In 2004 when this JSDF project was approved, diarrheal diseases were one of the three main causes of morbidity and mortality for children under the age of five in Peru. About 2,000 children died every year due to this disease. Families learned to live with diarrhea. Not surprisingly, 25% of children had symptoms of malnutrition, with the poorest families being the most at risk. Furthermore, the second cause of death – respiratory infections – was also related to bacterial contamination.

To address this issue also prevalent in other developing countries, a global Public-Private Partnership for Handwashing (PPPHW) was launched with the participation of, among others, the World Bank, UNICEF, USAID, and the London School of Hygiene and Tropical Medicine, Centers for Disease Control (CDC) (which participated in the design of the monitoring and evaluation framework that would measure behavior change and health impact), and three multinational soap companies. To join this effort, Peru’s Ministry of Health issued a National Handwashing Decree in January 2004, to promote the practice of handwashing. A HW Committee for Peru was also formed at this time including the Swiss Development Cooperation, USAID, and the Bank’s Water and Sanitation Program (WSP).

The Handwashing Initiative (HWI) presented a feasible and effective solution to the problem which had a high economic and social cost. Global evidence had recently confirmed that an appropriate practice of hand washing with soap, at critical times, could reduce diarrheal diseases between 47% and 52%, and up to 50% of respiratory infections in children under five.

**Development Objectives**

The development objectives of the project were: (i) to reduce diarrheal disease and consequent malnutrition by 20% in children under five in the targeted groups, by building capacity to increase the practice of handwashing utilizing research-based mass media communication campaigns and IPC methodologies; and (ii) to achieve long-term sustainability of handwashing practices by institutionalizing hygiene promotion programs in the health, education, water and sanitation sectors in Peru, and by securing the future continuity of activities by private partners (2004-05).

**The Project**

The project had three components: (1) Training Partner Staff to Reach the Poor- This component trained staff of Partner Agencies -- mainly health, education, and water and sanitation village workers and NGO staff in the project areas -- as members of the Peru PPPHW initiative. The training focused on behavior change methodology skills for practitioners when working with women and children to ensure they
practice new behaviors, utilizing professionally-designed messages targeted to the poorest communities;

(2) Materials Development for Interpersonal Communication (IPC)- The communication campaigns and materials utilized a standardized set of messages to achieve behavior change such as logos and communications tools that were costumized to the needs of the target individuals in local languages, in this case, Quechua and Aymara. The materials, the delivery methodologies, and the coordination systems with the line sector ministries and private sector partners and NGOs were provided to field workers. Furthermore, to give backbone to the program, the methodologies were developed in coordination with the Ministry of Health, linked to a certification/merit process; (3) Mass Media Communications- Creative mass media communication tools were developed for radio and television, adapted to behaviors based on field research, and included Radio Soap Operas, Radio Talk Shows, and Promotion of Handwashing Contests, among others. Delivery was through commercial channels as well as private closed networks such as the national banks. Municipalities were provided with the ads and the soap opera to be aired locally at their own expense; and (4) Project Management, Monitoring & Evaluation, and Institutionalization- PRISMA, the Grant implementing agency, reported to the national Peruvian PPPHW Steering Committee. A key activity of the PRISMA team was to promote the institutionalization of the handwashing process into the work of community-based programs, especially among NGOs and line sector ministries, thus ensuring sustainability of the practice. The capacity of NGOs and community institutions to collect baseline health and handwashing practice data was strengthened, as well as their skills to observe and measure behavior change. Standardized global indicators were used to facilitate cross-country comparisons.

Key Project Features for Success

Wide Range of Partnerships:
Partnership was a key determinant of success for this project. A Public-Private Partnership had been organized with the leadership of the Ministry of Health and the participation of USAID, Swiss Development Cooperation, and the Water and Sanitation Program financed by the World Bank. Together they established the National Handwashing Committee (NHWC) that met regularly and had the mandate to draw the vision and develop a program that would place handwashing as a prominent message in health promotion and hygiene. The partnership included soap companies such as Colgate-Palmolive and Alicorp, and private media companies such as Radio Program of Peru, which had not previously thought of targeting messages to the poor. These private sector companies contributed their knowledge and skill in marketing, communications, and consumer behavior to help develop the communications strategy. They also showed interest in working with NGOs and learning to address segments of the markets they were not familiar with. From the government side, the Ministry of Health led the public sector commitment to this effort. Involvement of the public sector facilitated institutionalizing the program for longer term sustainability and scale-up nationally, for example by including handwashing in the curriculum for hygiene. The public-private-NGO partnership was innovative for Peru.

Professional Communications Strategy:
The professional design of the communications strategy included a focus on individual motivation utilizing private sector know-how, while NGOs provided extremely valuable experience with direct contact communication methodologies to reach the poorest segments of the targeted population. Attention had been given to an experience in Central America, where the private sector had provided its expertise on the design of well targeted and effective communication campaigns that placed a focus on the consumer. Learning about triggers of motivation was essential for communication efforts to have an impact. With the support of the CDC in Atlanta, field research was carried out in Peru to learn about child-bearing women’s perceptions and motivation in health and hygiene.

Information dissemination tools were designed to reach the targeted audience through personal and mass media communication, developed through field research to ensure cultural sensitivity for
the proper content and medium. All field agents had to acquire the skills to communicate the same effective messages, and be able to motivate women to adopt the proposed behavior. Thus, it was crucial to train village workers to strengthen their communication skills, and at the same time attempt to standardize quality messages. Furthermore, health promoters who are commonly overloaded with tasks, had to be incentivized to deliver the handwashing initiative messages.

Intensity of Communications Interventions:
IPCs activities targeted two audiences: i) mothers via community-based workers, including health providers and community development volunteers; and ii) primary school students via teachers. The IPC sessions focused on three key themes to affect behavior for handwashing with soap, and improve skills to manage soap and water: Motivation, Resources, and Knowledge. Sessions were delivered through front-line workers who convened small group meetings or visit mothers at home. Mothers received two to three sessions, while students got three to six IPC sessions – teachers delivering IPC to children followed the same content as for mothers but each session was divided in half. A child was considered reached if she/he attended four of the six sessions.

The messages were enhanced through Direct Consumer Contact (DCC) events focused on the power of soap and water through the superhero character of Super Jaboncin (S.J.). Research had revealed lingering misconceptions about HW, mainly the belief that rinsing hands in water was sufficient. To counter this belief, the project developed a communications concept for mass media and DCC, featuring Super Jaboncin who gains the power to fight germs by adding soap to water. The Superhero concept formed the basis of DCC events. A SJ handwashing dispenser was also promoted by front-line workers to households and schools in seven regions, where they have been used by an estimated 530,000 women and children. Demand for the dispenser in some areas outpaced supply and households began constructing an artisan “do-it-yourself” version. Larger DCC events were fairs with simultaneous activities taking place, including games for children, live theater, and kiosks where demonstrations and advice on where to place soap and how to set up a handwashing station was shared with mothers.

To facilitate implementation by various street theatre groups, a SJ kit was developed, which included: i) a superhero costume; ii) three games with large props to engage audience participation; iii) support materials (such as posters and comic strips featuring the superhero) to distribute to the audience; and iv) a guide on how to use the kit materials and conduct an event. The kit also included an overview of main messages and sample scripts for sketches. Radio spots and jingles further emphasized the power of soap and water through the SJ character which became endearing to children in particular. To bring SJ to life, three 30-second radio spots were developed. The radio spots were also designed to remind mothers of the four critical times to handwash with soap. Another reinforcement of the message was the slogan developed and broadcast -- Manos Limpias, Niños Sanos (Clean Hands, Healthy Children).

Results and Lessons

Vertical or Integrated Initiative for Handwashing - Although the HWI started as a free-standing project in 2004, after the first couple of years it became clear that HWI would be integrated into the tasks of field workers because it offered value added to other programs. As implemented, HWI was a catalyst to improve the impact of health, education, and sanitation programs at the national level.

Validated Standardized Training Instruments Yield Results - One of the most valuable project investments was the development of a behavioral change methodology to build capacities and standardize the approach by HWI promotion workers to be applied when instructing children and mothers. The program received a certification equivalency from the Ministry of Health and validation from the Ministry of Education for instruction in primary schools. The manuals produced provided a tool for teachers and health and sanitation field workers who rarely benefit from access to materials and often produce their own.

Private Partners: Thinking Outside the Box - A partnership building strategy was a key aspect of the project design which brought additional resources to maximize outreach and knowledge expertise in fields outside the public sector such as marketing to reach women at home or in their surroundings. Also, to the project’s advantage, the private sector got involved and over 60 private institutions supported the project in different regions of Peru. One that stands out is Belcorp, a Peruvian and Latin American cosmetics firm with about 120,000 field agents in Peru alone. Each agent had 20 clients that she/he visits every month. An agreement with Belcorp resulted in that all of their well trained door to door agents, promoted handwashing with soap among low-income women they would visit every month, during a three month campaign period. It is estimated they reached nearly 2 million women.
The challenge of measuring impact while targeting sustainability - One important factor to keep in mind is that once the project is integrated into a bigger program, it is quite difficult to attribute direct impact. In Peru, while the project’s analysis of impact evaluation data was scheduled for the beginning of 2012, authorities at local and regional level had already attributed diarrhea reduction indicators to the HWI. Even when the data is gathered through monitoring mechanisms to determine project results, the public sector will rely on their own statistics to make policy decisions.

Going to Scale and Sustainability

Looking back, the HWI evolved early into a full scale program as it reached 24 regions after 2007. The initial stage set a strong platform of a strategy that was developed for full implementation. In 2007 a second phase of the HWI started thanks to additional funding received from the Bill and Melinda Gates Foundation. Altogether, the HWI has lasted 8 years, sliding through a learning continuum that took it from a pilot project to a component of nutrition, health promotion, and environmental and education programs being financed by the public and private sectors either at national or sub-national levels in Peru.

At the country level, an Enabling Environment was designed to develop and strengthen the institutional and policy/strategy environment in which handwashing with soap programs can be scaled up and sustained. There were ten dimensions to facilitate sustainability: policy; strategy and direction; institutional arrangements; program methodology; implementation capacity; availability of products and tools; financing; cost-effective implementation; monitoring and evaluation; and partnership. These factors were monitored and reported on once a year using a spider diagram. The project fully completed the desired results under partnerships, institutional arrangements, and the availability of products and tools. The Partnership for Handwashing is now operating at the national level with clear roles and responsibilities.

Institutionalizing Approaches in the Ministry of Education and Regional Governments - As designed, the project planned full integration of HWI messages and methodologies as part of the school curriculum. The project strengthened the enabling environment conditions to sustain interventions beyond the end of the project. The facilitating agencies and regional coordinators played a pivotal role in the intervention execution. They engaged partners to broaden the reach of the project and share tools that contribute to consistent messaging. They also trained master trainers, who in turn trained the IPC frontline workers—principally health care providers, local community development workers, and teachers.

Ensuring Sustainability Through Handwashing Stations - The project facilitated the creation and distribution of handwashing stations that would help sustain behavior change after the project ends. Over 57,000 Super Jaboncín soap dispensers were distributed free of charge throughout the country, with both public and private partners covering transportation, distribution, and monitoring costs. These dispensers continue to be used in households, schools, health clinics, and private sector firms to increase easy access to soap and water and are, thereby, reducing a major access barrier to washing hands with soap.

Follow-on Project

The Water and Sanitation Program from the World Bank has incorporated the program in sector projects, and will continue to play a critical role in supporting national and local efforts to promote handwashing at scale, through operations in nutrition, health, and water and sanitation. In 2007 with the Bill and Melinda Gates funding, the HWI scaled up to 24 regions in Peru. Also in 2007, the HW project was started in Tanzania, Senegal and Vietnam.

Resources

To know more about the WSP administered by the World Bank and its partners, go to: www.wsp.org/wsp and visit: www.globalhandwashing.org to have more information about PPPHW.