

What We Did Why It Matters

April 28, 2016



INTEGRATION



USAID
FROM THE AMERICAN PEOPLE

washplus
Supportive Environments for Healthy Communities

What Did WASHplus Integrate?

WASH into...

HIV

Nutrition

Neglected Tropical Diseases

Education



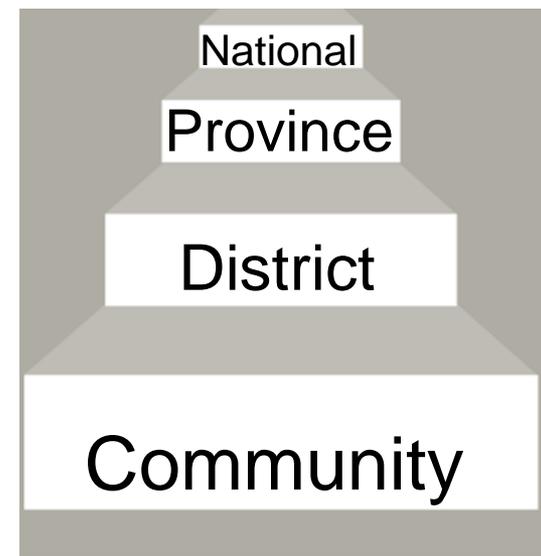
How Did WASHplus Integrate?

- Integration on a continuum

Integration Continuum



- Across levels of the system
 - In a country
 - Globally



Integration Approach

Co-locate WASH programs (especially infrastructure) in areas of high need

Work with government counterparts, USG partners, & any coalition of the willing

Engage champions!

Review/improve WASH guidance within existing sectoral policies & guidelines

Review/improve capacity building materials & job aids

Provide tools & training for organizations to integrate WASH into other programs

Integrate 1-3 WASH indicators



Why Integration Matters to WASHplus

Integration creates synergy

Improves financing opportunities

Beneficiaries do not live isolated, vertical lives...integration can improve lives



Session Plan

1. WASH-nutrition integration in Uganda & Bangladesh

2. Joint WASH-nutrition programming in Mali

3. 2 rounds of Discussion Tables

6 topics each session

4 topics same/2 topics change

Round 1 WASH-Nutrition Table in French

Discussion Table Topics

Round 1

1. WASH in schools
2. WASH, schools & MHM
3. WASH and nutrition
(French)
4. WASH and HIV
5. Indicators for integrated programs
6. WASH, nutrition, & ECD
(Clean, Fed & Nurtured)

Round 2

1. WASH in schools
2. WASH, schools, & MHM
3. WASH and nutrition
4. WASH, nutrition, & infant poo
5. Indicators for integrated programs
6. WASH and NTDs

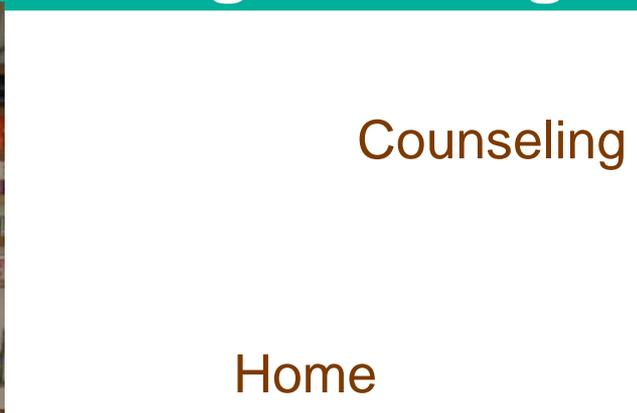
WASH Integration- Uganda



WASH, HIV, & Nutrition Integration: (P)olicy & Programming Opportunities



Clinic



Counseling

Home



School

Integrating WASH HIV/Nutrition

Quarterly Pediatric Clinic



Integrating WASH HIV/Nutrition



Integrating WASH “Straight” Nutrition Programs



Small Doable Actions For Keeping Food Safe: Food Handling & Preparation

It is especially important to wash hands and food containers with soap and flowing water before handling food to minimise the risk of germs. Adhere to all personal hygiene practices like keeping fingernails short while handling food.



- ◆ Construct a tippy tap close to the kitchen to ensure hand washing with soap.
- ◆ Wash hands with soap before preparing food.
- ◆ Keep fingernails short and clean.
- ◆ Prepare raw meat or fish away from other raw foods. Don't allow juices to touch other foods.
- ◆ Wash area where food is prepared at least daily, with water and Jik, if available, otherwise soap.
- ◆ Wash raw vegetables and fruits under running water to remove germs, insects, and chemicals.
- ◆ Keep animals (such as chickens) away from food preparation area.
- ◆ Wash all the knives, cutting boards, and plates used after cutting fresh meat with soap and water.
- ◆ For utensils used to handle cooked and ready-to-eat food, wash with soap and water and store on shelf or wall.



Co-Location of WASH Activity

to increase access to water and sanitation



Connecting WASH and Nutrition



Focus on handwashing

Emphasizing after defecation AND before food prep and feeding

Promoting installation of TIPPY TAPS as “enabling technology” and reminder

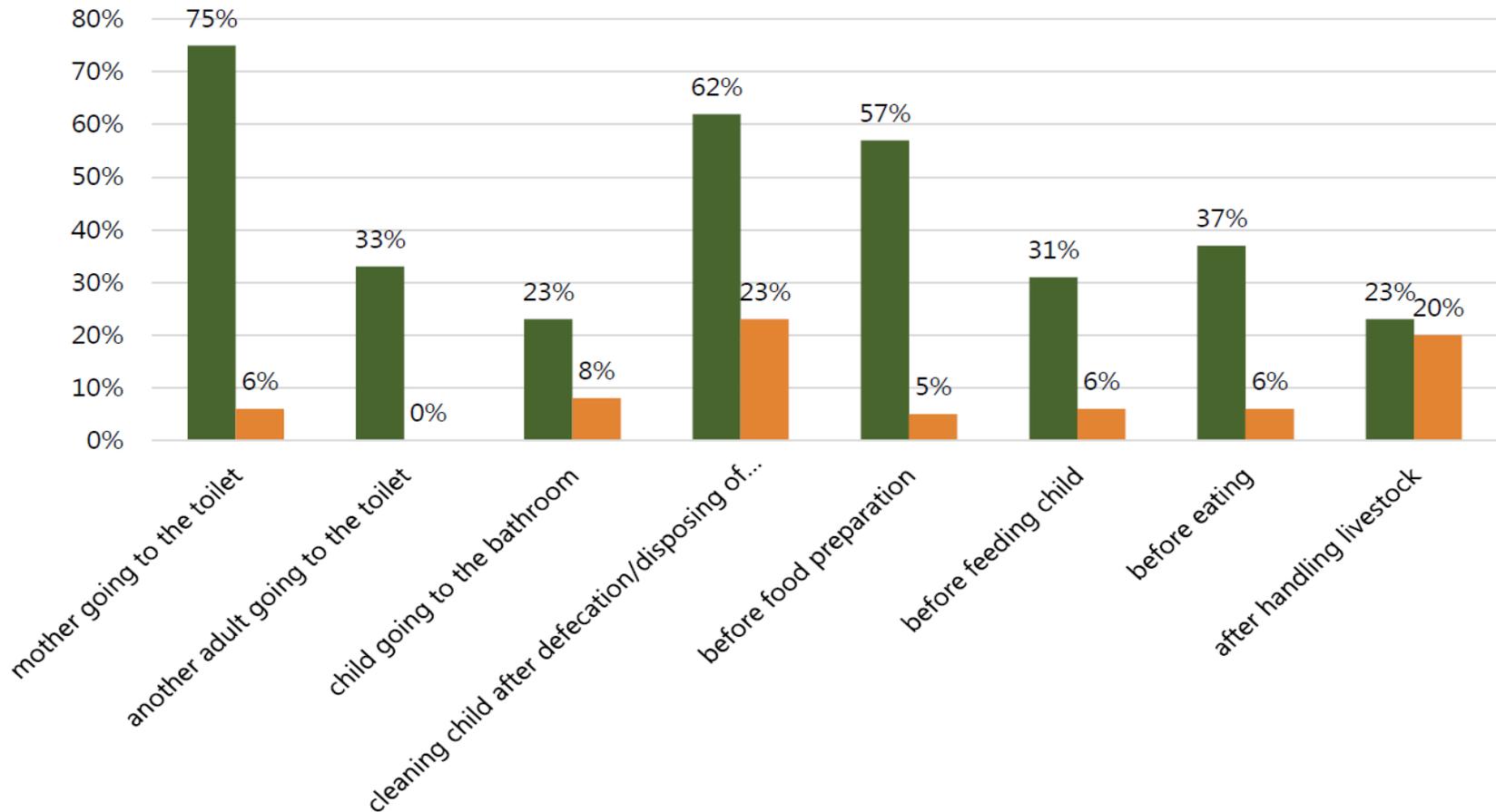
Reviewed guides

Trained trainers

Nutrition projects provided cascade training



Handwashing Among Farmer Field School Participants



Most of observed FFS graduates had **TWO Tippy Taps**: near latrine & ANOTHER near kitchen

Poo's Final Address

No matter where your infant poos, make it end up in the latrine!



What's the Recipe for a Healthy Child?

**Results from an Integrated WASH/Nutrition Program
in Mali**

April 2013 – April 2016

Project in Mali

OBJECTIVES

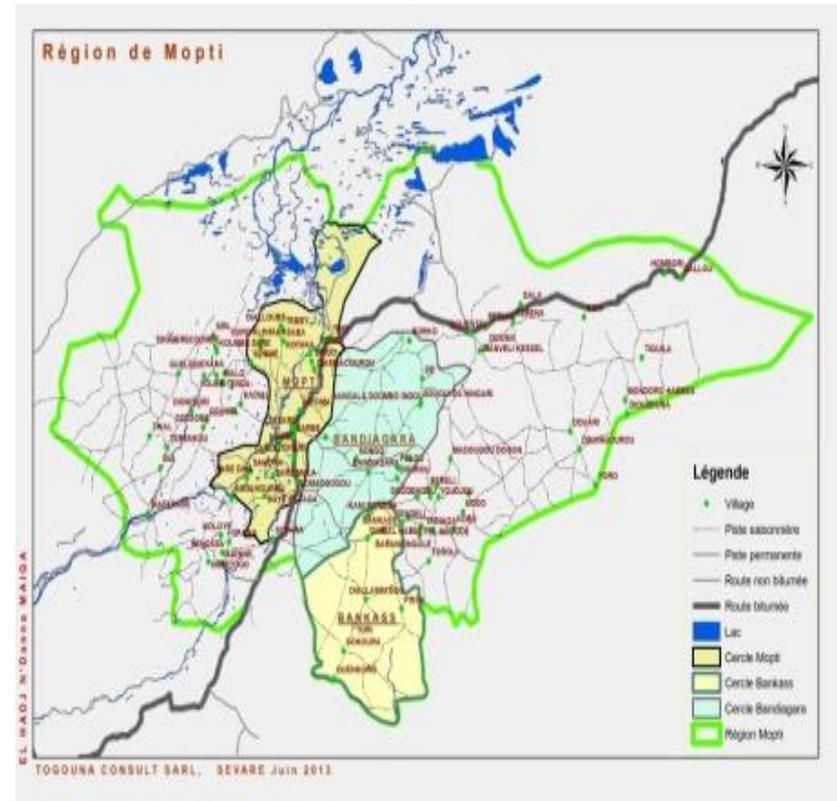
Overall

- Improve nutritional status of 19,000 children (under 2 yrs) in 180 rural villages in the Mopti Region

Specific

- Increase supply of appropriate, affordable, & sustainable WASH services for households
- Increase demand for low cost sanitation
- Improve sanitation, hygiene, & child feeding practices

INTERVENTION ZONE



180 villages in 18 communes in 3 districts (Mopti, Bandiagara, & Bankass) in Mopti Region

Principal Activities

Sanitation – CLTS, ODF and post-ODF



Sanitation marketing



Screening & referral of malnourished children



Negotiating improved practices with mothers, including handwashing at critical moments



Rehabilitation/ protection of water points



Promotion of POU water treatment



Nutrition & breastfeeding demonstrations



Promoting WASH-nutrition during world days (WTD, WHWD, WBF, WWD)



Cross-Cutting Approaches

Key behavior change (BC) approaches

- Implemented comprehensive BC strategy
- Trained village volunteers
- Used WASH-nutrition counseling cards
- Broadcast radio programming

Gender issues + gender equality

Strategic partnerships with regional
& local players

Environmental conservation

Entrepreneurial spirit at community
level



Results

Sanitation

- **146 villages certified open defecation free (ODF)**; 81% of target villages
- **10,230 latrines built**
- **Contributed to revised national CLTS Guide** focused on constructing traditional latrine models in difficult ecological zones



Water Supply

- **103 water points rehabilitated/repared**
- **47 communities have self-funding plan** to repair & maintain water points in future



Results - 2

Hygiene

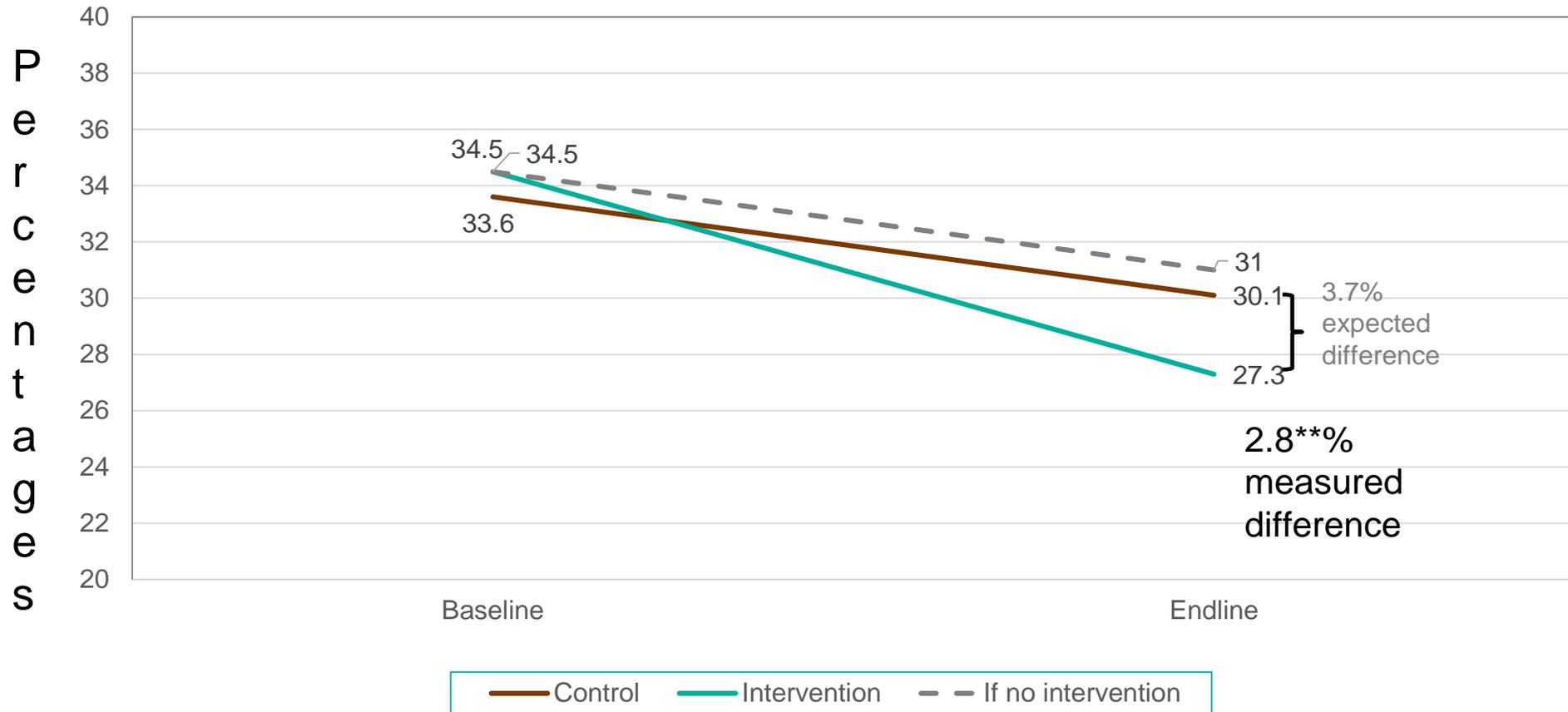
- **15,423** new handwashing stations
 - **3,933** tippy taps installed - toilet/kitchen
- **1,875** sessions on treating water
- **174,208** Aquatabs sold (>3,480,000 liters)

Nutrition

- **19,000** children under 2 regularly tested for undernutrition
 - Decrease in referrals (Apr-Jun 14 → Apr-Jun 15)
 - Moderate: 2,050 → 334
 - Severe with complications: 269 → 38
- **1,233** sessions on how to breastfeed & prepare enriched complementary food



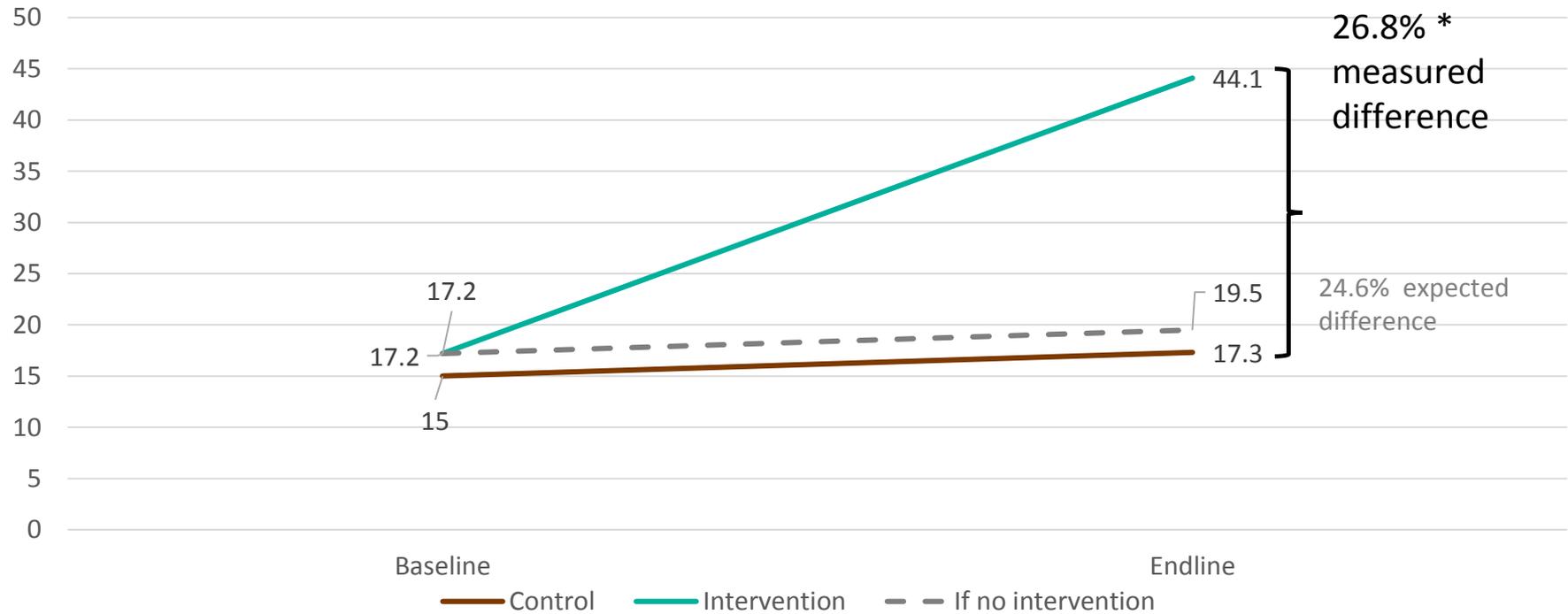
Reported Diarrhea Prevalence 2 Weeks Prior to Survey



** Measured difference at endline marginally significant, $p = .072$

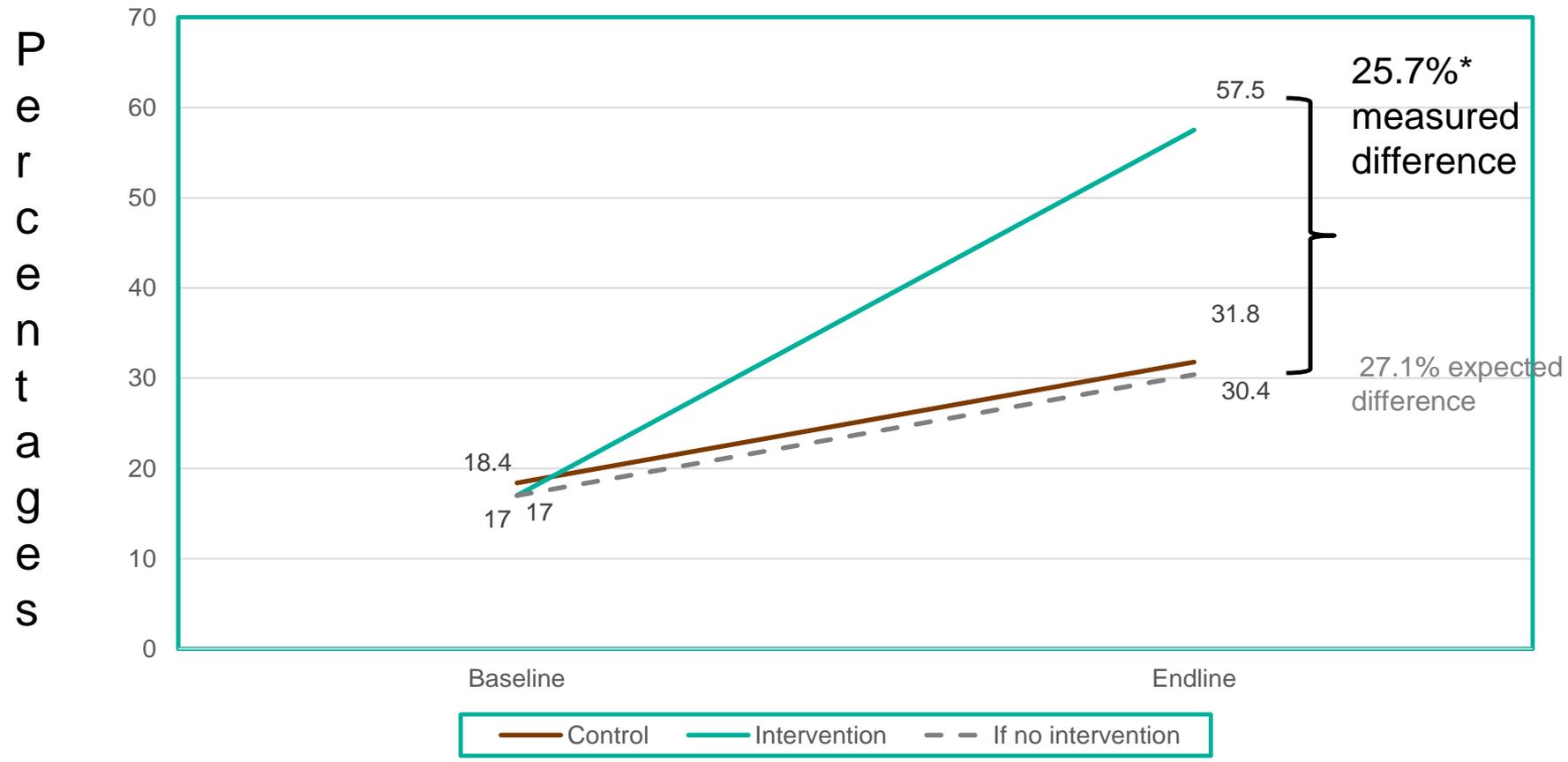
Reported Use of Chlorine to Treat Drinking Water

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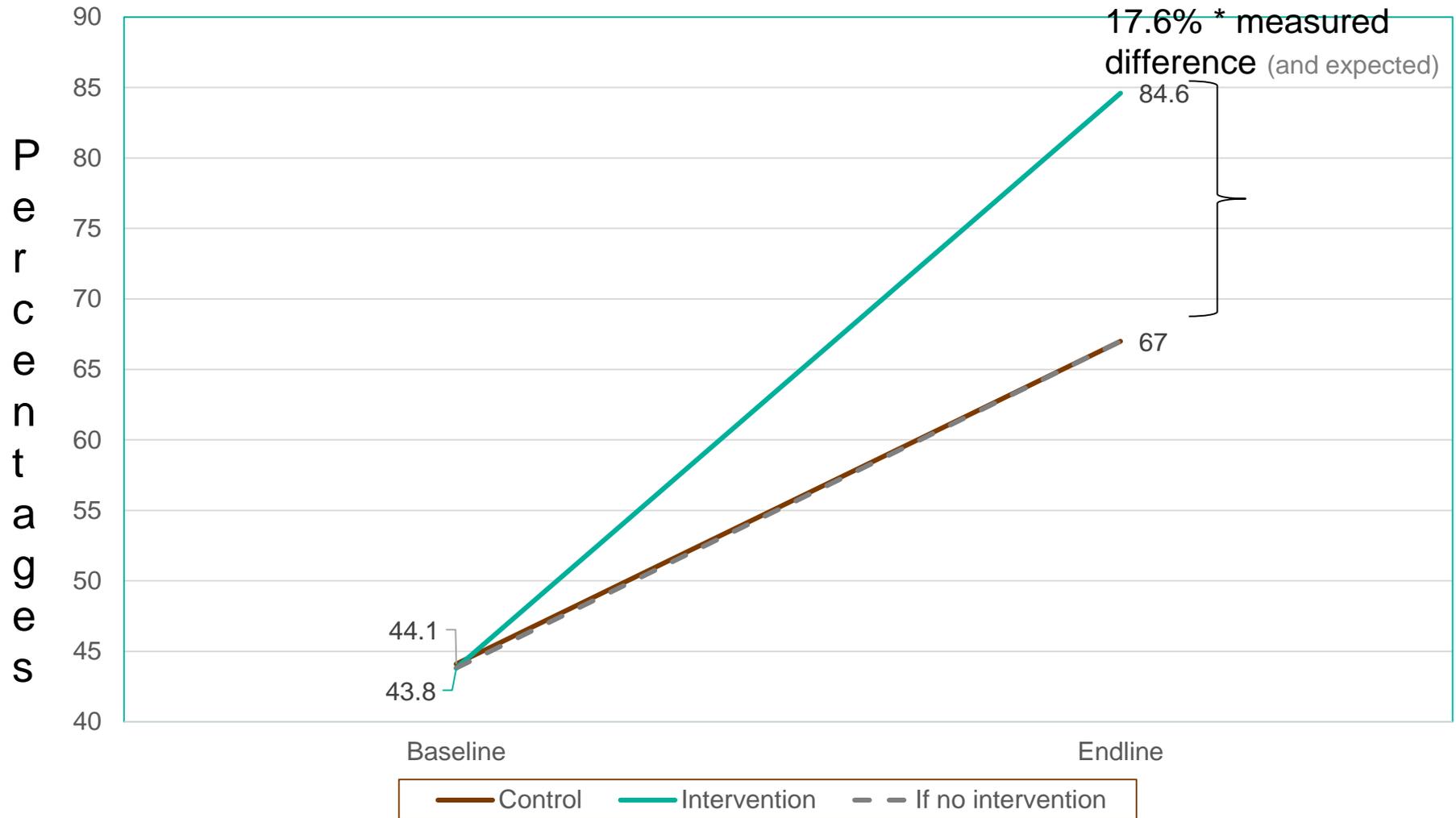
* Measured difference at endline significant, $p = .000$

Prevalence of Households with Access to Improved Sanitation



* Measured difference at endline significant, $p = .000$

Use of Potty by Youngest Child



* Measured difference at endline significant, $p = .000$

Cross-Cutting results

Major improvements cited by community members

- Cleaner villages
- Healthier children, especially less diarrhea & malnutrition
- Behavioral changes in all areas

Women's roles

- Workload reduced through rehabilitated water points
- Participation: water committees & pricing, purchasing Aquatabs, weekly village cleaning

Partnership with technical services

7,269 trees planted - 66% survival rate



Lessons Learned

Developing a coherent BC strategy—with long-term focus—maximizes results & can foster innovations

Integrating WASH & nutrition in communities reinforces adoption of preventive practices

Mobilizing community participation can be fostered by:

- Tailoring approaches to local environments
- Collaboratively involving stakeholders at all levels
- Featuring “champions” as messengers via media
- Stimulating healthy competition between communities, mayors, etc.
- Recognizing successes & increased self-efficacy
→ increased engagement at all levels



Thanks for your attention!

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