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## ABBREVIATIONS

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<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>DCC</td>
<td>Direct Consumer Contact</td>
</tr>
<tr>
<td>HWWS</td>
<td>HandWashing With Soap</td>
</tr>
<tr>
<td>NGOs</td>
<td>Non Government Organisations</td>
</tr>
<tr>
<td>CBOs</td>
<td>Community Based Organisations</td>
</tr>
<tr>
<td>WSP-AF</td>
<td>Water and Sanitation Program of the African Region</td>
</tr>
<tr>
<td>GoT</td>
<td>Government of Tanzania</td>
</tr>
<tr>
<td>MKUKUTA</td>
<td>The Kiswahili translation of the National Strategy for Growth and Poverty Reduction</td>
</tr>
<tr>
<td>TSSM</td>
<td>Total Sanitation and Sanitation Marketing</td>
</tr>
<tr>
<td>FLA</td>
<td>Frontline Activator</td>
</tr>
<tr>
<td>RAs</td>
<td>Resource Agents</td>
</tr>
<tr>
<td>DCs</td>
<td>District Coordinators</td>
</tr>
</tbody>
</table>
ACKNOWLEDGEMENT

This facilitator’s guide was developed with inputs from Ethiopia’s “Training in Community-led Total Behavior Change in Hygiene and Sanitation guide”, “Building interpersonal communication skills manual” for UNICEF India, Global Handwashing Planner’s Guide and training materials on the handwashing campaign from Uganda.
The Water and Sanitation Program of the Africa Region (WSP-AF) is supporting the Government of Tanzania in improving sanitation and hygiene behaviors. Tanzania has adopted the MKUKUTA (the Kiswahili translation of the National Strategy for Growth and Poverty Reduction, Tanzania’s version of the PRSP), which has the target of providing 95% sanitation coverage by 2010. WSP-AF is supporting the Government of Tanzania (GoT) in scaling up hygiene and sanitation in rural settlements in order to meet the MKUKUTA goals.

WSP’s sanitation and hygiene project in Tanzania has three components. The first is the Total Sanitation and Sanitation Marketing (TSSM) project, with the following objectives:

i) To increase the improved sanitation coverage in Tanzania through developing large scale and sustained demand for improved sanitation, and simultaneously supplying it with appropriate products and services.

ii) To learn the most effective ways to do the above, and how to replicate it on a large scale and in other contexts.

The second is the National Handwashing with Soap Initiative (HWWS) and has the objectives of:

i) Planning and implementing a large-scale, sustainable handwashing with soap program

ii) Learning and documenting program impact and effective approaches to stimulating, scaling up, and sustaining improved handwashing behavior.

The third is the Impact Evaluation (IE), which has the objective of estimating the direct impact of the two components above on the health and welfare of the rural poor in Tanzania. A thorough baseline survey of the target population is being undertaken to determine:

- the range of sanitation technologies they use
- rates of handwashing
- current rates of diarrhea incidence and acute respiratory infections

The sanitation and hygiene project is to be implemented in 10 rural districts in Tanzania: Igunga, Iringa, Karagwe, Kiteto, Kondoa, Masasi, Mpwapwa, Musoma, Rufiji, and Sumbawanga. The two projects support each in that the sanitation focuses on demand creation for improved sanitation and skills to provide increased demand for sanitation services and products, the HWWS on the other hands concentrates on creating handwashing with soap at the critical times. The sanitation targets households and community while the HWWS targets primary care providers especially mothers with children under five years and children aged between 9-12 years.

The HWWS is designed to influence positive hygiene behaviors change and stimulate demand for improved sanitation services and needs of the Tanzanian rural poor. This is being accomplished by building on what has been learned by previous water and sanitation efforts in the country and design
and implement hygiene behaviors change communication, promote handwashing with soap and work with communities and suppliers to build their capacity to respond to the growing needs of soap and related services.

The HWWS is promoting use of soap at critical moments, especially among mothers and caregivers of children under five years and children aged between 5-14 years. It promotes washing. It uses a combination of commercial and social marketing approached to stimulate behaviors change among primary and secondary target audiences. Studies show that handwashing with soap can reduce diarrheal incidence by 42-47% and can reduce the transmission of acute respiratory infections by over 30%.

The handwashing project is working closely with the Ministry of Health and Social Welfare through the hygiene and sanitation unit in the directorate of preventive services, the Ministry of Water and Irrigation’s community water supply and sanitation department, and the districts’ water and sanitation/hygiene groups in the selected districts. Several local private sector soap companies are increasingly showing interests to leverage this project.

This project has a very rigorous monitoring and impact evaluation element. The data from a baseline evaluation will inform the current intervention and will be compared to end of the project impacts. The impact evaluation will also help to compare current and future rates of diarrhea and handwashing with soap practices. In addition, enabling environment assessment, different rounds of consumer research and preferences will be conducted to determine obstacles and opportunities for future scalability of the project.
THE HWWS CAMPAIGN

The HWWS campaign seeks to achieve widespread and sustained increases in improved handwashing with soap at critical times (after contacting feces and before handling food) among rural mothers and caretakers of children under five years old.

The **goal** of the HWWS campaign is:

“Establish the behaviour of Hand Washing With Soap after defecation, after cleaning a baby’s bottom, before preparing food/cooking and before eating.”

The **objective** of this project is:

- To make the mother who is the caretaker of the family believe that HWWS is a critical part of daily life and by inculcating this simple habit in her family she is fulfilling her role and responsibility.

This objective will be achieved by:

- Having the mother believe that by teaching simple, hygienic habits like Hand Washing With Soap her children are less vulnerable to illness and can attend school regularly thereby ensuring a successful future.

- Hand Washing With Soap is easy and simple to achieve and maintain.

**Campaign Strategies**

The campaign will use 3 main strategies which will reinforce each other. These are mass media, Direct Consumer Contact (DCC) and Interpersonal Communication (IPC).

**Mass media:** will include printed and audio visual materials designed to reach the mass audience. The campaigns messages are principally going to be aired on various radio stations in the project area.

**Direct Consumer Contact (DCC):** This will be a combination of entertainment and education that can attract large audiences. DCC activities will include use of drama (both from the contacted group and community, video shows, music, poetry and road shows etc).

**Interpersonal Communication:** will mainly be in form of group discussions and/or on a one-to-one basis. The campaign will communicate with groups and work with existing social networks within a community or village to promote the behaviour of HWWS. Facilitating dialogues with existing groups will help to generate further discussion and action on HWWS. One of the key activities under the IPC component of the campaign is to train Frontline activators who will be responsible to conducting the community dialogues and promoting HWWS.
ABOUT THE TRAINING

Aim

With this training WSP and Government of Tanzania aim to promote Hand Washing With Soap (HWSS) at critical moments, especially among mothers and caretakers of children under five years. It promotes washing hands with soap at four critical times: 1) after defecating, 2) after handling children’s faeces, 3) before food preparation, 4) before handling food.

Objectives

The objectives of the training are:

1. To equip participants with accurate information and skills on HWSS
2. For participants to understand the concepts of interpersonal communication and their importance in promoting HWSS.
3. To make participants aware of their roles and responsibilities as Frontline activators and as change agents who can trigger the process of behaviour change
4. For participants to understand how to plan and implement HWSS activities in the community
5. Ensure participants are able to carry out the necessary IPC monitoring.

Training outputs

By the end of the training participants will:

• Be able to demonstrate accurate information on HWSS
• Be able to conduct IPC community events in the community using IPC skills
• Know their roles and responsibilities in the HWSS campaign
• Be able to monitor their activities

Duration of training: Three days

Who is a Frontline Activator (FLA)?

A FLA is a community member who is trusted and respected by their community and is interested in improving their communities. The FLA will be a responsible for promoting HWSS in their community.

A FLA can be selected from any of the following categories of people:
Health officers (ward level), teachers, Village health workers, religious leaders, community leaders, community development officers, Village WATSAN committee members and volunteers from the
Each ward in the project area that is implementing HWWS will select five FLAs for training.

**Criteria for Selection**

The community with the guidance of the district and Resource Agencies (RA) will select FLA using the suggested criteria below:

The FLA should be:

- Resident in the ward
- Aged between 18-49
- Able to read, write and count
- Committed to improving their community
- Respected and accepted by the community
- Willing to work as a volunteer

**NB:** To the extent possible it is preferable that all FLAs are women. During the selection process it should be made clear to the community that the FLAs will work on a voluntary basis but will be equipped with skills and knowledge on IPC and HWWS, given materials to support them during implementation e.g. pens, books, given identification items like badges, t-shirts etc.

**FLA Roles and responsibilities**

The FLA plays a central role in the campaign. All the other strategies mass media and direct consumer contact rely on them to reinforce the campaign messages. The FLA puts a face to the campaign message. This means the FLA interacts with the community to promote handwashing, encourage the community to listen to the messages aired through mass media, mobilize and participate actively in the DCC activities. Specifically you:

- Promoting HWWS in both formal and informal settings
- Follow-up on homes/communities sensitized to encourage adoption of behavior
- Participate and mobilize communities for DCC events
- Demonstrating how to make and use a handwashing facility
- Demonstrating how to wash hands
- Referring community members to masons and other district staff for further help
- Collect data using the IPC monitoring form
ABOUT THIS GUIDE

Purpose of this guide

This training guide is for trainers who are leading workshops with FLAs. The guide is designed to lead trainers through sessions on different topics by providing participatory activities and key messages for each session. Remember that this guide is a guide and should be used for reference only -- not read aloud word for word. Trainers should adapt the activities and messages in this guide to meet the needs and desires of particular audiences, taking into account their education levels, relationships to one another, and roles in the community.

Structure of the training guide

In order to enable FLAs to communicate strategically about HWWS this training guide provides sessions both on how to communicate and what to communicate. The topics covered are:

- Being a FLA
- Hand Washing With Soap (HWWS)
- Communication
- Interpersonal Communication Skills
- Planning
- Monitoring and reporting

There are three main parts of this manual:

Part 1: Session Guides
Each session begins with an introduction page laying out the objectives, duration, materials, session procedures and notes for the facilitator. The curriculum is then laid out with activities and key messages addressing each objective. Trainers are encouraged to tailor the activities and content to meet the desires of the target audience.

Part 2: Facilitators’ Notes
The facilitators’ notes are at the end of each session and will assist to give more information on each topic.

Part 3: Participatory Training methods
The participatory methods are used in this training to make learning activities entertaining and give the training a sense of momentum.

Facilitators’ reference guide:

As part of the training manual, a facilitators’ reference guide has been developed to provide important
background information on each topic for the facilitator. Facilitators should read these modules in full before the beginning of a session. Then, these sections can be used for reference during training.

**Facilitation Tips**

Being a strong facilitator takes time and dedication. It can be a lot harder than being a lecturer or teacher because you have to do more than just “tell people what you know.” Rather, your role is to engage and channel the thoughts and experiences of the people in the room so that they form accurate and powerful conclusions. Remember to:

- **Be a learner:** A facilitator is not the source of all knowledge but a person who will listen, guide and suggest rather than direct.

- **Trust in your participants:** All people have experiences, knowledge and resources from which others can learn. Remember to trust in the capacities of your participants!

- **Create an atmosphere of confidence:** By being self aware, open, and respectful of participants’ opinions, you can create an environment in which people feel free to share their thoughts and experiences.

- **Be prepared:** Strong facilitators know their subject, audience, and curriculum. Know the learning objectives & how they relate to activities.

- **Be flexible:** Sometimes, learning methods will need to change to meet the needs of a particular group - find creative ways to adapt your curriculum to meet their needs.

<table>
<thead>
<tr>
<th>Before a training</th>
<th>During a training</th>
<th>After a training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Know the audience</td>
<td>Introduce trainers, participants and topic</td>
<td>Assess the trainee’s understanding</td>
</tr>
<tr>
<td>Identify training needs</td>
<td>Set ground rules</td>
<td>Evaluate the training</td>
</tr>
<tr>
<td>Set targets</td>
<td>Assign responsibilities (time keeper, etc)</td>
<td>Make action planning</td>
</tr>
<tr>
<td>Review objectives &amp; make a training plan</td>
<td>Find out expectations &amp; fears</td>
<td>Plan follow-up activities</td>
</tr>
<tr>
<td>Read through all training materials and find out else you need to know</td>
<td>Relate expectations to objectives</td>
<td>Clean the training space</td>
</tr>
<tr>
<td>Prepare materials &amp; logistics</td>
<td>Provide logistics</td>
<td>Hold trainer review session</td>
</tr>
<tr>
<td>Check out &amp; arrange a venue</td>
<td>Involve participants</td>
<td>Document training &amp; lessons learned</td>
</tr>
<tr>
<td>Hold a planning meeting with facilitators</td>
<td>Monitor attention levels and understanding</td>
<td></td>
</tr>
<tr>
<td>Set up the room so that participants sit in a semi-circle – to foster discussion</td>
<td>Use energizers when needed</td>
<td></td>
</tr>
<tr>
<td>Arrange handouts</td>
<td>Follow activity plan</td>
<td></td>
</tr>
<tr>
<td>Prepare flipcharts</td>
<td>Vary your learning methods</td>
<td></td>
</tr>
<tr>
<td>Register participants</td>
<td>Control the group</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Deal honestly and carefully with sensitive topics</td>
<td></td>
</tr>
</tbody>
</table>
Facilitation skills are essential in this training process. It is therefore recommended that the Resource Agents (RAs) and the district staff identify skilled facilitators who can effectively communicate to/with the FLAs. The facilitators should have gone through the training of trainers. The facilitators should also go through the sessions for the day prior to each day’s training.

**Venue**

The facilitator should make sure that the training venue is identified in time and is available for the training on the specific days. Clear communication should be sent to the FLAs so that they are aware of the training in time. The FLAs should also be informed about the training at least one week in advance to enable them prepare for the training.

**Practice Sessions**

The facilitator should make sure that all the materials required for the practical sessions are in place. This is for sessions on handwashing and making a tippy tap.

**Materials**

Make sure that enough copies of the participants handouts to use during the session especially for the sessions with role plays. The other materials that should be prepared for each session are included in the manual like; flip chart and flip chart stand with adequate and assorted color markers, VIPP cards, etc.

**Timetable for the training**

The training is to take three days. FLAs will be mobilized to attend the residential by the Resource Agencies (RAs) and District Coordinators (DCs). Below is the timetable:

<table>
<thead>
<tr>
<th>DAY ONE</th>
<th>Time</th>
<th>Activity</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30 a.m. - 9:15 a.m.</td>
<td>Registration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:15 a.m. - 9:30 a.m.</td>
<td>Opening remarks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SESSION 1: GETTING STARTED</td>
<td>9:30 am - 9:50 am</td>
<td>Introductions</td>
<td>Interactive game</td>
</tr>
<tr>
<td>9:50 am – 10:05 am</td>
<td>Expectations and Fears</td>
<td>Plenary session</td>
<td></td>
</tr>
<tr>
<td>10:05 am – 10:15 am</td>
<td>Ground rules</td>
<td>Plenary session</td>
<td></td>
</tr>
<tr>
<td>10:15 am – 10:30 am</td>
<td>Logistics and forming groups</td>
<td>Interactive game</td>
<td></td>
</tr>
<tr>
<td>10:30 a.m. - 10:45 a.m.</td>
<td>BREAK TEA</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### SESSION 2: HAND WASHING WITH SOAP CAMPAIGN

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:45 am – 11:30 am</td>
<td>Background to HWWS campaign</td>
</tr>
<tr>
<td>11:30 am - 12:00 pm</td>
<td>Critical times for washing hands with soap</td>
</tr>
<tr>
<td>12:00 pm – 1:15 pm</td>
<td>How to make a tippy tap with a soap holder</td>
</tr>
</tbody>
</table>

**LUNCH**

### SESSION 3: BEING A FRONTLINE ACTIVATOR

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>2:00 pm – 2:20 pm</td>
<td>Sharing Experiences</td>
</tr>
<tr>
<td>2:20 pm – 3:00 pm</td>
<td>Who is a Frontline activator and what are the benefits of being one?</td>
</tr>
</tbody>
</table>

### SESSION 4: EFFECTIVE COMMUNICATION

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>3:00 pm – 3:30 pm</td>
<td>Effective communication</td>
</tr>
</tbody>
</table>

### SESSION 5: INTERPERSONAL COMMUNICATION

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>3:30 pm – 4:00 pm</td>
<td>Interpersonal communication</td>
</tr>
<tr>
<td>4:00 pm – 5:00 pm</td>
<td>Developing IPC skills of participants</td>
</tr>
</tbody>
</table>

### DAY TWO

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30 am – 8:45 am</td>
<td>Re-cap of day one</td>
</tr>
<tr>
<td>8:45 am – 9:30 am</td>
<td>Learning and listening skills.</td>
</tr>
<tr>
<td>9:30 am – 10:00 am</td>
<td>Asking open-ended questions</td>
</tr>
<tr>
<td>10:00 am – 10:30 am</td>
<td>IPC Continued: Using responses and gestures</td>
</tr>
</tbody>
</table>

**TEA BREAK**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00 am – 11:30 am</td>
<td>Reflecting back</td>
</tr>
</tbody>
</table>

### SESSION 6: ASSESSING AND ANALYSING PROBLEMS RELATED TO HWWS

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:30 am – 12:30 pm</td>
<td>Assessing and analysing problems related to HWWS</td>
</tr>
</tbody>
</table>

### SESSION 7: STEPS TO BEHAVIOUR CHANGE

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:30 pm – 1:00 pm</td>
<td>Steps to behaviour change</td>
</tr>
</tbody>
</table>

**LUNCH**
<table>
<thead>
<tr>
<th>SESSION 8: FIELD VISIT</th>
<th>2:00pm – 5:00pm</th>
<th>Field Visit</th>
<th>Group work</th>
</tr>
</thead>
</table>

**DAY THREE**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30am – 8:45am</td>
<td>Recap of Day Two</td>
<td>Plenary</td>
</tr>
<tr>
<td>8:45am - 10:00 am</td>
<td>Presentations from field trip</td>
<td>Plenary</td>
</tr>
</tbody>
</table>

**SESSION 8: PLANNING FOR IPC ACTIVITIES**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:00am – 10:30am</td>
<td>Planning for IPC activities</td>
<td>Group and plenary discussions</td>
</tr>
<tr>
<td>10:30am – 11:00am</td>
<td><strong>TEA BREAK</strong></td>
<td></td>
</tr>
<tr>
<td>11:00am – 1:00pm</td>
<td>Planning for IPC activities</td>
<td>Group and plenary discussions</td>
</tr>
</tbody>
</table>

**SESSION 9: USE OF INFORMATION, EDUCATION AND COMMUNICATION MATERIALS**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>2:00pm – 2:45pm</td>
<td>Use of IEC materials</td>
<td>Plenary discussions and role play</td>
</tr>
</tbody>
</table>

**SESSION 10: MONITORING OF IPC ACTIVITIES**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>2:45pm – 4:00pm</td>
<td>Monitoring IPC activities</td>
<td></td>
</tr>
<tr>
<td>4:00pm – 5:00pm</td>
<td>Closure and Lunch</td>
<td></td>
</tr>
</tbody>
</table>
SESSION 1: GETTING STARTED

Purpose:

The purpose of this session is to establish enabling group dynamics like respect, trust, and openness. By getting acquainted with one another, sharing expectations, and setting ground rules, participants will be positively engaged in the workshop from the very start.

Objectives:

By the end of this session, participants will have:

1. Become acquainted with one another
2. Related their expectations and fears to workshop objectives
3. Generated a list of the simple things you can do to have a good workshop
4. Reviewed logistics and formed groups for the training

Methodology:

Mutual interview, brainstorming, group decision-making

Materials:

Flip chart paper, pieces of manila paper, markers and masking tape

Preparation:

- Write the objectives of this training on a flipchart
- Write on different pieces of paper equivalent to the number of participants the following sentences: Washed hands with water and soap after using toilet, Washed hands with water alone after using toilet, Did not wash hands after using toilet. Fold them into two.

Duration: 20 minutes

Session 1.1 Introductions

Procedure:

1. Welcome participants to workshop briefly.

2. In plenary pass around the pieces of paper and let each person pick one. When everyone has picked a piece of paper let them read what is written on the paper. Each participant must make sure that no one-else reads what is on the paper they have.

3. Ask the participants to move around the class shake hands and greet each other. Each person should greet at least four to five people. As they greet each other let them find out their name,
place of work, and any other information.

4. Ask participants to comeback in plenary and introduce the person next to them. Then let each of them read the message on the paper to the rest of the group.

5. Mention that they got to know each other through the greeting but cannot know who had washed hands with water and soap after using the toilet or not. Link this to what happens in the community when people do the actions written on the paper.

6. Mention that we are here to learn more about the consequences of not washing hands with soap at specific times. Inform them that they will learn more about this subject as the training proceeds.

**Session 1.2  Relate expectations and fears to training objectives**

**Duration:** 15 minutes

**Procedure:**

1. In plenary ask participants their expectations and fears of this training and write them on the flip chart.

2. Address fears and identify any expectations and fears that are outside the scope of the workshop.

3. Compare the expectations to the objectives of the training. Remind participants during the workshop to check if their expectations are being met and fears overcome.
   i) To equip participants with accurate information and skills on HWWS
   ii) For participants to understand the concepts of interpersonal communication and their importance in promoting HWWS.
   iii) To make participants, aware of their roles and responsibilities as Frontline activators and as change agents who can trigger the process of behaviour change
   iv) For participants To understand how to plan, and implement HWWS activities in the community
   v) Ensure participants are able to carry out the necessary the IPC monitoring.

---

**Objectives of training**

The objectives of the training are:

1. To equip participants with accurate information and skills on HWWS
2. For participants to understand the concepts of interpersonal communication and their importance in promoting HWWS.
3. To make participants, aware of their roles and responsibilities as Frontline activators and as change agents who can trigger the process of behaviour change
4. For participants To understand how to plan, and implement HWWS activities in the community
5. Ensure participants are able to carry out the necessary the IPC monitoring.
Session 1.3 Ground rules to have a good workshop

Duration: 10 minutes

Procedure

1. In plenary have participants generate a list of norms (“ground rules”).

2. Ask participants to select a “host team” to help ensure that the training runs smoothly. Include a team leader, time keeper, and welfare monitor.

Session 1.4 Logistics and forming groups

Duration: 15 minutes

Procedure:

1. Divide the participants into groups of six. Let participant count from one up to six and all those that mentioned the same number will form one group.

2. Tell the participants these groups will be their groups for the rest of the workshop.

3. Give groups 3 minutes to think of a team name and a team symbol that is easy to draw.

4. Review logistics: meeting times, place, meals, schedule, etc.
SESSION 2: HAND WASHING WITH SOAP CAMPAIGN

Purpose
The purpose of this session is give information to participants on the HWWS and the campaign.

Objectives
By the end of this session, participants will be able to:

1. Appreciate the need for a HWWS campaign
2. Know the benefits of HWWS
3. Know the critical times to wash hands

Methodology:
Presentation, plenary discussion

Materials:
Flip chart paper, markers and masking tape, overhead projector (if possible), Soap and water (of known volume, so water can later be measured in it), Bucket and pitcher

Session 2.1: Background to HWWS campaign

Duration: 45 minutes

Procedure:
1. Use the presentation in the facilitator’s training guide to introduce participants to the campaign.

2. Allow participants to ask questions where they are not clear.

3. In plenary ask participants the following questions:
   - what can be done to prevent the diseases mentioned in the presentation
   - why should we wash hands with soap
   - What are the different methods of washing hands in the community

4. Wrap up session emphasizing the need the importance of washing hands with soap at critical times.
Session 2.2 Critical times for washing hands with soap

**Duration:** 30 minutes

**Procedure:**

1. Mention to participants we’re going to find out how many times a day a mother needs to wash their hands and when.

2. In their groups ask to do the following:
   - Think of a mother and let them start identify the household tasks she performs from the time she wakes up in the morning to the time she goes to bed. Including using the toilet, preparing food and cleaning the baby’s feaces.
   - Let them identify at which junctures the mother needs to wash hands with soap.
   - What makes it hard for a mother to wash hands in a day?

3. Help the participants to see that it would cost more money to treat the sick child than to wash hands.

4. Emphasize HWWS as being important for critical junctures:
   - After defecation
   - After cleaning a baby’s bottom
   - Before preparing food/cooking
   - Before eating

5. Conclude by mentioning that it is the responsibility the FLAs who are also change agents to help people see that it is possible to take up the new behavior of handwashing with soap.

**Note to facilitator**

**Benefits of handwashing with soap and water**

- Regular handwashing with soap and water
- Keeps away diseases and helps you save money that you could have used in treating children
- It saves you time especially during harvesting and planting season. You are able to concentrate on work instead of looking after sick children
- It keeps your children healthy
- Makes you have hands to be proud of

**Rewards to Mothers**

Handwashing with soap and using a tippy tap will help the mother:

- Save time and water because with the tippy tap less water is used for handwashing
- Save time and money because children will not fall sick often with hygiene related diseases
- Have happy, healthy children which is a reward of their hard work in the home
- Have a family with hands to be proud of.
Session 2.3: How to make a tippy tap with a soap holder

Objectives: By the end of this session, participants will know:

1. Hand Washing with Soap is easy and simple to achieve and maintain.

Preparation: Practice making one or two types of functional tippy taps

Materials: Handout on How to Make a Tippy Tap, Plastic 3 litre jerrican, String for hanging, Nails, candles, matches for poking holes in vessels

Duration: 1 hour 15 minutes

Procedure:

1. **Mention that**: Because hand washing requires a lot of water, we know it is hard for families to wash when it means more trips to the well, more purchasing of water, more effort. One way we can influence improved hygiene practices is to reduce some of the barriers to hand washing. For example introducing the tippy tap which is a simple technology that saves water and makes hand washing easier.

2. Show participants the flyer on how to make a Tippy Tap with a soap holder and go through it with them.

3. Demonstrate how to make the tippy tap with the materials provided.

4. In their groups let them follow instructions on the flyer and make a tippy tap with the materials provided,(3 litre plastic jerrican with lid, nail, candle, 3 metre length of string, soap).

5. When they complete making the tippy tap have them fill the jerrican with water. Let the participants demonstrate the correct washing hands with soap method as indicated in the steps at the end of this session.

6. Select another group of participants to wash hands with soap using a jar and a basin/container, pouring water over the hands as is commonly done.

7. In both demonstrations take note of the waste water being caught in the basin or container below. Compare the amount of water used to wash hands when using a tippy tap and when pouring water over the hands with jar.

8. **Mention that**: that less water is used when using the tippy tap. This means the tippy tap will help save water in the home.

9. Discuss other possible advantages to the tippy tap (able to WASH with just one person, don’t need a second person to pour water; takes hand washing out of the ‘domain’ of the woman… now that it’s a ‘technology’, men might maintain it.)

10. Discuss where it can be placed and any improvements to the design.

11. Ask participants if it is possible to use cut a small piece of soap from what they have and use it for handwashing? Mention that we are not requesting them to buy soap for handwashing. But we are
suggesting they use what they have and prioritise washing hands after the critical junctures. Soap for handwashing can be part of the household budget and yet not be an extra cost.

*Note to Facilitator: Refer to the facilitator’s guide for the steps on how to make a tippy tap.*

**Steps to correct handwashing: (Refer to handwashing flyer)**

1. Wet your hands with water
2. Lather your hands with soap.
3. Rub the palms, in between fingers, under nails, and the back of your hands vigorously.
4. Keep your finger nails always short for an easy cleaning because nails hide germs.
5. Reach as high as your wrists.
6. Rinse your hands well with running water (pour from a jug or tippy tap)
7. Dry them in the air to avoid recontamination on a dirty towel or dirty clothing.
SESSION 3: BEING A FRONTLINE ACTIVATOR

Purpose:

The purpose of this session is to develop an understanding of a FLA. By sharing experiences on convincing a friend to try out a new product/behavior etc, participants will be able to create an understanding of a FLA that is practical and effective, and this understanding will be used throughout the workshop.

Objectives:

By the end of this session, participants will be able to:

1. Define FLA and understand its benefits
2. Identify the qualities of an effective FLA

Methodology:

Sharing experiences, brainstorming, role plays, games

Materials:

Flip chart paper, pieces of manila paper, markers and masking tape

Preparation:

- Write out manila cards, one with each of the 5 W’s of a FLA
- Who is a FLA?
- What are the roles of a FLA in promoting HWWS?
- Where and when can an FLA’s conduct community activities?
- How does one benefit from being a FLA?

Session 3.1 Sharing Experiences

Duration: 20 minutes

Procedure:

1. Invite one or two participants to tell a story of a time when they convinced a friend or family member to try out a new product/behavior that would improve their life. Briefly discuss the challenges and successes of these experiences.
2. Explain that many people find it important someone takes the time to give them the pros and cons to taking up a new product or behavior. They want confirmation that the product or behavior is beneficial to them and will not cost them much. Here cost does not only refer to money alone but other elements like time and effort. FLAs can therefore be leaders of change and personal sellers in their community.

Session 3.2: Who is a Frontline activator and what are the benefits of being one?

Duration: 40 minutes

Procedure:

1. Based on the stories just told in the session above ask the participants to answer the following questions in their groups. Incase time is a constraint each group can answer two questions and then present in plenary.

- Who is a FLA?
- What are the roles of a FLA in promoting HWWS?
- Where and when can an FLA’s conduct community activities?
- How does one benefit from being a FLA?

2. Let each group present in plenary and have a discussion.

Key points for the facilitator

Emphasize the non-tangible benefits of being a FLA. This includes; being respected in the community, having access to extra information and training that others do not have, being able to create motivation for change in the community etc.

Refer to reference guide for the roles and responsibilities of an FLA
SESSION 4: EFFECTIVE COMMUNICATION

OBJECTIVES

By the end of this session, the participants will be able to:

1. Explain the components of the communication loop.
2. Give some examples of miscommunication.
3. Identify barriers to communication.

Methodology: Participatory games, group discussions, plenary presentations

Duration: 30 minutes.

Materials: Flip chart, VIPP cards, Markers

Procedure:

In plenary let participants define communication. After listening to the participants give the definition in the reference guide.

1. Give out instruction for the whispering game. Ask participants to stand in a semi circle.

2. Whisper a sentence in the ear of the first participant. Example of sentence: “Makoma’s family does not wash hands with soap and water after using the toilet or before eating food so his children always suffer from diarrhea.”

3. Ask him/her to whisper the same sentence to the next participant only once and so on.

4. After the message reaches the last participant ask three or four people to repeat what they were told including the first and last person.

6. Tell the group the sentence you told the first participant.

7. Compare the similarities and differences; ask why there was a breakdown in communication and relate to real life experiences. Allow participants to share their experiences. Ask participants how they can avoid such distortions.

8. Post a flip chart paper showing the two boxes of “sender” and “receiver”. Explain the model and emphasis the importance of two way communication.
**Note to facilitator**

**Key Message**
Communication is a two way dialogue.

Picture 1:

COMMUNICATION LOOP

ONE WAY COMMUNICATION

<table>
<thead>
<tr>
<th>SENDER</th>
<th>Message</th>
<th>RECEIVER</th>
</tr>
</thead>
</table>

Picture 2:

COMMUNICATION LOOP

TWO WAY COMMUNICATION

<table>
<thead>
<tr>
<th>SENDER</th>
<th>Message</th>
<th>Communication</th>
<th>Feedback</th>
<th>RECEIVER</th>
</tr>
</thead>
</table>

Facilitator Notes:

**BARRIERS TO EFFECTIVE COMMUNICATION**

The following are possible barriers to effective communication:

- Different assumptions.
- Different points of view.
- Emotions.
- Misunderstanding of language.
- Use of difficult words.
- Lack of attention.
- Poor clarity of speech.
- Conflicting body language.
- Sending discouraging feedback.
- Cultural differences.
- Lack of trust.
- Too much information.

**WAYS TO IMPROVE COMMUNICATION**

- Become sincerely interested in the other person.
- Listen well. Check your own understanding of what the other person said.
- Try to see things from the other person’s point of view.
- Use appropriate words.
- Speak clearly.
- Encourage questions.
- Know exactly what you want to communicate.
- Think: “How is it possible for someone to misunderstand my message?”
- Ask yourself: “Am I giving too much information or not enough?”
- Use encouraging non-verbal communication.
- Check people’s understanding.
objective

1. To get participants to share their views on what they think IPC is all about.
2. To make participants aware of the concepts and principles of IPC.
3. For participants to gain a framework for IPC skills

Methodology: Plenary discussions, role plays, plenary discussions

Materials: Chart papers, markers, VIPP Cards Handout on GATHER - steps, principles and topics of IPC.

Duration: 30 minutes.

Procedure:
1. In plenary ask participants to tell you what they understand by IPC. Write their responses on a flip chart. This will take 10 minutes. Discuss in brief their ideas on what is IPC and give them the correct definition.

2. Present the conceptual model of GATHER presented under Note to facilitator. The six principles of GATHER approach should be presented on a flip chart. Refer to the facilitator’s notes.

3. The handout can be given after the session. Develop the steps explaining each step at a time.

Note to facilitator

Interpersonal communication (IPC, is the face to face verbal or non-verbal exchange of information and feelings between two or more people.

THE SIX STEPS OF “GATHER”

The six steps of Community/Individual Interaction.

1. Greet the community, participants.
2. Ask people about themselves
3. Tell people why you have come and what you can offer.
4. Help people in decision-making – do they want to accept what you are offering. If there are choices help them to make a decision.
5. Explain fully the information on their decision.
6. Return to the community to see how things are going and whether anyone has any problems or need any support.
1. GREET

i) Whenever you organize/attend a meeting or visit a household, greet everyone as far as possible according to local tradition. Introduce yourself and your organization.

ii) Introduce your organization in the local context. Example – my organization works to improve the conditions of the community. Just like your Local committees work for the development of the community, so do we function as an organization that that works for development.

iii) Share a few words about general development and how with little resources we can do many things for our community. For example: There are many things that affect the good health of children and a family. There are many simple things that you can do at home to make life better for yourselves at low cost. We have come to learn from you and share with you what we know.

REMEMBER:

Be informal in your dealing with and informal groups and formal when you are in formal gatherings like community meeting etc. Do not sit with an open note book. The community might be intimidated. Ask for permission to take notes after ensuring good rapport has been built.

2. ASKING

If in an informal setting after greeting and introduction, this is moment to allow the group/community to talk. If it is a formal setting after greeting and introduction, you can ask a general question on health and development of the particular area/community you are in. Do not jump into issues on health because this is not what they may be thinking about at that moment. After they have opened up enough, you can become specific on HWWS. It is important for you to know some basic information on HWWS in the community you are in.

LISTENING IS A SKILL

Listening is a skill. Listening means – encouraging others to talk. Listening means giving others space to express what they feel. Listening means – winning the heart and soul of someone who you would want to make a healthy decision. (Refer to the reference guide for more information)

3. TELLING

FRAME YOUR ANSWER KEEPING IN VIEW
• What they already know about the subject.
• What they may want to know?
• What specific fears or myths they have about the subject?

USEFUL TIPS
• Do your homework thoroughly. Collect all sorts of information, be prepared to answer potential questions and, tackle fears and myths related to the subject. Study the IPC materials that are with you.

• Do not pretend to know everything. If not confident about some information, say clearly that you will return and reply to all their queries after consulting.
4. HELPING, FACILITATING, ENCOURAGING

In order for the community to change their behavior or attitude (in favor of the information that you are giving them - wash your hands with soap at critical junctures — they need, in addition to factual information support and encouragement from all around, within their social environment e.g. from their peers and friends, other family members, the wider community in addition to factual information.

This means helping them to overcome their personal fears or beliefs. Many people do not wash their hands with soap because they think it costly, or the husband has not provided the money, there is no handwashing facility near the toilet or culture says children’s feaces are not harmful etc. Therefore other community influential persons religious leaders, local clerics, health workers, spouses and other influencers belonging to their own community to take an active role in convincing mothers and caregivers to change their behavior.

5. EXPLAIN

**REMEMBER:**
- Use educational/information materials. Choose those that are appropriate to the issue at hand.
- Visual materials explain better and have higher retention value. A popular media message evaluation study states – we recall 10% of the things that we hear, we recall 50% if we hear and see, we recall 90% if we hear, see and DO. This means, the motivator/volunteer needs to be fully ready with visual materials before a meeting etc.
- Use local examples, simple analogies, language, folklores etc.

6. REPEAT YOUR VISIT

Repeated visits win trust. Repeatedly meet the community. Maintain records of what they say and ask for.

**EXAMPLES:**
- If they have said they do not now how to make a tippy tap, try to help them make one or link them up to a mason.

**SESSION 5.1 Developing IPC skills of participants.**

**OBJECTIVE**
By the end of the session participants will

1. Understand interpersonal and motivational skills

**Methodology:** Role plays, plenary discussion

**Material:** Role plays case studies

**Preparation:** Make copies of the role play to give to participants, Familiarize yourself with the role plays and questions, write the questions at the end of each role play on flip chart paper

**Duration:** 1 hour
Procedure:

1. Start with a role play. Get two of the already identified groups. Take them out of the hall. Share with each group a story plot or situation below.

2. Instruct them to prepare a role play based on the situation. Allot them 10 minutes to present.

3. Tell the rest of the participants to; observe the role play and take special note of the FLA’s.

4. Ask participants to answer the questions at the end of the role plays?

5. Ask the groups that did the role play to become observers and the observers to act the same role plays improving them using the GATHER approach and the IPC skills they just learnt.

Role Plays

SITUATION I

This is Ali’s house. Ali is a fisherman. He goes for fishing and cleans the fish at home before he takes it to the market. Ali is busy cleaning the fish so he can dry it. His daughter is helping him with the cleaning. His wife is also present in the house doing the household chores. Mary the FLA of this village has come to meet him and tell him about the HWWS and how it would be beneficial for him to start promoting the practice in his home.

She enters Ali’s house without seeking any permission or knocking at the door. She is carrying a register and a pen. While Mr. Ali is sitting on the floor, she draws a chair and sits on it. She is asking questions and is continuously writing in the register. Ali is replying without paying any attention. Mary is looking at her watch and seems to be in hurry. The suggested dialogue could be as follows:

Mary: (Mary is knocking at the door). Ali’s wife opens the door and Mary just walks in.
Mary: “This is Ali’s house I suppose?”
Wife: “Yes it is”.
Mary: “Where is he?” (She pushes herself in).
Ali is sitting on the floor cleaning the fish. His daughter is helping him. He is giving her instructions. Mary pulls up a chair and sits down.
Mary: “Ali. I hope you’re the one?
Ali: (Without looking up) “Yes”.
Mary: “Ali, why don’t you have a handwashing facility at your dilapidated toilet?”
Ali: Why should I have one?
Mary: (she is busy noting in her notebook ): “Why? Don’t you know that if you do not wash hands after the toilet you will fall sick including all the family members?”
Ali: (continues working): “We are poor. We do not have money to waste on rich people’s items like that.
Mary: Rich people? That is why your son died last year. You have such a poor mentality.
Ali: “Have you come to insult me in my home?”.
Mary: “No I have come to tell you that you must wash your hands with soap after visiting the toilet”. Am off, since I have given you the message. It’s now up to you. I have already spent so much time here.
QUESTIONS FOR DEBRIEFING

1. What have you observed?
2. What was the conclusion of the visit?
3. What is it that the FLA should have done?

SITUATION II

Elinike is a FLA. She has asked the women’s group in her village to give her some time to talk about handwashing and to explain the importance of using soap at critical times – after defecation and before handling food. Elinike talks non-stop to the women, while reading from her reference guide given to her during the training. The women are agitated, yawning and some start leaving the meeting. However Elinke just goes on talking. When she is finished she thanks the women and tells them she has to leave because another group is waiting for her.

QUESTIONS FOR DEBRIEFING

What you have seen?
Why did the FLA fail in setting up a dialogue with the group?
What should she have done?

Facilitators Notes

Brief the participants on the various attributes and skills a good FLA should possess and use when dealing with non-acceptors or reluctant families especially and the community at large (Relate to the on Six Steps etc).

SESSION 5.2: Learning and listening skills

Objective
1. By the end of the session, the participants will be able to demonstrate non-verbal and verbal skills for encouraging others to talk.
2. To improve listening skills and understand how false information can be spread.

Duration: 45 minutes.

Materials: Flip chart paper.

Procedure:

1. Explain: “Now that we realize the importance of listening to and learning from the community/individual, we will be reviewing and practicing four important listening and learning skills”.

- Encourage non-verbal language.
- Asking open ended questions.
- Using responses and gestures to show interest.
- Reflecting back what you have been told by the participant or individual.

2. Review each skill in turn according to the sections as given below.

5.2.1 Non-verbal communication

Four types of non-verbal communication

1. Posture: Keep your head level
2. Eye contact: Pay attention
3. Physical Barriers: Remove barriers
4. Taking Time: Don’t rush

Objectives:

By the end of the session participants will have;

1. Practiced using the non-verbal communication skills

Methodology: Role play

Material: Flip chart paper, Handout on role plays for non-verbal communication

Preparation:
Choose and prepare participants to carry out Demonstration A. Familiarize yourself with the role plays

Procedure:

1. Ask participants “What do you think we mean by “non-verbal communication?” Let participants make one or two suggestions, and then summarize with the following explanation: “Non-verbal communication means showing your attitude through your posture, your expression, your emotional response without speaking”.

2. Demonstrate the skills: (DEMONSTRATION A). Tell participants that you (or a participant) will demonstrate four different kinds of non-verbal communication.

3. Ask participant to help act the role plays showing the four types of non-verbal communication.

4. Conduct the four pairs of demonstrations outlined below:

5. Demonstration A: “Non-verbal Communication:” With each pair, you address the mother or community in 2 ways: one way helps communication, other way does not encourage communication. Change the demonstrations sometimes using the helpful way first, sometimes second so that the participants must concentrate and easily guess the gesture from the order of the demonstrations.

6. For each demonstration, ask participants to:
   a. Identify the type of non-verbal communication that you demonstrate.
   b. Say which form helps communication and which hinders it.
   c. Summarize the importance of non-verbal communication.
DEMONSTRATION A

With each demonstration, say exactly the same words, and try to say them the same way, for example: “Good morning, Maama John. Are you encouraging your household members to wash their hands with soap after using the latrine?”

1. POSTURE:
   **Does not help:** stand with your head higher than the maama John’s head.
   **Helps:** Sit so that your head is at level with the maama John.
   **Write:** ‘KEEP YOUR HEAD LEVEL’ on the flip chart paper.

2. EYE CONTACT:
   **Helps:** look at her and pay attention as you speak.
   **Does not help:** look away at something else, or down at your notes.
   **Write:** ‘PAY ATTENTION’ on the flip chart paper.

   *(Note: eye contact may have different meanings in different cultures. Sometimes when a person looks away it means that he or she is ready to listen. Direct eye contact between opposite sexes may also be inappropriate. If necessary, adapt this to your own situation)*

3. PHYSICAL BARRIERS:
   **Does not help:** Sit behind a table, or write notes while you talk to a community meeting.
   **Helps:** remove the table or the notes.
   **Write:** ‘REMOVE BARRIERS’ on the flip chart paper.

4. TAKING TIME:
   **Helps:** Make the community feel that you have time. Sit down and greet her without hurrying; then ask an open-ended question and wait patiently for members to answer.
   **Does not help:** Be in a hurry. Greet the group quickly, show signs of impatience, and look at your watch.
   **Write:** ‘TAKE TIME’ on the flip chart paper

Session 5.2.2: Asking open ended questions

By the end of the session participants will have;

1. Practiced asking open-ended questions.

**Methodology:** Role play

**Materials:** Flip chart paper with the following four quotations:

**Preparation:**
Choose and prepare participants to carry out the demonstration, familiarise yourself with the role plays

**Duration:** 30 minutes

**Procedure:**

1. **Explain:** To start a discussion with a person or with a group, you need to ask some questions. It is
important to ask questions in a way which encourages people to talk to you freely and to willingly share information. This saves you from asking too many questions, and enables you to learn more in the time available. We learn by listening, not by talking (point out that this is the reason why communicators have two ears and one mouth).

2. **Explain to participants:** Open questions are usually the most helpful. To answer them, the person must give you some information. Open questions usually start with “How? What? When? Where? Why?” For example, “When do you wash your hands with soap?” (Write these on the flip chart paper under “Open Questions”).

3. **Explain to participants:** Closed questions are usually less helpful. They often force a mother to give the answer that you expect, and she can answer them with a “Yes” or “No”. Closed questions usually start with words like “Are you?”, “Did he?”, “Has he?” or “Does she?” (Write these on the flip chart paper under “Closed Questions”). For example: “Do you wash your hands with soap after cleaning the baby?” If a mother says “Yes” to this question, you still do not know if she knows the other critical junctures to wash hands with soap. You can become quite frustrated, and think that the mother is not willing to talk, or that she is not telling the truth.

4. **Demonstrate the skill:** In their groups let the participants practice asking open ended and closed ended questions. After each demonstration, comment on what they have learnt from the role play.

5. Summarize the importance of using open ended questions.

**Session 5.2.3: Using responses and gestures**

By the end of the session participants will have;

1. Practiced using responses and gestures

**Methodology:** Role play

**Materials:** Copies of Demonstration B to give to “actors”.

**Preparation:** Choose and prepare participants to carry out the demonstration, Familiarize yourself with the role plays

**Duration:** 30 minutes

**Procedure:**

1. Explain: If you want a person to continue talking, you must show that you are listening, and that you are interested in what they are saying. Important ways to show that you are listening and interested are:
   
   • with gestures, for example, look at her, nod and smile;
   • with simple responses, for example, you say “Aha”, “Mmm”, “Oh dear!”

2. Demonstrate the skill: Ask a participant to read the words of the mother in Demonstration B, while you can play the part of the communicator. Give simple responses, nod, and show by your facial expression that you are interested and want to hear more.
3. After the demonstration, comment on what was shown.

4. Discuss locally appropriate responses. In different cultures, people use different responses, for example, “aha”, “oh”, “nodding the head”. They are part of the language. Ask what responses do people use locally? Let participants give some example of useful responses.

5. Summarize by reviewing the effectiveness and importance of this technique and explain that all participants will practice it shortly.

DEMONSTRATION B

**Communicator:** “Good morning Maama John. How is the new practice of handwashing with soap going?
**Mother:** “Good morning. It is going quite well, I think”.
**Communicator:** “Mmm” (nods, smiles).
**Mother:** “Well, I a bit worried because the children tend to forget to fill the tippy tap when the water is finished and to replace the soap .
**Communicator:** “Oh dear!” (raises eyebrows, looks interested).
**Mother:** “I wondered if I should give each child a turn to fill the tippy tap and replace the soap.
**Communicator:** “Aha!” (nods in agreement).

*Note to facilitator: The communicator asked a question to start the conversation. Then she encouraged the mother to continue talking with responses and gestures.*

Session 5.2.4: Reflecting back

By the end of the session participants will have;

1. practiced reflecting back techniques

**Methodology:** Role play

**Materials:** Copies of Demonstration C and D to give to “actors”.

**Preparation:** Choose and prepare participants to carry out Demonstration C and D.

**Duration:** 30 minutes

**Procedure**

1. Explain: Communicators sometimes ask individuals many factual questions. However, the answers to factual questions are often not helpful. The mother may say less and less in reply to each question. For example, if a mother says:

   “My baby was crying too much last night,” you might want to ask: “How many times did he wake up?”, But the answer is not helpful. It is more useful to repeat back or reflect what a mother says. It shows that you understand, and she is more likely to say more about what is important to her.

   It is best to repeat what the mother says in a slightly different way, so that it does not sound as though you are copying her. For example, if a mother says:

   “My baby was crying too much last night”, you could say:

   “Your baby kept you awake crying all night?”.
2. Demonstrate the skill: Ask a participant to read the words of the mother in Demonstrations C and D while you or a second participant reads the part of the communicator. After each demonstration, comment on what the communicator learnt from the mother.

3. Explain the point: If you continue to reflect back what a mother says every time, it can begin to sound rather rude. It is better to mix up reflecting back with other responses. For example: “Oh really?” or “Goodness”, or an open question.

4. Demonstrate the point.

Role Plays:

Demonstration C: Reflecting back.

**Communicator:** “Good morning Mother. How are you and baby James today?”
**Mother:** “He wants to feed too much—he is taking my breast all the time!

**Communicator:** James is feeding very often?”
**Mother:** “Yes. This week he is so hungry. I think that my milk is drying up”.

**Communicator:** “He seems hungrier since the diarrhea cleared.”
**Mother:** “Yes and my sister is telling me that I should give him some bottle feeds as well”.
**Communicator:** “Your sister says that he needs something more?”
**Mother:** “Yes. Which formula is best?”

*Note to facilitator: The communicator reflects back what the mother says, so the mother gives more information.*

Demonstration D: Mixing reflecting back with other responses.

**Communicator:** “Good morning Mother. How are you and baby James today?”
**Mother:** “He wants to feed too much—he is taking my breast all the time”.

**Communicator:** “James is feeding very often?”
**Mother:** “Yes. This week he is so hungry. I think that my milk is drying up”.

**Communicator:** “Oh dear!”
**Mother:** “Yes and my sister is telling me that I should give him some bottle feeds as well”.
**Communicator:** “Your sister wants you to give some bottle feeds?”
**Mother:** “Yes – she says that I am foolish to struggle on like this”.

**Communicator:** “How do you feel about that?”
**Mother:** “Well, I don’t want to give bottle feeds”.

*Note to facilitator: The conversation sounds more natural, but the communicator is learning more about how the mother feels.*
SESSION 6: ASSESSING AND ANALYSING PROBLEMS RELATED TO HWWS

Objectives

1. To train the participants in facilitating village communities to assess, analyze and resolve their problems.

2. To train the participants in understanding how to handle communities.

Methodology: Group discussions and plenary session

Materials: Story with a Gap (SWAG) tool (two picture with before and after situation), VIPP cards
**Preparation:** Read and practice the SWAG process

**Duration:** 1 hour

**Procedure:**

1. Ask participants their opinion about practices, beliefs, perceptions and actual experiences on HWWS in their community. Write the issues on a flip chart for use during the wrap up session.

2. Ask them to discuss the current situation/problem in relation to the junctures; promoting handwashing with soap after cleaning a baby and before handling food and the desired future action/practice.

3. Using the story with a gap tool present picture 1. Ask the participants if there such situations in their community. Direct the discussion to a point where the participants themselves decide that something has to be done to change the situation.

4. Having discussed the “before” situation introduce picture 2 with the “after” situation. Allow the
participants to comment on what they see in picture 2 and let them discuss if such a family exists in their community.

5. Ask the group to think of steps they can take to move from the present situation (Before picture) to the desired situation (After picture). Let them write each suggestion on down on a flip card.

6. Let the groups come together again and present their discussions to each other.

7. Ask the following questions in plenary:
   - what implications do the suggested steps have for the sort of action that can be taken?
   - Who are the possible most influential stakeholders they can work with to bring about the desired changed?
   - What will happen if we don’t achieve the desired change?

8. Inform the participants that they will refer to the identified steps during the planning session.

Facilitator Notes:

**Wrap up emphasising:**
- Communities must be encouraged to assess their own behaviours and analyse the reasons for their behaviours.
- This process moves people from one set of beliefs and practices to a new and more desirable set of beliefs and actions.
- The process helps people understand different viewpoints and arrive at a consensus and new balance.

**Example of responses to exercise above:**

**Handwashing (before eating/cooking) (after cleaning child’s bottom).**

**Current situation**
1. High mortality in their village/ward due to diarrhoea/infection.
2. Causes/reasons of the diarrheal disease and death-infection include hands not washed before eating/feeding, delay in response/referral belief in god’s will/fatalism.

**Desired future situation**
1. Infant/child survival.
2. Community realization that handwashing is critical for better child survival and health.

**Task ahead**
1. Is it possible?
2. Is it feasible?
3. What is the alternative desired practice?

**What/who will be the barrier in carrying out the desired practice?**
1. Water not available.
2. Soap not available.
3. No benefit.
5. Relief that not washing hands is not dangerous.
6. No services available close by.
7. Forgetfulness.

**What/Who will facilitate the change? How? Why?**
1. Advice by local head.
2. FLA trained.
3. Mother reassured.
4. Explained why hand washing with water and soap is necessary.
5. Explained how dirty hands are the cause of diarrhoea.
6. Benefit – prevention from disease saves you from cost of treatment/medicine, child survival, easy to do.

**Who are the stakeholders?**
1. Mother.
2. Child.
3. Mother in Law.
4. Health worker
5. FLA
7. Religious leader
SESSION 7: STEPS TO BEHAVIOUR CHANGE

Objectives

By the end of the session, participants will be able to:

1. Explain the steps of behavior change;
2. Explain the actions the FLA must follow to assist people to move from one step to the next;
3. Apply the “steps in behavior change” model to different situations.

Methodology: Group and plenary discussion

Materials:
Flip chart paper showing a staircase with numbers and arrows (one for every 6-7 participants).
- Individual cards with one step written on each (without number) (one set for every 6-7 participants).
- Individual cards with the different communicator actions (one set for every 6-7 participants).
- Tape for each group

Preparation: Familiarize yourself with the behavior change model

Duration: 30 minutes

Procedure:
1. Explain: As people change their behavior or adopt new behaviors, research all around the world has shown that they go through a series of steps. In the model we will use, we have 5 steps. As people go through these steps, they will understand the things people need to sustain good health behavior: knowledge, skills, confidence, motivation, resources, and support. The question we ask ourselves as change agents is: “How can we help people move through these steps, and to adopt the behavior?”

2. Divide the group into small groups (5-6 people).

3. Post a flip chart paper showing the stairs and arrows and explain that each group will be given a piece of flip chart paper and 10 cards: 5 cards are the steps and 5 cards are 5 FLA actions. Each person in the group takes one card and through discussion with other group members must decide the correct order of the steps and communicator actions. After deciding, the group should tape the cards in the appropriate places on the flip chart paper.

4. Discuss the presentation in plenary emphasizing the need to understand at which stage their community is in relation to HWWS.
5. In plenary ask the participants to

- identify the stage at their ward is in regard to HWWS.
- identify approaches they will use to move their ward to the next step.

6. Wrap up emphasizing that behavior change takes time. As FLAs or change agents they need to be patient and continuously educate the community.

**Picture 1**

![Diagram showing the communication action steps](image)

**Picture 2**

<table>
<thead>
<tr>
<th>STEPS</th>
<th>COMMUNICATION ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does not know (does not know fully)</td>
<td><strong>Find what they know and do</strong></td>
</tr>
<tr>
<td>2. Understands risks and benefits of new behaviour</td>
<td><strong>Give basic information</strong></td>
</tr>
<tr>
<td>3. Has positive information, knowledge and decides to try new behaviour</td>
<td><strong>Provide resources</strong></td>
</tr>
<tr>
<td>4. Try new behaviour</td>
<td><strong>Encourage, motivate</strong></td>
</tr>
<tr>
<td>5. Implements new behaviour</td>
<td><strong>Praise &amp; encourage people to maintain behaviour. Motivate them not to slip back into old habits. Find out what the experience was</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Help people see and appreciate benefit. Encourage them to continue behaviour.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Assist people to solve problems in order to adopt new behaviour. Encourage.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Give full information &amp; skills.</strong></td>
</tr>
</tbody>
</table>
SESSION 8: FIELD VISIT TO PRACTICE IPC SKILLS

Objectives

By the end of the session, participants will have practiced how to use the IPC skills to promote handwashing in a group or at individual level.

Methodology: Group, Field visit and plenary discussion

Materials:
Materials for making a tippy tap (3 sets)
Posters, flyers on handwashing and how to make a tippy tap, flip charts

Preparation: Familiarize yourself with the environment; find out if there is a school, health centre, market, mosque, church etc. where you can conduct the field trip. Also identify a few households where the participants can visit. Inform ask the community leaders for permission to conduct the field trip in their village.

Duration: 3 hours

Procedure:

1. Mention: to the participants that they are going to get a chance to practice the IPC skills they have just learnt in the community.

2. Divide the participants into four groups and in plenary give them the following guidelines for the field visit:

3. Each group will go to a different venue which could include a school, health centre, market, mosque, church or households based on what you have identified in the community near the venue.

4. Below are the tasks for each group:

   - **Health Centre:** The group going to the health centre should talk to the health in-charge and ask for permission to conduct a session on handwashing to the patients that are in the waiting room especially women. If permission is granted let then conduct the session.

   - **Primary School:** The group going to the primary school should talk to the head teacher and ask for permission to conduct a session on handwashing to the pupils in one class or in the health club. If permission is granted let then conduct the session.

   - **Church/Mosque:** For the groups that go to any one of these should ask for permission to talk to the leaders, identify the different groups in the church that they can talk to about handwashing.
These could include the leaders, women and youth groups etc. Let them draw up a plan to meet any of the groups available.

- Household visit: The group visiting a home should identify at least three homes which they will visit and give information on handwashing.

5. **Mention** to each of the groups that they should use the skills they have learnt while in the field.

6. **Mention** that each group will make a presentation upon return from the field on; what went well and what were the challenges. Each group should be given 15 minutes to present.

7. In plenary respond to the challenges highlighted by each group.

8. **Wrap up** the session and mention that with continued practice they will improve.
SESSION 9: PLANNING FOR IPC ACTIVITIES

Objective

1. To learn how to work in groups for planning for IPC activities in their own communities.

Methodology: Group discussion

Materials: Flip Chart and Markers

Duration: 2 hours 30 minutes

Procedure:

1. Explain IPC Planning: Planning for interpersonal communication activities is the objective of all this training. The training program has taught everyone personal skills of communication and behaviors. It has tried to mirror unproductive behaviors versus productive behaviors. It has covered many skills of listening, learning, asking questions in an effective manner etc. But now we have to plan for the activities.

2. In plenary present the expected target for IPC and for the FLAs.

3. In ward groups let participants develop community implementation plans. Let them draw their village map indicating all homes, landmarks like health centers, churches, schools, community halls, community market venues, football grounds, etc. Let them agree on how when they can organize events in areas like the churches, schools, health centers.

4. Ask participants to include DCC activities in their plans as they are responsible for mobilizing communities and taking part in them. They should also identify other planned community events which are an opportunity for them to promote hand washing with soap.

5. Let participants also identify the various women groups, youth groups and any other community groups that exist in their community. Let each group discuss how they will reach out to each of these groups to talk about HWWS.

6. Still in their groups let the participants identify key allies that they can work with to promote HWWS. These could include; religious leaders, women leaders, youth leaders, community leaders, elders in the community, health workers etc. Agree on how and when you can meet the allies and talk to them about HWWS. Remember you can get support from the WSP District Coordinators and Resource Agents to conduct some of these talks.

7. Finally let participants agree on how many days in a month they can organize HWWS events and how many times they will follow-up with a particular group to ensure adoption of behavior.
8. Based on the above draw up a plan (Use template in reference guide) as to how you will go about your work in addressing the community. You have to decide on a criteria how you will choose the group to address with the message on HWWS. Use all the IPC skills that you have learnt so far and identify at which stage of behavior change your village is at and decide on what approaches you will use to move them to the next step.
SESSION 10: USE OF INFORMATION, EDUCATION AND COMMUNICATION MATERIALS

Objectives:

1. To familiarize the participants to the various IEC materials available for helping them in their IPC work.

2. For all participants to practice using at least one tool.

Methodology: Role plays, group and plenary discussion

Materials: FLA reference guide, flyer on how to wash hands, flyer on how to make a tippy tap,, Story with a Gap, campaign posters on handwashing

Preparation: Familiarize yourself with the IEC materials

Duration: 45 minutes.

Procedure:

1. In plenary explain to participants the meaning of IEC materials and their benefits.

2. Introduce each of the items individually. Walk the participants through the materials.

3. Explain the purpose of each of the items and how it can be used. Refer to notes below on how to use IEC materials.

4. Then split the participants into groups and let them practice using the materials. Give them 15 minutes to practice in groups. Special emphasis should be given to the FLA reference field guide.

5. Reassemble the participants and let each group present what they have practiced to the larger group.

6. Ask the participants what they have observed and learnt from each others’ presentations.

7. Summarise the learning of using printed interpersonal communication tools.

8. Advise and guide the participants on how they can use the tool better.
Facilitators Notes

What are visual aids and IEC?

Visual aids are pictorial displays and tools that help providers and clients better understand and remember information about diseases, prevention, treatment, medical devices, and other health topics. Visual aids are a type of IEC, meaning information, education and communication materials. Other types of IEC include pamphlets, flipcharts, product/device samples, models (sexual organs etc), videos, cue cards, and posters.

Why do we use visual aids (benefits)?

Visual aids improve communication by:

- Helping FLA explain complex information
- Reminding the FLA of important points
- Helping community understand complex information
- Aiding the community to remember what they have learned
- Generating discussion between the community and FLA
- Capturing the community’s interest and attention
- Easing the discussion of sensitive issues
- Reinforcing key points and messages

How to use IEC materials

- Make sure you understand the poster before you discuss and distribute the visual materials
- Show the materials to the community/group. Make sure they can see the visual materials clearly.
- Ask them to mention what they see in the materials. Give them time to talk about what they see.
- Ask them if they can do the practice being shown in the material.
- Invite the community member to touch and hold the materials.
- If possible, give the community members the visual materials to take home. These print materials can remind community members what to do.
- Suggest to the community members to show take-home materials to other people who did not attend the meeting.

Remember to order more take-home materials before they run out.
SESSION 11: MONITORING OF IPC ACTIVITIES

Objective

1. To introduce the participant to Monitoring and its importance to the project

2. To inform the participants of the IPC targets

3. To introduce the participants to the IPC monitoring form

Methodology: Group and plenary discussion

Materials: Flip Chart and Markers

Duration: 1 hour 15 minutes

Procedure:
1. In threes let participants brainstorm on what they understand by monitoring and why we need to monitor? Give them 10 minutes.

2. In plenary let them present their group ideas.

3. Mention to the participants that monitoring is a very important part of this project because results from this project will be used to decide on a scale program. All data collected will be used to make a decision on how the country will move forward with improvement of health in the community in relation to hygiene. Emphasis that the government and project are depending on them to collect consistent and correct information.

4. Using the presentation on monitoring to share with participants the targets for IPC. Special mention should be made of the need for each FLA to conduct 5 IPC events in a month with not less than 15 people. However you can have a group with smaller numbers but ensure that by the end of the month you have met 15 people.

5. Introduce the IPC monitoring form and go over it with the participants. Let them practice filling it out based on an imaginary scenario.

6. Allow for any questions and clarifications developed from the plans they have drawn up.
**Note to facilitator**

IPC targets

These are the target that the FLAs have to achieve during the campaign.

<table>
<thead>
<tr>
<th>Sn.</th>
<th>Description</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Target population in 10 districts</td>
<td>1,521,123</td>
</tr>
<tr>
<td>2.</td>
<td>Target population to be reached by IPC in the 10 districts</td>
<td>320,000</td>
</tr>
<tr>
<td>3.</td>
<td>Cumulative No. of women 15-19 and children 5-14 to be reached by IPC</td>
<td>336,600</td>
</tr>
<tr>
<td>4.</td>
<td>No. of people to be reached by IPC over 17 months per district</td>
<td>32,000</td>
</tr>
<tr>
<td>5.</td>
<td>No. of people to be reached per district per month</td>
<td>1,890</td>
</tr>
<tr>
<td>6.</td>
<td>No. of people to reached per ward per month</td>
<td>225</td>
</tr>
<tr>
<td>7.</td>
<td>No. of FLAs per ward and district</td>
<td>5 per ward, 45 per district, 450 in 10 districts</td>
</tr>
<tr>
<td>8.</td>
<td>No. of supervisors</td>
<td>5 per district, 50 in 10 districts</td>
</tr>
<tr>
<td>9.</td>
<td>No. of events per FLA</td>
<td>5 events per month of 15 people each</td>
</tr>
<tr>
<td>10.</td>
<td>No. of supervisory visits (supervisor)</td>
<td>2 visit per month</td>
</tr>
</tbody>
</table>