# Handwashing Behavior Change at Scale Evidence from a Randomized Evaluation in Vietnam

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Abstract

Handwashing with soap, which has been shown to reduce diarrhea in young children by as much as 48 percent, is frequently mentioned as one of the most effective and inexpensive ways to save children’s lives. Yet rates of handwashing remain very low throughout the world. Handwashing with soap campaigns are de rigueur in developing countries, but little is known about their effectiveness. Few have been rigorously evaluated, and none on a large-scale. This paper evaluates a large-scale handwashing campaign in three provinces of Vietnam in 2010. Exposure to the campaign resulted in a slight increase in the availability of handwashing materials in the household, and caregivers in the treatment group were more likely to report washing hands at some of the times emphasized by the campaign. However, observed handwashing with soap at these times is low, and there isn’t any difference between the treatment and control groups. As a result, no impact on health or productivity is found. These results suggest that even under seemingly optimal conditions, where knowledge and access to soap and water are not main constraints, behavior change campaigns that take place on a large scale face tradeoffs in terms of intensity and effectiveness.

Gender Connection

Gender Informed Analysis

Gender disaggregated hand washing

IE Design

Clustered Randomized Control Trial (Clustered at community level)

There are two components to the intervention. Component 1 was a mass media campaign that featured 30 and 15 second television spots on popular national and regional TV channels. The second component is the interpersonal communication activities. The Vietnam Women's Union trained over 14,000 village health workers, teachers, and Union members on how to promote group and household level activities that reinforced handwashing behavior. The trainers met with women to provide instructions of proper handwashing behavior.

Intervention Period

The intervention lasted for 9 months mostly in 2010

Sample population

The study examined 210 communes from 15 districts in 3 provinces were selected to participate. There was a sample size of 3150 households, corresponding to 15 households per commune.

Comparison conditions

The treatment community received the mass media campaign and the interpersonal communication activities. The control received just the mass media campaign.

Unit of analysis

Household level

Evaluation Period

December 2009 to March 2011

Last updated: 14 August 2013
The program did not have an impact on handwashing with soap behavior. Knowledge about the correct way to wash was high at baseline, and some areas of knowledge improved, but it did not have an impact on the already high access to soap within households and modest effects on the self-reported handwashing behavior of mothers. Observed handwashing behaviors remained very low; mostly caregivers wash their hands with water only.

A pure control group was not part of the study design thus it is impossible to detect the impact of the mass media campaign. Project implementation happened at large-scale so there was little direct control over the implementation of the intervention. It is possible that mothers did not attend the meetings. The study may have been contaminated by other health projects in the area.

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