

**Global Scaling Up Handwashing Project**

# Four-Country Synthesis of the Enabling Environment for Handwashing with Soap Endline Analysis

**Catherine O'Brien and Michael Favin**

October 2012

Global Scaling Up Handwashing is a Water and Sanitation Program (WSP) project focused on applying innovative behavior change approaches to improve handwashing with soap behavior among women of reproductive age (ages 15–49) and primary school-age children (ages 5–9). It is being implemented by local and national governments with technical support from WSP in four countries: Peru, Senegal, Tanzania, and Vietnam. For more information, please visit [www.wsp.org/scalinguphandwashing](http://www.wsp.org/scalinguphandwashing).

This Working Paper is one in a series of knowledge products designed to showcase project findings, assessments, and lessons learned in the Global Scaling Up Handwashing Project. This paper is conceived as a work in progress to encourage the exchange of ideas about development issues. For more information please email Catherine O'Brien or Michael Favin at [wsp@worldbank.org](mailto:wsp@worldbank.org) or visit [www.wsp.org](http://www.wsp.org).

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# Glossary

AGETIP	Agence d'Exécution des Travaux d'Intérêt Public contre le sous-emploi: Public Works and Employment Agency, Senegal
ARI	Acute respiratory infection
BCC	Behavior Change Communication
DCC	Direct consumer contact
DD	Diarrheal disease
DED	District Executive Officer, Tanzania
EE	Enabling environment
FLA	Front line activator, Tanzania
HWI	Handwashing Initiative, Peru
HWWS	Global Scaling Up Handwashing Project
IPC	Interpersonal communication
M&E	Monitoring and evaluation
MDGs	Millennium Development Goals
MEF	Ministry of Economy and Finance, Peru
MIS	Management information system
MM	Mass media
MoE	Ministry of Education
MoH	Ministry of Health
MoHSW	Ministry of Health and Social Welfare, Tanzania
MOU	Memorandum of Understanding
NGOs	Non-governmental organizations
NTP III	National Target Program III, Vietnam
PEPAM	Programme d'eau potable et d'assainissement du Millénaire: Millennium Program for Drinking Water and Sanitation, Senegal
PHAST	Participatory Hygiene and Sanitation Transformation
PPPHW	Public Private Partnership for Handwashing
TSSM	Total Sanitation and Sanitation Marketing
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VEO	Village Executive Officer, Tanzania
VWU	Vietnam Women's Union
WSP	Water and Sanitation Program

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# Executive Summary

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The Water and Sanitation Program (WSP)'s Global Scaling Up Handwashing Project (HWWS) has ended its four-year implementation period (2007–2011). The project tested whether innovative approaches can generate large-scale and sustained increases in handwashing with soap at critical times among poor and vulnerable mothers and children in Peru, Senegal, Tanzania, and Vietnam. In 2007, baseline enabling environment (EE) assessments were conducted in each of these countries to better understand the programmatic and institutional conditions needed to scale up, sustain, and replicate project interventions. The assessments were repeated after three years of project implementation to assess progress in strengthening the EE and to recommend additional steps to improve the EE as the projects wound down. The purpose of this report is to synthesize the main findings from the four endline EE assessment reports, including conclusions and lessons learned as well as recommended interventions and practices that can be used to strengthen the EE in the future.

HWWS developed a common conceptual framework within which the EE assessments were conducted. The framework consists of nine dimensions that are considered to encompass the factors that support long-term, sustainable, at-scale handwashing with soap programming. They reflect a series of assumptions underpinning the key elements that the project considers essential for sustaining improvements in handwashing promotion, and ultimately improved handwashing practice. HWWS believes that although there is no guarantee of sustainability, programs can enhance the chances of sustained actions by assessing the EE at baseline and then, during implementation, taking steps to improve key sustainability factors.

The nine dimensions of the conceptual framework are:

- Policy, Strategy, and Direction
- Partnerships
- Institutional Arrangements
- Program Methodology

- Implementation Capacity
- Availability of Products and Tools
- Financing
- Cost-Effective Implementation
- Monitoring and Evaluation

The definition of each dimension, the project's original assumptions for each dimension, as well as some specific findings and recommendations from the four EE assessment reports, are provided in Section IV.

Endline EE assessments were conducted in the four project countries in late 2010 and early 2011. Major findings concerning each of the nine dimensions across the four countries include:

***Policy, Strategy, and Direction:*** This was a fairly strong dimension in all four countries. HWWS *Peru* successfully advocated for promotion of handwashing with soap to become part of numerous programs and strategies of the ministries of health, education, women and social development, and regional and district governments, in part by successfully promoting handwashing with soap as an effective way to address the national priority of reducing child malnutrition.<sup>1</sup> In *Vietnam*, through its work with the ministries of health and education, as well as the Vietnam Women's Union (VWU), the HWWS project has helped to raise the importance of handwashing with soap as a critical component of any sanitation and hygiene program. Although *Tanzania* lacks an approved sanitation policy encompassing handwashing with soap, the government has included handwashing with soap in the national growth and poverty reduction strategy and is working with partners to develop a sanitation policy and strategy that includes handwashing with soap as a vital component. In *Senegal*, the project joined with the National Association of Midwives and the National Nutrition Program—two strong structures supporting the Millennium Development Goals (MDG) for sanitation. These agencies and programs are considered strong enough to set an example for other

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<sup>1</sup> In Peru, the HWWS project was referred to as the Handwashing Initiative (HWI).

bureaus and agencies working on hygiene and sanitation on how to effectively promote at-scale handwashing.

**Partnerships:** The *Peru* project has successfully generated partnerships with government at all levels, NGOs, soap companies, mining companies, a plastics manufacturer that produces a handwashing station to promote and facilitate handwashing with soap, and other businesses. HWWS *Vietnam* helped to facilitate a public-private partnership that led to the development of a model handwashing station (not yet marketed), and has trained staff of the VWU members to promote handwashing with soap at scale. In *Tanzania*, HWWS worked with the health, water, and education ministries, the Prime Minister's Office of Regional Affairs and Local Government (PMO-RALG), and other stakeholders to develop a process for the four ministries responsible for sanitation to work together on policy and strategy development to promote handwashing with soap. The *Senegal* program has worked closely with national partners to train their staff to incorporate handwashing with soap into their daily work. Government agencies such as the Millennium Program for Drinking Water and Sanitation (PEPAM) look to the project to help them forge partnerships with private companies to promote improved sanitation, including handwashing.

**Institutional Arrangements:** HWWS *Peru* began with formal arrangements with key national governmental ministries but later focused on specific institutional commitments in work plans and budgets of specific national programs and local governments. With increasing governmental decentralization, the overall focus has shifted to forming, or simply supporting, more local coalitions and programs. In contrast, HWWS *Vietnam* worked with existing governmental networks (e.g., the VWU, Ministry of Health (MoH), and other key ministries) with clearly defined responsibilities for sustained promotion of handwashing with soap. HWWS *Tanzania* followed a strong recommendation from the EE baseline to support institutional coordination among key ministries, donors, NGOs, and other stakeholders to promote handwashing with soap in policy, strategy development, and implementation. HWWS *Senegal* focused institutional support on AGETIP (Agence d'Exécution des Travaux d'Intérêt Public contre le sous-emploi), which is responsible for coordinating efforts

to reach the sanitation MDGs and PEPAM, tasked with awarding US\$5 million in Global Sanitation Fund (GSF) money to improve hygiene and sanitation communication, resulting in a commitment from both to *always* include handwashing with soap in their projects.

**Program Methodology:** All country programs made great strides in developing and promoting the program methodology, and opinions on the approach and materials were generally quite positive. Most stakeholders in all countries appreciated the project's approach to handwashing with soap training and communication as practical, well developed, and useful and were eager to adapt and use it. In *Peru*, national programs of the ministries of health, education, and women have officially adopted the project's methodology (training and communication materials). The *Vietnam* MoH requested that HWWS assist them to develop a handwashing with soap integration kit for use by MoH staff, as did the VWU. In *Tanzania*, stakeholders asked HWWS to help coordinate a review of all handwashing with soap training and communication approaches currently in use, but the government has not yet agreed on a preferred model for promoting handwashing. Stakeholders in *Senegal* expressed a desire to learn more about the project's approach to training and developing communications materials for promoting handwashing with soap. Concerns were raised in *Vietnam* about the cost of reproducing materials. In *Tanzania*, some local governments thought that the promotional events component should have trained local cultural organizations rather than use a professional marketing firm from Dar es Salaam.

**Implementation Capacity:** Through advocacy, coordination, training of trainers, and provision of communication and program-support materials, HWWS *Peru* has contributed to increasing handwashing with soap implementation capacity at regional and district levels. A remaining area of concern, related to the country's rapid decentralization, is the capacity of some regional and district governments in planning, project preparation, proposal writing, efficient implementation, and other basic governing skills. HWWS *Vietnam* focused on training staff from the VWU, national and provincial staff from various ministries, select NGOs, and World Bank water project staff to increase capacity to

promote handwashing. *Tanzania* trained local government staff and volunteers to implement handwashing with soap at scale, and by 2010 turned to focus on supporting the Ministry of Health and Social Welfare's (MoHSW) lead role in the sanitation sector. Given the nature of the sector in *Senegal*, HWWS's MOUs with the National Association of Midwives and the National Nutrition Program to train national and local staff to promote handwashing with soap in their regular programs appear to be a viable way to create nationwide capacity to promote handwashing.

**Availability of Products and Tools:** Soap was found to be widely available in all four countries, although in *Tanzania* and *Senegal* some families find it difficult to pay for soap and the 2008 formative research in Peru found that mothers were reluctant to “waste” soap on handwashing. Communities in all countries have some access to water, but access may be time consuming, seasonal, and/or only for limited hours—a problem for sustaining the practice of handwashing. The HWWS projects in all four countries helped develop new handwashing station devices or promoted existing products that minimize water used for handwashing, and encouraged people to provide a place for soap and water for handwashing in the house.

**Financing:** By 2010 funding for handwashing with soap promotion in *Peru* had shifted from donors to national public and private organizations and programs. Peru is the only one of the four project countries to have made this shift. In *Vietnam*, by 2010 the government was discussing increased allocations for the communication support of improved hygiene, sanitation, and water supply. HWWS found that in *Tanzania* in 2010, funding allocated for sanitation and hygiene was moved from the Ministry of Water to the MoHSW because of lack of progress in improving sanitation and hygiene. The major change found in *Senegal* was a shift away from emphasis on securing funding for the Public-Private Partnership for Handwashing (PPPHW) to ensuring the HWWS project's support for PEPAM and AGETIP's roles in meeting the MDGs for sanitation.

**Cost-Effective Implementation:** The assessments found that partners in *Vietnam* and *Peru* felt no immediate need for cost-effectiveness studies to convince them of

the efficacy and importance of promoting handwashing with soap. In *Tanzania*, cost-effectiveness of handwashing was not a top priority, but there was interest in learning about the costs of running a large-scale handwashing with soap intervention. In *Senegal*, HWWS has cost data to share with stakeholders, although the 2011 EE endline did not find that cost-effectiveness was stakeholders' top priority.

**Monitoring and Evaluation:** HWWS *Peru* provided some capacity building in monitoring and evaluation to local partners, but found that there is demand for more. In *Vietnam*, HWWS's work with the VWU resulted in the organization developing and inserting a handwashing indicator into its monitoring system. In *Tanzania*, stakeholders are working together to improve sanitation and hygiene monitoring through national surveys and community-based systems. The project has experience in monitoring handwashing with soap at-scale programming that can be invaluable to this process, including a system of record keeping that tracks uptake of improved handwashing with soap behavior. The *Senegal* project developed a robust performance-monitoring system that has enabled the program to monitor implementation progress closely. The project's management information system has proven to be attractive to partners; for example, as AGETIP develops its handwashing with soap programs, HWWS has supported the development of a monitoring and evaluation system.

### Considerations for Programmers

The experience from this project demonstrates that it is difficult to make generalizations about which component of the EE programmers should focus on first. This report shows that each of the countries started and ended at different places with respect to the EE. Additionally, key stakeholders in any given country may value or place a different weight on any single EE components.

A key lesson from this project is that a programmer should assume that all components are equally important going into EE assessment, and until an EE assessment is conducted, it will be difficult to know where to prioritize resources and efforts.



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# I. Introduction

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## 1.1 Scaling Up Handwashing With Soap

Launched in November 2006 (with implementation from mid-2007 to mid-2011), handwashing with soap was implemented by the HWWS project and in-country partners in Peru, Senegal, Tanzania, and Vietnam (see Table 1).<sup>2</sup> The project was created in response to evidence that effective interventions to promote handwashing with soap could improve handwashing behaviors and dramatically reduce diarrheal disease and acute respiratory infections—two of the leading causes of child mortality and morbidity. However, much of the evidence generated to date has been based on small-scale interventions, often in controlled settings. Larger handwashing initiatives, on the other hand, have not had rigorous evaluation of health outcomes, nor have they adequately addressed sustainability after the project ends. HWWS’s methodology was designed to learn what works to improve handwashing behaviors at large scale and to sustain the activities after the project ends. It is also designed to measure the impact of increased handwashing with soap on health. The HWWS project is working with national and local governments to generate and sustain the handwashing with soap practices of 5.4 million women and primary-school-aged children.

This report synthesizes the key findings of the endline assessments of the EE for HWWS projects in Peru, Senegal, Tanzania, and Vietnam. Aimed to gauge the robustness of the programmatic conditions for the continued scale-up and sustainability of program interventions as external funding for the projects end, the assessments were conducted from October 2010 through January 2011. The same basic instrument was used for the 2007 baseline EE assessments, with some modifications and additions made in 2010 based on program experience and learning.

### Objectives of the Endline Assessments

1. Determine the current status of each dimension of the EE.
2. Identify strengths and weaknesses of each dimension, with a focus on deficiencies.
3. Describe the changes in the EE since 2007.

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**TABLE 1: HANDWASHING TARGETS BY COUNTRY**

Country (Population)	Target Population	Estimated Target Population for Washing Hands with Soap at Critical Times
Peru (28 million)	5.1 million	1.3 million
Senegal (11 million)	2.0 million	0.5 million
Tanzania (37 million)	5.2 million	1.3 million
Vietnam (84 million)	9.2 million	2.3 million

<sup>2</sup> In Peru, the HWWS project was referred to as the Handwashing Initiative (HWI).

4. Determine the level of importance for each dimension of the enabling environment to create conditions for scale-up and sustainability.
5. Make recommendations for improvements in the EE to the country task manager, HWWS headquarters staff, and main in-country partners covering the next six months.

### 1.2 The Enabling Environment

The 2007 baseline EE assessments covered nine dimensions considered essential to scaling up handwashing with soap behavior-change programs. Developed by the HWWS project based on a review of relevant literature and a discussion with subject matter experts, the conceptual framework considers these dimensions to be the essential indicators of the feasibility of achieving programmatic scalability and sustainability. *Scale-up* is defined as an increase in the present scale and rate of behavior change. *Sustainability* is defined as the ability to maintain interventions after funding under the project has ended.

Section III describes the nine dimensions (see Figure 1) in detail and outlines the assumptions that underpin the definition of the EE from the start of the project. It also indicates the respondent groups for information on each dimension.

**FIGURE 1: NINE DIMENSIONS ESSENTIAL FOR SCALING UP HANDWASHING BEHAVIORS**



## II. Summary of Country Projects

### 2.1 Peru

HWWS<sup>3</sup> in Peru was launched in 2003. For the first four years, the project focused on building robust partnerships, developing a sound implementation model, and creating evidence-based material for mass media (MM), direct consumer contact (DCC), and interpersonal communications (IPC). In 2007, HWWS started implementing activities in 24 of Peru's 25 regions to improve the handwashing behavior of 1.3 million women and children.<sup>4</sup> The project also focused on strengthening the EE to ensure that implementation of handwashing activities would continue after external funding through HWWS ends. The program in Peru has largely met or exceeded its programmatic targets for implementation and sustainability.

The project's approach to sustainability focused on promoting ownership of the HWWS methodology and raising handwashing with soap as a priority within different institutions. It did not seek to create or continue a standalone handwashing program or initiative. HWWS recognizes that what needs to be sustained is the project's technical added value to programs whose implementation will continue and that will use HWWS methodologies and tools and continue to assign resources to handwashing with soap in the future. HWWS considers it a major sign of its success that it is *not* frequently mentioned as a separate project or program but that its priority and methodology have been adopted by national and local programs and institutions, such as the ministries of health, education, and women, as well as regional, provincial, and local governments.

### 2.2 Senegal

The Public-Private Partnership for Handwashing (PPPHW) was launched in Senegal in 2003. For several years, PPPHW focused on catalyzing and coordinating various organizations' involvement in promoting handwashing with soap. The first phase of activities culminated with the 2007 launch of a 10-month communications campaign that included TV and radio spots, DCC, and IPC. In 2008, HWWS expanded interventions to eight of the country's 11 regions, with the objective of improving the handwashing behavior of 500,000 women and children. In parallel, efforts were directed at strengthening the EE to ensure that activities and outcomes would be sustained after external funding through HWWS ended. The Senegal program exceeded all implementation targets. HWWS worked with PEPAM and AGETIP. AGETIP oversees the award of contracts for the GSF. In a move to further strengthen sustainability of handwashing with soap at the national scale, HWWS provided training for the staff of the National Association of Midwives and the National Nutrition Program (CLTM), so these programs might successfully integrate the promotion of handwashing with soap into their activities throughout Senegal.

<sup>3</sup> HWWS is comprised of various partners such as government, private sector, and NGOs. WSP played a lead technical assistance role in developing evidence-based communication materials, building capacity of partners, brokering partnerships, and strengthening the enabling environment.

<sup>4</sup> Devine and Flórez 2010

### 2.3 Tanzania

HWWS has supported the Government of Tanzania's handwashing with soap promotion since 2005. The project's initial support focused on conducting small-scale formative research and raising awareness of the importance of handwashing with soap as a key public health intervention. In 2007, HWWS began scaling up interventions to 10 rural districts, with the goal of improving handwashing behaviors among 1.3 million women and children. At the same time, considerable effort went into improving the national EE to organize the sector and prepare for expanded implementation of handwashing with soap activities. These activities included using mass media (radio and print materials), DCC, and IPC interventions. Additional efforts were directed at strengthening the EE at the local level through building capacity of local government authorities and community volunteers to implement and support various behavior-change activities. At the national level, efforts focused on getting buy-in to an evidence-based behavior-change approach, changes in policy to more explicitly support handwashing with soap, and the development of indicators to better track progress.

### 2.4 Vietnam

In Vietnam, HWWS was launched in 2006. The initial phase consisted of a nine-month behavior-change campaign in 40 communes funded by the Danish Embassy utilizing MM, DCC, and IPC targeting mothers of children under five. In 2007, HWWS began to scale up activities, eventually carrying out activities in 540 communes in 10 provinces with more than two million mothers. Additionally, efforts were directed at strengthening the EE to ensure that activities and outcomes would be sustained after the project ended through a variety of partnership mechanisms at both the national and provincial levels to integrate handwashing with soap into ongoing partners programs. The MoH is responsible for promoting handwashing with soap within the Vietnamese government structure. As a mass organization, the Vietnam Women's Union (VWU) can reach households nationwide with messaging to promote and sustain behavior change.

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# III. Findings by Enabling Environment Assessment Dimension

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This section summarizes key findings by EE dimension from the 2007 and 2010–2011 EE assessments and also summarizes how the HWWS project and others contributed to changes in the EE. Each discussion begins with HWWS’s definition of the dimension, the assumptions that underpinned why each dimension is important to sustaining handwashing with soap, and a listing of the respondent groups (“stakeholders”) interviewed in country for the EE. The discussion goes on to cite examples (from each of the four countries) of change from the 2007 EE baseline to the 2010–2011 EE endline, and discusses the findings in brief.

## 3.1 Policy, Strategy, and Direction

- *Policy*: a set of procedures, rules, and allocation mechanisms that provides the basis for programs and services
- *Strategy*: guidance on how to implement a policy
- *Direction*: a common understanding among interested parties of the goals of an intervention

### *Assumptions:*

- Having handwashing with soap represented in national **policy** would necessitate implementing it at national scale, increase the likelihood of funding activities, and force monitoring of handwashing with soap.
- Having a handwashing with soap **strategy** would provide a common understanding of how to implement handwashing with soap interventions, which will increase the chances of continuing large-scale application post project.
- Having a common **direction** would require a shared vision of where handwashing with soap should go, and would increase the likelihood that interventions would be coordinated.

### *Respondents:*

- Government
- International agencies
- NGOs
- Donors
- Private sector

In 2007, findings from all four EE assessments noted the importance of a shared vision and strategy for handwashing

with soap among all key stakeholders in order to support and sustain programming. A formal policy on handwashing with soap, specifically accompanied by a well-articulated strategy, was also deemed necessary. Peru was thought to be farthest advanced along these lines in 2007, and in 2010 this was still the case. HWWS in Peru has had great success inserting the promotion of handwashing with soap not into one national policy, but into numerous programs and strategies, in part by successfully advocating for handwashing with soap to be considered an effective way to address the priority national goal of reducing child malnutrition. Some examples include:

- Handwashing with soap has a prominent role in the CRECER strategy, coordinated by the Prime Minister’s office, which commits 15 organizations to participate in an Initiative against Child Malnutrition in Peru.
- The multi-sector national conditional cash transfer program (Juntos) incorporated handwashing with soap promotion as one of their conditional behaviors in 2008/9.
- The MoE’s commitment to handwashing with soap promotion is official policy. Handwashing with soap is included in the national curriculum. A vice-ministerial resolution designates HWWS methodology and tools as a component of the National Healthy and Safe [Schools] Program implemented in 3,000 pilot schools. Handwashing with soap is also well integrated into the MoE preschool program (PRONOEIS, a program operated in poor communities by program staff and volunteer mothers).
- An MoH resolution made handwashing with soap a priority theme for its involvement in the multi-sector healthy schools program. The topic is also well integrated in the MoH’s Healthy Families and Homes project and its Healthy Municipalities and Cities program.
- The Ministry of Women and Social Development (MIMDES) is strongly committed to promoting handwashing with soap through such programs as PRONAA (aimed at reducing infant malnutrition and anemia, the program includes a school

breakfast program, child feeding centers, distribution of fortified bread, etc.); Wawa Wasi (a daycare program for children of poor working mothers); and FONCODES (a poverty reduction program).

- The raised profile for handwashing with soap has been officially recognized in more than 120 organizational resolutions, norms, and directives of the ministries of health, education, and MIMDES and their regional and district counterparts.

In highly centralized Vietnam there was a favorable political environment for supporting handwashing with soap in 2007, with opportunities for integration into ongoing programs and activities. At the same time, there was no national strategy or policy on handwashing with soap, nor a shared vision of a national policy and strategy among handwashing with soap stakeholders. By 2010 an objective for handwashing with soap had been prepared and inserted into the draft National Target Program III (NTP III), the document following NTP I and II, that lays out national policy targets for the nation, the first time that any such mention of handwashing had ever appeared in an NTP. Most stakeholders interviewed agreed that handwashing with soap was considered an integral and important part of hygiene and sanitation programming in Vietnam, and that a standalone policy on handwashing with soap was not required. HWWS has worked closely with the government ministries, including the ministries of Health, Education and Training, Agriculture and Rural Development, as well as mass organizations and NGOs, to train their staff to integrate handwashing with soap into their program using what respondents uniformly deemed a sound, practical approach to training and a well-developed package of communication materials. This and efforts on the part of other stakeholders, in combination with the MoH's leadership in response to outbreaks of avian influenza and diarrheal disease, have helped to elevate the importance of handwashing with soap as an integral component of hygiene and sanitation programming in Vietnam without developing a specific standalone policy.

On the other hand, in 2007 in Tanzania, it was found that in order to approach an ideal policy/strategy environment for promoting handwashing with soap, HWWS needed to commence advocacy immediately, which it did together

with other stakeholders active in hygiene and sanitation, such as UNICEF and NGOs. These efforts addressed the four relevant Government of Tanzania offices—the ministries of Health and Social Welfare, Water and Irrigation, and Education and Vocational Training, and the Prime Minister's Office of Regional Administration and Local Government—which together are responsible for sanitation in the country. By 2010 the four offices, under the leadership of the Ministry of Health and Social Welfare, had signed a Memorandum of Understanding (MOU), outlining a much-valued process for working on sanitation and hygiene policy and strategy, including handwashing with soap. At the time of writing the report, a draft policy, including handwashing with soap, was circulating for approval.

In Senegal, open discussions about handwashing with soap among stakeholders was found in 2007 and continued in 2010 in the same project-focused and fragmented environment. In 2007 there were too many one-on-one strategies with individual organizations and ministries and no comprehensive national strategy and policy on handwashing with soap, although the project's political and organizational priority had helped to establish the legitimacy of handwashing as an important hygiene intervention. By 2010 there were still many national ministries and bureaus assigned partial responsibility for hygiene and sanitation programming, resulting in fragmented responsibility and accountability for hygiene and sanitation. PEPAM, the national platform for coordinating programming supporting the aim of achieving the MDGs, and AGETIP, the national employment agency responsible for helping to select organizations to receive funding from PEPAM, worked closely with HWWS to support the inclusion of handwashing with soap in all hygiene and sanitation projects funded by the GSF. The GSF awarded Senegal US\$5 million over five years to support improved sanitation programming, which in Senegal includes handwashing. PEPAM is committed to promoting handwashing with soap in all sanitation projects, which may help foster a strategy on handwashing with soap attractive to all players.

### 3.2 Partnerships

*A relationship in which two or more parties, having compatible goals, form an agreement to share the responsibility for achieving the goals.*

*Assumptions:*

- This dimension is about interested public and private-sector agencies partnering to promote and achieve the objectives of handwashing with soap interventions.
- A strong partnership will bring together the skills and resources no single organization or agency possesses.
- Partners contribute resources—financial, human, knowledge, and/or goods/service—toward the agreed-upon goals.
- Partnerships may be among public and private sectors—both profit and nonprofit—at national and subnational levels.
- Private-sector partners need not be soap manufacturers.
- A partnership is not contractually based (i.e., HWWS does not pay for their services).

*Respondents:*

- Government
- International agencies
- NGOs
- Donors
- Private sector

In 2007 in Peru, HWWS focused on collaboration with national ministries and a few regional governments. It also established arrangements with national private-sector partners to promote handwashing with soap through their own networks. By 2010 Peru had become significantly more decentralized, and HWWS had generated an impressive array of partners at both national and local levels, including several dozen private-sector partners whose contributions reach far beyond their own clientele. Partnerships include government at all levels, NGOs, soap companies, mining companies, a plastics manufacturer that produces a handwashing station to promote and facilitate handwashing with soap, and other businesses in a decentralized system that favors development and implementation of local alliances and strategies that promote handwashing as a way to improve childhood nutrition and other goals. There are also numerous local partnerships at the regional (state) and district levels that address childhood malnutrition and other social goals that now include promotion of handwashing with soap.

In Vietnam in 2007, there was strong interest among stakeholders in cooperating and collaborating to promote handwashing with soap, but the MoH did not see a need for a PPP model to promote handwashing with soap as did other countries such as Peru and Senegal. Thus, HWWS focused on bilateral partnerships with the private sector, NGOs, and provincial departments of health and education. HWWS carried out a rapid survey of handwashing with soap stakeholders in Vietnam and found during the EE endline assessment that stakeholders agreed that the best way to promote handwashing with soap was to work with the MoH (responsible for hygiene promotion), mass organizations such as the Vietnam Women's Union (VWU), the Ministry of Education and Training, and others. Stakeholders interviewed in the EE endline assessment commented that HWWS Vietnam helped gather a public-private partnership that led to the development of a model handwashing station, although the station is not yet being manufactured and commercialized.

The 2007 Tanzania assessment recommended that HWWS work with ministries and other stakeholders, especially donors, to organize a broad-based, public-private partnership (PPP), summit-type meeting where successes, challenges, and approaches to promote handwashing were discussed. It also advocated collecting data from other countries to show the private sector how promotion of handwashing with soap might help expand their markets for soap. The baseline encouraged placing people's handwashing stories in newspapers, newsletters, and other media in order to create a buzz, generating favorable publicity for promoting handwashing to encourage actors from the public and private sectors to become involved. By 2010 HWWS had helped create opportunities for people's handwashing with soap stories to be told, particularly in newspapers. HWWS had also been asked by stakeholders to draw on its experience promoting handwashing with soap at scale to coordinate the development of a government and multistakeholder partnership to examine all handwashing with soap models in use in Tanzania and make recommendations for an effective Tanzania model for promoting handwashing with soap.

HWWS, in an important strategy for sustaining the promotion of handwashing with soap, worked closely with key Tanzanian government ministries, donors, NGOs, and other stakeholders to develop a mechanism with which the

challenge of and practical steps for improving sanitation, including handwashing with soap, could be discussed and consensus reached. This is documented in the MOU signed by the key ministries responsible for hygiene and sanitation. According to stakeholders interviewed during the EE endline assessment, the MOU and the process facilitated by HWWS to help develop it, provides a place for the ministries to work on draft policy and implementation modalities. There was some limited engagement with the private sector with one local soap company that co-branded its hand soap product with the brand of HWWS: “Hands to be proud of.” It is still possible that private partners may join with the government on the draft national sanitation strategy, though their interest lies more at the implementation level.

The 2007 baseline for Senegal reported diverse and significant interest in participation in HWWS, with a partnership structure being formulated (PPPHW), but there was more focus on individual organizations’ agendas than on the group. There was a lack of common understanding and vision of the partnership and its implications for promoting handwashing among the players, as well as insufficient collective and participatory decision-making. This led to unilateral decision-making by individual partners. The endline assessment in 2011 found that the PPPHW had gone dormant after the driving force behind it, a single, dynamic individual, became involved in other work. Even so, government institutions (PEPAM in particular) expressed interest in learning how to work effectively with the private-sector companies to promote improved hygiene and sanitation. Soap companies, insurance agencies, and media companies also indicated interest in learning how to work more effectively with government to promote improved hygiene and sanitation, and handwashing in particular. Both public and private groups look to HWWS to facilitate the sectors working together in a sustainable way. Despite this shift away from a PPPHW project-based approach to fostering partnership between the private sector and the government, there remains a concern that individual organization’s goals and objectives could take priority over efforts to meet national sanitation goals in a sector that is so fragmented. To forge partnerships with organizations capable of supporting handwashing with soap programming at scale, HWWS signed MOUs

with the National Nutrition Program and the National Association of Midwives in 2010 to train their staff at national and local levels to promote handwashing with soap in their programming. These strong partnerships will help to improve potential for the sustainability of at scale handwashing with soap in Senegal.

### 3.3 Institutional Arrangements

*The roles, responsibilities, relationships, and accountability arrangements among public and private organizations committed to reaching the handwashing goals.*

#### *Assumptions:*

- No single organization or agency can deliver large-scale comprehensive handwashing interventions.
- To operate efficiently, the roles, responsibilities, and accountabilities for each agency (e.g., line ministries, NGOs, etc.) need to be well defined and understood.
- Institutional arrangements need to be defined at national and subnational levels.
- Institutional arrangements need to be articulated and coordinated for public and private sector actors.
- An institutional home is necessary for large-scale sustainable handwashing initiatives.

#### *Respondents:*

- Government
- International agencies
- NGOs
- Donors
- Private sector

The Peru baseline assessment found that HWWS had formal arrangements with key national governmental organizations and generally more informal arrangement with private partners. Respondents noted the increasing trend towards decentralization and hence the need for local arrangements. They considered advocating for support of handwashing with soap in work plans, budgets, institutional directives, and actual activities much more important than pursuing formal institutional arrangements. In 2010 there was less emphasis on arrangements between HWWS and partners and more on arrangements among the partners themselves at national, regional and district levels. Overall, there was much more joint planning, implementing, and monitoring

at national, regional, and local levels. The focus had moved to encouraging formal commitments to promote handwashing with soap rather than agreements between HWWS and partners.

Vietnam's 2007 baseline assessment found that clear government networks existed with defined roles and responsibilities for promoting handwashing, and that HWWS's proposed project and approach had been only vaguely understood by most potential partners. The baseline assessment suggested that HWWS support existing government structures—including the MoH, the VWU, and the People's Committee—to enhance capabilities and strengthen sustainability, cooperation, and collaboration on promoting handwashing with soap at all levels. According to respondents during the endline assessment, HWWS did work with the MoH, especially in the first year of the project, and also worked closely with the VWU and the Department of Education and Training at local levels. These stakeholders reported increased capacity for planning for and promoting handwashing with soap, although they also mentioned a lack of funding to continue activities at the same level without HWWS funding. This is a concern for sustainability of activities. The baseline also suggested that HWWS delineate a stakeholder map—who does what and where. This was done and apparently used by the project for planning purposes.

The main recommendations from the 2007 Tanzania baseline assessment were to focus on institutional arrangements to enable sustainability and scale-up of handwashing with soap, and to support efforts to create effective coordination at the national level. By 2010, there had been a change in responsibility for sanitation within the Water Sector Development Program<sup>5</sup> (WSDP), with the MOWI making the MoHSW the lead agency for sanitation and hygiene. This occurred because the MoHSW has the national mandate for sanitation and hygiene. The challenge for HWWS by 2010 was how to best support the MoHSW in its new leadership role for sanitation and hygiene in conjunction with stakeholders ranging from other donors, UNICEF, and NGOs, and utilizing the committees mentioned above.

In Senegal, the 2007 baseline assessment found a lack of effective guidance for implementing a decentralization policy and little interest from local governments in sanitation and hygiene issues, including handwashing. Furthermore, institutional instability within the central government and lack of institutional leadership on handwashing, combined with poorly defined roles and responsibilities (for hygiene and sanitation) and lack of coordination mechanisms among agencies, made for a weak EE for promoting handwashing with soap behavior. On a positive note, there was a strong desire among stakeholders to clarify roles and responsibilities as well as strong interest from local NGOs and from the environment and other sectors to integrate handwashing with soap into topics/activities. As 2011 approached and the PPPHW went dormant, HWWS and other stakeholders found themselves working in a sector where the same limitations remained and were widely acknowledged by stakeholders. HWWS is prioritizing working with PEPAM and AGETIP to further strengthen and support these institutions' abilities to coordinate Senegal's efforts to reach the MDGs (Senegal's sanitation MDG includes handwashing), in part by strategic disbursement of money from the Global Sanitation Fund.

### 3.4 Program Methodology

*The approach agreed upon by partners and implementers to deliver handwashing with soap program interventions in order to reach the handwashing with soap targets.*

*Assumptions:*

- Health education approaches are insufficient to change behaviors.
- A more systematic, consumer-focused, research-based design will result in a methodology better able to change behaviors.
- The HWWS approach is an improvement over previous iterations.
- The HWWS approach will prove to be more cost effective and impactful.
- The methodology need not follow the guidance from *The Handwashing Handbook*.
- Each country may need to develop/adapt a country-specific methodology.

<sup>5</sup> The Water Sector Development Program (WSDP) is a basket fund comprised of government and donor resources for investment in water supply, sanitation, and hygiene.

- All participants in the HWWS program need to have a shared understanding of the methodology.
- The partners and implementers agree that the approach adopted under this project is cost effective to reach behavior change.

*Respondents:*

- Government
- International agencies
- NGOs
- Donors
- Private sector

All four countries made great strides in developing and promoting the project's program methodology, and opinions on the approach and materials were generally quite positive. In Peru in 2007 respondents felt that the melding of diverse partners' strengths had produced an effective approach. Some mentioned that the project took too much of a campaign approach, sometimes without follow-up, and with insufficient concern for institutionalization. Some respondents mentioned the need to focus more on IPC, whereas media representatives felt that MM could play a larger role. Several of the individuals interviewed pointed out that it has been much easier to generate enthusiasm and behavior change among children than among mothers, particularly in rural areas. In 2010, the methodology and tools had only changed slightly. Virtually all people interviewed praised the methodology as more effective and action-oriented than most other communication efforts in Peru. Very importantly, the methodology is not just a communication strategy. It includes a training methodology, and it facilitates the availability of handwashing stations that (1) remind people to wash their hands with soap; (2) make it easy for them to wash; and (3) save soap, water, and money. Ministries of health, education, and women's programs have officially adopted the methodology. Although the approach clearly incorporates IPC, DCC, and MM, local respondents were much more familiar with the first two approaches than the latter.

Stakeholders in the 2007 baseline assessment for Vietnam expressed interest in learning and applying new behavior-change techniques to promote handwashing with soap, noting that most handwashing communication activities

at the time followed traditional methods. The nature of the proposed program methodology was not yet clear to potential partners, so the HWWS project worked hard to develop a package of communication materials based on sound behavior-change principles and shared the results through practical training based on adult learning methodology. By 2010 the approach and communication materials had been shared with stakeholders, including the VWU, ministries of health and education (at national and provincial levels), NGOs, and other government ministries. Staff from World Bank water-infrastructure projects also received training from the project that enabled them to integrate handwashing with soap into their activities. Stakeholders across the board consistently praised HWWS for its contribution to handwashing with soap methodology. The MoH asked that the project assist them in developing a handwashing with soap integration kit for use by MoH staff, a good sign that the government's lead agency is interested in using HWWS's methodology to promote handwashing. Concerns were raised in Vietnam during the EE endline assessment about the cost of reproducing materials of the same quality.

Tanzania's 2007 EE baseline assessment recommended that the HWWS project emphasize the need to adapt the methodology for promoting handwashing to the Tanzanian context. It also recommended that the project incorporate feedback from stakeholders into its methodology to the extent possible. The baseline EE report recommended that Tanzania develop a social marketing approach with core concepts that could be delivered through multiple channels formulated with the technical assistance of the private sector and partner inputs. By 2010, an evidence-based social marketing approach was developed using MM, DCC, and IPC to influence handwashing with soap in the target population. However, many stakeholders expressed a need for a review of handwashing with soap promotion methods in use by various organizations and agencies in order to develop a common approach.

Stakeholders felt that with the MoHSW leading the development of a national policy and campaign, the time was ripe to support its leadership and that lessons learned from HWWS could be useful in shaping the national campaign. The HWWS project is in a position to work with

the MoHSW to develop appropriate handwashing with soap interventions and policy guidance for implementation. Stakeholders expressed an interest in learning more and sharing with the project what they believe to be an integrated BCC approach. To determine whether HWWS's approach can and should be replicated in Tanzania, these lessons need to be documented and discussed with stakeholders. Stakeholders have asked the project to help coordinate a review of its current training and communication approaches as part of the process to reach a consensus on a preferred Tanzania model for promoting handwashing in the community.

The 2007 baseline EE assessment for Senegal noted a lack of consensus on the handwashing with soap methodology among stakeholders and the implementation of numerous uncoordinated multimedia-communication activities. The findings cited included inadequately individualized programs and insufficient understanding of the proposed HWWS approach and other approaches used by stakeholders. There were also possibly complementary approaches that could potentially be explored. Among the few stakeholders familiar with the HWWS project, there appeared to be a broader knowledge of the project's approach, methodology, training, and materials. Many stakeholders interviewed during the 2010 EE assessment, aside from government stakeholders, expressed interest in learning and applying the project's methods, materials, and tools in their programs. MOUs signed with the project indicate that the Midwives Association and Nutrition Program are interested in learning and applying project methods, materials, and tools in their programs.

Stakeholders appreciated how HWWS's approach was developed using formative research (which included the role of fathers in promoting handwashing behavior). They were keenly interested in reviewing the IPC, DCC, and MM materials for promoting handwashing with soap. Programs with MOUs include the National Association of Midwives, National Nutrition Program, Dakar City Municipality School Milk Program (132 primary schools), and Ministry of Education Pilot Teacher Training: Dakar and Thies. Ultimately, the project's opportunity to contribute to sustainability in the near future is through completing the training for handwashing with soap for the Midwives and Nutrition

staff, resulting in two national programs championing and promoting handwashing with soap at critical junctures at scale using the HWWS methodology. It can be said that the HWWS approach *is* recognized by a few critical national programs like PEPAM, the Nutrition program, the Global Sanitation Fund (executed by AGETIP), and all programs that work with the project's technical assistance (Midwives and Nutrition).

It is interesting to note that stakeholders from Senegal and Tanzania were less interested in using MM approaches, perhaps because of cost, but quite keen to use IPC materials. In Peru, where the project's MM promotion of handwashing with soap won an international prize, most people interviewed in 2010 focused on IPC and DCC. Stakeholders in Vietnam expressed concern about their inability to replicate the materials produced by HWWS, fearing that they lacked adequate funds to meet the standard set by the project.

### 3.5 Implementation Capacity

*The necessary resources (human and financial), skills, incentives, and materials/tools to deliver the full complement of interventions necessary to deliver a handwashing with soap program.*

#### *Assumptions:*

- It is unlikely that sufficient capacity exists at the start of a program, and so it will need to be built.
- Capacity building is not limited to training; it also includes incentives, resources, and tools to deliver handwashing with soap interventions.
- Capacity may need to be built in all components of the program, including implementation of activities, planning, budgeting, monitoring, evaluating, procurement, etc.
- Capacity may need to be built within public and private sectors, as well as in NGOs.
- The development of sufficient capacity to deliver a handwashing with soap program should increase the likelihood of sustainability.

#### *Respondents:*

- Government
- NGOs
- Private sector

The Peru findings from 2007 were that in general skills and systems needed to implement the program existed at the national level but were weaker in some regions and districts. By 2010, through advocacy, coordination, training of trainers, and provision of communication and program-support materials, the project has helped increase implementation capacity at region and district levels. HWWS had focused strongly on training of trainers, mostly in the health and education units of regional governments. The facilitators in turn have trained some 22,000 individuals to promote handwashing with soap. Major challenges to ongoing capacity building include the large annual turnover of teachers as well as turnover in the health sector. One area of concern, very much related to the country's rapid decentralization in the past several years, is the capacity of some regional and district governments for planning, project preparation, proposal writing, efficient implementation, and other basic governing skills. The 2010 assessment recommended that HWWS collaborate with partners to address this need for capacity building.

In 2007, the baseline assessment for Vietnam's EE found some capacity to implement the HWWS methodology, although training in its behavior-change approach was needed in the initial provinces where the project proposed to work. The baseline also found handwashing sessions in the curriculum and capacity for promoting handwashing in schools. Despite finding adequate technology and capacity for evaluation and pilot program implementation, the assessment judged that capacity in Vietnam to go to scale was limited. HWWS worked to build the capacity of national and local VWU staff to promote handwashing with soap, but could not work as closely as hoped with the MoH on handwashing until 2010. By 2010, HWWS was developing handwashing with soap training and management manuals for MoH staff to promote handwashing with soap and was taking steps to build the capacity of key government ministries and the VWU to incorporate the promotion of handwashing with soap into their non-water and sanitation activities.

In 2007, Tanzania's EE baseline assessment noted a need to build community and ward capacity for planning and working with the private sector to identify efficient and

effective ways to market handwashing with soap to rural populations. The report also saw a need to clarify the most important capacity-building opportunities for handwashing with soap with partners. The baseline suggested limiting capacity building to what was needed to meet project objectives (for example, enabling the district government to sustain handwashing with soap activities). Turning to 2010, discussion on implementation capacity with stakeholders touched on multiple areas, but in the end came back to the basic need to concentrate on supporting the MoHSW in coordinating a national hygiene and sanitation campaign. This encompasses many areas, especially at regional and local levels, including planning, finance, monitoring and evaluation (M&E), and program methodology. It was difficult for the assessment to truly determine how implementation capacity at the district level had changed since the baseline. Aside from volunteers working with HWWS, district staff appeared to be capable of supporting the handwashing with soap program, but several district stakeholders expressed interest in and a preference for PHAST, and what they termed UNICEF's WASH approach used in schools. Some said that they believed these models worked well in Tanzania, but it may also be the case that these are the models they know. It was interesting to note that many staff expressed a desire to develop a Tanzanian model for promoting handwashing with soap that used elements from these models, and perhaps others that went unmentioned.

The key findings for Senegal in its 2007 baseline EE assessment included the presence of existing regional and local structures with existing, albeit limited, personnel with some apparent competencies and expertise pertaining to handwashing. There was, however, inadequate involvement of potential partners at all levels and sectors in promoting handwashing, and capacity to promote handwashing with soap weakened considerably at the very local level. In 2010 and 2011, HWWS began working to strengthen national capacity to implement at-scale handwashing with soap through training of the Midwives Association and National Nutrition Program and district staff. Smaller in scale, but no less interesting is HWWS's work with city of Dakar primary school staff, which prepares existing regional and local school staff to promote at-scale handwashing with soap at critical times.

### 3.6 Availability of Products and Tools

*The ready access of necessary products (e.g., soap, water, handwashing stations), that respond to consumer demand to practice handwashing with soap.*

#### *Assumptions:*

- Easy access to these products is necessary to sustain the practice of handwashing with soap and turn it into a habit.
- Consumers will not use the products that do not respond to their needs.
- Consumer-responsive products can be developed.

#### *Respondents:*

- NGOs
- Private sector
- Donors

Soap was found to be widely available in all four countries, although in Tanzania and Senegal some families find it difficult to pay for soap. Communities in all countries have some access to water, but access may be time-consuming, seasonal, and/or only for limited hours—a problem for sustaining the practice of handwashing. All four country programs developed handwashing stations, although Senegal promoted the use of a basin and vessel for handwashing.

In 2010, as in 2007, many communities in Peru continued to have difficult or part-time access to water. More than 95 percent of homes had access to soap. Formative research in 2008 showed, however, that many mothers were concerned with wasting soap on handwashing, and therefore did not make it available to family members for that purpose. This was a major incentive to devise the handwashing stations (Super Jaboncines), which facilitate handwashing with soap using liquid soap made from a small piece of a bar soap. As of October 2010, about 80,000 handwashing stations had been distributed in Peru (and 10,000 in Guatemala). These both encourage and facilitate handwashing with soap, conserving both water and soap in the process. Many more handwashing stations are needed as the project expands further. To increase production and distribution, partners need to arrange funding for the approximately \$0.70/unit cost. A small number of families have made homemade versions.

The 2007 baseline for Vietnam recommended that the project assess existing information on the availability and potential markets for products to facilitate handwashing with soap. The baseline also suggested that HWWS reconsider how to best integrate handwashing work into other projects and programs, for example, combine some handwashing activities with an ongoing water program. By 2010, HWWS in Vietnam had helped lead formative research that resulted in the development of a model handwashing station considered a viable candidate for promotion via a public-private partnership with government and business partners.

Tanzania's 2007 baseline called for HWWS to address the lack of handwashing facilities in schools. However, because the schools could not be used in the program owing to the design and impact evaluation, the school component was dropped. By 2010 the project trained community volunteers to motivate families to construct and use tippy taps made from plastic bottles at the household level. People were encouraged to use soap with their tippy taps. The use of tippy taps was also promoted through DCC events conducted by marketing agencies.

The Senegal baseline found that soap was widely available and affordable and that access to water was generally good. HWWS promoted the use of a handwashing station comprised of a vessel and basin to help ensure there was an established place to carry out the behavior. The government is working to improve access to water, even for the very poor, with the assistance of donors, NGOs, and other stakeholders.

### 3.7 Financing

*Adequate funds are available to organizations/agencies interested in promoting handwashing with soap to cover the programmatic costs required to deliver their respective roles and responsibilities.*

#### *Assumptions:*

- Inadequate resources greatly constrain the ability to deliver and sustain a large-scale handwashing with soap program.
- Sufficient funds need to be allocated to all components of a handwashing with soap program,

including training, implementing activities, monitoring, transportation, office supplies, development of materials, and so forth.

- Having dedicated handwashing with soap budget lines in partners' budgets increases the likelihood of sustained implementation.
- Having a financing plan based on realistic costs is important.

*Respondents:*

- Government
- Donors
- NGOs

In Peru in 2007 most financing came from international donors and in-kind contributions by private companies that reached their staff and customers through existing channels. By 2010, the focus had shifted from donor funding to funding by national public and private organizations and programs. Peru is the only one of the four HWWS countries to have made this shift in focus. Although lack of funding is clearly perceived as a barrier to expansion in some regions and districts, well-managed regional and district governments and partnerships that prioritize reducing malnutrition or promoting handwashing with soap can access several sources of funding. Various national government financing schemes are available to those regions, provinces, and districts that have the skills to tap into them. Regions that have mining and other large companies can establish projects that can attract private funding.

Vietnam's 2007 baseline noted a mix of internal, project-focused needs and broader-based needs outside of the project. The baseline found insufficient attention paid to financing such products as handwashing facilities, water, and soap. The baseline noted the need for increased private-sector investments in handwashing programs and for encouraging each partner, including the Government of Vietnam, to establish a handwashing promotion and/or product line items in their organizational budgets. It also called for the development of a budget format for the PPHW that makes clear that handwashing with soap is explicitly funded. By 2010 HWWS had helped bring together partners to develop and potentially market a model handwashing station through a multistakeholder, public-private partnership. As

of 2010 the NTP III was still under development, with the Ministry of Agriculture and Rural Development discussing increasing the allocation for communication in support of improved hygiene, sanitation, and water supply to as high as 20 percent of the total budget. HWWS's higher profile activities, such as training, development of a communication materials package, and the model handwashing station, together with MoH and other efforts, helped raise awareness of the importance of investing in handwashing with soap as part of an overall hygiene and sanitation communication effort. Private soap companies continue to collaborate with the MoH on handwashing communication and promotion activities.

Tanzania's 2007 baseline suggested that the HWWS project help districts increase their capacity to effectively program and use their hygiene-promotion funds, and work with the Ministry of Education and Vocational Training and District Executive Directors to ensure that funding is allocated for handwashing facilities in schools. The baseline noted that funding was mainly donor driven but that it was allocated through government mechanisms: the Prime Minister's Office for Regional Affairs and Local Government, down to the districts. In 2010 this was still the case. However, the US\$20 million allocated for sanitation and hygiene under WSDP was moved from MOWI to MoHSW. HWWS and partners are coordinating support to the MoHSW to help districts effectively program and use funds allocated for hygiene and sanitation promotion. As previously noted, HWWS did not focus on promoting handwashing in schools due to the design of the impact evaluation.

The Senegal baseline focused on ways to obtain adequate funding for the PPPHW to cover activities and expand. By 2010, the HWWS project's focus had shifted to supporting PEPAM and AGETIP in their role of coordinating sanitation programming aiming to reach the MDGs. By 2010, the GSF had also agreed to provide US\$5 million (over five years) to support projects promoting improved hygiene and sanitation behavior. AGETIP, the government employment agency working with the PEPAM framework, is awarding contracts for GSF funding and is working with HWWS to help ensure that a handwashing with soap component is included in all awards.

### 3.8 Cost-Effective Implementation

*The cost of implementation as compared to the health and economic impacts to be measured in the impact evaluation.*

#### *Assumptions:*

- HWWS wants to sustain only cost-effective interventions.
- Useful for advocacy in order to sustain financing and implementation.

#### *Respondents:*

- Government
- NGOs
- Donors
- International organizations

In Peru in 2007 it was found that HWWS and its partners had collected extensive cost information but had not yet calculated cost-effectiveness. Capabilities to collect and analyze needed data existed at the national level, but technical support was seen as necessary at subnational levels. The 2010 assessment found that some government stakeholders already perceived handwashing with soap as a cost-effective intervention, and therefore measuring cost-effectiveness was not a top priority. Many informants have a strong belief—sometimes based on local data—that handwashing with soap is a “low-cost, high-impact” intervention, in the words of one respondent. People cited local data on child growth, child malnutrition, diarrhea and pneumonia cases, and school absenteeism. It was noted that because handwashing with soap promotion in Peru is integrated into so many different programs, calculating cost-effectiveness might be difficult.

The 2007 Vietnam baseline assessment found existing capacity and expertise to conduct a cost-effectiveness study. At the 2010 endline assessment, however, there did not appear to be much interest in this issue, and many interviewees required probing. It is important to note that when probed, some stakeholders thought that cost-effectiveness is “not quantifiable, cannot be analyzed, and that handwashing with soap can have huge impact and is effective. We do not need to have proof that this should be supported.” Some stakeholders said that there are many benefits to handwashing with soap that are intangible and immeasurable in a

standard cost-effectiveness study. Given what is known about the effectiveness of handwashing with soap and the need for improved hygiene in Vietnam, partners currently feel no need to have a cost-effectiveness study to convince them of the efficacy and importance of promoting handwashing with soap.

The 2007 Tanzania assessment recommended that HWWS describe clear incentives for tracking cost data, including costs averted due to decreases in diarrheal disease (DD) and acute respiratory infections (ARI), and simplify the collection of cost data. The baseline also suggested that the project try to raise awareness within government about the cost-effective impact of handwashing with soap on DD and ARI reduction targets. During the 2010 assessment, this issue did not appear to be a major concern to stakeholders, but even so, HWWS has some data on the cost of handwashing with soap as recommended by the 2007 baseline to share with stakeholders. This may be of interest to the ministries as they spell out the details of their national sanitation strategy.

Senegal’s 2007 baseline assessment reported finding insufficient expertise to gather and utilize cost-effectiveness information. The 2011 endline assessment found limited interest expressed by stakeholders, although HWWS will have cost-effectiveness data that they propose to share with stakeholders.

### 3.9 Monitoring and Evaluation

*Monitoring is the process of capturing progress on implementation and achievement of targets in a timely manner to allow for analysis and prompt adaptation of implementation changes. Evaluation is defined as the assessment of the results of monitoring to identify what worked and what didn’t work.*

#### *Assumptions:*

- Ongoing monitoring of handwashing behaviors is necessary to keep the topic on the national policy agenda.
- Monitoring needs to continue in order to track changes in the target population that may require a change in intervention design.
- Ideally, M&E systems are not parallel, but are incorporated into existing monitoring systems.

- M&E for handwashing is likely to be poor, and so systems and capacities will need to be developed.
- Monitoring data need to be received quickly enough to allow for program adjustment if necessary.
- Collaborative development of targets keeps national and subnational actors focused on results.

*Respondents:*

- Government
- Donors
- NGOs
- Private sector

In the 2007 Peru assessment, respondents generally agreed that M&E was important, but they were not aware of the results of HWWS's monitoring. This led to the recommendation that the project share monitoring and other experience among partners in Peru. The endline assessment found that HWWS had done a much better job of disseminating information on progress, lessons learned, and innovations through a website, newsletters, and reports. Still, some respondents did not recall seeing documents and information that they should have received. There are now one or more handwashing with soap indicators in the information systems of the many government programs that promote handwashing with soap. HWWS has provided some capacity building in M&E to local partners, but there is demand for more.

The 2007 Vietnam assessment found existing capability to develop, apply, use, and maintain a monitoring system, but there was a lack of consistent handwashing behavior-change indicators found among potential players. By the 2010 endline assessment, HWWS had helped build capacity in the VWU to monitor handwashing with soap activities in its regular programming, and the VWU had drafted a specific handwashing with soap indicator for its M&E system. As mentioned earlier, the NTP III was still in draft stage in 2010, with the inclusion of a handwashing with soap indicator defined as the presence of soap and a handwashing station in homes.

Tanzania's 2007 baseline recommended using the minimum number of indicators necessary to guide and evaluate the project, and building on an existing M&E system that

could be accessed by all partners. It suggested that HWWS help provide evidence of how monitoring would benefit partners, and work with an experienced research group to measure health outcomes. By 2010, the government, HWWS, and stakeholders in Tanzania planned to address M&E needs by incorporating handwashing with soap into the planned National Sanitation Campaign. Stakeholders (particularly the MoHSW, WaterAid, UNICEF, and HWWS) are making efforts to improve M&E by strengthening national surveys, definitions, and targets along with testing ways to improve routine monitoring and how to incentivize reporting.

The government of Tanzania is working with stakeholders to develop a national performance-monitoring framework. No firm decisions have been made on a handwashing indicator yet, but national stakeholders expect to continue to work with HWWS on this issue. It was clear from meetings with district and village officials during the endline assessment that HWWS has worked through many iterations of a community-based M&E system for tracking progress on the HWWS project. The project developed several forms for front line activators (FLAs) for tracking the number of meetings held to promote handwashing with soap behavior change, and the types of groups and activities that were conducted. Village registers—inventory lists of household sanitation and hygiene indicators—were also introduced. These registers have been placed with village executive officers (VEOs), who collect the FLA reports. FLAs use the forms submitted to track their progress in carrying out their IPC work. Some VEOs were clearly informed about, supportive of, and active in the project, but others just collected the reports to forward to HWWS staff.

Senegal's 2007 baseline found that there was expertise in operating existing, albeit limited, monitoring systems. By early 2011, HWWS had developed a robust monitoring system for close tracking of handwashing with soap that it needed to share with stakeholders. The best succinct description of HWWS's M&E system is drawn from the project's annual report:

*The project has developed a robust performance monitoring system which has enabled the program to closely monitor implementation progress. The MIS has proven to be attractive*

*to boundary partners, for example, as AGETIP develops its handwashing with soap programs, WSP has been supporting the development of a monitoring and evaluation system. AGETIP's MIS will potentially include the same indicators as WSP—presence of a handwashing facility with soap and water, frequency of improved handwashing at critical times, distance of handwashing facility to kitchen/latrine, and changes in some handwashing determinants. Additionally, the National Nutrition Program has approached WSP to help strengthen the handwashing section of their MIS to include handwashing indicators. The proposed indicators are presence of a handwashing station, distance of the handwashing station to latrine/kitchen, and practice of handwashing with soap at critical times through structured observations.*

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## IV. Summary of Assessment Findings

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The EE endline assessments in all four countries found increasing demand from the project's partners to support and strengthen the development of handwashing components within national programs. HWWS provided technical assistance in planning, training to improve performance on monitoring, capacity building for program implementation (IPC and MM in particular), facilitating policy development and dialogue, and strengthening partnerships. Interviews with stakeholders (government, NGOs, private sector, media companies, international organizations, HWWS, World Bank operations staff, and donors) during the EE endline assessments underscored the degree to which stakeholders valued handwashing as an integral component of a solid hygiene and sanitation strategy, or in Peru as part of a strategy to reduce childhood malnutrition. The indications are that handwashing interventions stand a good chance of continuing. Important outcomes drawn from the EE endline reports included:

- **Inclusion of handwashing indicators in national monitoring systems.** Including feasible indicators of handwashing with soap increases the likelihood that program activities will be funded to make progress against the indicator. This is a critical contribution to increasing the likelihood of sustainability of handwashing with soap programming.
- **Development or strengthening of handwashing in national policies.** Having a strong policy on handwashing—or ensuring that handwashing with soap is incorporated into other national policies such as reducing childhood malnutrition or improving water and sanitation—helps increase the likelihood that handwashing will become part of the national routine programming, and lessens the chance that it will be ignored.
- **Increased funding for handwashing.** Each country team has convinced partners to increase funding for handwashing programming, a critical step toward continuing handwashing interventions.
- **Improved national capacity.** The projects have focused on building implementation resources in country. These resources are housed in national agencies such as ministries of health and education in all countries as well as regional and local governments, and the VWU. The private sector's capacity has been improved through collaboration with HWWS in developing behavior-change communications. These resources can be drawn on by subsequent initiatives to carry out the handwashing programming and help train local agencies to promote handwashing themselves using local resources.
- **Development of handwashing programs.** In each country, stakeholders are developing handwashing components for national programs and have requested support from HWWS to help design the programs.

# V. Summary of Recommended Activities to Strengthen the Enabling Environment

Table 2 lists the recommended actions in each of the countries to further progress on strengthening the EE. Either HWWS or other sector partners could carry out these activities in each country.

**TABLE 2: SUMMARY OF RECOMMENDED ACTIVITIES TO STRENGTHEN ENABLING ENVIRONMENT IN 2011**

EE Dimension	Peru	Vietnam	Tanzania	Senegal
Policy, Strategy, and Direction	<ul style="list-style-type: none"> <li>• Maintain contact with the lead organization or coalition in each region that can perform key functions of advocacy, alliance-building, and training; offer suggestions as needed, learn about and share achievements and lessons learned.</li> <li>• Prepare and implement a national event or several regional events, at which different-level actors share their experiences around handwashing with soap promotion, including, for example, the Ancash experience with the Juntos program (educational sessions are part of the conditions for cash payments).</li> </ul>	<ul style="list-style-type: none"> <li>• Compile a fully developed advocacy package of lessons learned from the HWWS project, ranging from baseline and endline assessment; compile a package documenting handwashing with soap methodology, training approach and materials, management guidance, and BCC materials to share with stakeholders.</li> <li>• Advocate with stakeholders the continued importance of handwashing with soap targets and indicators in national policy.</li> </ul>	<ul style="list-style-type: none"> <li>• Support the MoHSW to lead in hygiene promotion through the broadening of the evidence base for promoting handwashing with soap at critical times through the sharing of the Tanzania Behavior Change Journey in a series of national and district sharing workshops.</li> <li>• Contribute to the development of guidelines to promote hygiene improvement with a focus on handwashing with soap in the National Sanitation Campaign.</li> <li>• Support the MoHSW in its responsibility to provide clear guidance on implementing policy at the district level in concert with, and via the PMO-RALG.</li> </ul>	<ul style="list-style-type: none"> <li>• Use HWWS participation in PEPAM subcommittee and UNICEF coordinated WASH subcommittee to share lessons learned about handwashing with soap at scale implementation to support improved hygiene programming.</li> <li>• Provide technical assistance to PEPAM so that the GoS framework for implementing sanitation and hygiene programming is designed to include handwashing with soap.</li> </ul>

*(continued)*

EE Dimension	Peru	Vietnam	Tanzania	Senegal
Partnerships	<ul style="list-style-type: none"> <li>• If feasible, continue to publish and widely disseminate HWWS bulletins, with a focus on creative and effective contributions by partners at the regional and district levels that could later be adopted by the HWWS Hygiene and Sanitation Alliance.</li> <li>• Encourage regional, provincial, and district coalitions addressing handwashing with soap to publicize their own work and results, including the contributions of various partners, through local radio, newspapers, and public events.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with the VWU on integrating handwashing with soap activities within the VWU’s own program planning through the provision of technical assistance as per HWWS’s 2010 Transition Strategy.</li> <li>• Continue to support stakeholder business plans under development to market handwashing stations, and remain active in the partnership using the project’s convening power to help facilitate development as projected need arises.</li> </ul>	<ul style="list-style-type: none"> <li>• Take the lead in helping stakeholders develop a partnership based on the UNICEF coordinated School WASH to help define the best, most appropriate mix of methodologies for promoting handwashing with soap at scale in Tanzania.</li> </ul>	<ul style="list-style-type: none"> <li>• Organize a meeting or workshops with potential private sector partners such as soap companies and PEPAM and other interested stakeholders as appropriate, with the objective of understanding how to determine cooperation objectives, budgeting, partner roles and responsibilities, outcomes, and planning cycles.</li> </ul>
Institutional Arrangements	<ul style="list-style-type: none"> <li>• Through their social-development projects in Peru, the HWWS project and the World Bank should advocate for regional and local governments to promote handwashing with soap, using HWWS’s methodology and tools.</li> </ul>	<ul style="list-style-type: none"> <li>• Support MoH leadership on the promotion of handwashing with soap at scale at critical junctures through the development of handwashing with soap program management and training manuals for training MoH staff.</li> <li>• Provide stakeholders, especially GoV stakeholders, with packages of planning, management, training, and communications material needed to train staff to promote handwashing with soap.</li> </ul>	<ul style="list-style-type: none"> <li>• Support the MoHSW and PMO-RALG in developing instructions for allocation of financing priorities at the district level.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with GoS and development partners to help define roles and responsibilities for hygiene.</li> </ul>

EE Dimension	Peru	Vietnam	Tanzania	Senegal
Program Methodology	<ul style="list-style-type: none"> <li>• Continue collaborating with MIMDES (PRONAA, Wawa Wasi, FONCODES) in finalizing the process of adopting HWWS methodology for their programs, and then prepare the print-ready adaptations of HWWS materials.</li> <li>• Continue to work with the ministries of education, health, and the environment to finalize the process of adopting the handwashing methodology, then, time-permitting, prepare print-ready joint guidelines for the Healthy Schools program.</li> </ul>	<ul style="list-style-type: none"> <li>• Offer stakeholders the opportunity to form learning alliances with HWWS to examine the HWWS approach, methodology, training materials, and communications materials, and determine how best to sustainably adapt and use them in their ongoing programming.</li> <li>• Ensure that packages of materials, reports, studies, and manuals are completely prepared for sharing with stakeholders in a workshop or series of workshops.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue collaborating with all stakeholders to develop a process to share lessons learned in hygiene improvement and decide on a process for selecting the best approach for Tanzania.</li> </ul>	<ul style="list-style-type: none"> <li>• Hold workshops to expose the stakeholders, beyond those having signed MoUs with HWWS, to the handwashing with soap Behavior Change Journey, and tell the story of at-scale promotion of handwashing with soap in Senegal from both the perspective of the community and the community-based organizations and media companies who implemented the handwashing with soap methodology and developed IPC and DCC tools.</li> </ul>
Implementation Capacity	<ul style="list-style-type: none"> <li>• Through the Hygiene and Sanitation Alliance, provide technical assistance to public sector partners in planning, implementing, monitoring, and evaluating multisector water, sanitation, and hygiene investments.</li> <li>• Advocate with partners to support capacity building in regional and municipal governments in planning, project preparation, proposal writing, and other basic skill areas.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that handwashing with soap management and training manuals for MoH staff are developed in close coordination with the MoH.</li> <li>• Coordinate with MoH, MARD, and MOET on appropriate methods for sharing HWWS learning with GoV stakeholders comprehensively through a workshop, series of workshops, and learning notes, as appropriate.</li> </ul>	<ul style="list-style-type: none"> <li>• Advocate with national and regional government partners to include training on the handwashing with soap methodology and tools in their workplans.</li> <li>• Explore options for strengthening the use of volunteers in hygiene promotion and developing alternatives to monetary incentives; and look at integrating handwashing with soap into other community-based interventions.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide support and monitor training planned with national midwives and nutrition programs, and document progress of training and implementation plans.</li> <li>• HWWS should follow, support, monitor, and report in ongoing HWWS documentation on the handwashing with soap training provided to the midwives, nutrition program, Dakar Primary Schools, and MoE in Thies.</li> </ul>

(continued)

EE Dimension	Peru	Vietnam	Tanzania	Senegal
Availability of Products and Tools	<ul style="list-style-type: none"> <li>• In the interest of sustainability, encourage local partners (public and private) to plan for and finance additional copies of materials. Private companies may well be willing to assume this cost, particularly if their logo can be placed on the material.</li> <li>• Encourage homemade SJs, as have been made in one area of Cajamarca. Perhaps handwashing stations could be made from <i>titora</i> reed in the Lake Titicaca area.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure on-time, well-researched handwashing with soap intervention outlines including approach, methodology, training and tools, communications material, staffing, financing, and monitoring requirements, are prepared for insertion into World Bank water projects under preparation.</li> <li>• Using the convening power of the HWWS project, promote continued multistakeholder participation in marketing plans for the handwashing station model developed with IDEO.</li> </ul>	<ul style="list-style-type: none"> <li>• Review qualitative findings from program implementation to develop recommendations for locally suitable and sustainable handwashing with soap products including soap and tippy taps. This is an essential part of telling the story, and developing the evidence base for handwashing with soap promotion. Such a review can help inform other dimensions of the EE such as policy and strategy, program methodology, financing, and even implementation capacity and training.</li> </ul>	<ul style="list-style-type: none"> <li>• Stakeholders from GoS and NGOs expressed an interest in HWWS facilitating a meeting between private sector companies to figure out how to work together in an organized, well-planned way to promote hygiene and sanitation. Judging from what stakeholders said, both sides would benefit from a discussion on sharing goals, objectives, projected outcomes, and learning when and how to plan together and budget, so that collaboration can occur.</li> </ul>
Financing	<ul style="list-style-type: none"> <li>• Continue to advocate with the Ministry of Economy and Finance (MEF) to include a line item in the national budget to build the capacity of regional and district governments in planning, implementing, and monitoring behavior-change methodologies.</li> <li>• Explore with the MEF and other partners how best to offer training and other support in institutional strengthening (planning, budgeting, human resources management, etc.) to regional and district governments so they can include funding and activities for promotion of handwashing with soap in annual work plans and in multiyear regional development plans.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to advocate for the inclusion of a strong communication component for hygiene improvement that includes handwashing with soap in the NTP III.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to advocate within the MoHSW for the incorporation of hygiene and sanitation components in other health areas such as maternal health, malaria, HIV/AIDS and child survival in order to position handwashing with soap as an important component of their programming versus a rival for funds.</li> <li>• Advocate to government stakeholders for a better understanding of the evidence base for and efficacy of including handwashing with soap in ongoing programs by telling the story of handwashing with soap.</li> </ul>	<ul style="list-style-type: none"> <li>• Share the Behavior Change Journey methodology, tools, story, and results with stakeholders. Sharing results will help GoS, donors, and other stakeholders decide how to spend money allocated for hygiene and sanitation software, for developing BCC packages and approaches from the national to the community and household levels. This, combined with information on costs, could potentially provide powerful motivation, in addition to existent support (PEPAM, AGETIP, NGOs) for handwashing with soap, to continue to strengthen hygiene and sanitation behavior change.</li> </ul>

EE Dimension	Peru	Vietnam	Tanzania	Senegal
<b>Cost-Effective Implementation</b>	<ul style="list-style-type: none"> <li>• Discuss with the MEF the importance of cost-effectiveness data for its funding of handwashing with soap promotion as well as other programs. If such data will continue to be needed, organize an orientation/training for key partner staff.</li> </ul>	<ul style="list-style-type: none"> <li>• Share cost-effectiveness data results and data with stakeholders after study is completed.</li> </ul>	<ul style="list-style-type: none"> <li>• Share cost-effectiveness data results and data with stakeholders after study is completed.</li> </ul>	<ul style="list-style-type: none"> <li>• Share cost-effectiveness data with stakeholders at venues to include workshops, PEPAM Hygiene subcommittee, and UNICEF WASH subcommittee, where and as appropriate.</li> </ul>
<b>Monitoring and Evaluation</b>	<ul style="list-style-type: none"> <li>• Meet with key national and regional partners to discuss their satisfaction/comfort with current M&amp;E of handwashing with soap in their organizations. If there is sufficient demand and it is feasible, help organize orientation/training on handwashing with soap for interested partners.</li> </ul>	<ul style="list-style-type: none"> <li>• Support the inclusion of a handwashing with soap indicator in draft NTP III in conjunction with other partners.</li> <li>• Share lessons learned from the implementation of handwashing with soap at scale with stakeholders as part of a lessons-learned presentation that includes the totality of the experience across dimensions.</li> </ul>	<ul style="list-style-type: none"> <li>• Support MoHSW, regional, and local governments with implementation of village register system to monitor sanitation and hygiene, and assist in evaluating its effectiveness.</li> <li>• Work with MoHSW to include a handwashing with soap indicator in other national surveys that collect household data.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase HWWS efforts to share its learning on monitoring and evaluating handwashing with soap at scale with stakeholders through a skill-building workshop targeting different segments of stakeholders (GoS, NGO, donors) as well as in presentations to selected hygiene and sanitation subcommittees.</li> </ul>

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## VI. Considerations for Programmers

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We recommend that any organization interested in implementing large-scale handwashing with soap interventions with government counterparts undertake an EE assessment to understand the context in which programmers will be working. The EE assessment should help practitioners identify and address key factors that ultimately support or hinder the service delivery of behavior-change interventions.

The experience from this project demonstrates that it is difficult to generalize about which of the nine EE components is most important for programmers to focus on first. As this report shows, each of the countries started and ended at different places with respect to the EE. Additionally, stakeholders in any given country may value or place a different weight on anyone of the EE components.

For example, in Vietnam stakeholders did not think developing a specific policy around handwashing with soap was essential to prioritize it in the country, because they saw the inherent value of promoting handwashing with soap. Cultural and political differences and levels of economic development between countries will influence the EE of different countries, and some components may require more attention.

The key learning coming out of this project is that a programmer's assumption going into EE assessment should be that all components are equally important, and until an EE assessment is conducted, it will be difficult to know where to prioritize resources and efforts.

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