

Handwashing with Soap – Two Paths to National-Scale Programs

Lessons from the Field: Vietnam and Indonesia



Acknowledgments:

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Handwashing with Soap—Two Paths to National Scale Programs

Lessons from the Field: Vietnam and Indonesia

EXECUTIVE SUMMARY

This Field Note describes two Southeast Asian programs that are making handwashing a feature of everyday lives on a national scale: the Handwashing Initiative (HWI) in Vietnam, which has reached nearly two million caretakers of young children and 80,000 students; and the Public-Private Partnership for Handwashing with Soap (PPP-HWWS) in Indonesia, which has contributed to reaching millions of students, mothers, workers, and travelers. The program in Vietnam has concentrated on first gaining an understanding on how people actually behave and then determining how to change that behavior, while the program in Indonesia leverages the reach of the private sector and other partners to scale up handwashing initiatives that were previously researched and already underway. They both demonstrate ideas that can be applied in other countries.

For countries about to embark on designing either a stand alone handwashing program or a handwashing component within a larger water and sanitation program, the process of developing evidenced based materials in Vietnam could be applied in the development of materials. The Indonesia case study provides insights on how to leverage partnerships to increase reach in countries where handwashing with soap programs already exist.

This document is most useful for:

- Practitioners who see the need or potential for a national scale handwashing with soap promotion program,
- Governments, and practitioners such as NGOs, who want to add a hygiene component to a new or existing water and sanitation program, and
- Organizations who are interested in examining public-

private partnerships outside of traditional hardware programs.

These two examples show that there is no single approach for national handwashing programs. Individual country contexts — population size, government leadership, budget, prior hygiene programs, and willing partners — determine the path of national programs. In Indonesia, the PPP-HWWS has reached a much wider target audience than the government or development organizations, working independently from one another, could have reached. Experience in Vietnam has shown that a public-private partnership model is not essential for a large-scale handwashing program. The national government was involved in the development of evidence-based materials which were then acceptable to other partners for scaling up, including through provincial government partnerships.

Common lessons learned are that:

- Behavior change messages must be based on research and developed by professionals
- Consistent messages and information about the critical times for washing hands will improve implementation efficiency
- Implementers need to be trained in behavior change promotion techniques
- Build on earlier handwashing work to jumpstart partnerships
- A national logo is valuable to unite all stakeholders around the common message and campaign

Both Indonesia and Vietnam demonstrate that if national programs welcome new and different partners or promotion

opportunities, then the reach of handwashing promotion can be enormous.

Challenges remain for the handwashing with soap programs in Indonesia and Vietnam and include:

- Ensuring handwashing promotional materials are inclusive of all people in these ethnically and geographically diverse countries,
- Obtaining more physical investment in water supply and handwashing stations in schools to enable handwashing with soap, and
- Setting up monitoring and evaluation processes to give feedback and guide the future direction of the programs.

INTRODUCTION

Although mortality rates for children under five are declining in both Vietnam and Indonesia, in 2007 diarrhea claimed the lives of more than 27,000 children under five years of age in these countries. In Indonesia in particular, diarrhea causes 18 percent of all deaths of children under the age of five, compared to 10 percent in Vietnam.¹ Many thousands more children every year are unwell and malnourished because of diarrhea and other illnesses that are transmitted through poor hygiene. In some areas of Vietnam, 92 percent of school children have intestinal worm infections, while three-quarters of women nationally, including pregnant women, are infected with one or more type of worm.² The simple action of washing hands with soap has been demonstrated to reduce the incidence of diarrhea by up to 47 percent and acute respiratory infections by up to 34 percent.^{3,4} Washing hands with soap can also reduce the spread of SARS, cholera, Avian Flu, and H1N1 along with other emerging infectious diseases that occur in Southeast Asia.

Vietnam and Indonesia are two of 15 developing countries around the world that are part of the global Public-Private Partnership for Handwashing with Soap. The PPPHW was established in 2001 through the Global Handwashing Initiative⁵ to promote handwashing with soap at a national scale, using partnerships between the private and public sectors. PPPHW programs target children, mothers, teachers, and caregivers. Indonesia has gone on to further develop these partnerships, while Vietnam's approach initially built on the PPPHW but now has more bilateral arrangements through its Handwashing Initiative.⁶

This Field Note describes the success of two different approaches in meeting the huge challenge of scaling

BOX 1. GUIDING PRINCIPLES OF PUBLIC PRIVATE PARTNERSHIP FOR HANDWASHING⁷

The global **Public-Private Partnership for Handwashing (PPPHW)** works to save children's lives by promoting the awareness of this simple practice. The partnership is guided by the following principles:

- **These deaths are preventable**

Research shows that, if widely practiced, handwashing with soap could reduce diarrhea by almost 50 percent and respiratory infections by nearly 25 percent.

- **Handwashing with soap is a right**

Every child has a right to vaccination and should also have the right to protection from hand-transmitted diseases.

- **Large-scale changes in handwashing practices can be achieved**

A large-scale increase in the practice of handwashing with soap would make a significant contribution to meeting the Millennium Development Goal of reducing deaths among children under five by two-thirds by 2015.

¹ UNICEF. 2008. *Indonesia Country Profile, Maternal, Newborn & Child Survival; and Vietnam Country Profile, Maternal, Newborn & Child Survival*

² Le, H.T., et al. 2007. "Anemia and intestinal parasite infection in school children in rural Vietnam." *Asia Pacific Journal of Clinical Nutrition*. 2007;16(4):716-23. and Nguyen, P. H., et al. 2006. "Intestinal Helminth Infections Among Reproductive Age Women in Vietnam: Prevalence, Co-Infection and Risk Factors." *Southeast Asian Journal of Tropical Medicine and Public Health*, 2006:37(5).

³ Curtis, V; S. Cairncross. 2003. "Effect of washing hands with soap on diarrhea risk in the community, a systematic review." *Lancet Infectious Diseases* 3:275-281.

⁴ Luby, Steve, et.al. 2005. "Effect of handwashing on child health; a randomized control trial." *Lancet Infectious Diseases* 366:225-33.

⁵ The Global Handwashing Initiative was developed by an alliance of the World Bank, the Water and Sanitation Program, the London School of Hygiene and Tropical Medicine, the Academy for Educational Development, and the private sector, in collaboration with USAID, UNICEF, and the Bank-Netherlands Water Partnership

⁶ The Government of Vietnam was not ready for a multilateral partnership for handwashing, and already had programs in place with UNICEF and Unilever that were consolidated under the HWI.

⁷ <http://www.globalhandwashing.org/>

up handwashing to a national level. In Vietnam, the focus is on well-researched and targeted communication programs delivered through a mass organization and schools. In Indonesia, efforts concentrate on national level coordination and leveraging private sector participation to encourage handwashing. In both countries, handwashing initiatives have been adapted to local circumstances with some interesting and unexpected results.

This document details ideas and approaches for designing and implementing behavior change programs, and fostering private sector participation. It describes lessons learned in relation to implementing national handwashing with soap programs. The approaches and lessons learned will have most use for those countries wanting to scale up handwashing to reduce diarrheal and other infectious diseases.

VIETNAM HANDWASHING INITIATIVE

Background

Within the last ten years, Vietnam has made rapid economic and development progress, including being on track to achieve the Millennium Development Goal for water supply. However, progress on sanitation and hygiene lags behind other development. Acute respiratory infections are still the leading causes of mortality and morbidity in children under five in Vietnam. Malnutrition is still high relative to other Asian countries. The country has also suffered from reoccurring outbreaks of SARS, Avian Flu, cholera, and H1N1. These emerging diseases have heightened the recognition by authorities that improved hygiene is critical to contain and prevent outbreaks.

In Vietnam, handwashing has long been part of programs that focus on prevention of specific diseases, although there was never a concerted effort to do a full handwashing with soap campaign focusing on one behavior to improve hygiene practices. Most water and sanitation projects in Vietnam now include a hygiene component (including handwashing), but due to lack of resources allocated to hygiene promotion and inexperience in developing behavior change communications materials, the promotion of handwashing with soap has previously had limited

FIGURE 1: VIETNAM COUNTRY DATA

Area:	331,210 km ²
Number of provinces:	64
Population: (2009)	85.8 million
Children under 5:	8.4%
Life expectancy:	Males 70 Females 76
Under 5 mortality:	15 per 1000
Primary school enrollment:	96%

Source: CIA World Factbook, 2009 National Census, UNICEF 2008



impact. Communication campaigns in the past made many assumptions about the target audience such as presuming that health was the main driver for improved hygiene. They also focused mainly on increasing knowledge, and often used fear of disease as the motivating message. In addition, communications materials were usually cut from different contexts and pasted and used again, rather than developing materials derived from research about the target audience and their handwashing behavior.

Evidence shows that handwashing is not common practice in Vietnam, and using soap is rare. A baseline survey

(commissioned by Water and Sanitation Program) in 2006 found that only 5 percent of mothers were observed to wash their hands with soap before feeding their child and only 23 percent were observed to wash their hands with soap after disposing of their child's feces. Less than a third of people thought that washing hands with soap was important. If people did wash their hands, they usually used water only, and did so at times that were not critical to reducing diarrhea in children. WSP observations found that the most likely time that people washed their hands (using water only) was when their hands felt dirty such as after coming back from the field or after touching livestock. These results show that despite all the previous promotion efforts, people did not wash hands with soap, particularly at important times.

Description of the Program

The Vietnam Handwashing Initiative began in January 2006 with the aim to reduce morbidity and mortality from diarrheal diseases in children under five years of age. The program uses strategic communications to promote handwashing with soap among poor women aged 15-49 and children aged 6-10. At the core of the initiative is an integrated behavior change program that uses multiple

channels to promote and reinforce handwashing with soap practice.

These channels are:

- Creating positive social norms for handwashing with soap through national and regional mass media;
- Enhancing skills and intentions of mothers and caretakers to adopt handwashing with soap through community-based interpersonal communications via health and education staff and mass organization members;
- Raising the profile of handwashing with soap at the community level through high-impact marketing events; and
- Public relations and advocacy activities aimed at national policymakers to strengthen the sustainability of the interventions.

Two communications initiatives have been developed — one for adults, and one for children. The campaigns have been rolled out in 600 communes (the lowest level of government administration in Vietnam), via health workers, Vietnam Women's Union members, and other partners of the program.

BOX 2. PRIMARY PARTNER: THE VIETNAM WOMEN'S UNION

The Vietnam Women's Union (VWU) is a mass organization – a political and social institution established by the government as a way to communicate down to the grassroots level about national government programs and initiatives. The VWU's objective is to promote gender equity, foster the development of women, and protect the rights of Vietnamese women. It shares the same vertical structure as a line ministry. The VWU receives resources from the Government of Vietnam, and external agencies such as UNICEF and the World Bank, and from its members. The presence and structure of mass organizations such as the VWU in Vietnam presented the HWI with a unique opportunity to reach millions of women and children with face-to-face communications activities.

In December 2006 Vietnam became one of four⁸ countries in WSP's large Global Scaling Up Handwashing Project. Funded by the Bill and Melinda Gates Foundation, the aim of the project is to test whether innovative promotional approaches can generate widespread and sustained improved handwashing with soap practiced, and quantify the anticipated resulting health benefits. The global project's target is to change handwashing with soap behavior in 5.4 million women of reproductive age and primary school-aged children. In Vietnam, the Scaling Up Handwashing Project funds are used under the HWI to develop approaches and change the handwashing habits of 2.3 million women and children. A structured learning and dissemination process to develop and share evidence, practical knowledge, and tools is a strong feature of the project.

⁸ Also Senegal, Peru, and Tanzania

BOX 3. VIETNAM COUNTRY OBJECTIVES

- ✓ 2.3 million of target population (women 15-49 and children 6-10) adopt handwashing with soap at critical times.
- ✓ 9.25 million of target population are exposed to handwashing with soap communication.

The major objectives of the Handwashing Initiative are to:

- Make handwashing with soap a habit among millions of mothers and children,
- Use a strong monitoring and evaluation component to learn from and adapt program planning and management,
- Establish a sustainable program that will continue and expand after the five-year grant ends, and
- Document and disseminate the learning from designing, implementing, and evaluating a large scale behavior change program.

The HWI’s focus on a single message gave an opportunity for a fresh look at evidence-based communications approaches and materials.

The Environmental Health Management Agency of the Ministry of Health, and the Vietnam Women’s Union implement the HWI with technical support from WSP. The Ministry of Education and Training also endorses the school-based activities with active support from the Department of Education and Training in the provinces.

In addition to the HWI, there are other ongoing programs in Vietnam that promote handwashing with soap as part of larger sanitation programs including:

- The Unilever-supported “Share Love Not Germs” campaign, which has been implemented since 2006 in 10 provinces. This campaign is also designed to change the handwashing with soap rates in project areas;
- UNICEF’s Water Sanitation and Health Program; and
- NGO programs to improve water supply and sanitation for households and schools, including Plan in Vietnam, SNV, Church World Services, East Meets West and others.

Target Groups and Behaviors

In Vietnam, two complementary communications campaigns were developed, one for caretakers of children under five including mothers and grandparents, and the other for primary school children. The campaign for mothers and caretakers began well ahead of the campaign for school children; however the approaches for both have been very similar, using these steps:

1. Researching the audience;
2. Developing a behavior change framework to analyze research findings, guide the formation of the communication campaign and track changes in behavioral determinants throughout the life of the program;
3. Developing the creative approach including messages and tactics;
4. Pre-testing and adjusting the messages based on audience feedback;
5. Producing materials and rolling out of the activities;
6. Monitoring changes in behavioral determinants during the program, and using this knowledge to fine-tune the activities.

Step 1 involved formative research to identify the barriers to handwashing with soap that could be overcome through communication campaigns. Techniques for researching adults included: focus group discussions; in-depth interviews; structured observations within households to see actual handwashing with soap; activities and product trials where caretakers were given soap to use for a week, and then interviewed about when and how they used it.

FIGURE 2: FOAM BEHAVIOR CHANGE FRAMEWORK

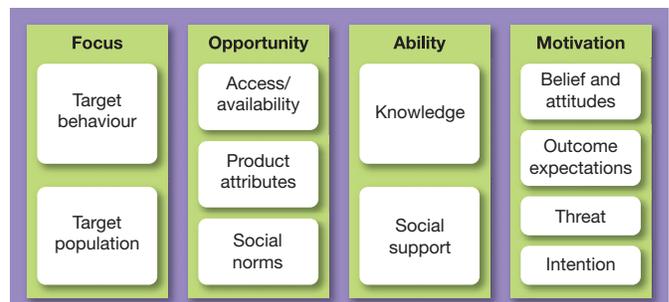
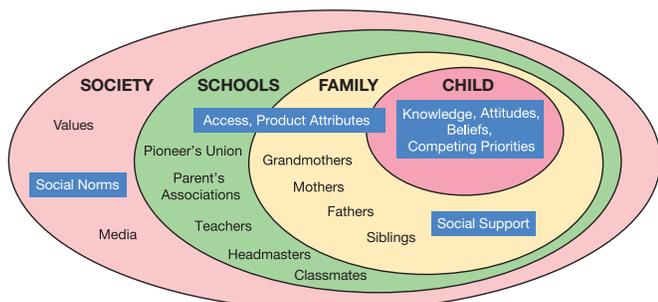


FIGURE 3: FOAM-EM



WSP Vietnam program staff utilized a framework called “FOAM” (Focus, Opportunity, Ability, Motivation), developed by WSP as a common conceptual framework for all four countries taking part in the Global Scaling Up Handwashing Project.⁹ FOAM provides a way to analyze handwashing behavior research to design effective handwashing programs. It looks at all the factors that can help or hinder handwashing with soap, such as convenient access to soap, beliefs about the cause of diarrhea, who influences behavior in the household, desirable attributes of soap, or knowledge of the links between handwashing with soap and diarrhea. Most importantly, the starting point for the framework is to clearly identify and describe exactly who is being targeted, and what behaviors are being targeted for change. Ideally, FOAM would have been used to guide the development of the research design, however, since the FOAM model was developed after the formative research study was completed, FOAM was used to reanalyze the research findings and then inform the development of the campaign communications objectives.

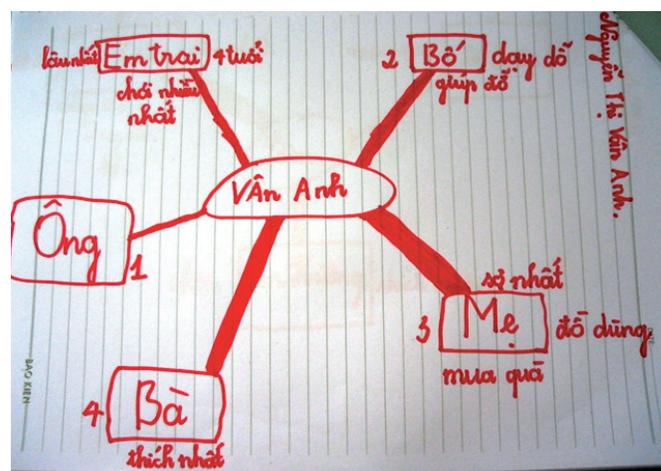
The FOAM framework was further adapted in Vietnam for primary school children. This variation, called FOAM-EM (Focus on Ability, Opportunity, and Motivation—Ecological Model), builds on findings from an innovative research study conducted in Vietnam with technical support by the London School of Hygiene and Tropical Medicine. In Vietnamese, “em” means “little brother or sister,” so FOAM-EM is a memorable acronym. FOAM-EM identifies key factors influencing primary school children’s handwashing behavior as well as their relationships with family, school, and community.

Studying the hygiene behaviors of school children, particularly younger children, is difficult. Novel methods were devised using games and play, and drawings or other visual aids to facilitate interaction and get feedback from children. Principals, teachers, and caretakers were also interviewed to understand the schools’ organization. The formative research included direct observation of water, sanitation, and hygiene facilities at school and home.

Six primary schools chosen from three provinces to represent northern, central, and southern regions of Vietnam took part in the formative research study. In each province, one peri-urban and one rural area were chosen. Research tools used with children included:

- Discussions on role models, and desired careers;
- Daily clocks to show how time is spent both during school term and during summer holidays;
- Drawing a family structure diagram to show relationships within the household;
- Belief interviews on the benefits of washing hands with soap, causes of diarrhea; and
- Storytelling using pictures to uncover motivations for handwashing.

FIGURE 4: QUALITATIVE TOOLS USED WITH SCHOOL CHILDREN



Family structure diagram: the thick lines show the child’s strongest relationships and influences at home - in this case with Mother (Mẹ) who is feared the most but who also buys them presents, followed by the Grandmother (Bà), who the child likes the most.

⁹ For more information about FOAM refer: http://www.wsp.org/wsp/sites/wsp.org/files/publications/WSP_IntroducingFOAM_HWWS.pdf

BOX 4. FORMATIVE RESEARCH**What is formative research?**

Formative research is conducted during the development of a program to help identify and understand the characteristics — interests, behaviors, needs — of the target audience. It uncovers factors that influence the decisions and actions of the target audience, and identifies the best ways to reach them. The research includes both qualitative and quantitative data collection methods.

Designing the Campaigns

Campaign messages were developed based on the most relevant findings of the formative research.

Research on Caretakers showed that caretakers were concerned most about making sure that their children meet developmental milestones so that they are able to keep up with their peers. Washing hands was usually done with water only, and using soap was not felt to be important or necessary, but the smell of soap is an attractive attribute. Television is the best way to reach caretakers as mothers often enjoy watching TV programs in the evening with their families. Members of the Women’s Union and health workers are the most trusted sources of information.

Key Communications Concept: Caretakers are concerned most about making sure that their children meet developmental milestones so that they are able to keep up with their peers

A campaign was developed based on the idea of promoting “good motherhood.” Handwashing with soap was positioned as an easy way for mothers to help ensure the health and well-being of their children. Using this platform, six campaign concepts were developed and pretested throughout the country. One final concept was chosen by the target audience, based on the popular song Five Clean Fingers. When teaching young children how to count, mothers and teachers often sing this song. The campaign uses the song to point out that, “Hands are not clean if you wash only with water, soap is needed.” The final products

for the campaign included two television commercials, two posters and a logo that included the tagline: “Wash your hands with soap for the health and development of children.”

Based on the research findings about the importance of interpersonal communication to caretakers, comprehensive reference manuals were developed, one for health workers and one for Vietnam Women’s Union members. These manuals are used to lead group meetings with mothers, grandparents, and teachers, conduct household visits, and organize market meetings, club meetings and community contests.

High-impact community marketing events including games, quizzes, contests, and demonstrations were also held to reinforce the positive messages about handwashing with soap and to illustrate that clean-looking hands, and hands that do not smell, can still have germs. The demonstration involved participants rubbing a powder, detectable only under ultraviolet light, on their hands to represent germs. Because the powder is invisible to the naked eye, the hands still appear to be clean.

Research on children showed that children like the smell of soap and knew that they need to wash their hands with soap but could not identify the important times — before eating and after defecating. They have a desire to prevent others, especially younger siblings, from getting sick. Children used TV as a window to the wider society, and their role models reflected greater societal values: education, hard work, and altruism.

Key Communications Concept: Children want to protect their younger brothers and sisters from getting sick. Regret at making someone ill from not cleaning dirty hands is the primary motivator for hand washing with soap.

The school setting presents unique challenges to effectively promoting hand washing with soap. The most likely time when children will wash their hands in school is after using the latrine, not before eating, as almost all rural school children return home to eat their mid-day meal.



School days are long and highly regimented with limited opportunities for play. Teachers have a full teaching load with no time to introduce new activities. Handwashing with soap is already part of the curriculum, but hygiene lessons are often limited to theory as the lack of water, soap, basins, and clean, working latrines prevents children from practicing handwashing with soap at schools.

The campaign for children was developed based on the platform of children as the “pride of the family.” Handwashing with soap was positioned as an easy, fun, and smart behavior with a tagline of, “Wash your hands with soap for your own health and the health of others around you.”

The handwashing with soap campaign for school children used a fresh, interactive approach to education, combining mass media and interpersonal communications activities, especially through teachers. As Vietnamese children have little free time in their daily lives, WSP supported an advertising agency to develop an entertainment/education program to generate interest, enthusiasm, and promote the practice of handwashing with soap. A campaign, focused on colorful, attractive, and positive characters, was developed around a superhero who acquires special powers by handwashing with soap in order to help his family and others. Two different concepts for the superhero were pre-tested with a final character — a rural schoolboy, Bi, who becomes

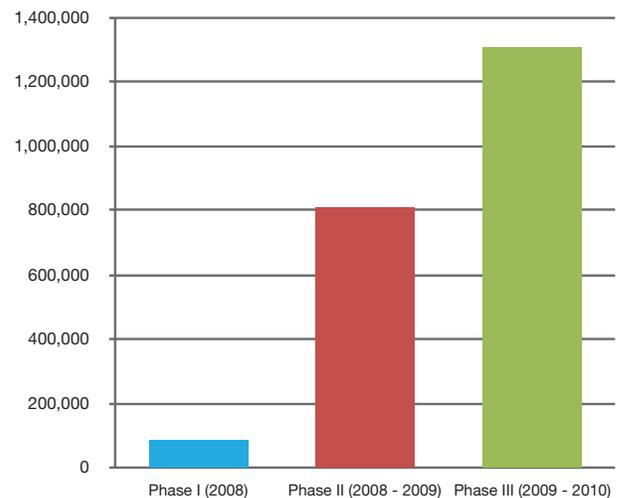
a superhero — selected. The Bi character was refined and pretested again several times before the final production. A series of ten comic strips was developed around Bi and his adventures with handwashing. The comics were printed in a popular children’s magazine, *Nhi Dong*, and then turned into animated cartoons that were then aired on a nightly children’s show, *Good Night Baby*.

Bi was also included in the print materials in schools, along with singing of the *Five Clean Fingers* song used in the caretaker’s program, which was incorporated into games and activities. The school materials offered simple guidelines and an instructional DVD to help teachers apply the games as a supplement to existing lessons on handwashing with soap. Each school within the supported program area carried out five extracurricular activities including participation in a national handwashing with soap drawing contest through the *Nhi Dong* magazine.

Scale

Between May 2008 and November 2010, health workers and Women’s Union staff have reached nearly two million caretakers through interpersonal communications activities. Importantly, over 15,000 health workers, teachers and Vietnam Women’s Union staff were trained in the theory and practice of handwashing with soap. This enabled them

FIGURE 3: TOTAL NUMBERS OF PEOPLE REACHED VIA THE HWI





to then communicate with many people in the community, through thousands of mothers' meetings, grandparents' meetings, market meetings, Women's Union members' meetings, kindergarten teachers' meetings, and visits to more than 425,000 households. Other events to support interpersonal communication included 10 community marketing events and 48 cooking contests that integrated handwashing with soap into the event.

Through school events and mass media activities, handwashing with soap promotion has reached an estimated 800,000 students nationwide. Direct promotional activities in 512 rural and semi-urban schools throughout Vietnam have resulted in:

- Training for over 670 teachers,
- 772 Global Handwashing Day school events,
- 260 "My Superhero" contests,
- 512 school handwashing with soap launch events, and
- 1,260 meetings/events for handwashing promotion at school.

To address the challenge of insufficient handwashing facilities at schools, guidance on how to make low cost handwashing with soap stations is given to teachers and principals during the training courses in schools. Simple and affordable solutions such as plastic buckets, plastic water dippers, and techniques to manage soap are shared.

Costs

Initially, in 2006, the Danish Embassy in Vietnam provided US\$1 million for the HWI. The HWI was then scaled up with a further US\$2.5 million from the Bill and Melinda Gates Foundation between 2007 and 2011 as part of the Global Scaling Up Handwashing Project implemented by WSP. Water supply and sanitation projects and programs have shared the implementation costs of handwashing promotion in selected locations, while private companies such as Unilever have also contributed to handwashing promotion.

Monitoring of Results

The HWI has invested a significant amount of resources in monitoring and evaluation. A global Results Framework sets clear, specific targets to guide program monitoring, including tracking the number of activities completed and estimating audience reach for all communications channels. In Vietnam, data are collected monthly at the commune level and aggregated to the national level for a country specific picture. Semi-annually, the Vietnam data are compiled with data from the other three countries to form a global picture of project progress. Another significant component of the program is an impact evaluation to quantify the health and poverty impacts of a large-scale handwashing with soap program.

Unique Features of the Handwashing Initiative in Vietnam

The HWI is a programmatic approach to handwashing, concentrating on implementation and achieving tangible and ambitious results set by the Global Scaling Up Handwashing Project. At the heart of the Project is the goal to improve communication techniques for handwashing promotion.

Vietnam is fortunate in having extra funding through the Gates Foundation to test and implement handwashing campaigns. Other countries attempting to scale up have difficulty getting enough funds to achieve this on a scale.

The HWI has made deliberate use of professional expertise to help build credibility and objectivity in the research. However, Vietnamese expertise in social marketing and health promotion is not yet well developed. A market research firm was hired to carry out the adult formative research study and an international advertising agency was contracted to design both the caretaker and school children communications campaigns. Close supervision by WSP is critical to keeping the marketing campaigns true to the research findings as advertising agencies do not always base their creative ideas on evidence and research data. The Agency Brief (which contains the research reports and guidelines for the agency) serves as an important tool to guide and measure the creative ideas of the agency, and for accountability.

Strong partnerships are forged directly at the provincial level where there is enthusiastic demand for handwashing support. WSP and the Women’s Union work directly with interested provincial Health and Education Departments, rather than working through the central level of government.

Vietnam’s National Target Program for Rural Water Supply and Sanitation has helped to leverage the HWI.¹⁰ By 2010, almost all nine pilot provinces participating in the National Target Program had requested and received support for handwashing promotion, in most cases sharing the costs to implement promotional activities in schools and the community. WSP funded a limited number of training courses for provincial and district health workers and printing of all communications materials for most of the pilot provinces. The pilot provinces then, in turn, funded commune level training and supported interpersonal communications from their National Target Program budget allocation for hygiene promotion. This partnership approach can serve as a model to advocate for provincial government allocations for handwashing nationally.

In Vietnam, policy makers and program managers are often under pressure to quickly roll out a communications campaign, especially if they are stretched in terms of time or

financial resources. They may be tempted to skip or shortcut the consumer research stage. The experience from Vietnam is that this first step is the most crucial in designing an evidence-based campaign. The research findings are critical to identifying behavioral determinants that subsequently guide the development of the communications campaign objectives. The campaign objectives are then used as the basis for a monitoring and evaluation system.

INDONESIA PUBLIC-PRIVATE PARTNERSHIP FOR HANDWASHING WITH SOAP

Background

Handwashing with soap has been promoted in Indonesia since the 1980s by many government, development assistance, and NGO programs. Handwashing was included in diverse health and hygiene programs such as breast-feeding, prevention of the spread of avian flu, and water and sanitation projects. Usually the focus was on creating awareness and increasing knowledge to change behavior. Promotional efforts were sporadic, uncoordinated and unevenly spread across the vast Indonesian archipelago.

According to a baseline survey of six provinces in 2006 (conducted by Environmental Services Program-USAID¹¹), mothers rarely washed hands with soap at critical times. Only 6 percent of mothers washed hands with soap before preparing food. When taking care of children only 7 percent

FIGURE 6: INDONESIA COUNTRY DATA

Area:	1,904,569 km2
Number of provinces:	33
Population: (2010 est.)	237.5 million
Children under 5:	9.2%
Life expectancy:	Males 68 Females 73
Under 5 mortality:	31 per 1000
Primary school enrollment:	96%

Source: UNICEF 2008

¹⁰. AusAID, Danida and the Netherlands jointly fund the National Target Program. Pilot provinces are supported with technical and capacity-building assistance to improve the effectiveness of RWSS expenditure and make progress towards achieving the national water supply and sanitation targets in rural areas.

¹¹. Environmental Services Program – United States Agency for International Development.



of mothers washed hands with soap before feeding a child, and 9 percent after cleaning their baby’s bottom. Few women washed their hands with soap after they defecated or before eating.

Description of the Program

In 2007, as part of a national “community-based total sanitation strategy,” the Indonesian Government and partners called for a national handwashing with soap program to improve the coordination and focus of handwashing activities, and move away from the piecemeal, project-by-project or district-by-district approach of the past. The Public-Private Partnership for Handwashing With Soap (PPP-HWWS) was created as a response. The partnership supports the Ministry of Health in the creation of healthy communities by promoting sustainable large-scale handwashing with soap campaigns targeting audiences countrywide.

The PPP-HWWS begun in 2007 as a small core group of national-level member organizations from public, private and non-profit sectors, but now includes large and influential organizations such as:

- Government: Ministry of Health, and the National Development Planning Agency (BAPPENAS);
- Donor organizations: WSP-World Bank, Asian Development Bank, USAID, UNICEF, and WHO;

- Private national and multinational companies: Reckitt Benckiser (Dettol), Unilever, Triple Ace, Exxon Mobil, Indofood, Bank BTPN;
- Non-governmental organizations: Save the Children Fund, CARE, Johns Hopkins University, Mercy Corps and Plan International; and
- Community-based organizations: PKK (national women’s organization), Muhammadiyah (Indonesia’s second largest faith-based mass organization).

The partnership operates through regular meetings of the core group, special issues sub-committees, and a National Steering Committee. Since 2007, WSP has supported a full-time person located within the Ministry of Health to act as PPP-HWWS Coordinator.

Members of the Core Group develop activities in areas related to their interests and strengths. Some work directly with local government, while others develop their own projects with NGOs active at community level. Each partnership member contributes in some way to national handwashing promotion, within the overall objectives of the PPP-HWWS. The Ministry of Health has few resources to do promotional activities in Indonesia’s many communities, but together with BAPPENAS, it provides a national framework and leadership, and strategic links to provincial and district government administration. Donors who typically conduct projects outside of the government system are now bringing handwashing with soap promotion

into their water and sanitation projects using the guidelines and approaches agreed between partners. Businesses contribute to financing and implementation of marketing techniques. Community-based organizations use their networks to reach out to communities around the nation.

The first phase of the PPP-HWWS involved consolidating and raising awareness of the national handwashing partnership itself. The second phase is more directly working at changing handwashing behavior.



Mother with a hanging "home made" handwashing station

Target Groups and Behaviors

Mothers and caretakers of children under five years of age and school children are the ultimate target audience for handwashing activities. However promotional activities are not limited to these target groups. For example, handwashing is promoted to wider audiences such as religious travelers, factory workers, bank customers, or the public in general. The PPP-HWWS aims to make handwashing with soap an everyday behavior in all situations for everyone.

One of the major outcomes of the PPP-HWWS has been agreement on promoting both the need to use soap and the critical times for handwashing.

Before the PPP-HWWS was established, various health programs that promoted handwashing focused on many different times for handwashing such as: before eating, before serving food, before feeding a child, after going to the toilet, after touching animals (poultry), before breastfeeding, after cleaning a baby's bottom, after sneezing, after cleaning out rubbish, and for children after playing and touching dirt. The critical times were not identified or standardized. Prompted by a sharper focus on high priority health issues, such as diarrheal diseases among under-fives and the Avian Flu epidemic, the Ministry of Health endorsed five times as critical for handwashing with soap:

- Before eating,
- Before preparing and serving food,
- Before feeding a child,
- After going to the toilet, and
- After touching animals (poultry).

All stakeholders now universally promote these five critical times.

A second important outcome is the development of strong links, coordinated by the Ministry of Health, between the PPP-HWWS and large scale water and sanitation projects supported by the World Bank, Asian Development Bank, and NGOs such as Mercy Corps, Plan International, and CARE. The partners agreed that all project plans must include a component for handwashing with soap. This

has helped bring handwashing with soap messages to large numbers of local officials and their project teams. Through them, the PPP-HWWS has been able to connect with local administrations at various levels around the nation, helping to scale up the program and reach wider target audiences.

Campaign Materials

The PPP-HWWS did not set about to develop new communication materials, as there are many examples already in use across Indonesia. The available materials were largely based on formative research undertaken by previous and current USAID and NGO projects. Also, in 2006 new formative research from the USAID’s Environmental Services Project confirmed and clarified the findings of previous studies.

Instead, attention has been given to national level program guidelines to provide a common basic framework for the PPP-HWWS initiative. With many different, sometimes competing stakeholders (e.g. soap manufacturers) the process itself of preparing guidelines can help to unify approaches and understanding, as well as clarify responsibilities, promote transparency and equity of participation, and standardize technical approaches. These “rules of the game” include:

- *General Guideline for Handwashing with Soap Program Management*,¹² explaining the design of the program, policy and the strategy;
- *Technical Guidelines*, providing instruction on how to carry out handwashing with soap programs;
- *The Catalogue of Handwashing Facilities Options*, showing design options for areas with and without piped water supply;
- *Technical Guidelines for Co-Branding*, outlining rules of work between local authorities and the private sector;
- *Private-Public Participation General Guidelines*, describing who can be partners in the handwashing program; and
- *The Advocacy and Communication Strategy*, describing strategies for communicating handwashing with soap messages to audiences.

FIGURE 7: HANDWASHING WITH SOAP LOGO



Nationally coordinated activities by the partnership are aimed at drawing nationwide attention to handwashing messages and showing national Government leadership in the activities. The national program uses a common logo with the slogan “Make a habit of washing hands with soap.”¹³ The core group and partners coordinate communication activities through mass media such as radio and television and in national events or commemorative days for specific audiences.

Standard handwashing program materials were developed that can be reproduced by the private sector if credit is given to the original developer — either the PPP-HWWS secretariat or a partner organization. These materials include traditional health promotion materials as well as more innovative ones including:

- A pocket book for community organizations and local health promoters;
- A story book for mothers of younger children and comics for school children;
- Public service announcements for use on TV, in-house video, and audio systems;
- Jingles for use on radio;
- Re-usable shopping bags with handwashing with soap logo and slogan; and
- Stickers for toilets and handwashing stations to remind people of the five critical times and how to wash hands properly.

¹². *General and Technical Guidelines for Handwashing with Soap Program Management* was developed by the PPP to support the Government’s total sanitation strategy.

¹³. The logo and slogan were developed from formative research carried out by USAID in 2006.

Some of the standard materials were designed and produced (based on formative research) for specific events but not fully pre-tested, due to time constraints. However, limited numbers were produced and pre-testing was carried out later. Revisions were incorporated before mass production to ensure that the messages are well understood and the materials effective.

Other materials have included Training-of-Trainer modules prepared to aid implementation of WASH projects by regional and local handwashing with soap teams within the Ministry of Health. These are guidelines about the program and content such as: the importance of soap in preventing the spread of germs from hands, types of diseases that can be controlled, social marketing, steps in building partnerships at local level, and choices of settings to carry out activities. There is also information about how to conduct group discussions, make action plans, and invigorate training.

Scale

Through high level organization and coordination, handwashing with soap has gained much prominence in national events, programs, and celebrations. The approach taken in Indonesia has been to forge increased synergy and develop joint implementation guidelines across various initiatives, in order to enable rapid scaling up to reach across such a vast nation. The nature of this did not lend itself to target setting of quantitative behavior change, as the evolution of the program was organic and often outside of the direct control of the PPP-HWWS.

Handwashing with soap is now being integrated into a wide variety of programs and situations on a broad scale. Promotion is through normal avenues such as the Ministry of Health activities and water and sanitation programs, but also many unexpected channels including private hospitals, food producers, oil and gas companies, religious groups, and banks.

Handwashing with soap promotion features are part of Indonesia's national World Water Day celebrations,

Indonesian Mothers Day (December 18) and the National Health Day events during December 20-21.

In 2008 the public's attention was captured by an officially recognized record-breaking feat for the most number of people washing hands together at the same time and in the same place. This exploit involved 5,000 school children and 7,000 mothers, led by Tangerang Regency with support from USAID, CARE, and Unilever. For Indonesia's first Global Handwashing Day, sponsored by Lifebuoy on October 15, 2008, a record-breaking event was organized for the largest number of school children and parents washing their hands simultaneously in four major cities in Indonesia. The following year, for Global Handwashing Day 2009, the Ministry of Health led more than 1 million students in five cities across the country to simultaneously wash their hands.

Indonesia has the largest Muslim population of any country in the world. Each year more than 220,000 people take part in the Hajj Pilgrimage. Before departing for Saudi Arabia, pilgrims are hosted for a couple of nights by six regional offices for Hajj Travel. The posters and stickers about the five critical times for handwashing are placed in dining halls, toilets, and kitchens of these regional travel offices to remind people of the importance of handwashing.

An H5N1 Bird Flu campaign was launched in August 2008 in conjunction with Muhammadiyah, the second-largest faith-based mass organization in Indonesia, and was conducted in nine cities in five provinces. The campaign recommended adopting handwashing with soap as a habit to prevent bird flu, and was supported by USAID, WSP, Unilever and Reckitt Benckiser. More recently, a talk show, supported by Reckitt Benckiser (Dettol) and the Royal Taruma Hospital to increase public awareness on the H1N1 Swine Flu pandemic and the importance of handwashing with soap, reached around 11 million viewers.

Private companies use the framework and materials of the PPP-HWWS for their own large-scale initiatives. One of Indonesia's mid-size national banks, Bank BTPN, displayed



Getting the numbers: national promotion of handwashing with soap has enabled this record breaking attempt at the most people washing hands with soap at one place and time.

the handwashing with soap video and posters in all of its 366 branches and outlets in 14 provinces. It also held monthly interactive discussions on handwashing with soap with customers at 46 branches. The oil and gas company Exxon Mobil supported a series of radio talk shows on handwashing with soap promotion and has integrated handwashing with soap messages into mothers and girls empowerment and education programs in Aceh, Central and East Java. Some 62,000 staff of Indofood, Indonesia's largest noodle and snack food manufacturer, watched the handwashing with soap video public service announcement over a 3-month period in 2009 on TV terminals in all of the company's 32 production sites.

Private business has demonstrated its role in scaling up handwashing promotion by leading the sharing of information and experience on handwashing promotion. In late 2008, Unilever hosted a half-day "Marketing Expo" of successful behavior change promotions for government

representatives and NGOs. The company then supported a workshop for the Ministry of Health and NGOs to develop handwashing promotion communications.

Indonesia's national PPP-HWWS has also been the object of study from its Asian neighbors, with government and NGO groups coming from Timor-Leste, Vietnam, and Lao Peoples' Democratic Republic to learn about the mechanisms.

Monitoring

The first three years of work focused on advocacy, raising awareness of handwashing with soap and of the national logo, and establishing a framework for Government's future role in handwashing with soap promotion, rather than on behavior change at community level. Consequently monitoring has focused on the delivery of activities not on behavior change.



Each partner in the PPP-HWWS has its own tools for baseline surveys and monitoring. The Ministry of Health has developed means to measure advocacy and awareness activities, which are used by local government health officers for reporting to the national level.

In 2010, an integrated activity with WSP's Total Sanitation and Sanitation Marketing Program was carried out to measure handwashing with soap behavior among people in areas that have been declared free from open defecation. Data reported by the different partners from their project areas, and data collected by Ministry of Health, were combined to present an overall picture of both handwashing with soap programs and practices in Indonesia.

Costs

WSP has supported the PPP-HWWS secretariat in Indonesia. The annual budget for secretariat staffing costs, materials, research, training and workshops has been around US\$180,000 per year. As the leader of the PPP-HWWS, the Ministry of Health co-funds the work through its Community-Based Total Sanitation Strategy budget.

WSP's budget contributes to a larger picture where handwashing with soap promotion costs are shared among the national government, international development agencies, private sector players, NGOs, and other hygiene promotion projects. Local government administrations are encouraged to take a greater part in the handwashing with soap program by allocating budgets and cooperating with the private sector. Although contributions from partners and participants are not monetized, the total amount is estimated to be in the order of five times WSP's annual contribution.

Unique Features of Public-Private Partnership for Handwashing with Soap in Indonesia

The PPP-HWWS program works through an agreed framework and operating guidelines for partners developed at the national level, but then allows handwashing promotion activities to happen organically according to the interests, energies and resources of partners.

The Ministry of Health is in the central position of the handwashing with soap partnership. Its leadership is active and engaged. The WSP-funded PPP-HWWS Coordinator and Secretariat is physically located within the Ministry of Health to enhance coordination.

The budget for handwashing promotion is small and therefore has to be targeted effectively. Support from the private sector is feasible as Indonesia's Corporate Social Responsibility Law has made active participation by the private sector easier. Passed in 2007, the law requires that limited liability companies operating a business related to natural resources support social and environmental responsibility programs. The Law provides opportunities

BOX 4. FIVE PILLARS FOR COMMUNITY-BASED TOTAL SANITATION

The Government's 2008 national strategy for Community-Based Total Sanitation (STBM) has been a key to mainstreaming handwashing behaviors and strengthen the PPP-HWWS. The strategy has five pillars for behavior change:

- Open-defecation free communities,
- Handwashing with soap,
- Safe and sustainable household water supply,
- Safe treatment of household waste water, and
- Safe disposal of solid waste.

for partnership between the Government and private sector, and has helped scale up the PPP-HWWS program.

The Ministry of Health’s Community-Based Total Sanitation decree serves as an umbrella law for managing the handwashing program in Indonesia. Through the strategy and initial target of 10,000 villages to achieve all five pillars, water and sanitation projects around the country are required to integrate handwashing with soap components into their plan, greatly increasing the reach of the PPP-HWWS.

Indonesia’s handwashing partnership involves private companies that are natural business competitors. The PPP-HWWS has developed transparent protocols and practices to avoid any conflicts of interest or perceived unfair promotional advantage for private businesses. An example of the type of conflict that can occur is the design

of the national handwashing with soap logo. The design featured a yellow colored soap that was perceived to favor one of the two soap manufacturers in the partnership, leading the other soap manufacturer to refuse to use the national campaign logo while the yellow soap was depicted. A neutral colored orange soap (as used in the Global Handwashing Campaign logo) was eventually selected to feature in promotional materials. Both soap manufacturers then gave their full support to the campaign. Coordinating the PPP-HWWS in a transparent way with fair competition among companies who are direct competitors has helped the Government stay neutral in the partnership.

Summary of Country Approaches

Vietnam and Indonesia’s approaches to national handwashing program have varied. Each country program is summarized in the following table:

TABLE 1: COUNTRY HANDWASHING PROGRAM

Criteria	Vietnam	Indonesia
Program Objectives	Women aged 15-49 and children aged 6-10 adopt handwashing with soap at critical times: before feeding a child, before preparing food, after using the toilet, and after cleaning a baby’s bottom	To improve the coordination, effectiveness and sustainability of handwashing promotion by strengthening the roles of stakeholders, in particular the private sector
WSP Program Focus	Improving the content and delivery of handwashing with soap communication materials	Coordinating and leading handwashing with soap promotional activities at the national level and scaling-up across the country
Main WSP Partners	Ministry of Health Vietnam Women’s Union	Ministry of Health (Directorate of Environmental Health, and the Center for Health Promotion)
Role of Private Sector	Limited. Some support from soap manufacturers.	Critical. Various soap and non-soap private companies involved in developing, funding, and implementing national and local campaigns.
Main Target Audience	Caretakers of children under five; school children aged 6-10.	Caretakers of children under five; school children; general public.
Method Used to Reach Target Audience	Personal communication through the Women’s Union and health staff; primary school activities; national children’s magazine and television; community marketing events.	National radio, television and newspaper; workplace communications; school activities; personal communication; local events and commemorative day celebrations.
Main Messages	“Wash your hands with soap for the health and development of children” (Caretakers) “Wash your hands with soap for your own health and the health of others around you”. (Children)	“Make a habit of washing hands with soap.”

LESSONS LEARNED

Both national handwashing with soap case studies provide important lessons learned for future work in Indonesia and Vietnam. The following section provides insights that may be useful for other countries in Asia and beyond that plan to nationally scale up handwashing with soap activities.

There is no one way. There is no one solution or approach to starting a national handwashing program. Each program will be different depending on the country context in which it is implemented. Experience in Vietnam demonstrated that a PPP model is not essential to starting up a large-scale handwashing program where other resources and partnership are available. Factors which affect the country context include: size and ethnic diversity of the target audience; previous handwashing initiatives; dynamism and leadership ability of government; the type and number of partners; resources and budget available; and the framework of laws and policies.

Build on earlier work. In both Vietnam and Indonesia, the national programs built upon existing handwashing experience, integrated with other programs, or were complementary to existing programs. In Vietnam, the Handwashing Initiative was complementary to the work of the Global PPPHW, UNICEF, and others. In Indonesia, the PPP-HWWS developed and assimilated other handwashing forums such as the Johns Hopkins University-managed health promotion forum Koalisi untuk Indonesia Sehat, which was building coordination for handwashing amongst donors and the private sector. Failure to recognize earlier work, or starting an entirely new initiative, would have alienated partners in the sector.

Create a supportive environment. Creating a strong supportive environment with Government is an important first step for countries with a large diverse population and many existing or potential players in handwashing promotion. The creation of umbrella laws, strategies, guidelines and structures for the long-term participation by government and stakeholders, will move the program from piecemeal activities to a coordinated nationwide program. As seen in Indonesia, once a supportive

enabling environment has been created at national level, a nationwide community-based behavior change program will be more easily introduced, and all hygiene community players including the private sector can support each other in different areas to cover all audiences in the country.

In a decentralized environment, where program priorities and use of local resources are at the discretion of the respective local governments, the key to adoption of national policies and programs at the local levels lies in “lobbying” or “socialization” of these policies and programs, with appropriate guidelines and capacity building.

Leading the way. Whoever is the lead agency for a national handwashing program will influence the dynamics of the partnership, and the effectiveness and sustainability of handwashing promotion. The best lead agency may not be the most obvious choice. For example in Vietnam, the Women’s Union plays a crucial role in national program implementation.

In terms of the role of Government, it is important to understand the organizational structure, roles, mandates, and budgets of various departments and department sections, along with knowledge of how the departments and divisions relate to each other.

Partnerships are not easy. Partnerships involving government, donors, private businesses and community groups bring different perspectives, interests, cultures, and styles of working. Inevitably, this will result in some disagreements or misunderstandings. Having a mutually agreed-upon set of guidelines and procedures for how partners work together can prevent (or mend) breakdowns in partnerships. An independently appointed coordinator can help keep activities focused and communication lines open, as can the government if it facilitates in a neutral way. Patient discussion, trust, and goodwill, combined with effective coordination can resolve most issues.

Independent coordination. In both countries, WSP has played a unique role, ranging from initiator to facilitator,

coordinator to mediator. An independent handwashing coordinator is a useful focal point for national partnerships. However thought needs to be given to where the coordinator is placed, in order to optimize the effectiveness of communication between the lead ministry and members of the partnership. Placement may also change over time, as needs change. In Indonesia, the PPP-HWWS coordinator was originally based in the Ministry of Health for four days per week. As the program has evolved, she now divides her time between the Directorate of Environmental Health, the Center for Health Promotion (Ministry of Health), and WSP.

Taking the time. Instigating a national handwashing campaign cannot be done quickly. All partners need to understand the implementation time involved, especially the time needed to obtain agreement and consensus between partners. Regardless of whether the political structure is socialist or democratic, when it comes to implementing a national program governments will require time for their own internal consensus and approval processes. Recruiting specialist services and preparation and agreement on Terms of Reference or Agency Briefs is also time consuming. There is no fast track solution and the desire to shortcut national campaigns should be vigorously resisted.

Using the same messages. Well researched, but standardized handwashing with soap messages can have a high impact on target audiences, and make campaign implementation easier and more efficient. In Vietnam, there were consistent and overlapping messages for caretakers and school children. In Indonesia, agreement by all key partners on the umbrella key messages based on formative research, on a well-tested and accepted national logo, and on the five critical times for handwashing resulted in delivery of consistent information and reduced delays in the production and consequent broadcast of public service announcements.

Using professional skills. Engaging people with professional experience and training in their field, whether it is media production, research, or hygiene promotion, improves the chances that communication strategies will succeed. Professional inputs from outside of the handwashing partnerships can bring independence, and minimize

partnership members being mired in minor issues and decisions. However, it is still important to involve partners in the development of promotional materials and to have a professional quality production. A message that is developed without the involvement of partnership members, or poorly produced materials will not have the support of implementers.

The right channels. No matter how good the handwashing promotion message is, if the wrong channels are selected for spreading that message then the message is wasted. Selecting the right channel is about making sure the message is heard or seen by the people for whom it is intended. In Vietnam, formative research identified the best channels to reach caretakers and children such as popular TV shows and newspapers. Members of the Women's Union were also identified as being trusted sources of information. The Women's Union was the perfect choice for a communication channel as it is a national organization with a wide reach down to village women; it has a mandate to promote health and hygiene, and has experience in communication. In Indonesia, formative research contributed to the communications strategy, and the many channels used reflect the diversity of the national partnership members. The flexibility in channels has resulted in handwashing promotion to large numbers of people in situations where the government and donors could never penetrate.

Training for partners and implementers. Training for partners and implementers is an essential part of any national handwashing campaign to give people the skills and understanding to carry out the program. In Vietnam, participatory workshops were organized on behavior change communication, program planning, and selection of communes targeted for the program. The Vietnam Women's Union was also trained in the use of interpersonal communication for promoting handwashing with soap. Capacity building of the Ministry of Health and Women's Union staff is a continuous need. In Indonesia a number of workshops and national conferences have been organized for partners to learn about the handwashing with soap program and to share information, experiences, ideas and techniques. These events occur on an ongoing basis. Health staff have also been guided in implementation.

Being open to opportunities. National handwashing campaigns need to be open and willing to take on new partners or new opportunities as they arise to leverage the promotion of handwashing with soap. New partners and opportunities bring more energy and wider exposure to handwashing campaigns. Having a clear framework, operating guidelines, and agreed goals help keep the partners focused on the initiatives' objectives. In Indonesia, the number of core partners in the PPP-HWWS has grown to include a very diverse membership, increasing the reach of handwashing messages far beyond what was initially thought possible. In Vietnam, the HWI has worked with the National Target Program for rural water supply and sanitation as well as provincial partners.

What else we need to know

Both case studies are examples of successful national handwashing programs implemented in different ways that are appropriate to each country context. Nevertheless, there are still challenges remaining. Vietnam and Indonesia have many ethnic groups, many traditions and languages so that one national campaign material may not “fit” all. An

ongoing challenge is that communication materials need to be tailor-made or adjusted at the provincial or even district level to reach all citizens. This requires more research on the specific behaviors of different ethnic groups.

School environments in both Indonesia and Vietnam lack water supply and adequate handwashing stations. In Vietnam of the 35,000 main schools, only 65 percent have water and 41 percent have sanitation facilities. In both countries water and sanitation projects are helping address these needs but more needs to be done if promotion of handwashing with soap is to be effective. The challenge is how to ensure water and sanitation projects devote enough resources to ensuring the physical infrastructure for handwashing and to carrying out effective promotional activities.

Only through evaluation will it be known how the national campaigns have changed handwashing behavior. More work is needed to monitor and evaluate these programs so that in the future it might be possible to measure and compare achievements between these and other countries.

FURTHER READING

The Global Public Private Partnership for Handwashing (no date). *The Handwashing Handbook: A guide for developing a hygiene promotion program to increase handwashing with soap.* World Bank.

Coombes, Y and J. Devine. 2010. *Introducing FOAM: A Framework to Analyze Handwashing Behaviors to Design Effective Handwashing Programs.* WSP. http://www.wsp.org/wsp/sites/wsp.org/files/publications/WSP_IntroducingFOAM_HWWS.pdf

Nguyen, N, M. Nguyen, N. Paynter. 2011. *A Handwashing Behaviour-Change Journey: Vietnam Mothers.* WSP.

Nguyen, N. 2010. “The development of an entertainment education program to promote handwashing with soap among primary school children in Vietnam.” *Sharing Experiences: Effective hygiene promotion in South-East Asia and the Pacific.* WaterAid Australia, International Water Centre. IRC International Water and Sanitation Centre.

Rafiqah, I, and I. Blackett. 2010. “Public-Private Partnership for Handwashing with Soap in Indonesia.” *Sharing Experiences: Effective hygiene promotion in South-East Asia and the Pacific.* WaterAid Australia, International Water Centre. IRC International Water and Sanitation Centre.

