

# MADAGASCAR OVERVIEW

# **About HIP**

USAID's Hygiene Improvement Project (HIP) aims to reduce diarrheal disease prevalence and improve child survival through the sustainable improvements in three key hygiene behaviors: hand washing with soap, safe feces disposal, and safe storage and treatment of drinking water at the household level. HIP works at scale in Ethiopia and Madagascar (rather than starting at pilot and working towards scale-up), and provides technical support for comprehensive hygiene improvement programming in Nepal, Peru, Uganda, and the West Africa Water Initiative countries. In all of its programs, HIP supports the integration of hygiene improvement into other health platforms such as HIV/AIDS and other infectious diseases, as well non-health platforms such as schools. HIP also helps develop consumer approaches and private sector partnerships to increase the availability and demand for low-cost sanitation options, as well assure effectiveness and sustainability of use.

## **HIP in Madagascar**

HIP works with the national water, sanitation, and hygiene network, DIORANO-WASH, to promote improved hygiene practices at scale. This partnership combines the power of over 130 government agencies, NGOs and PVOs, formal and non-formal, religious and social leaders, journalists and the private sector to bring about real, sustained change in hygiene and sanitation practices. HIP is promoting behavior change around hand washing, latrine use, and the treatment and safe storage of water. HIP has developed relations with a network of established USAID partners in the areas of health, the environment, and water and sanitation to incorporate the adoption of its "small doable actions" for improved hygiene into their existing program activities, greatly increasing the scale of the population that has access to, will use or acquire knowledge of improved hygiene behaviors.

# HIP's Madagascar "At-Scale" Strategy

HIP conducted trials of improved practices of "small doable actions" associated with the three key hygiene behaviors among 100 households in four regions to understand what factors would facilitate the adoption of these actions. The results led to a national top-down and bottom up behavior change strategy, with special focus on four regions. HIP advocates at the national level, working with key ministries (Health and Family Planning, and Education) for WASH-friendly policies and national programs in health centers, schools and communities. HIP plays a key role on the national DIORANO-WASH steering committee, advocating for a national water, sanitation and hygiene campaign that was launched on April 27, 2007. As a matter of program policy HIP builds capacity of its many national, regional and local implementing partners in negotiating and promoting improved hygiene behaviors.



The treatment of unsafe drinking water is an important part of HIP's program in Madagascar.

## WASH-Friendly Health Centers, Schools and Communities

HIP works through existing networks of community health workers and is producing simple reference and training materials for use in the field. HIP also works with the Ministries of Health and Education to define norms and standards for WASH infrastructure in schools and health centers. In addition, HIP is working with UNICEF, WaterAid and the Ministry of Education to develop the WASH-friendly schools approach to hygiene improvement for school curriculum and teacher training. HIP is also developing a sanitation marketing approach to increase the demand for and availability of low-cost sanitation options. Finally, HIP is collaborating with the Government of Madagascar's "Champion Commune" approach, successfully advocating for the inclusion of hygiene improvement benchmarks for participating communes to qualify for this designation.

## Monitoring and Evaluation

HIP is measuring change at the household and facility levels in the project's three key practices (hand washing, safe disposal of feces, and safe storage and treatment of drinking water). Facilities visited included basic health centers and schools. The data collection was done in conjunction with another USAID funded-project, FANTA, which uses an LQAS sampling approach to track health sector achievements in USAID-funded programs annually.

#### **Geographic Areas of Activity**

Regions of Analamanga, Amoron'i Mania, Atsinanana, and Haute Matsiatra.

## HIP's Partners in Madagascar

HIP works with DIORANO-WASH, SantéNet, Fonds d'Investissement du Développement, WaterAid, local NGOs, faith-based organizations, and civil society groups through formal collaboration agreements, contracts, or inclusion in trainings on promoting the three key hygiene practices.

#### Key HIP Staff

HIP Country Program Manager, Sarah Fry, <u>sfry@aed.org</u>, telephone: 202-884-8927 HIP In-country Representative, Randriamananjara Odile Michèle, <u>omrandria@aed.org</u>

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Hygiene Improvement Project Academy for Educational Development 1825 Connecticut Ave., NW Washington, DC 20009-5721 Tel. 202-884-8000; Fax: 202-884-8454 hip@aed.org - www.hip.watsan.net