Wash’Em and the COVID-19 response

Wash’Em is a process for rapidly designing handwashing promotion programmes in crises and outbreaks. In the early stages of the COVID-19 pandemic we cautioned against using Wash’Em in its standard face-to-face form because of concerns about staff and community safety. Instead we developed a COVID-19 guide with activity explainers, webinars and videos, all of which were focused on low-cost activities that could feasibly be implemented across a range of settings in the early stage of the response. We also provided direct support to many users and subsequently developed some materials answering your common questions about the technical and practical aspects of handwashing. Our early work led us to set up the COVIID-19 Hygiene Hub with a range of global partners and this has since supported hundreds of organisations and governments in their COVID-19 response all around the world.

As we have transitioned from the acute phase of the response into a phase of longer-term programming for COVID-19 control, we have been learning from our users about how they have safely and effectively used the Wash’Em approach to shape their COVID-19 programmes. In this brief we include tips, examples and case studies in different regions of the world.

Things to consider prior to using Wash’Em for COVID-19 programme design

There is no standard way for doing Wash’Em safely during the COVID-19 pandemic. This is because each county is experiencing a different stage of the pandemic and because different national guidelines are in place. Therefore, it’s vital that your organisation evaluates the risks in your local circumstances and context.

- Understand the current level of transmission in the area where you are working. If there has been confirmed community transmission in your area in the last 2 weeks we recommend doing the Wash’Em process remotely.

- Decide who is best placed to collect data. This could include remote data collection from your central office or collecting data via local volunteers.

- If staff or volunteers are interacting with the community make sure you adhere to regional and national guidance on movement restrictions, COVID-19 testing and on preventative behaviours such as mask use and physical distancing.

- Find out whether other actors are working in the same area. Find out if they have already collected any data and invite them to join you in the data collection or volunteer to share findings once the Wash’Em process is complete.

- Consider how you may need to adapt the data collection process to fit the local circumstances.

- Consider whether you want to add on additional questions or methods to understand other key COVID-19 preventative behaviours (e.g. physical distancing, mask use and surface cleaning).
Things to consider for doing remote Wash’Em training

With movement restrictions in place it’s likely that your data collection team will be people who live near to your target population. To accommodate this, Wash’Em trainings often have to be done remotely at the moment.

- How many staff need to be trained? Where possible remote trainings are more effective with smaller groups of people. Less than 10 people is likely to work best.
- Do all staff that need to be trained have access to internet, mobile data or the ability to dial into training sessions?
- Consider dividing the Wash’Em training across a series of shorter sessions run over the course of a week. It’s hard maintain attentiveness for online sessions that are longer than 2 hours.
- Make sure you still leave lots of time for online discussion during your training.
- If your teams are doing in-person data collection plan for them to have an opportunity to practice the Wash’Em tools together first. If you are doing remote data collection arrange for staff to practice the Wash’Em tools using the same communication platform as will be used with participants.
- During your discussions on logistics and distress planning dedicate additional time to thinking about the adjustments that may need to be made in light of COVID-19 restrictions, staff and community safety and protection and referral mechanisms for COVID-19 cases or those experiencing socio-economic hardship associated with the pandemic.
- In preparing your team for fieldwork we suggest putting together a question and answer sheet for your staff. This should include common questions or misunderstandings that people may have about COVID-19 in your context and evidence-based practical answers. Make sure suggested answers are context–relevant and in simple local language. Encourage staff to listen out for any misconceptions that they hear during the Wash’Em data collection. At the end of data collection staff should use the question and answer sheet to correct any misinformation or answer questions that the participants may have.
Things to consider when doing the Handwashing Demonstrations Tool in person or remotely

Before starting data collection make sure you are aware of whether people generally wash their hands inside their homes or outside/at a public facility. If handwashing facilities are inside the house, you may be putting households at risk if you enter their household to observe their handwashing. Instead consider asking them to take a photo of their handwashing facility and then ask them the questions that are on the handwashing demonstration decision making table. If people have mobile or makeshift handwashing facilities, you may also be able to ask them to bring these facilities outside for them to do a demonstration. If handwashing facilities are outside the house it should be safe to conduct the handwashing demonstration as normal.

Normally the approach suggests that you ask people to demonstrate handwashing post-toilet use or before eating. Given the current pandemic you may choose to adapt this to asking participants to demonstrate how they would normally wash their hands if returning home from the market.

If doing the approach fully remotely (such as by phone interview) use the questions in the decision making table to guide the discussion.

Things to consider when doing the Personal Histories Tool in person or remotely

Use the ‘outbreak’ worksheet and focus on COVID-19 (rather than cholera as per the example worksheet).

If you are working in a crisis-affected setting you may also want to do some personal histories related to the nature of the broader crisis (i.e. also use the worksheets on disaster or conflict and displacement). The rationale for including this is that you find that COVID-19 is not people’s first priority.

If you are doing remote interviews you can ask people to describe their situation at different time points rather than getting them to draw.
In the Philippines Oxfam undertook the Wash’Em tools as part of their COVID-19 response programming in the conflict-affected region of Mindanao.

In the top image you can see them using the Personal History tool, in a private outdoor space while wearing masks.

In the middle image you can see a FGD where they are using the Motives tool. They enlarged the character cards and the facilitator worked with participants to order them on the wall so no one but her had to touch the cards.

The bottom image is of an FGD where the Disease Perception tool is being used. The team added faces to the cards and gave each person a set so that they could express their opinions without touching surfaces that other participants had touched.

The Wash’Em undertaken by Oxfam was part of a project funded by Unilever/DFID and delivered in partnership with Philippine Rural Reconstruction (PRRM) Movement for Eastern Samar in Visayas, the Initiatives for Dialogue and Empowerment through Alternative Legal Services (IDEALS) and United Youth of the Philippines-Women (UNYPHIL-Women) in Mindanao.
Things to consider when doing the Disease Perception, Motives and Touchpoints tools in person (the Wash’Em tools that are done in focus group discussions)

Focus groups discussions (FGDs) are riskier to conduct at the moment than the individual methods above.

✅ Keep FGDs small with no more than 6 people.

✅ Normally the Wash’Em process suggests sampling for diversity. While you should still try to include diverse participants it may be safer to bring neighbouring people together. If you are doing in person FGDs you should not invite people who are over the age of 60 or who have pre-existing conditions which make them at risk of severe disease or death should they get COVID-19.

✅ Hold the FGD near people’s homes to minimise the need for travel.

✅ Identify a well-ventilated, outdoor but private space for the FGD.

✅ Set up a handwashing facility in the FGD space so that participants and staff can clean their hands prior to and after the session.

✅ Ensure that staff and participants wear face masks throughout the session (provide these to participants). You may find that you need to speak more clearly to be understood while wearing a mask.

✅ Make sure there is room for participants to maintain physical distancing throughout the session. You can do this positioning chairs at least 1m apart prior to the session or putting other physical cues in place to maintain distancing.

✅ Consider printing the tool cards so that they are larger. If you do this then you can hold the cards at the front, minimising the need for each participant to touch the cards. Alternatively, you could print a set of cards for each participant.

Things to consider if doing FGDs remotely

✅ You will need to identify some key contact points within the community and work with these individuals to identify participants.

✅ Select a commutation platform for the FGDs. Where possible preference doing video calls as this will allow the activity to be fully interactive and the tool cards can be used as per normal.

✅ Consider whether participating in the Wash’Em process will come at a cost to participants (i.e. because of the cost of phone credit or data). Where possible provide mobile bundles to participants. This can act as an incentive to participate and will ensure that everyone has enough data for the duration of the session.

✅ Consider how you can involve a diverse group of participants. For example, older people may have less access to phones and computers, but since they are at high-risk from COVID-19 it is important to include their voices.
In Honduras GOAL decided that in some regions it was safer to conduct FGDs remotely via the Facebook Messenger app.

Firstly they recorded a short video about the Wash’Em approach and why they were collecting data this way. This was sent to community volunteers who identified potential participants and shared the video as part of the consent process. Once participants agreed they were sent mobile data credit for one day. Participants were then able to take part in video-based conference calls via Facebook Messenger which is common in the area. To make sure the process was inclusive of older people who had less access and familiarity with technology, GOAL buddied older individuals with younger people in their household and got them to participate in pairs.

Things to consider for data analysis and program design:

- If working remotely, it might be easiest for one person to centrally input the data into the decision making spreadsheets and have a discussion with the data collection teams to ensure their interpretation is correct.

- Answer the questions in the decision making software. Under question 14 of the ‘context’ section make sure to select that your programme is focused on Coronavirus prevention.

- Generate recommendations. Discuss these as a team. Consider how might these need to be further adapted given the current circumstances where you are working.

- Also discuss how you might integrate handwashing promotion ideas into other aspects of your programme which may focus on mask use, physical distancing or cleaning.
Yayasan Plan International Indonesia had been working on a long term WASH project in Eastern Indonesia with the support of Plan International Australia and DFAT’s Water for Women Fund. When COVID-19 happened they decided to use Wash’Em, in the early stages of the pandemic, in order as to adapt their current work to be more COVID-19 sensitive. They selected three of the Wash’Em recommendations and adapted them to make sure they were context appropriate and safe to deliver.

**Village-level handwashing competition**

The team learned that handwashing infrastructure was often lacking or not very desirable to use in the areas where they were working. Based on the Wash’Em recommendations they ran a competition to build or upgrade handwashing facilities using locally available or recycled materials. The competition was done at a village level with the winning village being the one with the most handwashing facilities. The competition tried to create ‘friendly rivalry’ between neighbouring villages and provide peer recognition of individuals who built creative facilities. The winners were provided a small token of appreciation on Indonesian Independence Day (in August 2020) and the results were advertised widely throughout each sub-district, so that handwashing behaviours are normalised and reinforced. The photos below show some of the creative handwashing facility designs that were developed.

**Social media tips**

The team found that websites and social media were some of the best ways of reaching people in the area. The project used these channels to share COVID-19 prevention updates as well as advice and tips that were gathered from community members about how to adopt preventative behaviours. Sharing community-driven perspectives helped to normalise prevention behaviours and increase practice. The project put a particular focus on gathering stories from women and people with disabilities. This helped to make sure messages reached more people with disabilities and promoted inclusivity by sharing examples of female-led hygiene promotion and the contributions people with disabilities were making to COVID-19 prevention. The photo to the right shows these stories being shared online via local newspapers.
Together we can beat this Pandemic

The Wash’Em recommendations suggested creating a motivational story that emphasised that if communities worked together and adopted preventative behaviours they could beat the pandemic. To bring this idea to life the project worked closely with the Government of Indonesia to record motivational messages of endorsement from local leaders and influencers. The videos incorporated COVID-19 awareness raising and prevention messaging but linked these to working together to overcome the disease. Videos were in local languages and had large sub-titles (to make them more inclusive). Video and audio messages were shared through loudspeakers around villages, radio, and via social media. The photo above shows local leaders directly appealing to their population to work together.