

**Global Scaling Up Handwashing Project**

**Progress Report:**  
Peru, Senegal, Tanzania, and Vietnam

July 1–December 31, 2009

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Global Scaling Up Handwashing is a Water and Sanitation Program (WSP) project focused on learning how to apply innovative promotional approaches to behavior change to generate widespread and sustained improvements in handwashing with soap at scale among women of reproductive age (ages 15–49) and primary school-aged children (ages 5–9). The project is being implemented by local and national governments with technical support from WSP. For more information, please visit [www.wsp.org/scalinguphandwashing](http://www.wsp.org/scalinguphandwashing).

WSP is a multi-donor partnership created in 1978 and administered by the World Bank to support poor people in obtaining affordable, safe, and sustainable access to water and sanitation services. WSP's donors include Australia, Austria, Canada, Denmark, Finland, France, the Bill & Melinda Gates Foundation, Ireland, Luxembourg, Netherlands, Norway, Sweden, Switzerland, United Kingdom, United States, and the World Bank.

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# Executive Summary

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## Introduction

This reporting period marks the beginning of the final year of implementation of the Global Scaling Up Handwashing with Soap (HWWS) project. It represents a critical phase, a time for our teams not only to continue intensifying behavior change interventions, but also to establish HWWS promotion as a central component in national and local efforts to improve children's health and nutrition in Peru, Senegal, Tanzania, and Vietnam. At present, we are on target to achieve the intended scale of HWWS promotion and with the project's support, our clients are more committed and are taking concrete and momentous actions to finance, plan, implement, and monitor HWWS programs at national and local levels.

Globally, the project is on track to either meet or exceed expected end-of-project (EOP) targets in each of the countries for the reach of behavior change communication interventions in each of the three communication channels: interpersonal communication (IPC), direct consumer contact (DCC) and mass media. By the end of this reporting period, about 2.3 million mothers and caretakers have been engaged through IPC activities (74% of EOP target); about 379,000 women and children have attended DCC events (56% of EOP target); an estimated 40.7 million people have been reached by mass media (100% of EOP target); and over 26,000 front-line activators (FLAs) have been trained by the project (85% of EOP target).

The project is also on track in strengthening the enabling environment to help sustain HWWS interventions beyond the life of the project. Notable progress has been made around efforts to integrate HWWS activities into existing national, regional and local programs and services, to replicate the approach within and outside the four countries, and to secure national and local-level funding for HWWS activities.

The global performance monitoring system is fully operational and is providing performance data from each country on a regular basis to the global team. The Impact Evaluation achieved key milestones with the completion of baseline surveys in all HWWS countries. As data becomes available the team will be better able to revisit some initial assumptions and recalculate power estimates. Baseline data and

analysis will be shared with clients and partners in the coming months, adding a new dimension to the value the project can provide to our government clients.

Evidenced based lessons are being captured and useful knowledge products are begging to be produced and disseminated—but overall progress continues to lag in the learning component, with less than 40% of knowledge products completed. A Knowledge Management consultant hired in this reporting period worked to establish a production process and develop tools and several knowledge products were completed or progressed as a result. In Peru, four monthly Handwashing Bulletin and one HW series were prepared and disseminated; and in DC, two Working Papers (*Global Learning Strategy*, and *Practical Guidelines for Measuring Handwashing Behavior*); one Technical Paper (*Improving Measures of Handwashing Behavior*); and two Learning Notes (*Emergent Learning about Learning* and *Insights from Designing a Handwashing Station for Vietnamese Households*) were edited and designed for production. In addition, two reports on project milestones (*Annual Progress Report*, *Global Annual Meeting Report*) were prepared and work on the project Web site—including new pages and the addition of presentations and media—has resulted in significant improvements.

## Challenges

The project has seen considerable progress over the past six months, but the team recognizes that several challenges must be addressed in the coming months. One of the key challenges is incorporating learning into implementation. However, this learning process is expected to improve as teams increase the use of monitoring systems as management tools. The project will continue to reinforce a structure for learning-to-action meetings to help the country teams rapidly adopt lessons into program implementation.

A related challenge is tied to the transition expected as project funding ends. The country teams have done good work integrating the HWWS approach into national and regional institutions but knowledge gained so far needs to be captured and developed into useful tools and documents. This will be a focus over the coming year and will need to be balanced against the intensifying interventions.

Another challenge is measuring reach of mass media. While we can estimate the reach based on the data reported by the implementers, these reports must be independently verified. In the next reporting period we will launch community-based surveys to measure prompted and unprompted recall of exposure to provide independent verification directly from the ultimate consumers and beneficiaries, the women and caretakers. A final challenge comes from the use of scales for measuring determinants, such as religious beliefs and social norms: these scales require a series of focus groups and qualitative testing before piloting on small samples and principal component analysis in order to arrive at a final series of questions. This lengthy step requires additional time and resources, for which we intend to adequately budget in the upcoming surveys.

### **Expectations for the Next Six Months**

At the global level, the next six months of implementation will further scale up the reach and intensity of communications interventions and support our clients and partners to effectively finance, plan, implement, and monitor HWWS programs at national and local levels. In addition,

the project will focus on harvesting learning in key areas, including behavioral determinants, measuring the level of exposure of through monitoring surveys, and sharing baseline data with clients and other stakeholders. Knowledge management efforts across the country teams and HQ will focus on prioritizing and producing knowledge products such as Working Papers, Learning Notes, and Technical Reports to facilitate replication and support sustainability, and strengthening dissemination to effectively reach stakeholders through learning events (e.g., workshops, conferences, brown bag lunches) and print and digital materials.

Considerable effort will also be undertaken to prepare IE-related products, re-estimate sample sizes, procure survey firms, revise and pilot the questionnaires, strategically deciding which outcomes should be collected in each country, training and standardizing survey personnel.

The expected areas of focus for each country are defined in Annex 1, Country Stories.

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# I. Achieving Intermediate Outcomes—The Global Story

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This reporting period marks the beginning of the final year of implementation of the Global Scaling Up Handwashing with Soap (HWWS) project. It represents a critical phase, a time for our teams not only to continue intensifying behavior change interventions, but also to establish HWWS promotion as central component in national and local efforts to improve children's health and nutrition in Peru, Senegal, Tanzania, and Vietnam. At present, we are on target to achieve the intended scale of HWWS promotion and, with the project's support, our clients are more committed and are taking concrete and momentous actions to finance, plan, implement, and monitor HWWS programs at national and local levels.

## Emerging Intermediate Outcomes

In the coming months, more data from impact evaluation baselines, longitudinal, and monitoring surveys will become available. Project teams will then be able to quantify the relationship between reaching mothers, caregivers, and children with the message of washing your hands with soap at critical times, and shifts in behavioral determinants and changes in the behavior. The project will not know the full extent of this behavior change, or the affect this behavior change has on diarrhea and other conditions affecting poor health and nutritional status of children, until the completion of the impact evaluation end line surveys in 2011.

At this time, however, we can say something meaningful about the Intermediate Outcomes of the project—the reach of the behavior change interventions and the extent to which our clients and partners are taking policy and programmatic actions to scale up HWWS and to sustain it beyond the life of the project.

Globally, the project is on track to either meet or exceed expected targets in each of the four countries for the reach of behavior change communication interventions in each of the three communication channels (IPC or interpersonal communication; DCC or direct consumer contacts; and mass media). As expected, the use of mass media, be it national or regional, has facilitated the rapid expansion of reach. To date, we estimate that 40.7 million women and children across the four countries have been exposed to TV

and/or radio spots promoting HWWS. Unlike mass media, IPC is often perceived to be difficult to scale up, but this has not been the case in this project. To date, through IPC consisting of face-to-face interactions and exchanges between trained community-based workers/volunteers and our target group we have supported the engagement of about 2.3 million women and caretakers.

Each country team has selected implementation partners that are well-positioned to rapidly expand the reach of IPC: In Vietnam, scaling up was enabled by a partnership with Women's Union, a mass organization with a profound presence in every commune; in Senegal, scaling up has been strengthened by the use of existing community-based organizations experienced in delivering behavior change interventions through networks of outreach workers; and in Peru and Tanzania, scaling up has been supported by the use of existing service providers in the public and non-governmental sector such as teachers and community development workers.

In addition to helping scale up, these partnerships have catalyzed support, created opportunities to forge new and diverse partnerships, and have helped leverage national and local investments in sectors such as health, education, and water/sanitation. These investments, in turn, have directly contributed to the scaling up of reach.

The following are examples of what has been achieved over the reporting period. They demonstrate how clients and partners are taking concrete actions to scale up and sustain the reach of HWWS interventions.

- In seven regions of Peru, local partnerships have expanded the geographical scope of the HW initiative to new areas, increasing the size of the target population that will benefit HW behavior change interventions. To be precise, target population increased by 70% in Cajamarca; 30% in Piura; 25% in Lambayeque; and 70% in Arequipa.
- In Vietnam, the country team leveraged a World Bank financed investment project in rural water supply and sanitation to promote HWWS in the Red River Delta area. In addition, the National Target Program, the government's initiative to speed up

progress towards MDG targets, expanded HWWS in three additional provinces of Phu Yen, Dak Nong, and Tra Vinh with the support from the project.

- In Vietnam, the Women's Union has committed to mainstream HWWS activities in all 63 provinces, as laid out in an MOU signed between the World Bank and the Women's Union. This is a sizeable increase from 12 provinces initially covered by the project.
- In Senegal, the partnership with the Ministry of Education has helped to expand HWWS into the School Health pilot program. The pilot includes handwashing orientation, training, and materials for teachers, developed under the project.
- In Tanzania, the country team has helped international organizations adopt the project's approach to HWWS behavior change within several ongoing program including UNICEF programs in school sanitation and in its learning districts; AED's Tanzania Marketing and Communications for AIDS, Reproductive Health, Child Survival and Infectious Diseases (T-MARC), currently being piloted in Morogoro; and in outreach activities conducted by SNV (Netherlands Development Organisation), WaterAID, and the Water and Sanitation Collaborative Council in their respective districts.
- In Tanzania, a private sector company, Tarmal Industries, has launched a soap brand which includes key Global Scaling Up HWWS messages and the project logo on the packaging. Tamal Industries is one of the largest soap producers in Tanzania and we expect this will help increase the penetration of HW messages into more households.

Moreover, during the reporting period, the country teams have laid the groundwork for more partnerships and more opportunities to leverage for scaling up of reach over the next six months.

- The Peru team has strengthened its partnership with the Ministry of Women, which has one of the largest social networks in the Peru (reaching close to 5 million women). This ministry oversees major social programs, including a national nutrition program that reaches the poorest segments of the population and our target group.
- In Tanzania, for the first time, the national government has allocated annual budgets to all 132 districts

in Tanzania to support hygiene and sanitation activities. In addition, the Ministry of Water and Irrigation has sent planning and implementation guidelines to its District Water and Sanitation teams. These teams consist of representatives from key sectors that are responsible for overseeing sanitation and hygiene interventions within their wards. The country team is using these guidelines as a framework for district-level implementation with possible opportunities to integrate and mainstream Scaling Up HWWS project approaches.

In addition to scaling up HWWS within the four project countries, the Peru team has undertaken efforts to replicate HW behavior change in other Latin American countries. These efforts have resulted in promising outcomes. Using Peru's methodology for behavioral change in schools, WHO/Pan American Health Organization (PAHO) in Guatemala are designed its manuals developed to help teachers promote HWWS in their classrooms. In addition, PAHO contacted DURAPLAST in Peru and ordered 10,000 Super Jaboncin HW soap devices that will be distributed in 3,000 primary schools to help combat the spread of the AH1N1 virus.

The project has made significant progress in the past six months towards several Intermediate Outcomes, specifically the reach of behavior change interventions, and policy and programmatic actions undertaken by clients and partners to support scaling up. These Intermediate Outcomes will be further strengthened as the project moves into the final year of implementation in an effort to meet all the planned targets (particularly for IPC).

Milestones in this reporting period also lay a strong foundation to accelerate learning and the development of knowledge products. Learning from the implementation will be bolstered by data collected through the endline surveys scheduled in late 2010. Together, they will support efforts in transitioning the project at the conclusion of implementation of behavior change interventions in late 2010. As implementation of the interventions winds down, country teams will work to supporting national institutions with the necessary tools, documents, and technical assistance to continue the work post-intervention. The implementation production tools and a production process achieved during this reporting period will support new efficiencies to produce these tools and documents.



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## II. Delivering Results— Implementation Progress and the Project Components

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This section summarizes the results achieved in each component of the project: i) Programming, ii) Enabling Environment, iii) Learning, and iv) Monitoring and Evaluation. It assesses the extent to which these project components are on track to achieve EOP targets defined for each of the key indicators under each component. It also highlights examples from the HWWS countries that demonstrate progress or the achievement of a particular result in support of the overall objective of achieving HWWS behavior change at scale that is sustainable and replicable/adaptable. An in-depth examination of developments in each of the four countries is included in Annex 1, Country Stories.

### Component 1: Programming

*The Programming Component encompasses the design, delivery, supervision and monitoring of the behavior change communication programs implemented through Interpersonal Communication (IPC), Direct Consumer Contact (DCC) and mass media channels. It aims to have a positive influence on the behavioral determinants defined for each of the four HWWS countries.*

The HWWS project has continued to build on the momentum reported previously. By the end of December 2009, an estimated 2.3 million mothers and caretakers have been engaged in interpersonal communications, either through one-on-one or group meetings (74% of EOP target). About 379,000 women and children have attended DCC or community promotional events (56% of EOP target), and an estimated 40.7 million have been reached by mass media, in particular radio and TV (100% of EOP target).<sup>1</sup> Over 26,000 front line workers responsible for delivering the face-to-face interactions have been trained by the project (85% of EOP target).

Table 1 shows the Programming progress in the four countries and at the global level across the four indicators discussed above.

Given the strong implementation progress of communications interventions across the four countries from July to December 2009, the team is confident that the project remains on track to achieve its overall reach targets at global and country levels. The figures below demonstrate the progress on mass media (Figure 1) and IPC and DCC (Figure 2) reach as a percentage of EOP targets. Mass media progress is separated from other channels as its reach cannot be aggregated across time periods.

### Country Performance

#### Peru

Peru has made significant progress toward EOP targets in the Programming component in the last six months. IPC, DCC, local mass media, and front line worker trainings have reached 174,000, 180,000, 3.8 million, and 14,000 people, respectively (see Figure 3). Implementation now covers the entire country and in seven of the 25 regions in Peru the responsibility for implementation has shifted from the project to local governments. In these seven regions, local municipalities, private institutions and community based organizations (CBOs) are now leading HWWS behavior change programs according to the conditions in each unique regional setting. Accordingly, WSP's role in these regions has evolved to one of supporting local authorities directly, providing technical assistance, capacity building and tools.

#### Senegal

Since July 2009, Senegal has launched an integrated communications campaign aimed at stimulating and sustaining handwashing with soap behavior change of about 480,000 women of reproductive age and primary school aged children. While the mass media channels used cover the entire country, intensive interventions of local mass media, DCC, and IPC through household visits and community meetings have been implemented in 80 communes throughout eight regions of Senegal (Figure 4). Mass media broadcasts completed include 1,496 radio spots and 92 TV spots. The TV spots were

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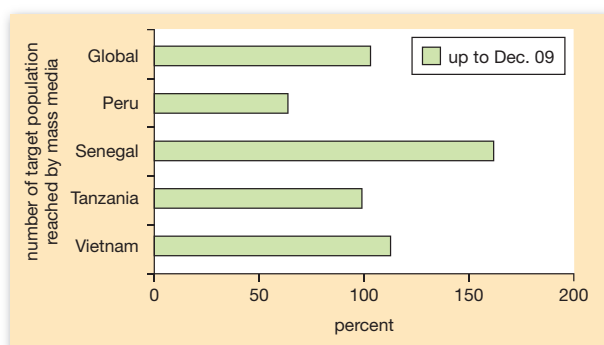
<sup>1</sup> We do not aggregate the reach numbers across the channels, as exposure is intended to overlap, as the aim of the integrated communications program is to reinforce and complement one intervention with another.

**TABLE 1: EMERGING GLOBAL RESULTS IN THE PROGRAMMING COMPONENT BY DEC 31, '09\***

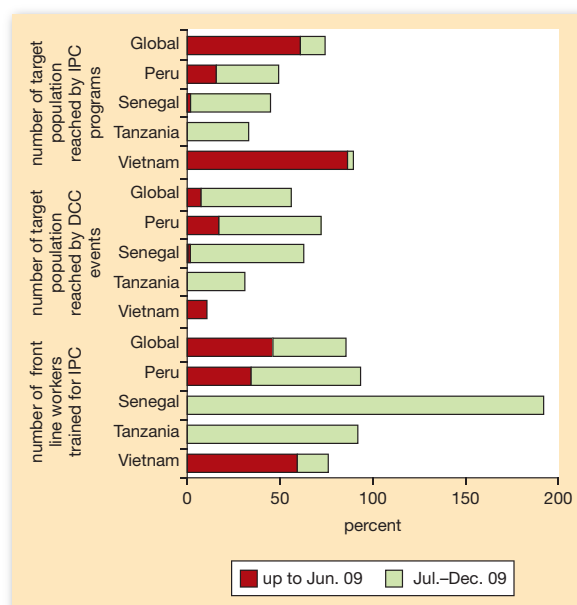
Performance Indicator	EOP Target	Results						
		Up to 6/30/09	% of EOP Target	7/01/09 – 12/31/09	% of EOP Target	Up to 12/31/09	% EOP Target Met	
# of target population reached by IPC programs	<i>Global</i>	3,143,000	1,910,210	61%	422,670	13%	2,332,880	74%
	<i>Peru</i>	353,000	55,900	16%	118,300	34%	174,200	49%
	<i>Senegal</i>	330,000	3,530	1%	145,470	44%	149,000	45%
	<i>Tanzania</i>	320,000	0	0%	106,000	33%	106,000	33%
	<i>Vietnam</i>	2,140,000	1,850,780	86%	52,900	3%	1,903,680	89%
# of target population reached by DCC events	<i>Global</i>	676,673	48,900	7%	329,620	49%	378,520	56%
	<i>Peru</i>	249,373	43,600	17%	136,600	55%	180,200	72%
	<i>Senegal</i>	225,000	1,900	1%	139,820	62%	141,720	63%
	<i>Tanzania</i>	171,300	0	0%	53,200	31%	53,200	31%
	<i>Vietnam</i>	31,000	3,400	11%	0	0%	3,400	11%
# of target population reached by mass media	<i>Global</i>	39,618,078	28,600,000	72%	20,501,300	52%	40,701,300	103%
	<i>Peru</i>	5,921,278	577,000	10%	3,234,000	55%	3,811,000	64%
	<i>Senegal</i>	1,680,000	0	0%	2,734,000	163%	2,734,000	163%
	<i>Tanzania</i>	14,579,800	8,400,000	58%	14,533,300	100%	14,533,300	100%
	<i>Vietnam</i>	17,437,000	19,623,000	113%	0	0%	19,623,000	113%
# of front-line workers trained	<i>Global</i>	30,774	14,200	46%	12,083	39%	26,283	85%
	<i>Peru</i>	15,000	5,200	35%	8,800	59%	14,000	93%
	<i>Senegal</i>	139	0	0%	268	193%	268	193%
	<i>Tanzania</i>	450	0	0%	415	92%	415	92%
	<i>Vietnam</i>	15,185	9,000	59%	2,600	17%	11,600	76%

+: Peru is only implementing local mass media and the numbers across the two time periods can be added because they represent different populations. Senegal, Tanzania and Vietnam, however, use national level media and the numbers cannot be aggregated.

**FIGURE 1: PROGRESS ON MASS MEDIA REACH (% OF EOP TARGET)**

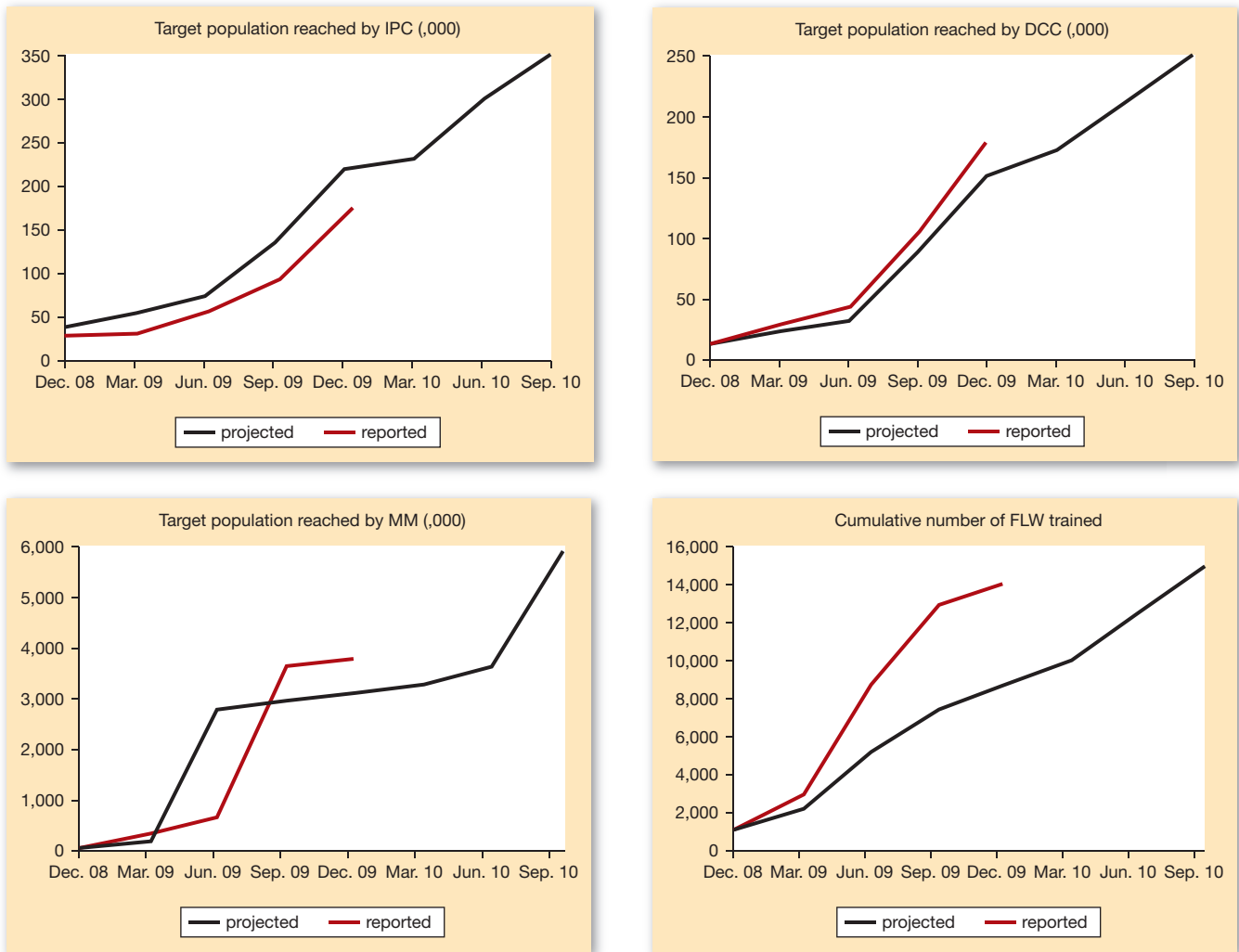


**FIGURE 2: PROGRESS ON IPC AND DCC REACH (% OF EOP TARGET)**



programmed to air during the broadcast of Latin American soap operas and Senegalese movies—both highly popular among women. The total number of participants attending DCC events rose from 1,400 to 109,000 (62 percentage point increase). IPC activities are being carried out by

**FIGURE 3: PERU PROGRESS IN THE PROGRAMMING COMPONENT**



five NGOs that have extensive experience in health promotion interventions. With the NGO’s extensive network of community-based organizations and outreach workers, the reach of IPC has jumped from about 3,500 in June 2009 to 149,000 in December 2009 (44 percentage point increase).

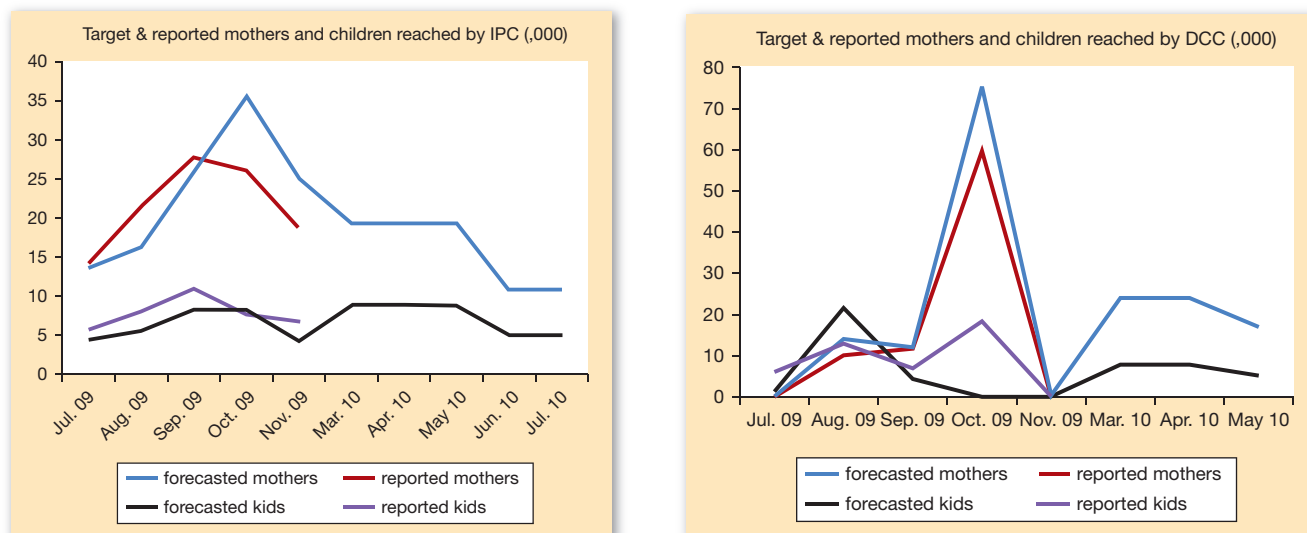
To date, supervision and quality checks of the face-to-face interactions with the households and community groups have found that this intervention has been able to improve knowledge and address obstacles to handwashing with soap. However, the front-line workers are facing a greater challenge

when it comes to supporting women and caretakers in the family to generate solutions for managing soap and water (i.e., setting aside soap and water specifically for handwashing in convenient places). Concrete options, such as various types of handwashing stations, are being researched to remove this obstacle.

*Tanzania*

During this reporting period, the project used mass media—airing five different radio spots on three stations—to reach an estimated 14.5 million people or 99% of the end of project target. The mass media was closely followed

**FIGURE 4: SENEGAL PROGRESS IN THE PROGRAMMING COMPONENT**



by the launch of IPC and DCC activities. IPC activities by trained front line workers reached an estimated 106,000 women and caretakers. These activities provided opportunities for women and children to ask questions and receive answers to their questions from trained and informed people, and helped reinforce messages featured in the mass media. During group meetings, FLWs helped mothers and children learn about the benefits of HWWS, how to make tippy taps, how to tackle barriers and how to motivate their family members to provide a dedicated place for HWWS and ensure that soap and ensure water are available. Resource Agencies and District Water and Sanitation Teams supervised and supported the work of the FLWs. The FLW activities helped create opportunities for communities to celebrate early successes at DCC events.

During this reporting period, an estimated 200 DCC events took place in seven of the ten project districts, engaging an estimated total of 53,000 participants. DCC will be completed in the three remaining districts by April 2010. DCC uses experiential approaches incorporating entertainment and educational techniques to reach and deliver messages to target audience groups. In Tanzania, DCC is staged in three phases: *Mobilization*, when the

implementation team meets with districts/community leaders to establish the activity plan; *Storming*, which involves the road shows, including numerous entertainment, promotional and educational activities; and *Celebration*, a day-long event that is attended by representatives from all wards and the district level. The events are organized and implemented by an experiential marketing firm that works closely with local cultural groups. They widely covered by local and national media.

#### Vietnam

While Senegal, Peru, and Tanzania focused on building up communications interventions during this reporting period, in Vietnam, the project entered a second phase with the expansion of program activities in four provinces which are not included in the Impact Evaluation. The number of communes in these provinces is relatively smaller compared to the number of communes found in the IE regions, which explains the low numbers for reach achieved during this reporting period. Training of community-based workers increased by 17 percentage point towards the EOP target, and IPC has reached about 53,000 women in the new communities. Mass media and DCC is scheduled to be re-launched and will take place between April and November 2010.

In the past six months, the Vietnam HWWS program designed and rolled out a behavior change program targeting school-aged children. Formative research (reported on in the 2009 Annual Report) was analyzed using the FOAM behavior change framework adapted for children (FOAM-EM). Among other findings, the research showed that, while Vietnamese children have little free time in their daily lives, they do watch television. Building on this finding, a television program using entertainment-education approaches was developed to generate interest, enthusiasm, and promote the practice of HWWS among children. The program is anchored around the character of Bi, a young boy who acquires special powers by HWWS and integrates several channels: an animated series aired during a popular children's TV show; a comic strip (adapted from the cartoon) inserted in the leading children's magazine; and school-based extra-curricular activities. The entertainment-education approach and materials produced under this component have the endorsement of the Ministries of Health and Education and Training, who agreed to let the materials carry their names along with the Women's Union and WSP. Additionally, IPC training was taken up by the Women's Union and has been well received by schoolmasters, teachers, and students.

### Looking Ahead: Opportunities, Risks and Mitigation Measures

- All four countries will continue to work vigilantly to expand the reach. One possible risk to implementation is associated with procurement of new implementation partners which will be required if current ones are not performing well. To mitigate this risk, the teams have assessed the performance of partners and undertaken procurement planning and processing.
- The figures on reach presented in this report have been collected by implementation partners, with quality review by the project teams. The level of intensity of exposure, which is determined by surveys of the target audience, will complement and enrich current information. The next six months present an important opportunity to acquire data on exposure, as well as changes in HW determinants and behavior. Monitoring surveys (i.e., first round in Tanzania, second round in Peru and Senegal, third round

in Vietnam) are expected to be launched before June 2010.

## Component 2: Strengthening the Enabling Environment

*The Enabling Environment component (EE) is designed to develop and/or strengthen the institutional and policy/strategy environment in which handwashing with soap programs can be scaled up and sustained. The EE for the HWWS has nine dimensions: Policy, strategy, and direction; Institutional arrangements; Program methodology; Implementation capacity; Availability of products and tools; Financing; Cost-effective implementation; Monitoring and Evaluation; and Partnership.*

HW often falls through the cracks of sector silos as there is no clear institutional home or clear leadership to take the hygiene agenda forward. Peru, Senegal, Tanzania, and Vietnam differ significantly in the levels of economic and human development, institutional capacity, decentralization, fiscal space, and governance. These distinct country settings influence implementation approaches and opportunities to strengthen the Enabling Environment and institutionalize HWWS promotion. Despite these differences, HWWS is now well integrated in all four countries through government-led or private sector initiatives or programs.

- In Tanzania, the project has worked to clarify institutional and implementation arrangements for hygiene, particularly handwashing. The Tanzanian Ministries of Health and Social Welfare (MoHSW) and Water and Irrigation (MoWI) have signed a Memorandum of Understanding as a result of intensive efforts between WSP, German bilateral partners (GTZ and KfW), WaterAid, and UNICEF, and government counterparts in the respective ministries. The MoU details the national arrangements for sanitation and hygiene, and formally establishes a National Sanitation and Hygiene Steering Committee, a Sanitation and Hygiene Technical Committee, and Working Groups. The MoU formalizes the definition of sanitation and handwashing, following the definitions adopted under the project. The MoHSW plans to have the MoU countersigned in 2010 by the Principal Secretaries from the Ministry of Education

and the Prime Minister’s Office—Regional Administration and Local Government.

- In Vietnam, a MoU signed between the World Bank and the Women’s Union—an influential mass organization with wide and deep networks—secures handwashing as a core component of the Women’s Union programming, extends the reach of the program to the entire country, and ensures that handwashing activities will continue beyond the life of the current project. In addition, the MoU outlines the respective roles and responsibilities for the signees: WSP’s role will continue to provide technical assistance on intervention design, monitoring, and evaluation in the non-project provinces.
- In Peru, HWWS promotion—the behavior change methodology implemented by the project—has become a part of the national policy of the Ministry of Education. This action further advances the progress and achievements already made to integrate HWWS into the school curriculum and the training of teachers.

In addition to working to secure the institutionalization of HWWS, Peru and Vietnam have also taken firm steps to develop enabling products, in this case, HW stations to facilitate convenient access to water and soap at critical places and times.

- In the last progress report, WSP shared the learning from the development of rough designs of HW stations for rural households. As a next step, during this reporting period, WSP met with WaterSHED Asia, a Global Development Alliance led by the University of North Carolina. At this time, resources are being sought to fund the design and business development work that would lay the foundation for a commercially produced and distributed HW station.
- In Peru, the launch of “Super Jaboncin” (SJ) handwashing facility had an enthusiastic response from public and private partners, resulting in a cost-sharing arrangement. The HWI produced 36,700 units, with partners covering costs associated with transportation and distribution; promotion; the production of liquid soap; and monitoring of use. SJ reached 272,000 children and women in 12 regions

of the country. Field monitoring and experience has shown that SJ is successful because it provides a concrete solution to the problem of convenient access to water and soap: SJ’s physical presence in critical places serves as an important reminder to children to wash their hands properly. This finding is consistent with the global emergent learning on the role of “enabling products” for handwashing (see Component on Learning). SJ will be scaled up in Central America with 10,000 units ordered by WHO for distribution in Guatemala.

Building on the lessons learned from Peru and Vietnam, the Senegal project team has begun to explore how the Scaling Up project can facilitate the National Program on Water and Sanitation (PEPAM) to develop demand-responsive and affordable HW stations. Currently, HW stations are provided to households when they obtain a latrine. The Senegal team will work with PEPAM to determine the level of use and responsiveness of these existing HW stations to meet household needs and propose steps to improve the enabling product.

Other key achievements in the Enabling Environment in past six months are summarized in Table 2.

#### **Handover of PPPHW Secretariat Coordinator Position**

On December 31, 2009 the position of the Secretariat Coordinator of the Public-Private Partnership for Handwashing was rotated to the Academy for Educational Development (AED). Established in 2001, the PPPHW’s Secretariat was first hosted by the World Bank. In 2003, WSP assumed the host functions of the Secretariat, with partial funding from the Bill & Melinda Gates Foundation and USAID. In November 2008, it was agreed to shift the position to a new host in the interest of good governance. The PPPHW Steering Committee used this opportunity to evaluate the Secretariat’s role and decide whether an alternative model should be considered. The Steering Committee decided to maintain the current model and, after some consideration, AED was selected as the new host. A Coordinator has been recruited and is now in place.



**TABLE 2: PROGRESS ON ENABLING ENVIRONMENT**

Performance Indicator		Status 12/31/09	
Evidence that HWWS is integrated into existing government or donor budgets in water, health, education and/or environment.	HWWS integrated in national policy/strategy (e.g., water, sanitation, health).	Progress in Last 6 months:	
		Peru	<ul style="list-style-type: none"> <li>• MoH has returned as a supporter of the program following HW Day</li> <li>• MoH and MINED budgets allocated for HW promotion.</li> <li>• HW and soap Stations—Super Jaboncin purchased, distributed and promoted with regional and local public and private funding.</li> <li>• HWWS becomes part of national policy on education</li> <li>• HWWS methodology for BC inserted in regional policy in Tumbes</li> </ul>
	HWWS integrated in service delivery (e.g., water, sanitation, health).	Senegal	<ul style="list-style-type: none"> <li>• Technical committee (under the supervision of the Water and Sanitation Sector Program’s Steering Committee) to help coordinate the multiple sectors involved in hygiene</li> </ul>
		Tanzania	<ul style="list-style-type: none"> <li>• MoU signed between MoHSW and MoWI with WSP support</li> <li>• Local soap company co-branding their products with HWWS campaign material</li> <li>• MoWI using HWWS material for work in non-program districts</li> <li>• MoWI establishes Deputy Directorship of Sanitation and Hygiene</li> <li>• Budget and sanitation &amp; hygiene plans adopted by MoWI and distributed to all 132 districts</li> </ul>
Handwashing promotion/hygiene included in budget of government or at least one additional donor.	Vietnam	<ul style="list-style-type: none"> <li>• MoU signed between WB and VWU</li> <li>• Partnership with USAID to support development of a commercial handwashing station</li> <li>• HWWS training integrated into National Target Program II and Rural Water and Sanitation projects</li> <li>• Provincial governments implementing HWWS materials in schools under their own budget</li> </ul>	

During the period that WSP coordinated the Secretariat, the PPPHW had several successes: The PPPHW established three working groups which are co-chaired by WSP staff supported by the BMGF—Schools, Monitoring and Evaluation, and Behavior Change. The Schools group spearheaded the highly successful Global Handwashing Days (October 15) in 2008 and 2009, which was celebrated in 80 countries and succeeded in getting 100s of millions of people to wash their hands. The Monitoring and Evaluation group established set indicators for handwashing, which have been accepted by MICS as core indicators (observation of soap and water at the handwashing facility). And the Behavior Change group held a Behavior Change Think Tank, which led to work on establishing an inventory of enabling technologies and related case studies from two countries, and the development of lighter formative research guidelines. Additionally, the

PPPHW Web site has been revamped and will be launched in early 2010.

Looking forward, WSP will continue to be actively engaged with the PPPHW as a member of the Steering Committee, through participation in working groups, and by sharing lessons from the HWWS project as they become available. WSP sees the PPPHW as a valuable partner in disseminating lessons, testing approaches, and developing new concepts for the HWWS sector.

**Component 3: Learning**

*The HWWS Learning Component is designed to take a proactive and strategic approach to the learning process to ensure responsive knowledge products are developed and shared with other programmers in the field to encourage knowledge uptake, adaptation and replication.*

**TABLE 3: PROGRESS ON PRODUCTION OF KNOWLEDGE PRODUCTS**

Performance Indicator	Country/Region	Cumulative Progress	Results 7/1–12/31/09	End of Project (EOP) Target	% Towards EOP Target
<b>Number of knowledge products completed per knowledge plan.</b>	Senegal	1	1	4	25%
	Tanzania	0	0	5	0%
	Vietnam	0	0	4	0%
	Peru	3	2	5	60%
	DC	17	0	51	33%
<b>Total</b>		<b>21</b>	<b>3</b>	<b>65</b>	<b>32%</b>

### Production of Knowledge Products

As Table 3 shows, progress on knowledge products has been slow over the duration of the project and in particular the past six months. A Knowledge Management consultant was hired in this reporting period to implement a production process. Steps achieved to strengthen the knowledge product development and dissemination include the development and implementation of editorial and design templates, detailed tracking systems, and the procurement of skilled vendors. These steps have established a solid foundation through which knowledge products can be consistently and efficiently produced and disseminated.

During this period two Working Papers (*Global Learning Strategy* and *Practical Guidelines for Measuring Handwashing Behavior*), one Technical Report (*Improving Measures of Handwashing Behavior*) and two Learning Notes (*Emergent Learning about Learning* and *Insights from Designing a Handwashing Station for Rural Vietnamese Households*) were edited and prepared for production. In addition, four monthly Handwashing Bulletin and one HW series were prepared and disseminated in Peru. With a goal to share more information with a wider audience, the *2009 Annual Progress Report* and a *2009 Global Annual Handwashing Meeting Report* were produced and disseminated on the project Web site, and a companion Web page for each report was also developed. The page with highlights from the Global Annual Meeting includes 15 presentations from the meeting, four videos taken at the meeting, and two videos related to the project. Additional iterations to the Web site

undertaken to provide more information included a new home page and components page.<sup>2</sup>

### Global Learning

As implementation continues to roll out, the teams are in a better position to begin documenting their learning. Learning is captured through reporting and information systems, performance-based monitoring, knowledge management processes and workshops. In the interest of testing and expanding the lessons from the project, the team has begun engaging with WSP technical staff outside the project.

The Global Annual Meeting in Vietnam included both project team members and five WSP staff working on hygiene initiatives in Africa, East Asia, and Central America. A key focus was on sharing lessons learned and how to harvest these lessons to produce tools and resources that will be essential for other countries seeking to replicate the project.

A role-playing exercise (“What Would We Tell Another Country?”) helped the team articulate answers and identified areas to strengthen. Additionally, three rounds of simultaneous peer-learning sessions were held on a wide range of topics from the four countries. In a scenario-based activity, “What does 2015 Look Like,” country teams focused on sustainability and what the sustainability of handwashing behavior looks like, and then identified the steps and conditions needed to take to make their vision a reality. On the basis of these exercises, the team was in a stronger

<sup>2</sup> 2009 Annual Progress Report [www.wsp.org/index.cfm?page=page\\_disp&pid=21250](http://www.wsp.org/index.cfm?page=page_disp&pid=21250)  
 2009 Annual Global Meeting [www.wsp.org/index.cfm?page=page\\_disp&pid=21437](http://www.wsp.org/index.cfm?page=page_disp&pid=21437)  
 Core Components [www.wsp.org/index.cfm?page=page\\_disp&pid=21214](http://www.wsp.org/index.cfm?page=page_disp&pid=21214)



position to adapt the HWWS lessons to new country contexts in an effort to scale up replication.

The Global Annual Meeting also provided an opportunity to identify key questions and look for shared understanding amongst the global team on the responses to these questions. There was a consensus that, to help move the sector forward, we must have a shared understanding and internal consistency on critical issues to successfully promote handwashing with soap at national levels. Team members developed a list of critical questions or issues in need of alignment and, as a next step, agreed to draft and circulate position statements. Some questions, for example, include the use of mud/ash and other alternatives (ABHS) to soap; a definition of handwashing and measuring behavior change; the involvement of men or others as a target population. The teams have begun work on Frequently Asked Questions (FAQs) and Learning Notes to address these matters.

### Emerging Learning

During the past six months, the team has identified four areas of learning based on project implementation:

#### *Reaching Scale and Strengthening Sustainability through Leveraging National Programs*

From inception, the project had the goal of reaching scale and improving sustainability by integrating HWWS into national programs. While integration has happened in each country, the realities of how it happened in each country differed due to the country context. For example, in Vietnam, time spent working closely with the Women's Union—to build their capacity, refine their approach to handwashing, and improve monitoring—lead to the signing of a Memorandum of Understanding (MoU) between the World Bank and the Women's Union. The MoU effectively institutionalizes HWWS into the WU's national programming, resulting in national scale and ongoing implementation. Due to the efforts of the team in Peru—they successfully demonstrated the importance of HWWS to nutrition—JUNTOS, a national nutrition program, has incorporated the handwashing approach into their program. Project coverage expanded to six additional

provinces and the number of trained handwashing agents increased by 18%. With the increasing roll out of implementation in Tanzania, the Ministry of Water and Irrigation (MoWI) saw the effectiveness of handwashing promotion and has incorporated the approach into existing government structures. This not only increases scale and sustainability, but lends credibility to the initiative among target population and partners.

#### *National Demand for Baseline Information*

With the completion of the fieldwork for the baselines, district and national governments have been increasingly interested to receive this information. The initial thinking was that the baseline data would be of primary interest to researchers. However, it is now understood that the governments will look to the baseline reports to provide essential data about their country or districts. To help satisfy this demand, the baseline reports will be repackaged and repurposed for dissemination with national and local governments as a key target audience.

#### *Institutionalizing through Local Governments. Or Not*

At the start of the project, the team assumed that operating through local governments would prove to be critical to the success of the project. This has proven to be the case in countries such as Peru and Tanzania, where decentralization has given the mandate to improve health to local governments. By contrast, in Vietnam, local government did not emerge as an appropriate vehicle for implementation. In Vietnam's more centralized context, operating through a centralized agency with a national reach has proven to be more effective. Senegal falls between Peru and Tanzania on the one hand, and Vietnam on the other: To date, there has been significant emphasis on efforts at the national level—focusing in particular on policy and strategy formulation—in conjunction with efforts undertaken with NGOs working at the community level. The latter is, in large part, driven by the experience of behavior change and successful interventions in other areas, such as nutrition and HIV/AIDS. What this learning underscores is the danger of basing project design on global assumptions without understanding national institutional contexts.

### *Beyond Motivation*

Factors that influence individuals' opportunity to HWWS have often been overlooked in hygiene promotion initiatives, with much of the focus centered on motivation. Findings from WSP's Global Scaling Up Handwashing Project and other research (see for example Biran et al 2005 and Luby et al 2009) suggest that convenient access to water and soap when and where needed, and a designated place for HWWS, are also important behavioral determinants. Enabling products such as handwashing stations provide a designated place, an environmental cue to action, and a stable context for handwashing—factors highlighted in the research literature as critical for habits to form and be maintained (see, for example, Verplanken & Wood, 2006). WSP is currently conducting a landscape of enabling products. Many identified to date are tippy-taps, however, the learning from a design consultancy for a handwashing station for rural Vietnamese households is that appearances may matter and that designing features to take account user preferences and usual practices into account is essential. Findings from planned case studies on selected enabling products and the evaluation of Duraplast in Peru will reveal whether mass-produced and commercially distributed products have the potential to scale up and sustain handwashing. Learning in this area is being shared through several channels including the South Asia Hygiene Practitioners' Workshop (in Dhaka in February 2010) and its Proceedings Journal as well as through planned Learning Notes.

### *Importance of Champions*

The HWWS project has benefited from several champions. The team has learned that champions emerge in many forms and different contexts. In Vietnam, a champion in the Women's Union had advocated for the MoU; once drafted, she was able to manage the process to secure finalization in a few days. In Tanzania, the World Bank's Senior Water Specialist long championed handwashing to the national government, effectively building the confidence of the MoW to support an unproven approach and eventually integrate it into the national program. Peru found a champion in the Ministry of Education who supported the adoption of handwashing training as a consideration in promotion of teachers. This strongly improved the incentive among the primary school teachers to participate in training and become certified in handwashing promotion.

## **Component 4: Monitoring and Evaluation**

### **Monitoring for Performance and Results**

Performance monitoring systems at the country and global levels continue to provide important data on implementation progress, successes, and opportunities to improve performance. The global Management Information System (MIS), introduced during the last reporting period, is being used as the basis for global learning and reporting. Country-level reporting processes and MISs have been in place in Peru and Vietnam for just over a year. The Senegal MIS was finalized in this reporting period and is capturing important implementation and performance data (see Box 1). With the recent launch of activities in Tanzania, the reporting and data collection systems are being rolled out now and are expected to be fully operational within the next several months.

#### **BOX 1: THE SENEGAL PERFORMANCE MANAGEMENT SYSTEM**

The Senegal MIS became fully operational in this reporting period and is tracking all qualitative and quantitative data across the project. The system is used by implementing agency (IA) staff, supervisors from the implementing agencies and the WSP M&E and management team. Written reporting forms are used by fieldworkers to record data on IPC and/or DCC activities and indicators. Forms are collected by IA supervisors for review and verification. Once data is verified, forms are sent to the WSP project office, where the project monitoring specialist reviews the forms for quality assurance purposes before data is entered into the Access database by a WSP staff member. The WSP MNE specialist generates monthly reports (Objectives-Achievements-Gap and Percentage Reports) that are reviewed at monthly performance meetings with the implementing agencies. A quality assurance monitoring team conducts periodic supervision at the household level, attending IPC and DCC activities to assess the quality and completeness of the engagement. The results of these "spot checks" helps to monitor the quality of delivery and adjust engagement methods and messages as needed.

### Impact Evaluation

During the last six months, the collection of baseline data was completed in each of the four countries. In Peru, data analysis was finalized but a revised report is underway to include additional tables and information. However, the baseline results have already been shared with some government counterparts and additional meetings are scheduled with several ministries for mid-February. Vietnam finalized the collection of baseline data and received the data in December. Data analysis is underway and a baseline report will be drafted by the end of February. In Senegal, the data collection was finalized but the data has been received. Data analysis is starting and a draft report is expected by early March. In Tanzania, MUHAS finally completed the baseline data collection with close monitoring and field support from both the implementation and the country IE teams. The process of entering and coding data was also supported by an additional CPro specialist who assisted MUHAS during data entry. The majority of the data has now been entered, but the process is much slower than anticipated. The baseline data collected by MUHAS will not be used for the impact assessment but a baseline report will be drafted to share with government counterparts and other WSP partners.

As data becomes available, the IE global team has been revising some initial assumptions and recalculating power estimates. Actual data will also help to revise some of the initial designs, when needed and revisit some of the outcomes to be collected. The main issues to consider and revisit are:

- In Vietnam the prevalence of diarrhea among children under age 2 is extremely low (fewer than 2%

for 2-week recall period) and no significant impacts will be captured on diarrhea and related health outcomes. Thus, no further longitudinal surveys will be conducted and the endline survey will be scaled down to measure behavior change outcomes rather than biometric measures.

- In Tanzania, resources will be reallocated to conduct one survey by a capable and reliable firm, thus relying only in the endline data, rather than having repeated but non-credible surveys. This approach is driven by the lack of transport infrastructure, limited capacity of firms in the region, and the geographical conditions of Tanzania. An alternative under consideration is to measure height rather than diarrhea prevalence if no capable and reliable firms can be found to conduct longitudinal surveys.

The coming months will be focused in disseminating IE results and knowledge products, and preparing for the endline surveys. This will include in-country presentations to share baseline data (some already programmed in Peru for mid-February), preparing IE-related products, re-estimating sample sizes, procuring survey firms, revising and piloting the questionnaires, strategically deciding which outcomes should be collected in each country, training and standardizing survey personnel, etc. The timelines for the endline surveys in each country are included in Annex 3.

Tables 4 and 5 present the current status and planned activities for each phase of the baseline and longitudinal surveys.

**TABLE 4: STATUS AND SCHEDULE OF BASELINE SURVEYS**

Country	Baseline Survey Launched	Data Entered and Handed to WSP	Preliminary Data Analysis Completed and Shared with Country Team	Final Report Completed and Disseminated	Results Shared with Team and Wider Group of Stakeholders and Government Partners
Peru	√	√	√	√ (Revised report Feb 2010)	√ (More meetings Feb 2010)
Vietnam	√	√	√	March 2010	March 2010
Senegal	√	√	March 2010	April 2010	April 2010
Tanzania	√	Feb–Mar 10	April 2010	May 2010	May 2010

**TABLE 5: STATUS AND SCHEDULE OF LONGITUDINAL SURVEYS**

Country	All Necessary Preparation for Launch Completed <sup>3</sup>	Pre-Intervention Monitoring Surveys Launched	Pre-Intervention Monitoring Survey Data Analyzed and Shared with Country Teams by PIs	Mid-Term Monitoring Surveys Launched	Mid-Term Monitoring Survey Data Analyzed and Shared with Country Teams by PIs
Peru	√	√	February 2010	√	Mid 2010
Vietnam	√	√	Early 2010	Mid 2010	Summer 2010
Senegal	√	√	Mid 2010	Mid 2010	Summer 2010
Tanzania	Due to the problems encountered with the contractor, this survey will not be conducted. An additional mid-term monitoring survey will be conducted in 2010.			To be decided	To be decided

<sup>3</sup> This includes the following deliverables: firms recruited, questionnaires finalized and translated to local languages, pilots conducted and timeline for the longitudinal set up.

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# III. Challenges and Project Responses

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## Global Challenges

### Performance Monitoring

In general, routine reporting on project performance through the MIS has progressed well over the past six months. However, the team still faces significant challenges in the area of performance monitoring of the behavior change interventions. The challenges include:

*Measuring reach.* We estimate the reach, relying on the reported data from the implementers of the communications interventions. What we ideally want is to use community based surveys to measure prompted and unprompted recall of exposure. We have included these measures in the monitoring surveys, which we look to for verifying against the reach reported.

*Monitoring implementation carried out by partners.* While local implementing partners in Peru have shared data on reach, facilitated by a Memorandum of Understanding, we have found it more challenging at local levels, where authorities have limited capacity for monitoring at the household level, the quality of data varies, and collection less systematic.

*Measuring behavioral determinants.* Scales are used for measuring determinants such as religious beliefs and social

norms. These scales require a series of steps—focus groups, qualitative testing, piloting on small samples, and principal component analysis—to arrive at a final series of questions. These steps are lengthy and require additional time and resources which must be planned for and budgeted.

*Incorporating learning into implementation.* With behavior-change interventions gaining momentum across the four countries, numerous implementation lessons are emerging from the field. For example, in Senegal, the project team is learning the importance of involving men to facilitate access to women and children in the family, to reinforce HWWS messages, and to help sustain behaviors. Tanzania is also learning from implementation experiences in which consistency and alignment of HW messages in an integrated communications program across multiple channels and implementing partners has proven difficult.

The challenge facing the teams, at present, involves how best to incorporate these learnings into implementation: mid-way adjustments pose a risk of hampering pace of implementation, particularly at this later phase of the project. Nevertheless, the teams in Senegal and Tanzania have taken practical and feasible steps, such as adjusting the content of communications material—in particular mass media and IPC—to improve the quality of interventions.

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## IV. Project Management

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At headquarters, the Senior Impact Evaluation Specialist, Jack Molyneaux, left at the end of September and was quickly replaced by Bertha Briceno. Ms. Briceno started in October 2009 and was integrated into the teams by attending the global annual meeting of the Global Scaling Up Handwashing Project (she also attended the global annual meeting of the Global Scaling Up Sanitation Project). Previously, Ms. Briceno was the Director of Evaluation of Public Programs for the Colombian government. In addition to her technical skills, she understands the use of impact evaluation data from the government perspective, is able to bridge the dialogue between researchers and practitioners, and has the ability to translate impact evaluation findings into policy recommendations.

At headquarters, the project hired Amy Grossman, a knowledge management specialist from National Geographic's

Education Programs. Ms. Grossman has helped the HWWS team make significant progress with the development and production of knowledge products, including designing editorial and design templates, improving WSP's Global Scaling Up Handwashing Project Website, editing products, and formalizing our publishing processes.

Our Senior Water and Sanitation Specialist, Ousseynou Diop, who was the overall TTL for the HWWS project in Tanzania and Senegal, passed away unexpectedly in November, following the global annual meetings. The regional management team appointed Yolande Coombes to temporarily fill Mr. Diop's role until a replacement is found. Ms. Coombes has been a technical advisor on both projects and has a strong background in behavior change and monitoring and evaluation.



# Annex 1: Country Stories

## July 1–December 31, 2009

### Peru Country Story

#### 1. Project Description

HWWS, known as the National Handwashing Initiative (NHI) in Peru, supports national and regional authorities, the private sector, and civil society organizations to promote HWWS in 23 of 25 regions in the country.

#### 2. Intended Project Outcome

Working in collaboration with many partners, NHI will stimulate and sustain 1,279,000 women and children to wash their hands with soap at critical times (i.e., after defecation, before eating).

#### 3. Highlights for the Reporting Period

- The implementation arrangements map completed at 100%;
- A second phase was reached in seven regions where local entities including governments, municipalities, private institutions, and CBOs are leading the process—allocating resources, tapping networks, and widening the scope of the intervention—as originally conceived in the project design;
- The Ministry of Health returned and the Ministry of Women emerged as relevant actors. These Ministries direct important national social programs and have expressed strong interest to insert HWI into their structures;
- Monthly bulletin delivered to 600 mail recipients including local stakeholders, partners, authorities, universities, media, teachers, implementing agencies already involved or with potential to join;
- The first issue of the Handwashing Series was delivered, complete with guidelines
- A consultant was recruited and research initiated to develop a toolkit for WB Managers to integrate a hygiene component into existing programs;
- Three longitudinal studies were completed and an Intercept Study was started and reached midpoint;
- Super Jaboncin, the long-awaited “creative technology” to put soap in place in homes and schools became a reality; designed by a private partner and acquired by diverse public and private partners. The device reached 272,000 women and children in Peru; an additional 10,000 units for Guatemala were ordered by WHO and delivered during the period. Its impact on behavioral change will be evaluated during 2010.

#### *Scaling Up*

- In seven regions, the scope of the program has spread to new areas due to local partnerships, representing a geographic growth of 70% in Cajamarca; 30% in Piura; 25% in Lambayeque; and 20% in Arequipa;
- The Ministry of Women joined at the policy elaboration stage, representing a major opportunity for scaling up as it represents one of the largest social networks in the Peru, reaching close to 5m women, and directs major social programs, in particular a nutrition program that reaches the poorest segments of the population and our target group.

#### *Sustainability*

- National, regional, and local policy: major developments in this dimension are analyzed in the attached chart;
- The Ministry of Education, the strongest partner in the public sector, evaluated the program as it is being carried out in 21 regions and 1,884 schools, and has promising results that will be shared with the team in early 2010.

#### *Replication*

- The OPS in Guatemala adapted our methodologies for behavioral change in schools—they actually redesigned and reproduced the manuals for teachers—you can find them in their web page. They mention

at the beginning of the publication that it is based on a methodology developed by the Handwashing Initiative in Peru;

- To help combat the spread of AH1N1, OPS in Guatemala contacted DURAPLAST in Peru and ordered 10,000 Super Jaboncin HW soap devices, to distribute at 3,000 primary schools. They reproduced the promotion material made in Peru and are ready to implement the plan as the products are coming out of customs;
- TTLs from Education and Environment Bank Projects have contacted the team expressing interest to receive support to integrate hygiene/handwashing components in projects in Argentina and Pakistan, respectively. The second case is a result of the Colombian collaborative experience—the same TTL changed regions.

#### 4. Overall Progress to Date

Target population reached by IPC	49.3%
Target population reached by DCC	71.9%
Target population reached by MM	64.4%
Cumulative number of FLW trained	95.1%

#### 5. Newly Emerging Questions

- How can we best plan for the end of project? How to build on lessons learned to date to maximize project impact, replication, and sustainability?
- How to make a case for success before the Impact Evaluations are completed? We are building the enabling environment under the assumption that we will succeed at achieving BC objectives;
- Who will take over the facilitation of the process in real life?

#### 6. Area of Focus for Next Six Months

- *Behavioral Change*—to assure we are meeting this objective, the project will focus on public sector leadership at regional and local levels. We will revisit our program to maximize scaling-up opportunities working with national networks in four sectors. TA will also be provided to strengthen local partnerships;
- *Sustainability*—We aim to insert the program methodology at the operational core of three or four sectors: health, education, sanitation and women.

We believe the EE is ready for this as we have evidence of the commitment of these Ministries, but we must learn about their precise expectations and demand and may need to modify the “BC package” accordingly;

- *Knowledge sharing*—Thematic areas have been identified and concept notes are in process. Products will target country demand as well as global.

### Senegal Country Story

#### 1. Project Description

In Senegal, the Scaling Up HW Project builds on the efforts of the Public-Private Partnership on Handwashing with soap (PPPHW) which was established in 2003 with assistance the Japanese Social Development Fund (JSDF) and WSP. PPPHW, with its Steering Committee under the auspices of the Ministry of Health, was responsible for the implementation of the first HWWS campaign that was structured around two types of communication activities: (i) direct consumer contact (DCC) events in 4 provinces in schools, market places, health centers and with women’s groups, and (ii) mass media activities through national and local channels (including local radio and billboards). The Scaling up project helps to further entrench the HW initiative to further scale up promotion and behavior change. The project deepens mass media interventions at the national and local levels, expands DCC, and introduces interpersonal communications in about eighty localities in eight regions (Dakar, Diourbel, Fatick, Kaolack, Louga, Thies, Ziguinchor, and Saint Louis). The size of the target population (i.e., women and caretakers and children from 5–13) in these eighty localities is about 1.5 million.

#### 2. Intended Project Outcome

Stimulate and sustain 493,000 women and children to wash their hands with soap at critical times (i.e., after defecation, before eating).

#### 3. Highlights for the Reporting Period

##### Scaling Up

- Launched first phase of implementation in all eight intervention areas, starting the last week of June;
- Mass media campaign commenced through television, radio, and billboard displays to prime target



audience to receive campaign messages and to facilitate follow-up of IPC and DCC activities;

- 149,000 women and children reached through IPC and 104,000 through DCC;
- Implementation lessons show that, because of their multiple roles in the family, men may play a pivotal role in handwashing promotion. A Learning Note about integration of men in the primary target is in development;
- Implementing an integrated communication campaign that includes mass media, DCC and IPC shows that mass media is a powerful tool that can open household doors and facilitate in terms of reach and exposure;
- Developed Monitoring Information System to provide access to common database and facilitate quality assurance to better assess progress by implementation agencies.

#### *Sustainability*

- WSP supported the Ministry of Health in taking a more active role in the national handwashing initiative, including acting as host for PPPHW Steering Committee meetings and organizing national celebrations marking the second Global Handwashing Day;
- With WSP input on the mapping of hygiene interventions, a steering committee has been established for reviewing the social and environmental impact of water and sanitation projects through PEPAM (a national organization coordinating W&S action for achieving the MDGs). It aims to incorporate a hygiene component into water and sanitation projects;
- With WSP support on developing of materials and training, Task force from the Ministry of Education developed a handwashing orientation book for teacher in preparation of the pilot program at schools.

#### **4. Overall Progress to Date**

An integrated HWWS communication campaign has been launched in eight intervention areas and has had significant reach and impact, according to fieldworkers (in IPC and DCC) who report that the mass media campaign has opened household doors for them. While the campaign

initially targeted only mothers/caretakers of children under five and children from 5–13, reports from fieldworkers reveal a pattern showing that men are very interested by HWWS promotion and that they have invited themselves to participate in discussions and to commit themselves and their families to handwashing with soap at critical junctures.

A Management Information System has been put in place, including access to a common database (shared with implementation agencies) and the selection of a team of supervisors to conduct quality assurance monitoring.

Supervision findings were used as an input to adjust actions on the ground and assess the performance of five NGOs, implementation agencies with regard to the extension of contracts.

The Impact Evaluation baseline study was completed and analysis initiated. Two rounds of the longitudinal study out of ten (2nd step) were completed.

#### **5. Newly Emerging Questions**

- How should we best target men—primary or secondary audience?
- Under the national rural water and sanitation program, HW stations are provided to households with subsidized latrine. How demand-responsive are these existing HW stations? How can they be improved and be positioned so that they help habituate the HWWS practice in the household?

#### **6. Area of Focus for Next Six Months**

- Assess type, convenience, preferences, willingness to pay etc. of handwashing stations in use in Senegal;
- Launch a monitoring survey (Doer/Non-doer 2) to monitor changes in determinants;
- Launch the 2nd phase of the communication campaign using IPC, DCC and mass media to expand reach and exposure;
- Monitor the next phase of the communication campaign;
- Launch a very large public relations/advocacy campaign to build partnership with medical sector, schools, nutrition program, plastic manufacturers etc.;

- Develop knowledge products and tools related to key findings to date such as men's interest in HW promotion, impact of integrated communication campaign, incorporating medical sector in HW promotion;
- Assess the demand-responsiveness of the existing HW stations provided under PEPAM and offer recommendations.

## Tanzania Country Story

### 1. Project Description

HWWS-Tanzania is implemented in conjunction with TSSM-Tanzania and in close collaboration with the Ministry of Water and Irrigation's National Water Sector Development Program (WSDP) and the Ministry of Health and Social Welfare's Health Village Initiative (HVI). The project is targeting women of reproductive age and children between the ages of 6–14 in ten districts.

### 2. Intended Project Outcome

Stimulate and sustain 1.25 million women and children to wash their hands with soap at critical times (i.e., after defecation, before eating).

### 3. Highlights for the Reporting Period

#### *Scaling Up*

- Building on effects started by mass media, rolled out DCC and IPC communication activities to move from awakening to engaging through face-to-face and group meetings;
- Frontline activators trained and deployed to continue on the ground HWWS promotions with support from professional marketing/promotional companies and NGOs;
- Increased project visibility through outdoor paintings and placements in project districts;
- District teams trained to supervise and monitor IPC activities, materials distribution and DCC interventions.

#### *Sustainability*

- Annual budgets allocated for all 132 districts to support hygiene and sanitation activities;
- National sanitation and hygiene policy with a framework for implementation and monitoring of all sanitation and hygiene activities nearing completion (to

be approved and endorsed by the cabinet and parliament in 2010);

- Tarmal Industries launched a soap brand with HWWS messages and logo on packaging and insert and distributed in selected markets;
- GHD and Sanitation & Hygiene Week continued to provide platform for partners and stakeholders to review and celebrate hygiene achievement.

#### *Replication*

- Sanitation and hygiene planning and implementation guidelines finalized and sent to districts for use by MOWI. These guidelines provide a framework for district-level implementation with possible activities using the Scaling Up project approaches. More budgets from central government have been allocated for hygiene interventions in a few districts to deepen implementation;
- Some stakeholders and partners adopted the project approaches to integrate with ongoing interventions: UNICEF integrated them into school sanitation and other learning districts it supports; AED/TMARC project integrated some training and education materials into a pilot program in Morogoro; SNV, WaterAID, and WSCC integrated some materials into outreach activities.

### 4. Overall Progress to Date

- Over 14,000,000 people reached through mass media campaign carried on three radio stations (two national, one regional);
- 53,000 people reached through DCC activations, in four districts;
- 106,000 women and children reached through IPC in seven districts;
- IPC training for frontline activators (FLAs) completed in seven districts, totaling 415 FLAs trained and supervised;
- 26,667 out of 235,000 households, equivalent to 11%, have installed HW stations with water and soap.

### 5. Newly Emerging Questions

- How can we create interest from non-traditional private sector partners who can support HW

activities by allocating financial resources, including HWWS messages in their promotions, and including HWWS in corporate social responsibility programs?

- How to develop durable, low-cost, and culturally-appropriate HW technologies such as soap holders/dispensers, customized washing basins, etc.?
- How to improve the link between below-the-line communication activities (i.e., IPC and DCC) and mass media?
- How to create and sustain relevant capacities to train, supervise and monitor HWWS activities in the communities and replicating their experiences to other districts?

## 6. Area of Focus for Next Six Months

- Refresh creative and communication materials to strengthen link mass media activities and messages with the below-the-line (in particular, interpersonal) communication activities;
- Increase and refine monitoring activities, ensure all forms are completed, collected, and input within acceptable timeframe;
- Capture and document learning from implementation and enabling environment;
- Continue supporting project districts to help other districts;
- Work with government to evaluate and improve planning and implementation guidelines;
- Identify and recruit more private sector partners to support HWWS with promotional materials, funding for additional air time, and outdoor rentals.

## Vietnam Country Story

### 1. Project Description

The Vietnam Handwashing Initiative is an integrated program promoting handwashing with soap in women of reproductive age, caretakers and primary school aged children targeting 600 communes in 12 provinces throughout Vietnam.

### 2. Intended Project Outcome

Stimulate and sustain 2.2 million women, caretakers, and primary school aged children to wash their hands with soap at critical times (i.e., after defecation, before eating).

## 3. Highlights for the Reporting Period

### Scaling Up

- During the last six months, our efforts on the scaling up component have been focused primarily on: 1) improving the interpersonal communications activities and preparing for the expansion of HWWS activities in 240 new communes and 2) development of a HWWS program to reach children through multiple channels including television, a children's magazine, and interpersonal communications;
- Training programs for adults have been completed in the four non-Impact Evaluation provinces and activities have begun in those provinces;
- Training courses for the children's program have been completed.

### Sustainability

- A Memorandum of Understanding has been signed between the World Bank and the Vietnam Women's Union that provides a mandate for mainstreaming of HWWS activities in all 63 provinces in Vietnam;
- At a regional level, two enabling environment kick-off workshops have been carried out with Women's Union representatives in almost all 63 provinces to introduce HWI and discuss ways that WSP and the central Women's Union can assist the provinces to integrate HWWS into provincial activities;
- Both the Ministry of Health (MoH) and the Ministry of Education and Training (MoET) were involved in the production of the children's program and both ministries have both endorsed the program.

### Replication

- Training and support to other programs to integrate and replicate HWWS activities into water and sanitation programs continued during this reporting period, including:
  - WSP supported six training courses in HWWS in three provinces (Phu Yen, Dak Nong, and Tra Vinh) within the National Target Program;
  - WSP provided materials and training to integrate HWWS into activities in two provinces (Thai Binh and Hai Duong) within the Red River Delta Rural Water Supply and Sanitation Project, a World Bank investment project.

#### 4. Newly Emerging Questions

With a better monitoring tool, would we be able to determine the performance of our interventions—in terms of exposure and its effective on changing the key determinants of the HWWS—as well as to quantify the resultant behavior change in our project areas?

#### 5. Area of Focus for Next Six Months

The HW team will be focusing our efforts on enabling environment and learning components of the program in the next six months including:

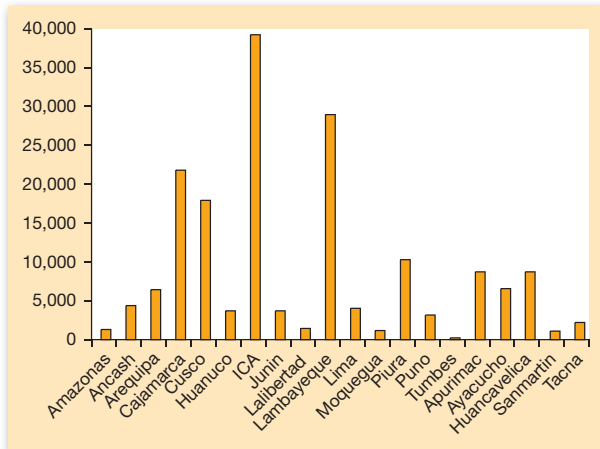
- Increase MoET’s willingness to mainstream the children’s program into the national curriculum through a workshop (organized by the Women’s Union) that would introduce the program to larger number of MoET’s representatives;
- Develop Integration Toolkit with practical guidelines on how to integrate or improve HWWS messages

into health, food safety, and water and sanitation activities;

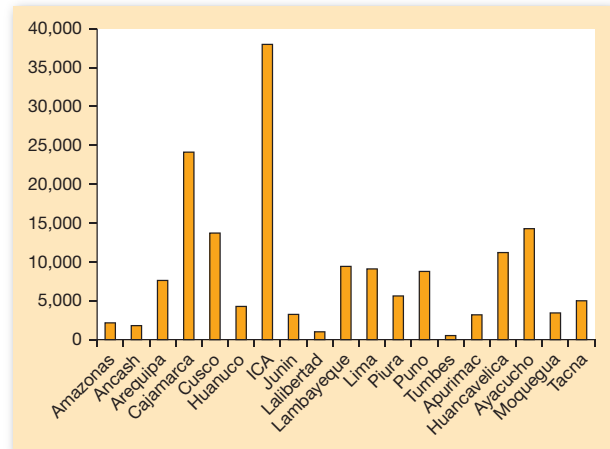
- Harvest lessons learned from the implementation of a large scale hygiene program from the provincial to central levels and producing a learning product to share learning;
- Roll out mass media for caretaker’s program and prepare for DCC activities;
- Provide oversight and technical assistance to the provinces, in particular the new communes added in Phase II, to ensure that activities are on time and carried out with quality, as we have done with the original 260 communes;
- Extend network of partners and build the enabling environment by organizing integration kickoff workshops to engage the Ministry of Agriculture and Rural Development in HWI.

# Annex 2: Additional Reach Graphs—Peru

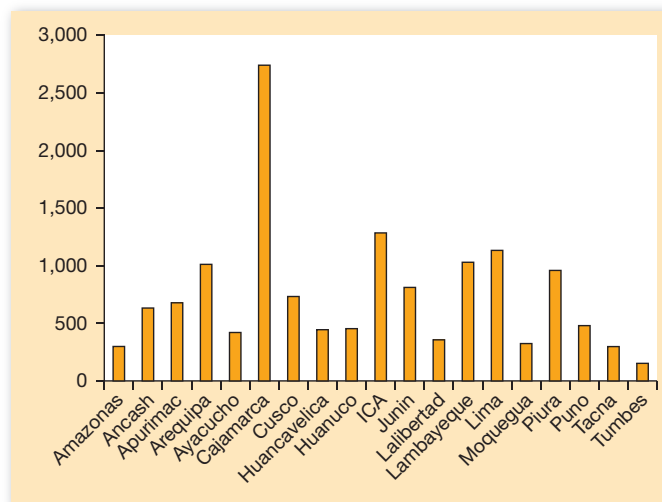
**FIGURE 2A: TARGET POPULATION REACHED BY IPC**



**FIGURE 2B: TARGET POPULATION REACHED BY DCC**



**FIGURE 2C: FRONT LINE WORKERS TRAINED**



# Annex 3: Timeline of Endline Studies

		2010												2011											
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Peru	Baseline																								
	Longitudinal																								
	Endline																								
India	Baseline																								
	Longitudinal																								
	Endline																								
Senegal	Baseline																								
	Longitudinal																								
	Endline																								
Tanzania	Baseline																								
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Indonesia	Baseline																								
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Vietnam	Baseline																								
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