Methodology:

This section deals with the research design, the subject and the respondents of the study, the research instrument, the validity and reliability of the research, the data-gathering procedure, and the statistical tools to analyze the data.

Research Design

Considering the nature of the data involved, the descriptive research design was used in this study to determine the level of Parents' Involvement in the implementation of the SBM-WinS program in one of the public elementary schools in a third-class municipality during the school year 2023-2024 as the basis for an action plan.

Descriptive research is valuable in providing facts on which scientific judgment may be based, providing essential knowledge about the nature of objects and persons and for closer observation into the practices, behavior, methods,

and procedures, and playing a large part in the development of instruments for the measurement of many gathering instruments like questionnaires, tests, interviews, checklists, score cards, rating scales, and observation schedules, and formulating of policies in the local, national, or international level (Calmorin, 2016).

A descriptive research design is valuable to this present study in providing facts and scientific judgment based on assessing this study. Also, this design is appropriate for the study to know the present situation and to determine the prevailing issues, making an adequate and accurate interpretation of the data.

Respondents of the Study

The study's respondents were 111 public elementary school parents from Kinder to Grade 4. These parents came from different grade levels and were chosen as the study's respondents. The researcher identified the parents with the help of the teachers during the PTA meeting.

A convenient purposive sampling method was applied in this study. Convenient purposive sampling is a type of non-probability sampling that involves the sample being drawn from the part of the population that is close to hand. Units are selected for inclusion in the sample because they are the easiest to access. This can be due to geographical availability at a given time or willingness to participate in the research (Kassiani Nikolopoulou, 2022).

Table 1

Distribution of the Respondents

Grade Level	Population (N)	Percentage (%)
Kinder	22	19.82%
Grade I	23	20.72%
Grade II	21	18.92%
Grade III	24	21.62%
Grade IV	21	18.92%
Total	111	100%

Data Gathering Instrument

The main instrument used in gathering the data was the survey questionnaire. The researcher formulated a questionnaire and submitted it to her adviser and the defense panel for correction, suggestions, and approval.

Part 1 of the questionnaire included the respondents' profiles, such as age, average family income, and number of children.

Part II of the questionnaire is 30 items for the areas, ten for sanitation, 10 for hygiene and deworming, and another ten for health education, which measures the level of parents' awareness towards the implementation of the School-Based Management – Wash in School Program using 5-point Likert scale rating with 5 as always, 4 as often, 3 as sometimes, 2 as rarely and 1 as almost never.

Validity

Validity is the level at which a concept is accurately measured in a quantitative study. Research validity in surveys relates to the level at which the survey measures correct elements that need to be measured. In simple terms, validity refers to how well an instrument measures what it is intended to measure (Heale & Twycross, 2015).

The first validator is a Master in Education who is a School Principal. The second validator is a Professor of Higher Education and a Doctor of Public Administration. The third validator is a Master Teacher serving the organization for thirty years.

The research instrument was subjected to face validation, where four experts were asked for their opinion about whether an instrument measures the concept intended. The jurors are professionals who are known to be competent and experts in this field. The researcher ensured that the items reflected the desired construct; hence, the suggestions and recommendations of the jurors were noted and thoroughly incorporated. As to the appropriateness of the items in the questionnaire, each juror will be requested to rate the instrument using the criteria presented by

Carter V. Good and Douglas E. Scates. The interpretations are as follows: Excellent (4.04 – 5.00); Very Good (3.28 – 4.03); Good (2.52 – 3.27); Poor (2.51 – 1.76); Very Poor (1.00 – 1.75).

The validity index of three validators, which was recorded at 4.80, was interpreted as "Excellent," meaning the tool was considered valid.

Reliability

Reliability relates to the consistency of a measure. A participant completing an instrument meant to measure motivation should have approximately the same responses each time the test was completed. Although it was not possible to give an exact calculation of reliability, an estimate of reliability could be achieved through different measures (Heale, 2015).

Since the research instrument was self-made, reliability was established. Cronbach's Alpha was used to establish the reliability of the research instrument. The Cronbach Alpha was used whenever the researcher had items that were not scored simply as right or wrong (Santos, 2016). Cronbach Alpha is a measure of internal consistency, that is, how closely related a set of items are as a group. It is considered to be a measure of scale reliability. A "high" value for Alpha does not imply that the measure was unidimensional. If, in addition to measuring internal consistency, you wish to provide evidence that the scale in question was unidimensional, additional analyses were performed. Exploratory factor analysis is one method of checking dimensionality. Technically speaking, Cronbach's Alpha is not a statistical test - it is a coefficient of reliability (or consistency).

Cronbach's Alpha could be written as a function of the number of test items and the average inter-correlation among the items. For the instrument to be reliable, it should be within the very high range of reliability coefficient. For this study, the respondents for the reliability test were the thirty (30) public elementary school parents of another school in the same district. The reliability statistics show a result of .966, which was interpreted as excellent.

Data Gathering Procedure

The researcher personally administered the questionnaires to the respondents. The researcher conducted the distribution with the School Head's permission. After the questionnaires were answered and retrieved, they were checked and scored. Scores were tallied, tabulated, analyzed, and interpreted according to the specific problem and hypotheses outlined in this investigation.

The researcher assured the respondents that their identities and responses were kept confidential.

Research Ethics Protocol

The study's respondents signed an informed consent form during the data gathering, which included maintaining their privacy and anonymity and keeping their responses confidential. It is used only for this study. They were informed about the nature and purpose of the study, which was to establish rapport and trust and to gain their cooperation during the entire data collection and interview for the respondents. The informed consent was discussed in Hiligaynon for about five minutes for each respondent to make sure that they fully understood the nature of the study, the purpose of needing their responses and their right to privacy, anonymity, and confidentiality, and that if the researcher violates any of these that they agree to, they may file a complaint against the researcher following the proper procedures of the law. The data and information used in the study were treated with strict confidentiality. No information regarding the participant's identity was disclosed unnecessarily in this study. After the data gathering, since there was no need to debrief.

Analytical Schemes

To the study's objective and the problem statement, the data that the researcher gathered will be subjected to tabulation, statistical analysis, and interpretation. The data obtained will be analyzed using descriptive and comparative analytical schemes.

Objective No. 1 used the descriptive analytical scheme to determine the profile of the respondents in terms of age, average family income, and number of children.

Objective No. 2 also used the descriptive analytical scheme to determine the level of involvement of respondents towards implementation of the School Based Management – Wash in School Program according to water and sanitation, hygiene and deworming, and health education.

Objective No. 3 likewise used the descriptive analytical scheme to determine the level of involvement of the respondents towards the implementation of the School-Based Management – Wash in School Program according to aforementioned areas.

Objective No. 4 used the comparative analytical scheme to determine if there is a significant difference in the level of parental knowledge in the implementation of school-based management-wash in school program according to the aforementioned areas.

Statistical Tools

Various statistical tools will be employed in the analysis of data in order to answer the objectives of this study.

Objective No. 1 used the frequency and percentage count to determine the profile of the respondents in terms of age, average family income, and family size. Frequency count is the summary of how often the different scores occur.

Percentage is computed to determine the proportion of a part to a whole such as given number of respondents in relation to the population. The frequency of a particular observation is the number of times the observation occurs in the data. The distribution of a variable is the pattern of frequencies of the observation. Frequency distributions are portrayed as frequency tables, histograms, or polygons. Frequency distributions can show either the actual number of observations falling in each range or the percentage of observations. Percent distribution is a measure of how a metric (such as total revenue) is distributed among the parts that make up the total (Manikandan, 2014).

Objective No. 2 used the mean to determine the level of knowledge of respondents towards the implementation of the School-Based Management – Wash in School Program according to water, sanitation, and hygiene.

The mean is considered the best measure of central tendency. According to Bruce & Bruce (2017), the most essential estimate of location is a mean or average value. Mean, also known as arithmetic average, is the value we get by dividing the total values of various given items in a series by the total number of items. Its main use consists of summarizing the essential features of a series and enabling data to be compared.

The mean range and interpretation shall be as follows:

Mean Range	Interpretation
4.50 – 5.00	Very High Level
3.50 – 4.49	High-Level
2.50 – 3.49	Moderate Level
1.50 – 2.49	Low Level
1.00- 1.49	Very Low Level

Objective No. 3 also used the mean to assess the level of involvement of the respondents towards the implementation of the School-Based Management – Wash in School Program according to the following aforementioned areas.

Objective No. 4 used the Mann Whitney U- test to determine if there is significant difference in the level of parental involvement in the implementation of school-based management-wash in school program according to the aforementioned areas when grouped according to the aforementioned variables.

Mann-Whitney U test is used to determine whether two independent samples have been drawn from the same population (Panneerselvam, 2015). Mann-Whitney U test is a non-parametric alternative to the t-test for the difference between the two independent means (Johnson and Cubby, 2014). The test is used to compare two population means that are not equal or equal. If the p -value is less than or equal to the 0.05 significance level, then reject the null hypothesis. Accept the null hypothesis if the p -value is greater than 0.05 level of significance.

The computed p -value was interpreted by rejecting the null hypothesis if the p -value is less than or equal to 0.05 level of significance and accepting the null hypothesis if the p -value is greater than 0.05 level of significance.

Results and Discussion:

Table 2

Profile of the Respondents in Terms of Age, Average Family Monthly Income, and Number of Children

Variables	Categories	Frequency	Percentage
Age	Younger (less than 41 years old)	52	46.80
	Older (41 years old and above)	59	53.20
	Total	111	100
Average Family Monthly Income	Lower (less than P9000)	67	60.40
	Higher (P9000 and above)	44	39.60
	Total	111	100
Number of Children	Few (less than 4)	46	41.40
	Many (4 and more)	65	58.60
	Total	111	100

The profile of the respondents in Table 2 states that the highest percentage, 53.20%, belongs to the older age group, which ranges from 41 years old and above. Most of the older Age are parents who are active in school partnerships. For the average family monthly income, the highest percentage, 60.40%, belongs to the lower category, wherein the income is lower than P 9,000.00. This means most of the respondents (sugarcane workers) earn a minimum wage. Lastly, the number of children, the highest percentage of 58.60%, belongs to the number of children, which is many, whereas the number of children is four and above. This means that most of the respondents are from large families.

Level of Parental Involvement in the Implementation of the SBM WinS Program according to Water and Sanitation, Hygiene and Deworming, and Health Education

Table 3

Level of Parental Involvement in the Implementation of SBM WinS Program in Water and Sanitation

Items	Mean	Interpretation
I am involved in....		
1. Teaching my children to bring water containers to school for their safety.	4.57	Very High Level
2. Teaching my children to take a bath daily.	4.53	Very High Level
3. Teaching my children the proper ways of hand washing.	4.56	Very High Level
4. Planning to have potable drinking water in school.	4.48	High Level
5. Implementing A handwashing area.	4.32	High Level
6. I am Teaching my children the importance of drinking 8-10 glasses of water daily.	4.54	Very High Level
7. Preparation of potable water supply.	4.50	Very High Level
8. Teaching my children the importance of taking a bath every day.	4.49	High Level
9. Teaching my children the proper disposal of waste.	4.48	High Level
10. Enough water supply for gardens and proper disposal of waste.	2.77	Moderate Level
Overall Mean	4.32	High Level

Table 3 shows the overall mean score; the result showed that the overall mean computed was 4.32, which was interpreted as a high level.

Table 3 shows the Level of Involvement of Parents in the implementation of the SBM Wins Program in the area of Water and Sanitation, utilizing the mean as a statistical tool.

Results further showed that respondents have a very high involvement in the phrase "Tea, ching my children to bring water container in school for their safety," with a mean of 4.57. This implies that the parents were concerned about their child's health, especially during their stay in school.

On the other hand, the lowest mean score of 2.77 is interpreted as a moderate level of the involvement of parents, which states in number 10, "Enough water supply for gardens and proper disposal of waste." (This implies that the plants will die and there will be contamination thus, spread of disease might arise and it will lead to acquiring diseases).

This result can be linked to the studies of Damkjaer, S. and Taylor, R.2017 conducted in Brazil, which contemplated the environmental impacts (environmental impact), water availability (water availability), and the expansion of agricultural activity. One of the most essential lives sustaining natural resources that a country should continually protect, preserve, and enhance is water. All forms of life depend on water. Access to clean and potable water immensely improves the quality of life.

Table 4

Level of Parental Involvement in the implementation of SBM WinS Program in Hygiene and Deworming

Items	Mean	Interpretation
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I am aware that...

1. Teaching my children how to use the toilet properly.	4.46	High Level
2. Teaching my children to change clothes and underwear every day.	4.48	High Level
3. Teaching my children how to clean their hands after using the toilet.	4.41	High Level
4. Teaching my children the importance of cleaning and disinfecting the toilet.	3.13	Moderate Level
5. Teaching my children the effect of having deworming twice a year.	4.11	High Level
6. Teaching my children to practice proper hygiene before deworming.	4.39	High Level
7. Teaching my children to inspect the scalp, ears, eyes, nose, and throat for any discharges and untoward signs and symptoms	4.50	Very High Level
8. Teaching my children to use soap in washing their hands before and after eating.	4.48	High Level
9. Teaching my children to use alcohol or hand sanitizers in school.	4.53	Very High Level
10. Teach my children proper grooming, like cutting nails and cleaning their ears and noses.	4.58	Very High Level
Overall Mean	4.32	High Level

As gleaned in Table 4, the overall mean score is 4.31, showing that the level of involvement of parents in the implementation of the SBM Wins program in the area of Hygiene and Deworming was on a high level,

The highest mean score of 4.58 is interpreted as very high in item no. 10, "Teaching my children proper grooming, like cutting nails and cleaning ears and nose." This implies that the respondents are hands-on with their children's physical development and nurture to develop their day-to-day life skills training.

On the contrary, as shown in the same table, the lowest mean score is 3.13, obtained by Item No. 4, "Teaching my children the importance of cleaning and disinfecting the toilet." This shows that the respondents must repeatedly teach their kids to do this. This implies that as early as they are, toilet training should internalize and develop within themselves. This further means that they should pay attention so that they will internalize the value of proper hygiene.

This study is supported by Luzviminda G. Rivera, RN, LPT, DPA, June 2020, on her advocacy for the promotion of correct hygiene and sanitation practices among school children. A clean environment has been the government's priority through the Department of Education to keep the learners safe and healthy, excel academically, and develop into productive citizens.

Table 5

Level of Parental Involvement in the Implementation of SBM WinS program in Health Education

Items	Mean Interpretation	
I am aware that...		
1. Attending the SBM WinS (School-based Management Wash in School) parents' orientation.	4.14	High Level
2. Spreading awareness on proper hygiene and practices.	4.11	High Level
3. Developing positive attitudes towards the SBM WinS program.	3.93	High Level
4. Distributing SBM WinS program fliers.	2.35	Low Level
5. Campaigning of SBM wins program benefits.	3.96	High Level
6. Teaching health education practices that are clean and green in our barangay to prevent the spread of diseases.	4.03	High Level
7. Promoting a healthy learning environment.	4.14	High Level
8. Attending forums, symposiums, and conferences about health education in our barangay.	4.10	High Level
9. Participating in LGU planning for strategic local actions.	4.05	High Level
10. Planning for the mobilization of stakeholders to support the SBM WINS program.	4.12	High Level
Overall Mean	3.89	High Level

Table 5 shows that the overall mean score of 3.89 indicated that the level of involvement of Parents in the implementation of SBM WinS program in the area of Health Education interpreted as high level.

The highest mean score was taken in item no. 1, "Attending the SBM WinS (School-based Management Wash in School) parents' orientation.," captured the numerical mean score of 4.14, and item no.7, "Promoting a healthy learning environment. which is interpreted as a high level. This implies that the respondents are responsible for attending the meetings and orientation since they were scheduled during the PTA meeting.

On the other hand, as shown in the same table, the lowest mean was obtained by Item no. 4, "Distributing SBM WinS program fliers." It has a mean score of 2.35, which is interpreted as a low level. This implies that parents will be less aware of the SBM WinS program. This further implies that most of the parents could not read, and most were laborers, only present at school occasionally.

This is supported by the DepEd IECA plan that Areas in school, specifically outside the school clinic, inside the classrooms, handwashing facilities, toilets, and school canteen, bulletin boards should have hygiene, sanitation, and healthy habits should be posted.

Level of involvement of Parents in the implementation of the SBM WinS program in the areas of Water and Sanitation, Hygiene and Deworming, and Health Education when grouped according to variables Age, Average Family Monthly Income, and Number of Children

Table 6

Level of Parental Involvement in the Implementation of SBM WinS program in Water and Sanitation when Grouped according to Age

Items	Younger		Older	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Teaching my children to bring water containers to school for their safety.	4.63	Very High Level	4.51	Very High Level
2. Teaching my children to take a bath daily.	4.62	Very High Level	4.46	High Level
3. Teaching my children the proper ways of hand washing.	4.63	Very High Level	4.49	Very High Level
4. Planning to have potable drinking water in school.	4.63	Very High Level	4.34	High Level
5. Implementing A handwashing area.	4.46	High Level	4.20	High Level
6. I am Teaching my children the importance of drinking 8-10 glasses of water daily.	4.60	Very High Level	4.49	Very High Level
7. Preparation of potable water supply.	4.54	Very High Level	4.47	High Level
8. Teaching my children the importance of taking a bath every day.	4.56	Very High Level	4.42	High Level
9. Teaching my children the proper disposal of waste.	4.58	Very High Level	4.39	High Level
10. Enough water supply for gardens and proper disposal of waste.	2.58	Moderate Level	2.93	Moderate Level
Overall Mean	4.38	High Level	4.27	High Level

Table 6 shows that the overall mean score in younger respondents is 4.38, and in older respondents, it is 4.27. It showed that in both items, the Level of Involvement of Parents in the implementation of the SBM WinS program in the area of Water and Sanitation when grouped according to Age is "high level."

The highest mean score was obtained by item no. 1 of the older respondents, "Teaching my children to bring water container in school for their safety." with a mean score of 4.51, interpreted as "very high level." This implies that the older respondents are aware of and keen on the safety of their children and have learned from their past experiences that clean water for drinking is necessary. The highest mean score was obtained by Item 1 in younger respondents, "Teaching my children the proper ways of hand washing with a mean of 4.63, interpreted as a Very high level. This implies that respondents were trained to demonstrate correct handwashing at home for the safety of their children.

UNICEF supports this that one of the cheapest, easiest, and most important ways you can keep your child safe from disease is to get them to wash their hands frequently.

Meanwhile, the lowest mean score of 2.59 younger respondents, 2:93 of the older respondents, was captured by item No. 10, "Enough water supply for gardens and proper disposal of waste," which was interpreted as a moderate level. It implies that the younger and older respondents have the same problem, such as the need for enough water supply as early as possible. This further means that plants might die and diseases might arise if proper waste disposal is not given proper attention. This further implies that absenteeism problems and drop-outs may rapidly increase.

This study is linked to WHO/UNICEF, 2019 "Ensuring availability and sustainable management of water and sanitation for all" by 2030 is included as the sixth Sustainable Development Goal in the Philippines. The proportion of the population with access to safely managed drinking water, safely managed sanitary facilities, and basic hand washing facilities was 47%, 52%, and 78%, respectively, in 2017.

Table 7

Level of Parental Involvement in the Implementation of SBM WinS program in Hygiene and Deworming when Grouped according to Age

Items	Younger		Older	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Teaching my children how to use the toilet properly.	4.54	Very High Level	4.39	High Level

2. Teaching my children to change clothes and underwear every day.	4.56	Very High Level	4.41	High Level
3. Teaching my children how to clean their hands after using the toilet.	4.50	Very High Level	4.34	High Level
4. Teaching my children the importance of cleaning and disinfecting the toilet.	3.25	Moderate Level	3.02	Moderate Level
5. Teaching my children the effect of having deworming twice a year.	4.15	High Level	4.07	High Level
6. Teaching my children to practice proper hygiene before deworming.	4.44	High Level	4.34	High Level
7. Teaching my children to inspect scalp, ears, eyes, nose and throat for any discharges and untoward signs and symptoms	4.52	Very High Level	4.49	Very High Level
8. Teaching my children to use soap in washing their hands before and after eating.	4.58	Very High Level	4.39	High Level
9. Teaching my children to use alcohol or hand sanitizers in school.	4.65	Very High Level	4.42	High Level
10. Teaching my children proper good grooming, like cutting nails and cleaning ears and nose.	4.69	Very High Level	4.47	High Level
Overall Mean	4.39	High Level	4.23	High Level

As gleaned in Table 7, the overall mean score in younger respondents is 4.39, and in older respondents, it is 4.23. This shows that the level of involvement of Parents in the implementation of the SBM WinS program in the area of Hygiene and Deworming when grouped according to Age was "high level."

The highest mean score was taken from item no. 10 of the younger respondent, "Teaching my children proper good grooming, like cutting nails and cleaning ears and nose." a mean score of 4.69 was interpreted as a very high level. This is implicit in the fact that the younger respondents had practiced good parenting skills, and it's essential to teach their children how to take care of themselves. Another highest mean score was taken from item no. Seven of the younger respondents, "Teaching my children to inspect scalp, ears, eyes, nose and throat for any discharges and untoward signs and symptoms," with a mean score of 4.49, interpreted as a very high level. It is implicit that the older respondents placed more emphasis and importance on teaching their children's physical health and personal cleanliness.

This citation is anchored to Clip Different – Transforming Ordinary, 2023 < UNK > "As your children grow older and learn more about the world, it's vital to teach them about essential hygiene practices they need to remain confident with themselves and function in the world around them. Along with hand washing, nail trimming is an easy routine to teach your children. These practices set them up for future success and allow them to be self-sufficient, making your life as a parent a little easier.

Meanwhile, the lowest mean score of 3.25 for younger respondents and 3.02 for older respondents, captured by item No. 4, "Teaching my children the importance of cleaning and disinfecting the toilet." is interpreted as a moderate level. It implies that the younger and older respondents have the same concerns. This means that younger and older respondents have the same perception, and there will be the possibility of spreading the infection to the whole family and even in school. This further implies that children are more prone to infectious diseases that can spread from one person to another; it will be a life-threatening condition and cause a financial burden to the family.

Table 8

Level of Parental Involvement in the implementation of SBM WinS program in Health Education when grouped according to Age

Items	Younger		Older	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Attending the SBM WinS (School-based Management Wash in School) parents' orientation.	4.29	High Level	4.00	High Level
2. Spreading awareness on proper hygiene and practices.	4.25	High Level	3.98	High Level
3. Developing positive attitudes towards the SBM WinS program.	3.98	High Level	3.88	High Level
4. Distributing SBM WinS program fliers.	2.25	Low Level	2.44	Low Level
5. Campaigning of SBM wins program benefits.	4.02	High Level	3.92	High Level
6. Teaching health education practice clean and green in our barangay to prevent the spread of diseases.	4.12	High Level	3.95	High Level
7. Promoting a healthy learning environment.	4.19	High Level	4.08	High Level

8. Attending forums, symposiums, and conferences about health education in our barangay.	4.13	High Level	4.07	High Level
9. Participating in LGU planning for strategic local actions.	4.19	High Level	3.93	High Level
10. Planning for the mobilization of stakeholders to support the SBM WINS program.	4.17	High Level	4.07	High Level
Overall Mean	3.96	High Level	3.83	High Level

As gleaned in Table 8, the overall mean showed that the level of involvement of parents in the implementation of SBM Wins program in the area of Health Education when grouped according to Age as rated by younger respondents with a mean of 3.96 and older respondents with the mean of 3.83 was interpreted as "High Level".

The result showed rated age categorized into younger and older; respondents rated the statement "Attending the SBM WinS (School-based Management Wash in School) parents' orientation," with younger respondents having the highest mean of 4.29, and older respondents having the mean of 4.08 "Promoting a healthy learning environment." On the other hand, the lowest mean score was 2.25 for "Distributing SBM WinS program fliers" for younger respondents and 2.44 for older respondents. This shows that younger and older respondents have the same problem encountered. This implies that the SBM WinS program needs to be fully understood by the parents; thus, they will become inactive to do so as well as they cannot teach proper hygiene and sanitation. Therefore, this further implies that the children are prone to acquiring diseases and get ill for a long time if not given adequate attention at school and home.

This result can be linked to the studies of Andriana Ivo & Kpodar, 2011; Delponte et al., 2015. Efficiency and effectiveness of information distribution by information repositories and access by information users will help developing countries eliminate extreme poverty and combat serious diseases.

Table 9

Level of Parental Involvement in the implementation of SBM WinS program in Water and Sanitation when grouped according to Average Family Monthly Income

Items	Lower		Higher	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Teaching my children to bring water containers to school for their safety.	4.40	High Level	4.82	Very High Level
2. Teaching my children to take a bath daily.	4.45	High Level	4.66	Very High Level
3. Teaching my children the proper ways of hand washing.	4.45	High Level	4.73	Very High Level
4. Planning to have potable drinking water in school.	4.40	High Level	4.59	Very High Level
5. Implementing A handwashing area.	4.28	High Level	4.39	High Level
6. Teaching my children the importance of drinking 8-10 glasses of water a day.	4.43	High Level	4.70	Very High Level
7. Preparation of potable water supply.	4.51	Very High Level	4.50	Very High Level
8. Teaching my children the importance of taking a bath every day.	4.34	High Level	4.70	Very High Level
9. Teaching my children the proper disposal of waste.	4.31	High Level	4.73	Very High Level
10. Enough water supply for gardens and proper disposal of waste.	2.70	Moderate Level	2.86	Moderate Level
Overall Mean	4.23	High Level	4.47	High Level

As gleaned in Table 9, the overall mean score in younger respondents is 4.23, and in older respondents, it is 4.47, which was interpreted as a "High level."

Table 9 shows the level of involvement of parents in the implementation of the SBM WinS program in the area of water and sanitation when grouped according to the average family monthly income.

The Result showed that the younger respondents had a very high mean score of 4.51 for "Preparation of potable water supply," and younger respondents had a 4.70 mean score for "Teaching my children the importance of taking a bath every day."

In contrast, the lowest mean score of 2.70 for the younger respondents and 2.86 for older respondents was captured by item number 10, "Enough water supply for gardens and proper disposal of waste." This implies that plants will die and cannot have a sustainable garden at school and home. This further implies hunger and lack of nutritious food served that lead to child's poor health condition. This further implies that they will become sick and malnourished, which will lead them to poor study habits. Thus, this further means that children will be inactive in school and eventually develop absenteeism problems. This result can be linked to the study of FAO et al., 2015 further noted that based on recent global estimates, about 795 million people were undernourished or unable to eat adequate nutritious food to have an active and healthy life.

Table 10

Level of Parental Involvement in the implementation of the SBM WinS program in Hygiene and Deworming when grouped according to Average Family Monthly Income

Items	Lower		Higher	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Teaching my children how to use the toilet properly.	4.34	High Level	4.64	Very High Level
2. Teaching my children to change clothes and underwear every day.	4.43	High Level	4.55	Very High Level
3. Teaching my children how to clean their hands after using the toilet.	4.36	High Level	4.50	Very High Level
4. Teaching my children the importance of cleaning and disinfecting the toilet.	3.01	Moderate Level	3.30	Moderate Level
5. Teaching my children the effect of having deworming twice a year.	3.99	High Level	4.30	High Level
6. Teaching my children to practice proper hygiene before deworming.	4.25	High Level	4.59	Very High Level
7. Teaching my children to inspect scalp, ears, eyes, nose and throat for any discharges and untoward signs and symptoms	4.37	High Level	4.70	Very High Level
8. Teaching my children to use soap in washing their hands before and after eating.	4.33	High Level	4.70	Very High Level
9. Teaching my children to use alcohol or hand sanitizers in school.	4.39	High Level	4.75	Very High Level
10. Teaching my children proper good grooming, like cutting nails and cleaning ears and nose.	4.48	High Level	4.73	Very High Level
Overall Mean	4.20	High Level	4.48	High Level

Table 10 shows the level of involvement of parents in the implementation of the SBM WinS program in the area of hygiene and deworming when grouped according to the average family monthly income.

As gleaned in Table 10, the overall mean score in lower income respondents is 4.48, and in higher income respondents is 4.48, which was interpreted as "High Level." Results further showed that the lower income respondents had a very high mean score of 4.48, "Teaching my children proper good grooming, like cutting nails and cleaning ears and nose." and higher income respondents had a 4.75 mean score, "Teaching my children to use alcohol or hand sanitizers in school."

In contrast, the lowest mean score of 3.01 of the lower income respondents, 3.30 of higher income respondents, captured by item 4, "Teaching my children the importance of cleaning and disinfecting the toilet.". This implies that germs wreak havoc on their health, causing various illnesses and sickness bugs. This further implies that children are more likely to suffer from respiratory problems, infections, allergies, or asthma. This further means the immune system may also be affected, leading to more frequent illnesses and, unfortunately,, death among children without proper health education and prevention of diseases.

This result can be linked to the study of Lu Z et al., 2020 stated that Water, sanitation, and Hygiene (WASH) is a parameter to assess the country's health and hygiene. Inadequate sanitation and lack of hygiene are considered factors of grave concern with a bearing on the health of ordinary people.

United Nations has set Sustainable Development Goals to provide safety after WASH practice in low and middle-income countries by 2030. In many countries, diseases of waterborne infections are still found to be a cause of concern, which causes many people to fall ill or even die. Diarrhea-related illnesses account for 4.1 percent of the global disease burden, which claims the lives of 1.8 million people, the majority of whom are children under the Age of five.

Table 11

Level of Parental Involvement in the implementation of SBM WinS program in Health Education when grouped according to Average Family Monthly Income

Items	Lower		Higher	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Attending the SBM WinS (School-based Management Wash in School) parents' orientation.	4.13	High Level	4.14	High Level
2. Spreading awareness on proper hygiene and practices.	4.16	High Level	4.02	High Level
3. Developing positive attitudes towards the SBM WinS program.	3.90	High Level	3.98	High Level
4. Distributing SBM WinS program fliers.	2.37	Low Level	2.32	Low Level
5. Campaigning of SBM wins program benefits.	3.94	High Level	4.00	High Level
6. Teaching health education practice clean and green in our barangay to prevent the spread of diseases.	3.99	High Level	4.09	High Level
7. Promoting a healthy learning environment.	4.16	High Level	4.09	High Level
8. Attending forums, symposiums, and conferences about health education in our barangay.	4.12	High Level	4.07	High Level
9. Participating in LGU planning for strategic local actions.	4.04	High Level	4.07	High Level
10. Planning for the mobilization of stakeholders to support the SBM WINs program.	4.13	High Level	4.09	High Level
Overall Mean	3.90	High Level	3.89	High Level

Table 11 shows the level of involvement of parents in the implementation of the SBM WinS program in the area of health education when grouped according to average family monthly income, which is categorized into lower family monthly income and higher family monthly income.

As gleaned in Table 11, the overall mean score in lower income respondents is 3.90, and in higher income respondents is 3.89 which was interpreted as "High Level". Results further showed that the lower income respondents had a very high mean score of 4.16, captured by items 2 and 7, "Spreading awareness on proper hygiene and practices." and "Promoting a healthy learning environment." and higher income respondents had 4.14 mean score "Attending the SBM WinS (School-based Management Wash in School) parents' orientation."

In contrast, the lowest mean score of 2.37 of the lower income respondents, 2.32 of higher income respondents, captured by item number 4, "Distributing SBM WinS program fliers". This implies that the parents do not fully understand the SBM WinS program. Thus, they will become inactive to do so as well as they cannot teach proper hygiene and sanitation at home. Thus, this further implies children are prone to acquire diseases and get ill for a long time if not given adequate attention at school and home.

This result can be linked to the studies of Andriana Ivo & Kpodar, 2011; Delponte et al., 2015. The efficiency and effectiveness of information distribution by information repositories and access by information users will potentially help developing countries eliminate extreme poverty and combat serious diseases.

Table 12

Level of Parental Involvement in the implementation of SBM WinS program in Water and Sanitation when grouped according to the Number of Children

Items	Few		Many	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Teaching my children to bring water containers to school for their safety.	4.70	Very High Level	4.48	High Level
2. Teaching my children to take a bath daily.	4.70	Very High Level	4.42	High Level
3. Teaching my children the proper ways of hand washing.	4.65	Very High Level	4.49	Very High Level
4. Planning to have potable drinking water in school.	4.63	Very High Level	4.37	High Level
5. Implementing A handwashing area.	4.54	Very High Level	4.17	High Level
6. I am Teaching my children the importance of drinking 8-10 glasses of water daily.	4.70	Very High Level	4.43	High Level
7. Preparation of potable water supply.	4.67	Very High Level	4.38	High Level
8. Teaching my children the importance of taking a bath every day.	4.67	Very High Level	4.35	High Level

9. Teaching my children the proper disposal of waste.	4.72	Very High Level	4.31	High Level
10. Enough water supply for gardens and proper disposal of waste.	2.85	Moderate Level	2.71	Moderate Level
Overall Mean	4.48	High Level	4.21	High Level

The table above shows the level of involvement of Parents in the implementation of the SBM WinS program in the area of Water and Sanitation when grouped according to the Number of Children.

The result showed an overall mean of 4.48, as rated by a few children, and a mean of 4.21, as rated by many numbers of children, which was interpreted as high on its level.

Results further showed that the small number of children respondents had a very high mean score of 4.72, captured by

item 9, "Teaching my children the proper disposal of waste," while many numbers of the children respondents had a 4.49 mean score captured by item 4, "Teaching my children the proper ways of hand washing."

In contrast, the lowest mean score of 2.85 of the few numbers of children respondents, 2.71 of many children respondents, captured by item number 10, "Enough water supply for gardens and proper disposal of waste." This implies that plants will die and cannot have a sustainable garden at school and home.

Thus, this further implies that children will be inactive in school and eventually develop absenteeism problems.

This result can be linked to the study of FAO et al., 2015 further noted that based on recent global estimates, about 795 million people were undernourished or unable to eat adequate nutritious food to have an active and healthy life.

Table 13

Level of Parental Involvement in the implementation of SBM WinS program in Hygiene and Deworming when grouped according to the Number of Children

Items	Few		Many	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Teaching my children how to use the toilet properly.	4.57	Very High Level	4.38	High Level
2. Teaching my children to change clothes and underwear every day.	4.54	Very High Level	4.43	High Level
3. Teaching my children how to clean their hands after using the toilet.	4.63	Very High Level	4.26	High Level
4. Teaching my children the importance of cleaning and disinfecting the toilet.	3.33	Moderate Level	2.98	Moderate Level
5. Teaching my children the effect of having deworming twice a year.	4.17	High Level	4.06	High Level
6. Teaching my children to practice proper hygiene before deworming.	4.50	Very High Level	4.31	High Level
7. Teaching my children to inspect scalp, ears, eyes, nose and throat for any discharges and untoward signs and symptoms	4.59	Very High Level	4.45	High Level
8. Teaching my children to use soap in washing their hands before and after eating.	4.61	Very High Level	4.38	High Level
9. Teaching my children to use alcohol or hand sanitizers in school.	4.70	Very High Level	4.42	High Level
10. Teaching my children proper good grooming, like cutting nails and cleaning ears and nose.	4.65	Very High Level	4.52	Very High Level
Overall Mean	4.43	High Level	4.22	High Level

Table 13 shows the level of involvement of Parents in the implementation of the SBM WinS program in the area of Hygiene and Deworming when grouped according to the Number of Children as categorized into few numbers of children and many numbers of children was high level where few numbers of children had the mean of 4.43 and many numbers of respondents had the mean of 4.22.

Result further showed that that the few numbers of children respondents have a very high mean score of 4.65 captured by item 10 "Teaching my children proper good grooming, like cutting nails and cleaning ears and nose" while many number of children respondents having 4.52 mean score captured by item 10 "Teaching my children proper good grooming, like cutting nails and cleaning ears and nose".

In contrast, the lowest mean score 3.33 of the few numbers of children respondents, 2.98 of many children respondents captured by item number 4, "Teaching my children the importance of cleaning and disinfecting the toilet". This implies children more likely to suffer with respiratory problems, infections, allergies or asthma. This further implies, immune system may also be affected, leading to more frequent illnesses and unfortunately lead to death among children without proper prevention to this case.

This result can be linked to the study of Lu Z et al, 2020 stated that, Water, sanitation and Hygiene (WASH) is a parameter to assess the country on health and hygiene.

Inadequate sanitation and lack of hygiene are considered as factors of grave concern with a bearing on health of common people.

United Nations has set Sustainable Development Goals to provide safe here after WASH practice in low and middle-income countries by 2030.

Table 14.

Level of Parental Involvement in the implementation of SBM WinS program in Health Education when grouped according to Number of Children

Items	Few		Many	
	Mean	Interpretation	Mean	Interpretation
I am involved in....				
1. Attending the SBM WinS (School-based Management Wash in School) parents' orientation.	4.35	High Level	3.98	High Level
2. Spreading awareness on proper hygiene and practices.	4.26	High Level	4.00	High Level
3. Developing positive attitudes towards the SBM WinS program.	4.00	High Level	3.88	High Level
4. Distributing SBM WinS program fliers.	2.46	Low Level	2.28	Low Level
5. Campaigning of SBM wins program benefits.	4.00	High Level	3.94	High Level
6. Teaching health education practice clean and green in our barangay to prevent the spread of diseases.	4.07	High Level	4.00	High Level
7. Promoting a healthy learning environment.	4.20	High Level	4.09	High Level
8. Attending forums, symposiums, and conferences about health education in our barangay.	4.13	High Level	4.08	High Level
9. Participating in LGU planning for strategic local actions.	4.24	High Level	3.92	High Level
10. Planning for the mobilization of stakeholders to support the SBM WINs program.	4.22	High Level	4.05	High Level
Overall Mean	3.99	High Level	3.82	High Level

Table above showed the level of involvement of Parents in the implementation of SBM WinS program in the area of Health Education when grouped according to Number of Children as categorized into few numbers of children with the mean of 3.99 and many numbers of children with the mean of 3.82 was interpreted as high level.

Results further showed that the few numbers of children respondents had a very high mean score of 4.35, captured by item 1, "Attending the SBM WinS (School-based Management Wash in School) parents' orientation," while many number of children respondents had a 4.09 mean score, captured by item 7 "Promoting a healthy learning environment".

In contrast, the lowest mean score 2.46 of the few numbers of children respondents, 2.28 of many children respondents captured by item number 4, "Distributing SBM WinS program fliers". This implies that SBM WinS program is not fully understood by the parents, thus they will become inactive to do so as well as they cannot inculcate proper hygiene and sanitation at home.

Thus, this further implies children are prone to acquire diseases and will get sick if not given proper attention at school and home.

This result can be linked to the studies of Andriana Ivo & Kpodar, 2011; Delponte, et al., 2015. Efficiency and effectiveness of information distribution by information repositories and access by information users, will potentially help developing countries to eliminate extreme poverty and combat serious diseases.

Conclusions:

The findings of this study have the following conclusions.

Parental engagement involves commitment and proactive participation from parents towards the school and their children. As a result of insufficient water supplies, plants will perish, leading to contamination and potentially resulting in the spread of diseases. It can also be inferred that plants will wither, leading to contamination and an increased risk of disease spread. Additionally, it can be inferred that there will be a rise in infections among children and families, which may contribute to higher rates of absenteeism and school dropouts. Parents had limited knowledge about the program's implementation, leading to their lack of active participation.

Acknowledgement

The researcher extends heartfelt gratitude to all who generously contributed their time, expertise, and support to the completion of this study. Deep thanks are offered for the strength, wisdom, and guidance that sustained this journey. Appreciation is given to those who provided insightful feedback, technical and grammatical assistance, inspiration, and unwavering encouragement throughout the research process. Special acknowledgment is made to the family, advisers, and colleagues whose dedication, motivation, and companionship made the research journey meaningful and fulfilling.

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