

How should I monitor and evaluate my handwashing behaviour change program?

Wash'Em



Handwashing behaviour is notoriously hard to measure! Humanitarian WASH (water, sanitation, and hygiene) professionals often struggle to know whether their handwashing promotion program is actually leading to behaviour change. In this document, we will provide some advice on measuring whether your hygiene program is working and why. We will also show you why it is important for WASH professionals to think about monitoring and evaluation from the beginning and throughout a project life cycle.



A team conducting a survey in Ethiopia

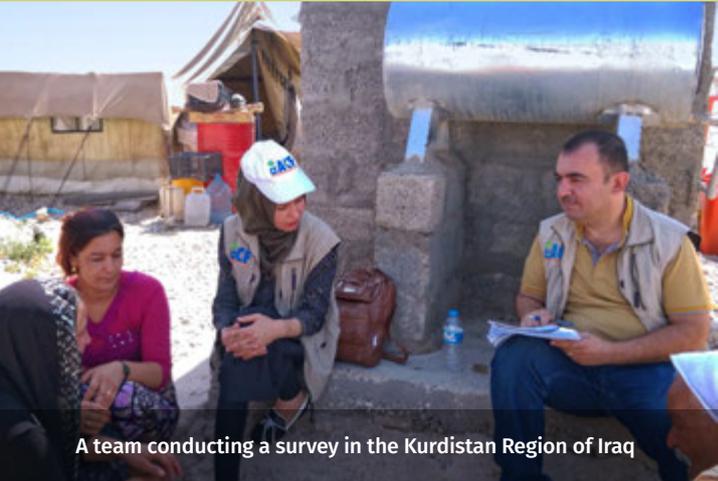
What do humanitarians say is challenging about monitoring and evaluation for hygiene programmes?

“ Behaviour change is often something people leave out because it’s hard to quantify. If you do sanitation, you can feel satisfied when the toilets are built, but for hygiene promotion, there is nothing to see. It’s hard to know if your handwashing behaviour change has worked ”

WASH PROGRAM MANAGER, DRC

“ We don’t spend much time thinking about monitoring and evaluation— normally we just leave that to our Monitoring, Evaluation, Accountability and Learning team ”

WASH PROGRAM MANAGER, IRAQ



A team conducting a survey in the Kurdistan Region of Iraq

What is wrong with common approaches to monitoring handwashing?

WASH actors in humanitarian and developing contexts have traditionally used baseline and endline surveys to measure behaviour. These are sometimes called Knowledge, Attitude, and Practices (KAP) surveys. There is no one standard KAP survey, but in the table below, we highlight some of the strengths and weakness of common KAP questions on handwashing.

Do you wash your hands?

Usefulness and accuracy:



A binary question like this will often generate a nearly 100% “yes” response. The reason is because handwashing is a socially desirable behaviour in all cultures. What ends up happening is that survey participants know the right thing to say and will typically report that they wash their hands with soap, even if that is not always the case. The result is that the baseline shows really high numbers of people practicing handwashing. The impression given is that there is not really much to improve on.

Thinking about yesterday, at what moments did you wash your hands?

Usefulness and accuracy:



This question is designed to explore whether people mention the five critical times for handwashing. Responses to this question are often affected by what is culturally acceptable to say. So, although someone may know the importance of handwashing after cleaning their child’s bottom or using the toilet, they may be embarrassed to discuss these things with a stranger. Questions like this one also rely on someone recalling behaviour. Remembering handwashing can be challenging since it is not very memorable and may happen frequently throughout the day.

In addition to water, did you use anything else to wash your hands yesterday?

Usefulness and accuracy:



Just like the first question, people will normally know that the correct answer here is soap. The result may be that you get an overestimate of how many people use soap for handwashing.

On the other hand, crisis-affected populations may say that they do not use soap or use only ash because they do not have enough soap. They might think that exaggerating their situation will encourage your organization to provide more soap for the population.

What are the benefits of handwashing with soap?

Usefulness and accuracy:



People generally know that the correct response is something to do with staying healthy or avoiding germs and disease. Studies have shown that almost everyone knows about the links between disease and handwashing, even in areas with limited formal education. Studies have shown that knowing about the link between handwashing and health does not mean someone is any more likely to wash their hands regularly.

However, if you probe for additional answers to this question, you might learn some interesting things about other motivating factors for handwashing. For example, someone might answer, “I wash my hands so that they are soft and smell nice.”



Do people know the correct steps for thorough handwashing?

Usefulness and accuracy:



Washing hands thoroughly at critical times is important. However, there is no correct answer to this question. Conflicting evidence exists about how many steps there should be and what these are. Some guidelines suggest five steps, while others suggest 11.

Show me how you would normally wash your hands?

Usefulness and accuracy:



When someone demonstrates how they would normally wash their hands, it is important that you realize that what you are seeing is their version of ideal handwashing. You should expect that people will wash their hands for longer than normal and more thoroughly. Use the Wash'Em Handwashing Demonstrations tool to help you pay attention to things in the environment that could enable or prevent handwashing.

KAP surveys can tell us what people know and think, but they are unable to tell us what people actually do. Finding out what people currently do is the most important measure for a behaviour change program.

Is there a more reliable handwashing indicator that is feasible for emergency contexts?

YES!

The World Health Organization and the United Nations Children's Fund have developed a global handwashing indicator. You can find out more here. The indicator is based on a spot-check approach. You simply go to someone's house and see if they have a handwashing facility near the toilet with soap and water present.

Here are a few reasons why the spot check is worth using as an indicator in your program:

- The spot check is a really quick way to collect data (much quicker than a survey).
- It provides a realistic estimate of behaviour (much better than self-reported surveys).
- It allows you to compare your program to other handwashing programs around the globe and is used by most national governments.
- The approach can be used to assess handwashing facilities in homes, schools, health centres, or workplaces.
- This indicator was developed because of a letter signed by more than 100 government and nongovernment organizations. The letter asked for handwashing to be mentioned in the Sustainable Development Goals and requested that spot checks be the standard mode of assessing the practice.



The Global Handwashing Indicator requires you to check whether there is a handwashing facility with soap and water present.



The spot-check approach is the most useful indicator to use for baseline and endline data collection. However, it is important to understand what this indicator can and cannot tell you about behaviour. This indicator is what we call a proxy indicator of behaviour—it does not reflect actual behaviour but gives an indication of what behaviour is likely to be. To predict behaviour, assumptions are made. For example, if no handwashing facility is present outside the toilet or there is no soap and water there, then hands are not being regularly washed due to the difficulty and inconvenience. Of course, even if a handwashing facility with soap and water is present, handwashing is not guaranteed. But the proper setup does create the right enabling environment, indicating that the family could easily practice handwashing if its members wanted to.

HANDWASHING LADDER



The Global Handwashing Indicator uses a ladder to classify access to handwashing facilities.

What other options are there for measuring handwashing behaviour?

Observation: Observation is often described as being the gold standard for measuring handwashing. It involves your staff spending about 3 hours in a household (normally early in the morning) to observe daily routines and document whether people wash their hands with soap at critical times. Observation is rarely used as a primary outcome measure in emergencies because of the time it takes to conduct on a large scale and the skill level involved. However, observation can be used to complement the Global Handwashing Indicator. For example, you might do spot checks at 100 households and then do observation in 10 households. By doing observation among even this small sample, you will develop much deeper insights about the barriers to this behaviour. This information will also help your staff to appreciate the realities of the lives of the people you are working with.

Note: If you try observation, make sure that you do not tell household participants that you are there to observe their handwashing—if you do, people will act differently and increase their handwashing behaviour. Instead, explain that you would like to observe and learn about their daily routines.

Are there other things that I should monitor?

YES!

Humanitarians often talk about the importance of doing both monitoring and evaluation. The Global Handwashing Indicator is a tool to aid evaluation and can help you to understand whether you had any impact on handwashing behaviour. But it will not tell you what worked or what did not work in your program. That is why additional indicators are needed to monitor programs. Monitoring requires us to think about how we expected to create behaviour change (sometimes known as a Theory of Change) and whether the expected things happened.



Staff undertaking observation in Ethiopia.



If some of the expected things did not happen, then this may be why our program was less successful than we anticipated. Monitoring indicators should be developed to assess inputs, activities, and implementation of your program, as well as outputs. The following table provides a guide and some examples.

INPUTS	ACTIVITIES AND IMPLEMENTATION	OUTPUTS	OUTCOMES
<p>What do I need to prepare, design, or purchase for my program to succeed?</p>	<p>What do I need to do with my population for my program to succeed?</p> <p>How can I make sure that I reach everyone in the community?</p>	<p>How will the things I do change the way my population think or act?</p> <p>What specific things should change?</p>	<p>What observable changes did my program have?</p>
<p>Example Indicators:</p> <ul style="list-style-type: none"> ■ Number of hygiene kits procured ■ Number of hygiene promoters trained ■ Number of materials developed 	<p>Example Indicators:</p> <ul style="list-style-type: none"> ■ Number of houses visited with hygiene activities ■ Number of hygiene kits distributed ■ Number of community events held ■ Handwashing facility competition held ■ Number of radio advertisements aired 	<p>Example Indicators:</p> <ul style="list-style-type: none"> ■ Number of households that built a handwashing facility ■ Number of households that associate handwashing with being successful or being a good parent ■ Number of people who believe that handwashing is a norm 	<p>Global Handwashing Indicator:</p> <ul style="list-style-type: none"> ■ Availability of a handwashing facility on premises with soap and water

Program monitoring does not need to be time consuming. Most of the data you need you are likely to collect through your ongoing program reporting and processes. The table below highlights types of monitoring data, sources of information, and the types of questions that you may want to ask.

<p>Coverage and Reach</p>	<ul style="list-style-type: none"> ■ Project reports ■ Procurement and distribution records ■ Social media (if your program had a social media component) 	<ul style="list-style-type: none"> ■ How many people attended each event? ■ How many households were visited? ■ How many products were distributed? ■ How many social media followers does your program have?
<p>Acceptability</p>	<ul style="list-style-type: none"> ■ Focus group discussions with your target population ■ Rapid interviews with attendees after community events ■ Interviews with government stakeholders, community leaders, or partner organizations 	<ul style="list-style-type: none"> ■ Did people feel that your program was relevant to them and that it met their needs? ■ What ideas did they have to improve your program? ■ Was there any unintended consequence of your program? ■ How did your program link to or support existing systems?



Accessibility	<ul style="list-style-type: none"> ■ Focus group discussions or interviews with key groups within your target population (such as people with disabilities, older people, and women) 	<ul style="list-style-type: none"> ■ Were the program materials and delivery channels appropriate? ■ Was the timing of the delivery right? ■ Did your program reach everyone in the community, including people with disabilities, the elderly, children, and vulnerable groups? ■ What changes could be made so that the program was more accessible?
Feasibility and program quality	<ul style="list-style-type: none"> ■ Regular (preferably weekly) discussions with WASH staff or the implementation team 	<ul style="list-style-type: none"> ■ What seems to be working really well? ■ Which aspects of the program are hard to get right? ■ Are there any aspects of your program that are taking longer or shorter than expected? ■ Are staff members doing things differently than planned? Why? ■ Are there any unintended consequences of your program? Have any ethical concerns arisen? ■ Are there any new security or logistics concerns? ■ Does additional staff training need to be provided to increase the quality of work being done? ■ What changes could be made to address some of these challenges?
Cost	<ul style="list-style-type: none"> ■ Procurement and logistics records ■ Human resources records ■ Interviews with community members 	<ul style="list-style-type: none"> ■ How much did each component of the program cost? ■ Were changes made to reduce costs? ■ If you did the program again, what costs would you consider adding or reducing?
Sustainability	<ul style="list-style-type: none"> ■ Interviews with government stakeholders and local leaders 	<ul style="list-style-type: none"> ■ What elements of the program would they like to continue or maintain? ■ What support or what mechanisms need to be in place to enable this to happen?

Can the Wash'Em Rapid Assessment Tools be used to monitor hygiene programs?

The Wash'Em Rapid Assessment Tools have been designed to help you understand what is driving behaviour in your context so that you can design a contextualized handwashing behaviour change program. They are not designed to place a numerical value on how many people are washing their hands. However, some Wash'Em users have chosen to reuse the tools about 6 months or a year into their program. Using the tools again at this stage can be useful to learn about whether specific activities are working as planned and can help you refocus your program if necessary.



Useful resources on program evaluation:

The Six Biases

This resource outlines common limitations in the ways that humanitarian and development actors work with communities. Awareness of these biases in our ways of working can help us avoid common program pitfalls.

DAC Evaluation Criteria

This list provides definitions in English and French of common evaluation criteria.

Practical Guidance for Measuring Handwashing Behaviour

This Working Paper provides a more detailed overview of different measures for assessing handwashing behaviour.

Evaluation Designs for Adequacy, Plausibility and Probability of Public Health Programme Performance and Impact

This article provides a nice summary of four different types of evaluations. In particular, it highlights that different evaluation designs provide different types of information. We need to be aware of the differences when making claims about whether our program has really resulted in change.

Process Evaluation of Complex Interventions: Medical Research Council Guidance

A process evaluation is another way of describing the monitoring process or any evaluation that explores why things did or did not work. In this article, the authors discuss the process of planning, designing, conducting, and reporting on the process evaluation of any intervention with multiple components.

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