Accelerating Hand Hygiene

A Government Leadership Meeting

6 July 2021
Kitch Bawa

Sanitation Project Manager
AMCOW

Nigeria
Hand Hygiene for All Initiative

VISION: Support national governments in developing and implementing sustainable hand hygiene programs.
Flagship Programs

To capitalize on the unique moment we’re in, HH4A is implementing three flagship programs.

**The State of the World’s Hygiene**
Reflecting the times we’re in with unprecedented attention on hand hygiene, this sister report to 2020’s *State of Sanitation* report captures the latest statistics on hygiene, and progress towards achieving the SDG target. It is a call to action for the sector stakeholder on the critical steps we all must take to achieve hand hygiene for all.

**Country Roadmaps**
Many countries expressed a pressing need for guidance on improving hand hygiene during COVID-19. HH4A has developed and are field-testing roadmaps to help governments improve policies, mainstream effective approaches, and facilitate cross-sectoral dialogue to establish sustainable hand hygiene programs.

**Costing Tools**
In parallel with the roadmaps, HH4A is providing tools to help countries cost hand hygiene interventions in their country. These tools will help guide the national budget process and quantify the necessary global investment in hand hygiene.
Results to Date

Over 35 countries are engaged in hand hygiene roadmaps and related hygiene policies. We’ll hear from five today.
Sunil Kumar Das
Joint Secretary
Ministry of Water Supply
Nepal
Nepal: Roadmap for HH4A (2021-2030)

• **Background:** Call for HH4A by WHO and UNICEF on 26 June 2020

• UNICEF and WHO Nepal sent a joint letter to five ministries and NPC

• **Technical working group** for the national roadmap

• **High level coordination meeting** (kick-off), Hon NPC Member as chief guest

• **Consultative process** (12 groups-3077 participants). It is expected to complete by July 2021 (target to endorse and launch on Hand Washing Day, 15 Oct, 2021)
Enabling Environment

• Hand Hygiene in Policies
  • Constitution of Nepal, 2015
  • Nepal’s commitment to SDG’s goal, 2016
  • Multi Sector Involvement
  • National Health Policy, 2019

• WASH guidelines and standards
  • Total Sanitation Guideline, 2017
  • WASH in Schools Procedures, 2018
  • National Standards for WASH in Health Care Facilities, 2020
  • National Standards for Instant Hand Sanitizer, 2020

• Sector Development Plan
  • Sanitation and Hygiene Master Plan, 2011
  • WASH Sector Development Plan, 2016-2030
  • “WASH plans” in all local governments/municipalities
Call to Action for HH4A

• Rt. Hon’ble President’s Call to Action for WASH against COVID-19
  - Appeal, inauguration, campaign

• A month long hand washing campaign completed - 29 Sep-30 Oct, 2020

• World Hand Hygiene Day 2021- 5 May

• WASH Account

• Piloting of the Sanitation Policy Monitoring and Assessment tool (PMAT)

• SWA: FMM on 2 Dec 2020
**Current Situation**

**Access to hand washing facility with soap**

Availability of Hand Washing Facility with Soap at Household Level (%) (Source, NHDS 2011, MICS 2014, NDHS 2016, and MICS 2019)

- 2010: 48%
- 2012: 73%
- 2014: 47%
- 2016: 80%

**NOTE:** During the COVID-19 Pandemic washing hands frequently with soap increased to over 90% (Source: UNICEF Family Tracker Survey, July 2020)

**Hand Washing Station with Soap and Water in School (DOE/WFP 2018), N=3534**

- 0.2%: 2.7%
- 7.6%
- 51%

**Soap and Running Water Available in HCF (HFS, 2015), N=963**

- Safely managed: 19%
- Basic service: 46%
- Limited service: 0.7%
- Unimproved: 36.2%
- No facility: 7.1%

**Status of Water Supply and Hygiene (MICS, 2020), %**

- 2%
- 18%
- 80%

During the COVID-19 Pandemic washing hands frequently with soap increased to over 90% while 28% also used sanitizers (Source: UNICEF Family Tracker Survey, July 2020)
Process/Methodology for Roadmap (RM) Preparation

- Methodology/process development
- Formation of TWG
- Review policies, data and identify gaps and opportunities

Preparation

- Consultation meetings with stakeholders - Health, Education, Prov/Local Govts, DPs, private sectors etc.
- Opinion poll for baseline data
- Collection of innovative solutions, best practices

Engagement of Stakeholders

- Prepare costed Road Map
- Share the draft RM to the stakeholders & TWG
- Incorporate comments, disseminate and finalize the RM

Finalization of RM on HH4A
Hand Hygiene coverage & availability of materials (%)

- **Household**: 57.7% coverage, 48.3% availability
- **School**: 57.8% coverage, 44.4% availability
- **HCF**: 74.0% coverage, 39% availability
- **Public Places**: 31.7% coverage, 21.2% availability

**Critical moments**: Hand washing after defecation, before eating food and feeding to child, after cleaning child’s bottom, before and after looking after a patient, and after touching frequently touched surface or objects.
Conclusions and way forward

• COVID-19 has provided great opportunity on the advocacy and public awareness showing the importance of hand hygiene more than ever.

• Sustainability of the facilities and behavior change is challenging. So national roadmap should cover the following key components for
  • Strengthening the system and services
  • Costed plan should be developed for short/medium/long term
  • Working with multiple sectors including private entrepreneurs
  • Strengthening capacity and institutional mechanism of local levels
  • Narrowing the gap between urban/rural, rich/poor
  • Monitoring and review
  • Learning from other countries specially on the sustainability
Eng. Ana Paula Cardoso

Head, Dept of Environmental Health, MoH

Mozambique
Hand hygiene for all in Mozambique

Sharing the early experiences of mobilizing multi-ministerial support for the development of a HH4A roadmaps under the leadership of the Ministry of Health.
Status: water, sanitation & hygiene

- Hand hygiene access is still limited, both in domestic and institutional settings;
- Access to handwashing facilities and services in households, schools and health care facilities is alarmingly low;
- Access to handwashing facilities with available water and soap:
  - Health care facilities - 40%
  - Family compounds - 26%
  - Schools - 15%
Status: water, sanitation & hygiene

Households, WHO/UNICEF Joint Monitoring Programme (JMP) 2019
- Access to basic drinking water: 56% (urban: 84%, rural: 40%)
- Access to basic sanitation: 29% (urban: 52%, rural: 17%)
- Access to basic hygiene: 26% (urban: 47%, rural: 17%)* DHS 2011 (No JMP estimates available)

Schools, JMP 2018
- Limited access to water: 31% (urban: 46%, rural: 28%)
- Access to basic sanitation: 48% (urban: 50%, rural: 46%)
- Access to basic hygiene: 15% (urban: 15%, rural: 11%)

Health care facilities, JMP 2020
- Access to basic drinking water: 56% national
- Access to basic sanitation: 43% national
- Access to basic hygiene: 40% rural (No national estimate available)

Fonte: JMP https://washdata.org/data/downloads#MOZ

“O nosso maior valor é a vida”
Status: water, sanitation & hygiene

- Multisectoral technical group for water, sanitation and hygiene;
- Composed of various governamental institutions, civil society organisations and non-governmental organisations and partners;
- This group aims to facilitate technical dialogue water, sanitation and hygiene, develop norms, monitor activity, and share experiences, among other activities.
History

Hand hygiene behaviour change:

• National Campaign on Environmental Hygiene (2008)
• National Health Promotion Strategy
• Action Plan for Promotion of Hygiene and Cleanliness
• National Strategy for Community Response to COVID-19 (2020)
• Formative research to identify principal barriers to hygiene practice

“O nosso maior valor é a vida”
Barriers

Out of these various initiatives, the following key barriers have been identified over the years:

• Lack of national norms and standards for water, sanitation and hygiene services in schools and health care facilities.

• Capital investments in health care facilities and schools often exclude the necessary infrastructure and services for water, sanitation and hygiene. Where they do occur, they vary, depending on financing agency.

• Routine sectoral monitoring systems used by the Ministry of Education and Ministry of Health do not include water, sanitation and hygiene indicators.
Handwashing during COVID-19

- The COVID-19 pandemic has led to greater government prioritisation of hand hygiene and hand hygiene practices have increased;
- A recent inquiry showed strong general public compliance with hand hygiene as a preventative measure against COVID-19 (up to 80%).
- The Education Sector mandated that access to water, and handwashing stations are minimum conditions for the reopening of schools.
- The Health Sector equipped COVID-19 isolation centres with handwashing stations, as an essential requirement for Infection, Prevention and Control (IPC) measures.
- Markets and other public spaces are being reorganised to reduce the risk of transmission. This includes availability of handwashing stations and supporting messaging at entrances and exits.
Progress in health care facilities

- Multi-sectoral group on water, sanitation and hygiene in health care facilities;
- Technical norms on water, sanitation and hygiene in health care facilities, endorsed by the multi-sectoral group;
- Terms of reference complete to carry out situational analysis;
- Numerous initiatives to improve water, sanitation and hygiene in health care facilities are in progress, with the support of key partners including UNICEF, WaterAid and World Vision.
Progress in health care facilities

- WASHFIT training is planned – global tool developed by WHO/UNICEF;
- Proposal developed for WASH indicators to be included in the national health monitoring system.

Mozambique indicators focus on the above 4 areas
Progress in schools

• Government commits to rehabilitation/ construction of WASH systems in the context of efforts to return children to school.

• Capacity development to ensure sustainability of service delivery:
  - Creation of maintenance teams,
  - Reinforced education/promotion of hand hygiene
  - Improved monitoring of practices through new database.
Progress in communities

- Mass media campaign launched by government to increase hand hygiene in the context of COVID-19
  - Media;
  - Radio messaging in various national languages;
  - TV spots

Mozambican health educators after installing a "tippy-tap" for handwashing. Credit: Carlos Serra
Next steps

• The Global Hand Hygiene For All initiative launched in 2020 presents a further opportunity to accelerate access to hand hygiene services and sustain behaviours.

• The Global initiative complements ongoing government efforts in line with the current State of Public Emergency, reinforces the importance of hand hygiene to the prevention of COVID-19 and contributes to making hand hygiene behaviours everyone’s business. This will prevent infectious disease transmission now and in the future.
Next steps

- Organise an advocacy workshop to launched the Hand Hygiene for All initiative;
- Develop an interministerial roadmap to achieve universal hand hygiene;
- Support national budgetary processes to ensure allocation of funds;
- Promote the prioritisation of hand hygiene investments within other key ministries, including for infrastructure and promotion activities;
- Promote the importance of hand hygiene financing among key development partners.
Investing in hand hygiene promotion, with both the present and future in mind!

Ana Paula Cardoso Thuzine
Email: apaulacardoso34@hotmail.com
Environmental Health Department, Ministry of Health (MISAU)
Dr. Beverley Ho

Concurrent Director IV, Health Promotion Bureau & Disease Prevention and Control Bureau (MoH)

Philippines
7 PRIORITY AREAS

1. **Diet and Exercise**
   - Enabling improved nutrition and increased physical activity

2. **Environmental Health**
   - Tackling environmental and climate impacts on health

3. **Immunization**
   - Promoting vaccine use

4. **Substance Use**
   - Preventing tobacco use, illicit drug use & harmful alcohol use

5. **Mental Health**
   - Increasing psychosocial and mental well-being

6. **Sexual and Reproductive Health**
   - Promoting positive sexual and reproductive behavior

7. **Violence and Injury Prevention**
   - Protecting communities from violence and injury
PA2: Scope & Challenges

- **air pollution** (both outdoor and inside the household)
- **access to safely managed water and sanitation, proper waste management**
- **crowding** of houses in communities

**Context: Devolved to 1500+ Local Governments**

- **7 million** rely on unsafe and unsustainable water sources
- **24 million** lack access to improved sanitation
- **93%** have handwashing facilities at home, but this does not translate to actual practice
PA2: National Policy Framework

- **Sanitation Code**
  - Provisions on installation and maintenance of handwashing facilities or lavatories in various settings

- **Local Government Code**
  - LGUs are granted powers to discharge functions and responsibilities to provide basic services and facilities, including those related to general hygiene and sanitation

- **National Sustainable Sanitation Plan (AO 2010-0021)**
  - Declared sustainable sanitation as national policy and priority, anchored on the principle that it is a public good, fundamental human right, and essential component of total human development

- **Philippine Approach to Total Sanitation (AO 2019-0054)**
  - Four sanitation levels for LGUs to determine their baseline status and to identify priority program components suited to their target level

- **Risk-Based Public Health Standards for COVID-19 Mitigation (AO 2020-0015)**
  - Objective 2 for reducing transmission includes the ff:
    - Encourage frequent hand washing with soap and water, such as through appropriate information and education campaigns.
    - Ensure access to basic hygiene facilities such as toilets, handwashing areas, water, soap, alcohol/ sanitizer.
Recommendations

1. Increase number of **accessible and well-maintained** handwashing facilities and/or sanitation stations in public spaces with sufficient **supplies**

2. Install **behavioral nudges** in hand hygiene facilities

3. Develop **complementary strategies** to further encourage and sustain proper
Hygiene Behavioral Nudges Ordinance

Key Features

- Establishment and Maintenance of an Enabling Environment
- C/MHO as Principal Implementer of Behavioral Nudges Master Plan
- Installation of Customized Behavioral Nudges for Identified Priority Settings
- Reporting and Monitoring
- Auxiliary Programs/Activities
- Mandatory Installation as Regulatory Requirement
1 Policy Review and Consultative Process
   • Review of national policy framework & literature on behavioral nudges
   • Comprehensive nudge guide for handwashing developed by partners at COVID-19 Hygiene Hub
   • Review and input from DOH - Disease Prevention and Control Bureau, Legal Service, Policy & Technology Division, and Hygiene Hub

2 LGU Cascade and Uptake of Policy
   • Orientation with CHDs and LGUs to cascade the playbook and discuss policy content
   • Department Memorandum 2021-0244 enjoining LGUs to utilize the playbooks and the materials in them, including template policy
Activity Timeline

1. Revisit and review provisions of existing local sanitation plans and policies
2. Develop Behavioral Nudges Master Plan for hygiene and sanitation promotion
3. Convene Local Health Board and consult with other relevant stakeholders and representatives
4. Select priority settings and map out strategic areas with handwashing facilities and sanitation stations
5. Design, develop, test, and produce behavioral nudge materials
6. Install customized behavioral nudge materials in identified areas
7. Develop and implement communication or other auxiliary activities
8. Develop and implement a local monitoring system for routine inspection, maintenance, and evaluation
9. Modify existing set or develop, produce, and install a new set of behavioral nudge materials
Playbook Chap 3: Capacity Building

Health Promotion and Behavior Change

Proper Sanitation and Hygiene

Implementing a Behavioral Nudge Intervention

Capacity Building Outline

FOR CITY/MUNICIPAL HEALTH OFFICE AND OTHER IMPLEMENTERS

Capacity building and technical support should be provided to those who will be in charge of planning and implementing the installation of behavioral nudges and other related interventions. Other stakeholders who are directly or indirectly involved in the interventions may also benefit from capacity building and this may also support advocacy and communication efforts. The following outlines proposed training topics and modules, as well as learning outcomes expected after undergoing capacity building workshops.

LEARNING OUTCOMES

At the end of these modules, participants from the City/Municipal Health Office and other offices or individuals involved in planning and implementation should be able to:

1. Understand the importance of proper sanitation and hand hygiene in infection prevention and control in various settings;
2. Understand and apply the fundamentals of behavior-centered design in planning for behavioral nudges in public spaces; and
3. Produce an LGU Behavioral Nudges Master Plan for hygiene and sanitation promotion in line with the principles of the New Normal.

MODULES

The following are proposed topics for workshops designed to equip implementers and stakeholders with basic knowledge and specific technical skills required for the intervention. These trainings may be prepared specially to suit the determined training needs of the participants or may be provided by local community organizations, non-government organizations, or government training bodies.

Health Promotion and Behavior Change
1. Introduction to Health Promotion and Behavior Change
2. Designing Effective Behavior Change Programs

Proper Sanitation and Hygiene
1. Introduction to Water, Sanitation, and Hygiene (WaSH)
2. Proper Sanitation and Hand Hygiene in the New Normal
3. Sustaining WaSH in the Community

Implementing a Behavioral Nudge Intervention
1. Principles for Planning and Design (e.g., Behavior-Centered Design)
2. Developing a Behavioral Nudge Master Plan
3. Designing Nudges for Sanitation and Hygiene
4. General Principles for Monitoring and Evaluation
# Basic Resources

<table>
<thead>
<tr>
<th>Behavioral Nudge Designs/Materials</th>
<th>Resources</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Printing/painting supplies and equipment (stickers/laminated/stencil material)</td>
<td># of each type of nudge per facility</td>
</tr>
<tr>
<td></td>
<td>Soap &amp; soap dish/dispenser</td>
<td># of facilities</td>
</tr>
<tr>
<td></td>
<td>Tissue/paper towel &amp; dispenser</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bathroom mirror</td>
<td></td>
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<tr>
<td>Handwashing Facilities/Sanitation Stations</td>
<td>Costs for construction/rehabilitation, maintenance</td>
<td># of sites</td>
</tr>
<tr>
<td></td>
<td>Utilities and supplies (soap/alcohol)</td>
<td></td>
</tr>
</tbody>
</table>
Monitoring and Evaluation

Structured direct observation and a spot-check by the designated monitoring officer/s

- 2 hour usage rate of facilities with nudges installed (actual vs. potential users)
- Amount of soap/water used
- Number of facilities in identified

![Facility Monitoring Form](image-url)
Playbook Chap 6: Sample Communication Materials
Germ stickers will be placed on surfaces of frequently touched objects like comfort room doorknob, toilet flush, workstations, tables, and more. These shall implicitly tell people to be cautious because germs could stay for hours or days on such items.
Colorful handprints will be placed on surfaces, above the sink or near the handwashing facility. These stickers will serve as cues for proper hand hygiene behaviors.
Brightly colored footprints or shoe stickers shall be placed on the floor, leading people to the handwashing station. These stickers will be helpful especially for handwashing areas that are separated from comfort rooms.
Different colored arrows will be placed on the floor. This will serve as a pathway towards the handwashing facility. Just like the footprints, this will be beneficial for areas with a separate handwashing area.

Plain arrow versions
A pair of “watchful eyes” shall be attached on the surface above or near the handwashing station. It shall create an atmosphere that others are observing you and that you are being watched to see if you are doing proper hand hygiene behaviors.
A printable stencil version of several of the nudges are also made available. These could be printed, cut out, and painted in strategic areas to reinforce desired behaviors.
Mrs. Yemisi Akpa

Chief Scientific Officer, Water Quality Control and Sanitation Department

Nigeria

Dr. Ehab Attia

General Manager, Infection Control Dept. (MoH)

Egypt
Kitch Bawa
Sanitation Project Manager
AMCOW
Nigeria
Dr. Maria Neira

Director,
Environment,
Climate Change &
Health
WHO

Switzerland
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THANK YOU