

WASH and Nutrition Integration and Small Doable Actions



Ron Clemmer, FHI360
USAID WASHplus

SuSanA WASH and
Nutrition Working Group
Stockholm
August 25, 2015

- WASH and HIV
 - WASH and Neglected Tropical Diseases
 - WASH and Nutrition
 - WASH in Schools
-
- Information on WASHplus' work on integration
www.washplus.org

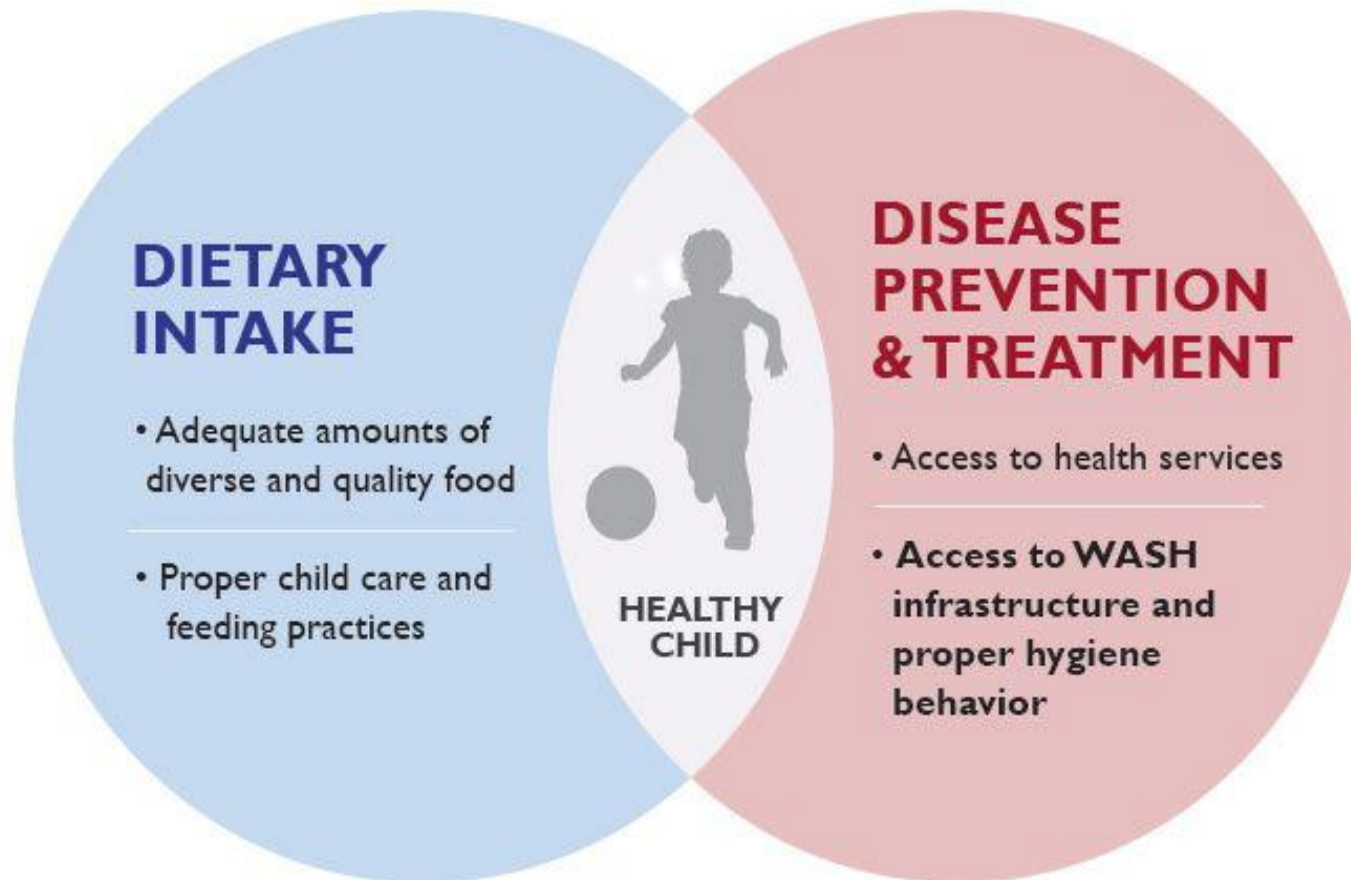


Integrating Safe Water, Sanitation,
and Hygiene into Infant and Child
Nutrition Programmes

A Training and Resource Pack for Uganda

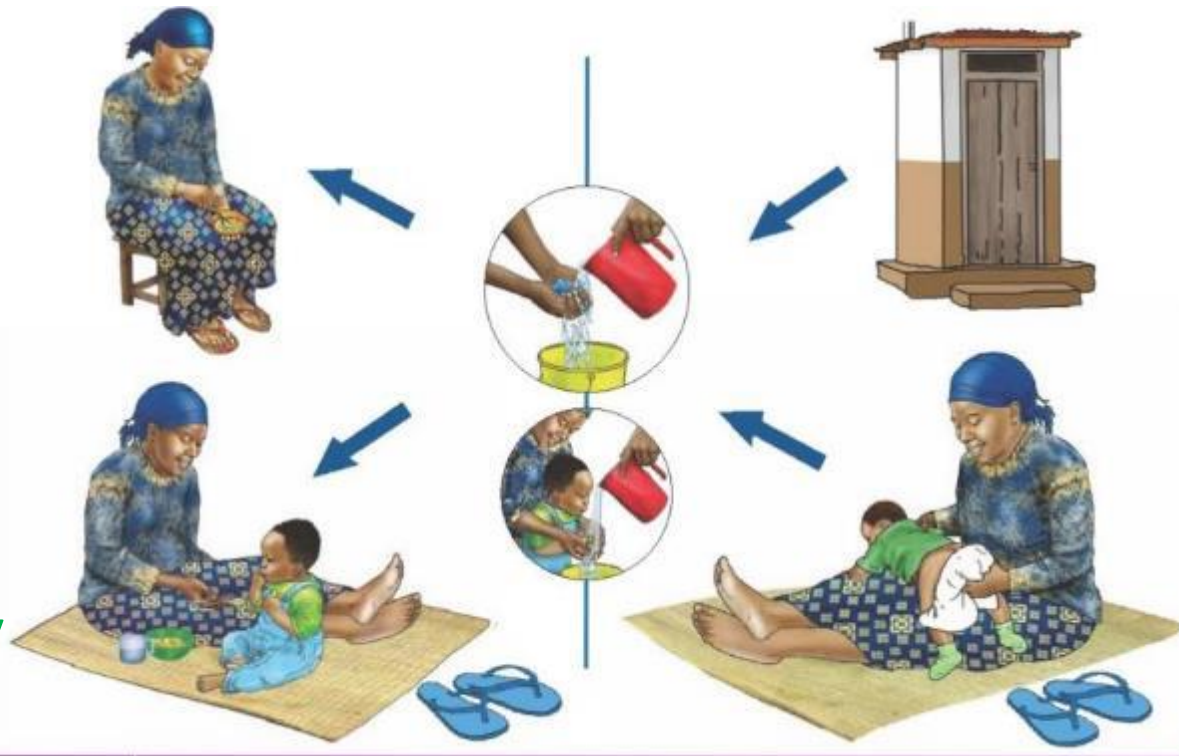
NOVEMBER 2014

Conceptual Framework for Child Nutrition



5 themes

- Hand washing with soap
- Safe disposal of infant feces
- Safe water treatment and storage
- Exclusive breastfeeding
- Complementary feeding



Activities

- Community-led total sanitation with sanitation marketing
- Screening and referring malnourished children
- Rehabilitating of water supplies and promoting of point of use water treatment
- Cooking demos w/ HW and POU promotion

Working through community health workers to promote an integrated set of **Small Doable Actions** to mothers with infant children

Small Doable Actions for WASH Behavior Change

- People rarely move from current to ideal practices
- Make it possible!!
- Identify, promote and facilitate improved behaviors that...
 - Have significant **positive impact** on health
 - Are **feasible** from 'actor' point of view in resource constrained settings
- Construct a continuum
- Integrate!!



ASSESSMENT AND NEGOTIATION

Father's/Mother's Name: _____ Name of the Village Health Team: _____
 Village: _____ Date of Visit: _____

1. Assess with the householder what they are doing now for each of the key behaviors and mark a check in the corner of the current practice.
2. Based on the current behavior, discuss the improved behaviors to the right of the current practice. During your discussion, ask...
 - What problem the family will face to change the current practice to the improved behavior?
 - Discuss if there is any one in the family who opposes to change the current behavior due to culture or other reason.
3. Circle one, two or three behavior/s that you agreed upon to practice.
4. Seal the agreement as a commitment and make an appointment to see the improvement behavior.
5. Finally, hand this card to them to put it securely on a wall or store in the family health card.

"It is all our responsibility to end open defecation, unhygienic practices and the diseases they bring!"

Disposal of feces

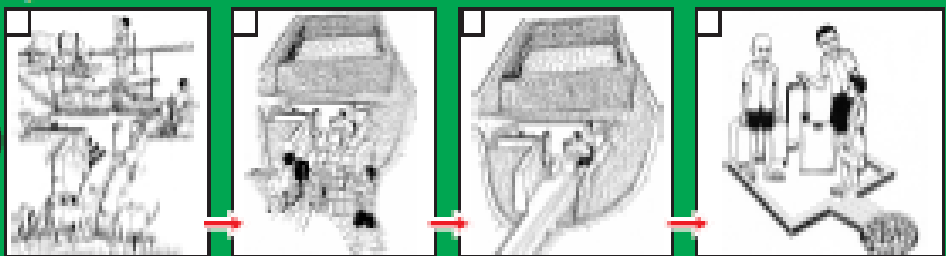
1 

2 

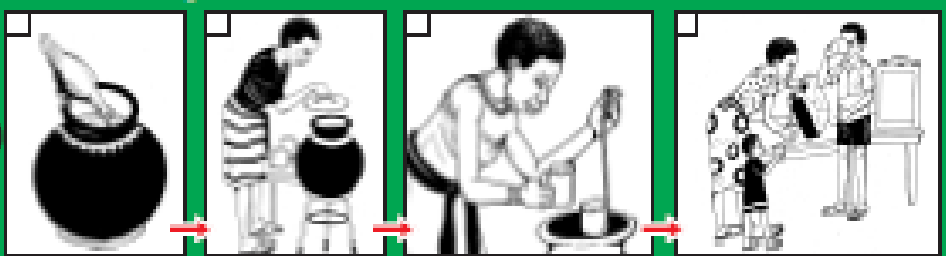
Washing hands with soap/ash after defecation

3 

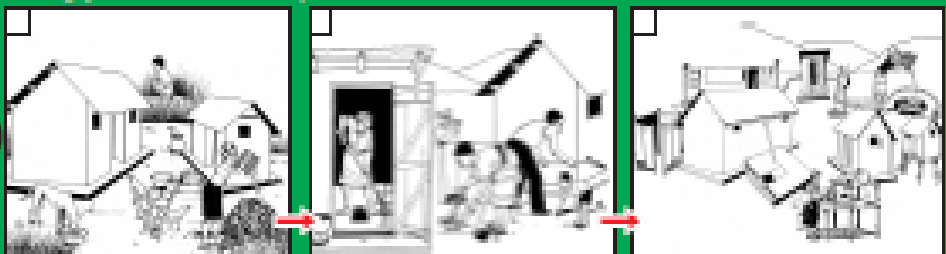
Keep Water source clean

4 


Safe water handling

5 

Cleaning your house and compound

6 

Keeping latrine clean

7 

Essential times for hand washing

8 

Thank You!!

For more information or questions

Ron Clemmer

rclemmer@fhi360.org

www.washplus.org



The following slides are to support answers in the Q&A session

Results in Integrating WASH & Nutrition Activities



- In Mali
 - 10,000 latrines built
 - over 40 villages certified ODF
 - Over 19,000 children screened for malnutrition;
 - 7000 referred for services
- In Uganda, numerous implementing partners trained and operating with integration focus and new skills
- More waterpoints, tippy taps, handwashing in all countries
- Resources, capacity building materials, job aids available

WASHplus'

Overall Integration Approach

- Work with USAID implementing partners, government counterparts and any coalition of the willing
- Look for champions!
- Review and improve guidance on WASH within nutrition policies and guidelines – *e.g. use clean water, apply hygienic practices*
- Review and improve capacity building materials and job aids
- Identify country-specific **Small Doable Actions** to help people improve WASH practices
- Form a Community of Practice with existing IPs for collaboration
- Co-locate WASH programs (especially infrastructure) in nutrition-sensitive areas
- Integrate 1-3 WASH indicators