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HIP HYGIENE IMPROVEMENT
PROJECT

Hip-LIGHTS **July–August–September 2010**

This is the final issue of Hip-Lights. The implementation phase of the Hygiene Improvement Project has ended and staff are working on project closeout and final dissemination of project products. HIP was just given a two-month no-cost extension to allow some additional time for further dissemination in project countries and at global fora. HIP partner the IRC International Water and Sanitation Centre will continue to host the HIP website for the foreseeable future and you can continue to access HIP information, products and resources at www.hip.watsan.net. HIP held a successful end of project event on August 3 highlighting key results and lessons learned during HIP's six years. For a summary of this event, see Task 4.

Task 1—Strategy

There are no Task 1 activities to report.

Task 2—Country Implementation

Ethiopia

In late August, HIP Deputy Director Julia Rosenbaum traveled to Ethiopia to present the initial findings from the endline survey in two distinct presentations. The first meeting was organized in Amhara to celebrate successes of the At Scale Hygiene and Sanitation Improvement program, and also focused on the Learning by Doing aspect of the program, to address some of the shortcomings of the approach and plan for future activities without the intensive support of Water and Sanitation Program (WSP) and HIP. Specifically, issues of more focused and extensive rollout of the effort, and the issue of latrine quality and low overall handwashing in the regions were discussed. Both the Health and Education Bureaus made public and enthusiastic commitments to continue the at scale effort, and not stop until “Total Behavior Change” is achieved. About 60 people attended the meeting.

At the national level, Ms. Rosenbaum, Kebede Faris, former HIP-WSP advisor and now with WSP, and Belete Muluneh, WSP Senior Water & Sanitation Specialist, presented the monitoring and endline findings and used this occasion to address the National Task Force developing the federal approach for Total Behavior Change in Hygiene and Sanitation. The findings were received with great interest, and a robust and spirited discussion followed the presentation, as the Task Force thought through the implications and applications of the Amhara experience for the national approach.

HIP/WSP received the data sets for both the household and school endline surveys, conducted consistency checks of available data files, and analyzed data. Results for household data show impressive results—a 25 percent drop in open defecation and a 26 percent increase in the uptake of unimproved sanitation. Measures of the presence of a hand washing station at a latrine remained constant. However, because of the considerable increase in latrine uptake, this result suggests that hand washing station installation at latrines kept pace with the growth in latrine uptake, regardless of the type of latrine installed. Results also indicate a modest yet significant increase in the presence of hand washing supplies (soap and water) at these hand washing stations.



Data analysis also shows that sanitation uptake is directly connected to intervention characteristics. In fact, families reached by through Community-led Total Sanitation and health educator visits—both supported by HIP/WSP—are 10 times more likely to install latrines than those that were not reached by these efforts. Results from a qualitative study to track institutional performance also show a considerable development in the involvement of WASH stakeholders and institutions in supporting hygiene and sanitation efforts to increase coverage in high intensity vs. control areas. On the public sector side, however, there is widespread adoption of hygiene and sanitation promotion by health education workers in both high intensity and control areas. The WASH-friendly school initiative is also beginning to bear fruit as trained teachers are beginning to implement school based WASH activities that may influence student practices as well as those of their families. These efforts will need to be sustained to increase and expand their effectiveness.

Madagascar

On July 21, HIP Madagascar held its formal end-of-project event, even though the hygiene improvement activities started under HIP has been extended by the Mission through another project mechanism for the next year and possibly beyond. It was an opportunity to highlight program accomplishments from 2006 to the present and to share some key results from the endline research with comparisons to previous surveys. The audience included USAID/Madagascar and visiting Washington staff, representatives from MCDI, PSI, USAID/Rano-HP, Voahary Salama, the Scouts, and faith-based organization partners. The morning was devoted to presentations, displays of publications and products such as posters and Scout WASH badges, and a Q&A session. In the afternoon the group went on a field trip to Mahitsy and Ambohodratrimo, HIP sites near the capital, to visit *blocs sanitaires* refurbished by HIP and operated by the communes. This visit sparked much discussion about sustainable financial management. USAID produced a success story based on the visit.

In other end-of-project related activities, Dr. Odile Randriamananjara, HIP's country representative, attended several events and presentations by the WASH community in Tana with USAID WASH partners Rano-HP and PSI. HIP also finalized all the required documentation for complying with USAID environmental impact monitoring regulations.

Regional activities have closed down until the new funding becomes available. However, during this final month the “hardware” team remained busy finalizing an experimental (for HIP) community water resource activity in Ambanitsena that involved rehabilitating a gravity fed system. The commune donated labor and materials and owns the infrastructure. HIP staff also refurbished a bloc sanitaire in the same area, though the facility is currently experiencing water pressure challenges.

HIP Sanitation Marketing Specialist Sombinaina Rakotoarisoa also wrapped up the first stage of the partnership HIP has facilitated between the microfinance institution Tiavo and a cement entrepreneur based in Fianarantsoa that produces latrine slabs and other sanitation hardware. Marketing and advertisement materials and media spots were prepared for the August launch.

Analysis of the Madagascar survey data between 2007 and 2010 indicates an 8 percent drop in open defecation, a 14 percent uptake of unimproved simple pit latrines, and emergence of hand



washing stations at latrines in addition to hand washing stations already available elsewhere in the household. The uptake of unimproved sanitation in Madagascar is due both to the type of latrine being constructed but also to the considerably high proportion of households visited who share their latrine with other households.

Results also point to different household water treatment practices being used. Over 90 percent of households prepare rice water. Although families do not perceive this to be a water treatment method, it in fact becomes one given that most families prepare rice by boiling it. Separately, about 60 percent of households boil plain water in addition to preparing rice water. A small percent of households visited also use Sur'Eau, the locally available water treatment solution. Given the different options cited, the endline survey results suggest that water treatment merits further study to craft appropriate water treatment and storage messages for HIP follow-on activities.

The success of both community-led total sanitation (CLTS) and the installation of for-fee toilet/shower facilities in public spaces were borne out in the survey results. Some thirty villages have been mobilized through CLTS and some of them have already achieved open defecation-free status. Seven for-fee public toilet/shower facilities are fully operational. Monthly, these facilities attract 7,000 to 12,000 users each.

Peru

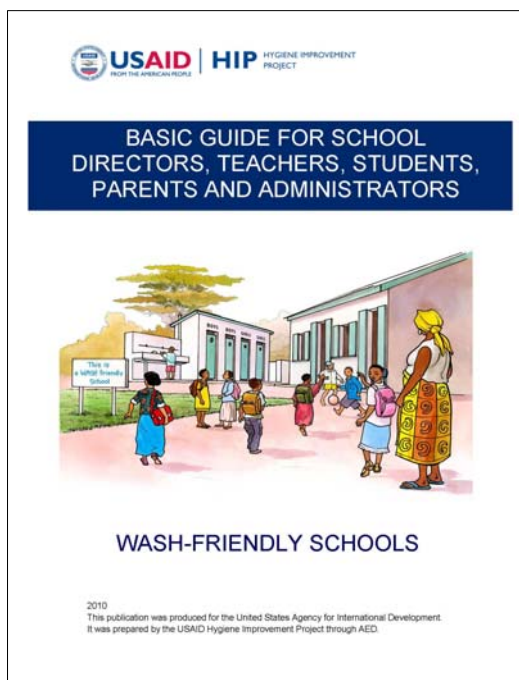
HIP intern Galo Perich completed case studies on access to microfinancing focusing on two of the markets targeted by the Creating Sanitation Marketing Initiative implemented by the World Bank's Water and Sanitation Program in Peru. HIP participates in the implementation of this initiative and supported Mr. Perich to undertake an in-depth look at loans provided through Caja de Cusco as well as character loans provided through credit committees in the department of Cajamarca.

Results of his research indicate that the profile of loan recipients in Cusco is quite different from those in Cajamarca. Loan recipients in Cusco are generally better off, are part of two-income families tied to the tourism industry with regular monthly incomes, and are interested in full bathrooms including toilets, showers, sinks, and water heaters. These are families that obtain loans to make all modifications through one single investment. Loan recipients in Cajamarca, on the other hand, are mainly households that earn their living from agricultural activities, have mainly one income earner, and whose revenues are tied to the agricultural cycle. These are households that buy materials needed and make investments progressively. The time required to install the type of sanitation facilities households aspire to is much longer. The actual and potential coverage of the Cusco market is significant using current lending approaches and an expansion to rural areas within Cusco is possible and merits further development. The actual and potential coverage in Cajamarca, however, is more limited. Providing loans to lower income families among the poor remains a challenge.

Task 3—Integration

WASH in Schools

HIP finalized two WASH in schools guides. The *WASH-Friendly Schools Basic Guide for Schools Directors, Teachers, Students, Parents and Administrators*, outlines 13 steps to make a school WASH-friendly—adequate sanitation and drinking water, hygiene lessons and other promotion activities, and school-to- community WASH activities. Each step has an annex with the necessary tools to carry it out. The *WASH-Friendly Schools Training Guide for Parents, Teachers, and Student Leaders*, is a training guide on the basics of WASH and how to work together to make and carry out a plan for a WASH-friendly school. The guides propose activities based on the total sanitation approach and are full of examples and illustrations of in and out of class activities for students, teachers, and parents. Both guides are available on HIP’s website at: <http://www.hip.watsan.net/page/3395>



WASH and HIV Integration

WASH and HIV Resource Kit

HIP’s resource kit on “WASH and HIV/AIDS Resources for Planning, Programming and Assessing,” is now available at the website at: <http://www.hip.watsan.net/page/4489>. Based on the HIP’s work to develop best practices, innovative tools and evidenced-based approaches for integrating water, sanitation and hygiene (WASH) into HIV/ AIDS programming, these materials are organized as a one-stop resource for anyone seeking guidance on WASH and HIV/AIDS integration. A CD of this resource is also available on request for a limited time (please request by Sept. 30) from hip@aed.org.

Joint USAID/WHO Publication

“How to Integrate Water, Sanitation, and Hygiene into HIV Programs to Improve Lives,” prepared by HIP in coordination with WHO, includes guidance on how to integrate WASH considerations into existing national HIV policies, guidelines, handbooks and HIV programming. This document will be available soon through the HIP website and in limited hard copy.

Kenya

HIP is the current chair of the Hygiene Promotion Technical Working Group (TWG). HIP Program Manager Liz Wamera convened the working group in July with full attendance from other organizations and the Ministry of Public Health and Sanitation (MOPHS). This initial meeting developed the TWG’s terms of reference and reviewed membership. World Vision is the co-convenor. This meeting informed the subsequent National Working Group meeting held in Kisumu, held to facilitate a field visit to learn more about technological options for sanitation in Kenya. Ms. Wamera also participated in field studies on community-led total sanitation, school WASH, and household water treatment projects in Nyanza.



In Western Province, HIP supported a hygiene and sanitation stakeholders’ forum that was convened in Nyanza Province in mid-July. Ms. Wamera worked with the government to ensure that a broad range of WASH-related NGOs and community-based organizations were included. She also attended a stakeholder roundtable meeting to review some research done on urinals in schools in Kenya. The study, commissioned by MOPHS and financed by UNICEF, recommended building more urinals (for boys and girls) as opposed to latrines in schools. IRC will publish a report on the findings.

The training of facilitators originally scheduled for July was postponed until September. Chief of Public Health Kepha Ombacho will open the training. Three national public health officials and nine public health officers from each of the three provinces—Coast, Nyanza, and Western—plan to attend the training. Two staffers from government training institutions will help facilitate the training; in this way HIP hopes to embed this training within the government and institutions within Kenya. A cascade training approach will be developed in the next fiscal year in collaboration with the trained facilitators. The USAID Mission in Kenya will continue to support WASH and HIV activities initiated under HIP through another project mechanism.

Task 4—Global Leadership


HIP End of Project Event

On August 3, HIP held its End of Project Event at AED’s Academy Hall, which was well attended, with more than 80 participants. After a welcome from Steve Moseley, AED’s President and Chief Executive Officer, John Borrazzo, Chief, Maternal and Child Health Division, Office of Health, Infectious Diseases and Nutrition, USAID, gave an overview of HIP’s contribution to USAID’s Environmental Health program. He noted that HIP helped USAID define what the agency should invest in to reduce diarrheal disease and what works, and also helped to evolve USAID’s Environment Hygiene Improvement Framework, the three components of which are fundamental to USAID hygiene improvement activities and essential for sustainable hygiene behavior change. HIP Project Director Sandra Callier gave an overview of the HIP project and Merri Weinger, HIP CTO and Program Manager for Hygiene Improvement, Office of Health, Infectious Diseases and Nutrition, USAID, shared some highlights of HIP activities and accomplishments.

The **WASH at Scale** session highlighted HIP’s at-scale approach to promoting changes in improved WASH practices in Ethiopia and Madagascar and shared unique as well as common challenges and approaches and results. *Key lessons learned:*

1. Leadership buy-in is critical for setting the enabling environment; coordination with three technical ministries: Health, Education, Water, plus partners = reach and coverage.
2. Systematic capacity building of many actors at all levels is key and must include refresher courses, job aids, supportive supervision, incentives to have it work at scale.
3. An implementation ethos of flexibility, innovation, experimentation – “Learning by Doing” is critical!
4. Mobilizing political leadership and engaging communities through community-led processes and household outreach – the key components of HIP’s at scale approach – show encouraging results and outcomes.

Meeting the WASH Needs of Families Affected by HIV/AIDS highlighted HIP’s experience supporting the integration of WASH in home-based care programs in Ethiopia, Uganda, and



Kenya. Dennis Warner, Senior Technical Advisor for Water and Sanitation with Catholic Relief Services, served as the session discussant, and emphasized the importance for WASH to be considered not only for HIV programs but across more programs overall. *Key lessons learned:*

- Small doable actions are common among countries.
- Building a community of practice is critical but requires a driving, committed champion.
- Partnering with existing programs allows for true integration even with limited resources.
- Improving WASH practices requires attention to enabling technologies, particularly hand washing and sanitation hardware.
- Placing WASH in a broader context reduces stigma.
- HIP has focused its efforts under this project on integrating WASH into home-based care. But many entry points exist and need to be used more effectively and systematically... despite the huge burden on outreach workers to give information on many different topics.
- The water and sanitation sectors are sometimes aware of the need to incorporate HIV considerations into their specific water and sanitation programming, but they are not always clear on how to do this. New programs should work more closely with these sectors to determine the gaps and develop strategies to fill them.
- Urban sanitation is always a challenge. Many solutions depend on communal financing to use a latrine. This puts an extra economic burden on households that are affected by HIV. Further, stigma considerations are can cause problems and limit latrine access. More research and programming options need to be explored in this context.
- Finally, collecting water is a huge problem that is often overlooked, especially in the context of HIV. For example, the issue of safety needs to be addressed so women are not exposed to HIV through rape or sexual coercion. And economic considerations are critical so women don't need to sell their bodies for a jerry can of water just to survive.

The session on **Demand Driven Sanitation** highlighted HIP's experience with sanitation promotion activities in Ethiopia, Madagascar, Peru, and Uganda. Jacqueline Devine, Senior Social Marketing Specialist with the World Bank Water and Sanitation Program, served as the discussant for this session. *Key lessons learned:*


- Demand driven sanitation programming is complex and requires respect, rigor and resources.
- Integrated technical options provide multiple points of entry for sanitation programming.

Confirmation of trends:

- Traditional supply-side approaches have not worked, and moreover, traditional supply-side approaches cannot mobilize the financial resources needed.
- The drive to meet MDGs (an output metric) emphasizes coverage and outputs; works at cross-purposes with demand-driven sanitation approaches.

Respect, rigor and resources:

- Sanitation is not an after-thought in WASH programming.
- Understand that sanitation is multi-sectoral and multiple skills are required (financial, technical, health, marketing)—not to mention management time for results to emerge.
- Recognize that sanitation options and therefore markets are complex—the hardware is site-specific and requires significant household investment.
- The sanitation product is not a consumable product, and we need to address sanitation marketing with the same respect as programs in social marketing and the commodity value chain.



Multiple points of entry:

- Understand that demand driven sanitation approaches cut across programming sectors as well as across market segments; need to be flexible and opportunistic about how to enter the markets—along the sanitation ladder, through different points in the HIF—e.g. government, financial sector, hardware.

All the presentations from the End of Project Event can be found at <http://www.hip.watsan.net/page/4490>

Public-Private Partnership for Handwashing

The Schools Working Group of the Public-Private Partnership for Handwashing (PPPHW) is now meeting once a week to finalize the new tools and approaches for this year's Global Handwashing Day (October 15) theme of "More than a Day." The tools consist of an advocacy guide and a "100 Schools Survey" guide whose results will serve advocacy purposes and lead to handwashing and toilet improvement action plans for the coming school year, a monitoring and evaluation toolkit for measuring the effectiveness of Global Handwashing Day activities at the country level, and a playground handwashing game called "Get Bubbly." In addition, the Planner's Guide has been translated into Arabic and Chinese. See www.globalhandwashingday.org for the latest information and resources.

World Water Week

At World Water Week, September 5-11, 2010, in Stockholm, Katie Carroll, PPPHW Secretariat coordinator, represented HIP and participated with WASH in Schools partners in the session led by UNICEF on the Follow up on Call to Action for Water, Sanitation and Hygiene (WASH) in School. For information on the Call to Action: <http://www.unicef.org/wash/schools/>.

Task 5—Capacity Development with PVOs and NGOs

The program in Uganda ended at the end of March. The only Task 5 activity to report is the completion of "Sanitation Marketing for Managers: Guidance and Tools for Program Development," developed to assist program managers in designing sanitation marketing programs, which is now available at: <http://www.hip.watsan.net/page/5006>.

Task 6—Knowledge Management

Task 6 staff worked intensively to prepare for HIP's end of project event on August 3 and supported the completion of a number of HIP global products.

New HIP products now available on the HIP website include:

- **WASH and HIV/AIDS Resources for Planning, Programming and Assessing.** <http://www.hip.watsan.net/page/4489>
- **WASH-Friendly Schools Basic Guide for School Directors, Teachers, Students, Parents and Administrators.** <http://www.hip.watsan.net/page/5009>
- **WASH-Friendly Schools Training Guide for Parents, Teachers and Student Leaders.** <http://www.hip.watsan.net/page/5008>
- **Sanitation Marketing for Managers: Guidance for Tools and Program Development.** <http://www.hip.watsan.net/page/5007>



Available soon: Both publications will be available at: <http://www.hip.watsan.net/page/3395>

- **At-Scale Hygiene and Sanitation Experiences and Lessons Learned in Ethiopia and Madagascar**
- **How to Integrate Water, Sanitation, and Hygiene into HIV Programs to Improve Lives**

In addition, HIP's final webinar was held on September 16 on Creating and Supporting WASH Friendly Schools. Seventy participants from 14 countries joined HIP for this event. You can find a recording of this and all of HIP's webinars at: <http://www.hip.watsan.net/page/4105>

Hip-LIGHTS is produced monthly by the **USAID Hygiene Improvement Project** (HIP) to provide updates about ongoing and planned HIP activities. HIP is a six-year (2004-2010) USAID-funded project led by the Academy for Educational Development (contract # GHS-I-00-04-00024-00), partnering with ARD Inc., the Manoff Group, and the IRC International Water and Sanitation Centre. HIP aims to reduce diarrheal disease prevalence, especially in children under five, through the promotion of key hygiene improvement practices, such as hand washing, safe disposal of feces, and safe storage and treatment of drinking water at the household level, as well as the integration of hygiene improvement practices into HIV/AIDS and other health and non-health activities. For additional information, contact:

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