Integrating Handwashing with Soap Behavior Change into Other Programs, with Hnin Hnin Pyne
In this module, we will focus on three issues:

(i) Questions to consider when thinking about integration;
(ii) how to become more evidence-based in the decisions you make;
(iii) Four dimensions of integration

First, what do we mean by integration?
“Integration” is a process through which interventions aimed at handwashing with soap behavior change are incorporated into existing services or programs.

- Not an end in itself
- Focuses on achieving healthy behavior change

“Integration” is a process through which Handwashing with soap behavior change interventions, whether be it communications or investments, are incorporated into existing services or programs. These services or programs often have goals of reducing diarrhea, improving nutritional status or increasing rural water supply.

Integration is not an END in itself. The focus should be on the achievement of behavior change to bring about positive impacts on health.

Next, what questions should you consider?
Before deciding on the what and how of integration, step back and ask:

What is the burden and geographical spread of diarrhea, acute respiratory infections and malnutrition in the country?

Asking this question will help focus the handwashing with soap intervention on priority populations and geographic areas.
Once priority areas and populations are selected, it is important to follow a systematic and data-driven approach to developing the interventions. The FOAM framework is one such approach. This framework, based on a model formulated by Population Services International was further developed by WSP for hygiene behavior change.

In the ‘FOAM’ framework:

F stands for Focus. Remember to focus on outcome, the specific behavior or practice and target population groups (e.g. handwashing with soap after defecation in mothers with young children)

O-A-M represent determinants: O stands for Opportunities, which include access to water and soap; A for Ability; and M for Motivation.

For additional guidance on using FOAM, see the module on Behavior Change.
Selecting determinants that are true levers of behavior change for the target population is very important. This decision must be based on data. If no data exists, consider conducting formative research using both qualitative and quantitative methods.

Messages and interventions are then developed specifically to influence or modify selected behavioral determinants.

If you are considering to use existing communications messages or materials, it is critical to assess their appropriateness first. Are the messages relevant and specific enough to influence behavioral determinants that have been found critical for the target population?

With the required interventions identified, the how of integration needs to then be considered.
What are the dimensions of integration? There are four dimensions:

(i) points of entry including the setting or service and channels
(ii) supervision of the implementation;
(iii) management and oversight; and
(iv) monitoring and evaluation.
The first dimension is to determine points of entry. This includes where behavior change intervention should take place. Questions to consider include:

Which settings, such as clinics and schools, or existing services, such as postnatal care, nutrition outreach, and sanitation promotion, have the greatest reach to the target population?
Keep in mind: Research on habit formation suggests that handwashing practice is most likely to occur and be sustained if the practice is introduced during major life changes such as marriage or the birth of a first child.

So focusing on existing services that reach women and men at these momentous times would be highly effective.
Next, what would the providers need to carry out the behavior change interventions?

Training is not enough. Job descriptions must reflect the new responsibilities; incentives need to be put in place to ensure that providers deliver the messages effectively; and supervision must also be in place to ensure quality.
Take the example of Peru, where WSP helped to integrate handwashing with soap into schools. The goal was to trigger and sustain behavior change among school-aged children.

Formative research showed that schools were critical points of entry. It also showed that teachers influence children’s behaviors by setting local norms, and that teachers serve as key sources of information for mothers.

WSP developed a behavior change approach based on these findings, created messages and materials, and built capacity of teachers to provide instructions on handwashing with soap in classrooms on to mothers.
Integration was led by the Ministry of Education, which supported local governments to coordinate and supervise handwashing with soap promotion in schools.

The Ministry of Education also created a certification program for teachers. Through this program, teachers earned points after completing a required number of outreach sessions with mothers.

These points, which could be used to negotiate salary increases, provided important incentives.
Second, supervising implementation at the local level is critical to ensure that interventions are taking place as planned in terms of quantity and quality.

Handwashing with soap behavior change interventions must be included in existing supervision plans and forms, and in supervisor’s trainings.

In Peru, the WSP team found that training and points were not enough. Support and supervision on the quality of outreach and classroom sessions were important.
Third, pay attention to the management and oversight of handwashing behavior change interventions.

It’s important to clarify where overall accountability for the results lie. There must be clarity of roles, responsibilities and reporting arrangements. Lack or limited accountability at the management level is likely to lead to insufficient attention to implementation. This is a common occurrence and challenge.

In addition, management and oversight require so-called SMART indicators to track progress and incentivize performance.
Finally, a plan for integration should include monitoring and evaluation. This plan is best developed from the beginning. Ideally, you should track:

--- the coverage and reach communications interventions;
--- changes in key behavioral change determinants; and
--- behavior change outcomes.

Monitoring is critical for accountability as well as learning what is working and what is not.

Keep in mind: It is useful to include indicators related to handwashing with soap behavior change process in routine data collection and periodic surveys.
Take the example of Senegal.

PEPAM, a national agency tasked with achieving the millennium development goals for water and sanitation in Senegal, saw the importance of handwashing with soap behavior change.

WSP conducted formative research and developed a behavior change communications approach and materials. PEPAM integrated this approach and materials into their sanitation campaigns.

PEPAM included handwashing indicators into routine monitoring of sanitation and water supply. They also included indicators in an annual household surveys to track the availability of water and soap close to latrines and in places designated for food preparation.
What are some tips to keep in mind?

One, resist starting with the what and the how to integrate.

Two, focus on outcomes, especially, specific behaviors by target population groups

Three, start with the FOAM framework. Use this to develop and design a behavior change approach.

Four, Use existing knowledge and data to decide about selecting determinants that need to be influenced

Five, Only then work on the details of the what and how integration will take place.
Six, Integration should be considered at four dimensions:
- Points of entry, including setting or service
- Supervision of implementation
- Management and oversight, and
- Monitoring and Evaluation
And, remember, integrating handwashing with soap interventions is not an END in itself. The goal is to achieve results at behavior change or health impact levels.
This completes this section of the module. To learn more, please see Key Terms and tips to Keep in Mind, and additional tools and resources related to handwashing.