



**USAID**  
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**HIP**

HYGIENE IMPROVEMENT  
PROJECT

Water, Sanitation, and Hygiene Improvement  
Training Package for the Prevention of Diarrheal  
Disease

# GUIDE FOR TRAINING OUTREACH WORKERS

- ▶ **Guide for Training Outreach Workers**
- ▶ Collection of Resource Materials
- ▶ Outreach Worker's Handbook

2009

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# ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
CDC	Centers for Disease Control and Prevention
CLTS	Community-Led Total Sanitation
HIP	Hygiene Improvement Project
HIV	Human Immunodeficiency Virus
IPC	Interpersonal Communication
MOH	Ministry of Health
NGO	Non-Governmental Organization
ORS	Oral Rehydration Salts
PVO	Private Voluntary Organization
SODIS	Solar Water Disinfection
SSS	Sugar Salt Solution
UN	United Nations
USAID	United States Agency for International Development
WASH	Water, Sanitation, and Hygiene
WHO	World Health Organization

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# PREFACE: LETTER TO PROGRAM MANAGER AND TRAINER

The USAID-funded Hygiene Improvement Project has compiled a training package to facilitate work in water, sanitation, and hygiene (WASH) around the world. This training guide, along with its accompanying *Outreach Worker's Handbook* and *Collection of Resource Materials*, is intended for use by any organization that works with or is about to start working with outreach workers—local individuals who work at the community level. Your organization has decided—or is in the process of deciding—to provide your outreach workers with training so they will be prepared to work in communities to help people adopt healthier behaviors related to water, sanitation, and hygiene. These new or improved practices will result in significantly fewer cases of diarrhea (and therefore less illness and fewer deaths), especially among children. In addition, these new practices may well have psychological benefits such as increased feelings of pride/prestige, of being good parents, and of contributing to the community's welfare.

If your organization is already involved in WASH activities, these materials can help your outreach workers become more effective at persuading individuals, families, and groups in their communities to adopt new and healthier behaviors to reduce the incidence of diarrhea.

Regardless of your organizational focus, these materials can make a link to improved WASH practices in the following ways:

- *Family planning*: Improved WASH practices lead to less diarrhea and childhood illness and better child survival, which are linked to couples' interest in family planning.
- *HIV/AIDS*: Improved WASH practices are critical for persons living with HIV/AIDS because they live at high risk of contracting diarrhea, which can cause or contribute to their premature death. These persons are potentially a source of diarrhea in the community, since they are highly susceptible to it.
- *Food production*: Preventing diarrhea in the community is potentially of interest to food production projects for two reasons. Diarrhea among persons working in agriculture, or among their children, reduces their availability and productivity, sometimes at critical harvest

or planting times. If one purpose of improved food production is consumption by the family itself, then diarrhea among family members works to reduce the positive impact of increased and/or more healthful food consumption.

- *Income generation:* As in the case of food production, diarrhea among both adults and children in a family reduces the amount of time available and ability to focus on productive tasks, so preventing diarrhea has a complementary benefit. It also reduces the resources used on treatment, enabling them to be used elsewhere.

It is likely that your outreach workers are already carrying out such tasks as:

- Giving group talks or demonstrations
- Making home visits
- Counseling and joint problem solving with families
- Collecting and/or leading community members to collect information on their conditions, resources, and opinions
- Planning, implementing, and monitoring activities

These are precisely the type of skills that lend themselves to effectively promoting improved WASH practices. In some cases, all that outreach workers lack is knowledge of WASH, strategies for improving family WASH practices, and an orientation to using job aids and other supports.

Should your organization decide to sponsor WASH training for your outreach workers, you, as a program manager, will be responsible for a number of tasks before, during, and after the training. The following recommendations and suggestions will give you a broad idea of the scope of the task you are about to undertake. (In the Introduction starting on p. 8, you will find more detailed information about the *Guide for Training Outreach Workers*, *Outreach Worker's Handbook*, and the workshop.)

HIP developed these materials through a wide review of WASH technical and training materials. The HIP materials most directly reflect the experiences of several USAID-funded projects—the Environmental Health Project (I and II) and HIP—in such countries as the Dominican Republic, Nicaragua, Uganda, Peru, Madagascar, and Ethiopia. The draft materials were revised based on valuable feedback from a field test that ChildFund International conducted in Zambia.

## Deciding If You Should Incorporate WASH Activities into Your Program

You, the program manager, should *begin* at the *strategic level* by thinking about and answering a series of questions that will help you put the WASH activities into an organizational context that ensures congruence with other activities. For example:

- How important is diarrhea as a cause of illness and deaths in the communities where your project works?
- How will this training and the subsequent WASH activities of the outreach workers fit into the existing programmatic framework of your organization?
- How will adding a WASH component to an existing program or project change (help or hinder) the program or project and its ability to achieve its goals and objectives?
- What resources (financial, human, and material) are available to support the addition of a WASH training and outreach component?
- How will the results of the outreach workers' efforts be monitored, evaluated, and reported?
- On which aspects of WASH would the outreach workers concentrate their efforts? The decision to start with water, sanitation, and/or hygiene should be made as a function of the organization's programmatic priorities and local needs and conditions.



## Preparing for the Training

Once you and your organization have decided to undertake WASH outreach activities and there is a “fit” with your other program activities, there are a number of steps you, the program manager, should take to prepare for the training.

1. You should familiarize yourself with both this Training guide, which will be used by the trainer, as well as with the accompanying *Outreach Worker's Handbook* and the *Collection of Resource Materials* that the outreach workers will use during training and in their community work. This will give you a clear idea about roles, responsibilities, and scope of the training and its follow-on activities.
2. You or the trainer (see the note to trainer on p. 5) will need to gather certain information (such as national, regional, or local level WASH statistics) that will be presented during the training. These statistics should help the trainer and outreach workers understand the broad WASH context in which they are working. Suggestions for different kinds of statistics can be found in Module 1, Session 2, p. 33, of this guide or p. 7 of the *Outreach Worker's Handbook*.
3. If your organization has already conducted assessments of local WASH conditions, the information from these assessments should be summarized in a way that both the trainer and outreach workers can understand easily. This information may facilitate the selection of target communities as well as help you determine the focus of promotional activities in the field.
4. You and the trainer should be familiar with the WASH conditions in the communities where the outreach workers will be conducting activities and be clear about your expectations (results or outputs). This will help the outreach workers know broadly where to focus efforts, although conditions may vary somewhat from community to community.
5. Designate someone to handle the logistical aspects of the training: selecting the participants, arranging the lodging for the participants, selecting the venue, making arrangements for meals, etc.
6. The introduction section contains a generic list of WASH tasks for outreach workers. As program manager, you should use the items contained in the job description to help craft a task list appropriate for *your* program's outreach workers. You should then use that list to help you complete the next item in this list (#7).
7. One of the most important decisions you and the trainer need to make is which sessions you will offer to your outreach workers. To help you do this, there is a menu of options on pp. 14–15 with suggestions about which sessions you might include in the training. The length of the training will vary according to which sessions you choose to include. Appendices 6–8 outline half-day, one-day, and three-day trainings. The shorter workshops are for raising awareness. To conduct all of the sessions in this Training guide (covering all three major WASH key practices—safe water, feces disposal, and hand washing) requires a training of at least four days.

8. It is impossible to create a generic manual—intended for use in any country where there are outreach workers—that does not need to be adapted to be relevant and appropriate for each particular setting. There are instructions on how to do this adaptation in various places in the text.

**Trainer Note:**



You (the program manager) and/or the trainer need to choose the most important sessions as well as MODIFY any sessions that have information that is not relevant for your country (for example, remove information about chlorination products that are not available in your country or remove information on alum if alum is not available in your country).

The *Outreach Worker's Handbook* is provided in both PDF form and in Word form, so that you might adapt the handbook to the particular needs of the outreach workers being trained by your program. Please keep in mind that page numbers have been cross-referenced between the *Guide for Training Outreach Workers* and the *Outreach Worker's Handbook*. Therefore, if you make changes in the handbook, you will need to change the references to those page numbers in the training guide.

This training package suggests tools to facilitate data collection for monitoring the progress of outreach workers and tracking changes in WASH practices in the community. These tools require a certain level of literacy and numeracy. You are free to adapt and use them or not. If appropriate, decide how you want to integrate WASH monitoring into your existing monitoring instruments and procedures, what data need to be collected, and how the data will be used. The tools included here can help your program collect data at two levels:

**Individual/Household Level**—The outreach worker uses an assessment and joint problem-solving card (Discussion Card) to determine the current behaviors in a household and to mutually plan with the community member how to improve behaviors. The Household Tracking Sheet helps the outreach worker document the current and negotiated improved behaviors for each household. The Discussion Card(s) and Household Tracking Sheet are intended to facilitate such counseling activities.

**Multiple Household/Communitywide**—The Consolidation Sheet helps gather in one place the information collected by multiple outreach workers within one community or geographic area. The Bar Graph helps the outreach worker turn the numbers on the Consolidation Sheet into a bar graph, which is a more visual way to present the data that is useful when giving feedback to the community on its progress. Use of the Consolidation Sheet and Bar Graph is optional, so you, the program manager, need to decide if these are useful tools for the program. (Giving the community feedback on how it is doing on key WASH practices both reminds and motivates people to try to do better.)

Visual aids and handouts used by outreach workers both in the field and in the training workshop are supplied in the *Collection of Resource Materials*. It is highly desirable that you adapt these illustrations to fit the local cultural context and then make sufficient copies. Information to help you do this can be found on pp. 11–14 below and in the *Collection of Resource Materials*—“Adapting Visual Aids.”

Information is available concerning session, daily, and workshop evaluations (Appendix 4), as well as templates for developing outreach worker self-appraisal forms (Appendix 3). This information can also be found in the *Collection of Resource Materials*.

## Supporting the Training of the Outreach Workers

It is recommended that you, the program manager, take the following steps to support the participants while the training program is in progress:

1. Welcome the participants to the training program and tell them that they have the organization's approval and support. Explain how their new tasks will help meet organizational goals and objectives by improving household and community practices that will prevent diarrhea and child deaths, what (in general) they will do to improve WASH, what kind of support they can expect once in the field, etc.
2. Monitor the progress of the workshop to see that participants understand the technical content, that the training conditions are favorable for learning, and that the participants are motivated to undertake their new roles. *If it is logistically feasible*, an effective way to train the outreach workers is to have them spend time in the workshop learning one set of skills, then venture into their communities to try out their newly acquired skills, and then return to the classroom to discuss what they learned and receive more training in preparation for their next community experience.

## Supporting Your Outreach Workers in the Field

There are steps you should take to assist the outreach workers after the training is complete:

1. Make every effort to put the outreach workers' newly acquired skills and knowledge into practice as soon as possible. The longer they wait, the more they'll forget what was learned in the training. Take advantage of their enthusiasm and motivation.
2. Make sure they have the supplies and materials they need. The activities they will be conducting in the field require some locally available items (such as containers and water treatment products). There are low-cost options for most of these materials.
3. Provide supportive supervision to them, particularly in the first months following training, since WASH activities and related skills are likely to be new to them.

4. Assist the outreach workers with their monitoring forms and tasks if your organization decides to gather WASH data.
5. Conduct debriefing sessions where the outreach workers can compare notes, think about lessons learned, and develop new ways and practices for their work.

The Training guide refers to many websites where you can find additional information (see Appendix 5).

Finally, an introductory word or two to share with the trainer(s):

1. Preparing to implement any workshop takes a lot of time. The general rule is two days of preparation for every day of workshop. Once you and the trainer(s) have selected the workshop topics appropriate for your community (the section on pp. 14–15 will help), you should allow your trainers enough time to carry out the preparations. The preparation will involve finding out information as well as gathering materials such as bottles, water, basins, soap, and cloth, and photocopying forms and tools for participants. These tasks are in addition to the logistical and administrative tasks involved in staging a workshop.
2. The Training guide has been written purposefully in a “recipe” style, so that someone whose primary duties are not related to training will be able to implement the workshop. Experienced trainers may find the training directions too detailed and should treat them accordingly. Also, please feel free to have experienced trainers “upgrade” the training methodologies based on their level of comfort with training and the content.
3. The timing for the various activities is generous. You may find that you are able to complete an activity well within the suggested timeframe. For example, an experienced trainer may be able to complete the introductory activities in a relatively short period of time on the first morning. **Please remember timing suggestions are illustrative.**
4. Finally, the session objectives have been written in terms of what the participants should be able to do. They are learner-focused. They guide the content of the session and help both trainer and participant to assess the acquisition of new knowledge and skills. Acquisition of WASH knowledge is not an end in itself, but should serve as a basis for what the participants will do in the field.

Good luck!

# INTRODUCTION TO THE MANUAL, WORKSHOP, AND MATERIALS

HIP compiled this training package as part of its mandate from USAID under contract number GHS-I-00-04-00024-00. To facilitate work being done in WASH around the world, USAID asked HIP to develop a *Guide for Training Outreach Workers* and an *Outreach Worker's Handbook* for use by a wide variety of organizations seeking to add WASH activities to their current programs or to start a diarrhea reduction program.

The purpose of this guide is to support the training of local outreach workers to carry out activities at the community level to reduce diarrhea. It outlines a training workshop for outreach workers that may be facilitated by NGOs, PVOs, the Ministry of Health, or any other organization that desires to combat diarrheal disease.

After participating in the workshop, outreach workers should be able to use the knowledge and skills acquired to carry out activities within their own organization's program, using as supports the accompanying *Outreach Worker's Handbook* and *Collection of Resource Materials*.

## Workshop Objectives

This manual is intended to enable users to organize a workshop that prepares outreach workers to:

1. Describe the national and local WASH situation (using data)
2. Define their role and responsibilities as an outreach worker
3. Describe the three key WASH practices and acceptable and unacceptable ways to carry them out
4. Explain and replicate in the community the various WASH activities demonstrated during the workshop
5. Demonstrate effective communication skills
6. Use appropriate monitoring tools to record their progress

7. Outline how they will move forward with activities once the workshop is over (prepare an action plan)

## Workshop Methodology

The workshop:

- Uses structured learning activities: presentations, group discussions, group work, role plays, practical exercises, etc.
- Engages the participants (outreach workers) through active involvement in exercises and small groups
- Enables participants to experience the same activities they will be carrying out in their communities
- Incorporates an *Outreach Worker's Handbook* and communication materials that the outreach workers can later use in the field

## Session Methodology and Structure

### Methodology

Based on adult learning principles, each session is structured according to the following seven steps that incorporate the “experiential learning cycle”:

- Introducing the session (some kind of icebreaker or climate setter)
- Presenting the session’s objectives
- Offering a structured experience to the participants (such as a role play)
- Processing (talking about) that experience
- Drawing new learning and conclusions from the experience and the processing
- Planning how to use the new skills and knowledge
- Summarizing the session and linking it to the next session

### Structure

The Training guide is organized by modules and sessions. Each session has:

- A title page with session objectives
- A “session-at-a-glance” table with activities, times, and needed materials
- Detailed training instructions for the trainer

This manual teaches an approach to improved hygiene that focuses on supportive counseling supported by group activities. There are also several other processes for improving hygiene in

communities. More information on these approaches can be found under Websites/Links (Appendix 5) of the manual.

## How to Use This Guide and the Outreach Worker's Handbook

### The Guide

This guide provides easy-to-follow instructions to the trainer on how to conduct the sessions. Before beginning a workshop, the trainer(s) should become familiar with the guide and its contents. The level of detail provided is for those who are less experienced in the field of training. More experienced trainers should feel free to skip over directions they don't need or to modify recommended training techniques.

The sponsoring organization should make decisions on which modules, sessions, and exercises to include or exclude based on: (1) the organization's and outreach workers' priority concerns in diarrhea prevention, (2) the acceptability and feasibility of various approaches to diarrhea prevention in the program area, and (3) the trainees' existing knowledge and capabilities. The trainer(s) should work with the program to incorporate into the training any existing or new educational materials or job aids that the outreach workers will be expected to use.

In addition to instructions to the trainers, individual sessions may contain explanatory trainer notes and suggestions about what to say to the participants. This information will typically appear in boxes. At the end of the suggestions for individual sessions are references to various appendices. The guide is keyed directly to the *Outreach Worker's Handbook* (given in italics with a page number) as well as to a variety of hygiene-promotion materials found in the *Collection of Resource Materials*.

### The Outreach Worker's Handbook

During the workshop the *Outreach Worker's Handbook* will be the source of complementary technical information that the trainer can use as s/he sees fit. It also contains a section where the outreach workers (if they are able) can record their reactions, new knowledge, and action planning steps.

Following the workshop, the outreach workers will take the *Outreach Worker's Handbook* back to their communities. There it will serve as a resource to support them in carrying out their activities. In addition to the complementary technical information and the journal, the *Outreach Worker's Handbook* contains several job aids.

The job aids are one-page instruction sheets on how to carry out the various demonstrations that are featured as part of the training of community outreach workers, as well as tools to facilitate communication between an outreach worker and a family or small group. Thus, the outreach workers who wish to repeat the awareness-raising demonstrations in the community will have a step-by-step guide for doing so and will not have to rely on their recall from the workshop.

## Collection of Resource Materials

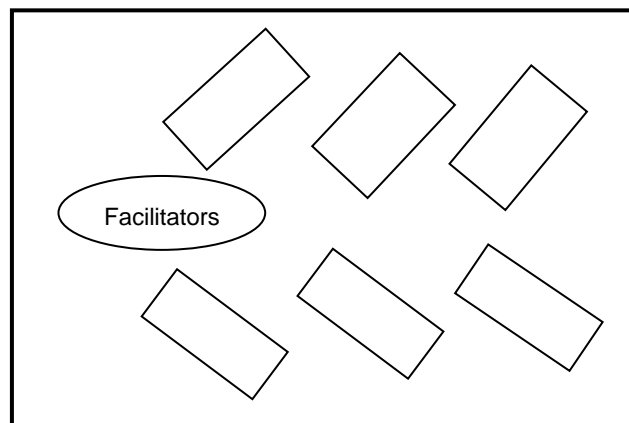
The collection contains samples of the materials (visual aids and other resources) for the training as well as for use by outreach workers in actual programs. The sample materials were developed for specific countries and programs. It is highly recommended that these communication materials be adapted for your specific program. However, this is a significant task that needs to take place *before* the training is held for outreach workers.

The *Collection of Resource Materials* is linked to the *Guide for Training Outreach Workers* and the *Outreach Worker's Handbook*.

## Logistics for the Workshop

Carefully select the venue for the workshop so that participants will be comfortable and ready to learn.

If possible, have the participants sit at a table (five or six per table) in such a way that they can all see the trainer as well as have face-to-face discussions at their tables. The following diagram illustrates the recommended placement of tables.



## Visual Aids for Outreach Workers' Training and Use in the Community

This information on adapting visual aids can also be found in the *Collection of Resource Materials*.

Visual aids, whether counseling cards, posters, slides, or other types of illustrations, are designed to facilitate dialogue and learning. Alone, well-designed visual materials can convey information, remind people to do something, and motivate action. Used as an aid to interpersonal communication, they can enhance oral communication and help a mother, family, or group stay engaged. Visual aids should play a key role in training community outreach workers. They can also



be important tools that outreach workers use to teach, motivate, and work with people in their communities.

The visual aids and other resources for the workshop and for use in the field are contained in the *Collection of Resource Materials* (sample communication materials on hygiene improvement) that accompanies this manual. The sample materials are referenced in the Training Guide. However, it is highly recommended that program managers and trainer(s) adapt these materials for their training and program.

This means not only that the *drawings* need to be adapted but also that the *content* of the materials should be adapted. Programs may also want or need to adapt the basic layout and design of the materials so they are easier to use, for example based on how people read: left to right, right to left, or down the page. How literate the outreach workers are will determine if and how much text is included in counseling cards and other materials they will use as job aids.



### **“Correct” Advice**

Perceptive readers will note that there are small inconsistencies in the “advice” that some of the sample materials convey. While the persons who prepared this Training Guide did assess the best global recommendations regarding hygiene practices, some practices lack full consensus. So it is possible that the persons preparing the various materials either were not aware of the latest technical recommendations or that their advice simply reflects the lack of consensus. This situation makes it imperative that organizations or programs designing or adapting materials check both globally (via the Internet, for example) and locally (with in-country experts) for their technical recommendations.

## **Role and Preparation of Appropriate Visual Illustrations**

The following information is provided for those who wish to deepen their understanding of the role of visuals and how to create and use effective visual aids as supports for work in the community. As part of the *Collection of Resource Materials*, a compendium of visual aid materials provides examples of appropriate visual tools for program managers in many different settings.

Depending on their quality and appropriateness, visuals can either help or inhibit good communication. While the drawings in the sample materials are generally well done, simply lifting and using those in other cultural settings may not be effective. Although illustration quality is very important for all materials, it is particularly important for “stand-alone materials” such as posters or pamphlets that are viewed independently by community members and not explained or used by an outreach worker to teach and stimulate conversation.

In general, both the type of material and its content should be consistent with its purpose. The following table summarizes types of materials and the purposes for which they are most appropriate:

Purpose	Types of Materials
To facilitate dialogue and problem solving	Counseling cards or flipcharts, divided into sections for (1) assessment of current practices and (2) discussion and joint problem solving regarding new practices (best used by an outreach worker with an individual family member or members); community demonstrations, dramas, festivals, large flipcharts, and scheduled radio programs can stimulate interest, but the key to stimulating changes in practice is to take advantage of that interest by leading good discussions about real problems and possible solutions.
To remind	These could be something hanging from the ceiling, posted on the wall, or simply placed strategically to remind people to do certain things. Stickers or tippy taps (Module 3, Session 4) can both remind people to wash hands with soap. Reminder materials are especially important for behaviors that should be repeated many times each day, such as many of the diarrhea-prevention behaviors.
To motivate	Motivation is best done person-to-person, but the right poster, film, radio spot, or program can also engage people emotionally. Providing feedback to the community as a whole, e.g., on how many families in their community have improved latrines, can motivate others through “social pressure.” It is important to note that a lot of experience indicates that simply giving people the “facts” about how diarrhea happens and what they need to do to prevent it is not effective for motivating new practices. People need to be engaged emotionally. The new practices they adopt need to satisfy <i>their</i> felt needs (e.g., to be better thought of by their neighbors), not those of public health specialists.
To teach	Again this is often done best person-to-person (or by group demonstrations), but posters or pamphlets showing something step-by-step can be supportive.
To provide information	Posters can work fine to inform people of some special occasion, e.g., a community meeting, but they do not have a long lifespan in most community settings. They are not good for conveying complicated information.

The best way to prepare effective and acceptable illustrations is to have an artist work hand in hand with the “target audience” for the illustrations. In selecting an artist, it is paramount that the artist acknowledges that his/her purpose is not to produce beautiful art but rather to create drawings that are attractive, understood, and congenial to the audience. This may mean, for example, that the artist will have to eliminate visual elements such as shadows or lines on a forehead if these confuse the audience. Even certain moods and expressions may not be acceptable. For example, community people may not want to see people who are “too sad” or “too old.” You can only learn such things by working closely with your audience as you develop the materials.

The best process is for the artist to go to the field to work with community members. Have him or her visit several communities and go into homes, perhaps taking photos. Have the artist actually work together with groups of mothers to decide jointly how to visually show certain concepts. The artist can do rough drawings and the mothers can react and make suggestions.

Once there are draft materials, they should be pretested, at least briefly. Again, pretesting can involve a formal study, but even one day visiting a couple of communities and getting the reactions of various people to the draft materials is very worthwhile. You want to learn about:

- How clearly the basic idea is communicated and understood
- Relevance and appropriateness to family, community, culture
- Believability (Does everything look “right” [realistic]?)
- Likes and dislikes, if there is anything offensive
- What people believe the material/drawing is suggesting that they do and if they feel they can do it

Remember, you want to ask not only about comprehension and opinions but also about suggestions for improvements.

If you are pretesting counseling materials, have a few outreach workers use the materials to counsel mothers or families. Both the workers and the community members should then be interviewed to obtain their reactions and suggestions.

Sometimes the program and artist need to compromise between what the audience requests and the potential effectiveness of the material. For example, people often want to see homes, furniture, and other conditions that they aspire to rather than what they currently have. It makes no sense to draw faucets and sinks if people obtain and store their water in ceramic vases.

The program and/or trainer(s) should provide sufficient copies of all visual materials and incorporate them into the training.

## Determining Workshop Topics

The following suggestions are intended to help the managers of the organization or program think through a number of decisions before planning and organizing the training.

- The first decision is whether the program and outreach workers will address all or only some of the three key practices (drinking safe water, safe feces disposal, and hand washing with soap).



### Trainer's Note

In addition to the three key practices mentioned in this manual (water, sanitation, and hand washing), there are many other behaviors that affect hygiene. Some of these behaviors include food hygiene, refuse disposal, and home hygiene. Similarly, there are other hygiene-related diseases (skin, eye, and respiratory) that are not mentioned in this manual, which may require the promotion of a different set of hygiene practices.

- A second major program-design decision is whether the organization will simply promote improved health-related practices or will also provide or facilitate “technologies” that make it easier to carry out these practices, e.g., water containers with a cover and spigot, hand soap, or chlorine drops or tablets to disinfect water. A program does not have to directly provide

or facilitate technologies in situations where other organizations are already doing so in the project area. Such a situation holds great potential for collaboration.

- A third decision concerns what options the program and its outreach workers will promote—options related to both *practices* and *technologies*. For example, will the program promote all four acceptable approaches to water purification (treating with chlorine, solar disinfection, filtration, and boiling) or fewer approaches? Will the project promote only hand washing with soap or also hand washing with ash or sand? If the program will promote tippy taps to families that are concerned with having enough water for hand washing, what design and materials will it promote?

Such decisions are key not only for program and training design but also for the design of assessment and joint planning materials that are used for one-on-one or group dialogue and joint planning.

How should a program go about gathering information on which to base such decisions? The steps are outlined in *Improving Health through Behavior Change* <http://manoffgroup.com/resources/ProcessGuideWeb.pdf> (English) and <http://manoffgroup.com/resources/GuiaPractica.pdf> (Spanish) as well as other resource books that can be accessed through the websites listed in Appendix 5. At a minimum, the process should include:

- Talking over these issues with other development organizations working in the same region
- Interviewing key informants in other organizations, including people like Ministry of Health (MOH) environmental health technicians
- Collecting, reading, and extracting insights from reports and studies

Persons from the organization or program should also spend some time on the ground in communities, either informally observing and chatting with leaders and families about hygiene issues or more formally carrying out in-depth interviews, focus group discussions, and trials of improved practices to learn what people are currently doing and what they are willing and able to do that is better for their health.

# Workshop Materials

(Quantity based on 20 workshop participants)

MATERIALS	QUANTITY
Name tents/tags	20
Welcome sign	1
5X8 index cards with national/local statistics	10 x # of tables
5X8 index cards with key practices	3 x # of tables
Plastic bottles with clean water and salt	4
Plastic bottle with clean water	1
Plastic bottle with water and some particles	1
Plastic bottle with mildly dirty water	1
Plastic bottle with very dirty water	1
Long piece of hair (or similar object)	1
Local chlorine products (if available)	1-3
Disposable cups	20
Magnifying glass	1
2.5 liter clean, plastic bottle with no label	# of tables
Water	15 liters
Slanted metallic surface	1
Biosand or ceramic filter (if available)	1
Container with tight-fitting lid (e.g. jerry can)	1
Long-handled ladle	1
Spigot	1
Pictures illustrating ways to treat, store, and serve water	1-4
Pitcher of water	1
Washtubs	6
Towels	4
Large tub of mud	1
Extra small pieces of paper	20
Soap dish and soap	1
Tippy tap	1
Stop watch	1
5 liter plastic container with handle	# of tables
Candle	# of tables
Matches	# of tables
Pliers	# of tables
Tube	# of tables
Flipchart (easel and paper)	1 box of 4 pads
Markers (4 red, 4 black, 4 blue, 4 green)	16
Tape	3
Large tracking sheets	20
Copies of job description	20
Copies of self-assessment form and key	20
Copies of tracking sheets	20
Collection of Resource Materials	20
Outreach Worker's Handbook	20

## Menu for Selecting Which Sessions To Do

MODULE/SESSION		WATER	HAND WASHING	SAFE FECES DISPOSAL
M-1/S-1 – Orientation		•	•	•
M-1/S-2 – Introduction		•	•	•
M-1/S-3 – Outreach Worker		•	•	•
M-2/S-4 – Key Practices		•	•	•
M-1/S-5 – Contamination		•		
M-2/S-1 – Pretreatment		•		
M-2/S-2 – Chlorination		•		
M-2/S-3 – Boiling Water		•		
M-2/S-4 – SODIS Method		•		
M-2/S-5 – Filtration		•		
M-2/S-6 – Transporting		•		
M-2/S-7 – Helping Families		•		
M-2/S-8 – Water Synthesis		•		
M-3/S-1 – How to Wash			•	•
M-3/S-2 – When to Wash			•	•
M-3/S-3 – Water and Time			•	
M-3/S-4 – Tippy Tap			•	
M-3/S-5 – Hand Washing			•	
M-4/S-1 – Dangers				•
M-4/S-2 – Disposal				•
M-4/S-3 – Latrines				•
M-5/S-1 – Interpersonal Com.		•	•	•
M-5/S-2 – Discussion Tools		•	•	•
M-5/S-3 – Opportunities		•	•	•
M-6/S-1 – Action Planning		•	•	•
M-7/S-1 – Tracking Progress		•	•	•