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HIP HYGIENE IMPROVEMENT
PROJECT

Meeting the WASH Needs of Families Affected by HIV/AIDS

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With Julia Rosenbaum and Merri Weinger

**HIP End of Project Meeting
August 3, 2010**



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Diarrhea Affects PLHIV & their Families:

- Increased morbidity and mortality in 90% of PLHIV (Katabira 1999, Monkenmuller & Wilcox 2000)
- Increased susceptibility of PLHIV contracting diarrhea
- Decreased nutrient absorption
- Decreased absorption of ARVs (Bushen et al, 2004);
(= possible ARV resistant strains)
- Increased burden on caregivers
- Increased water needs for people with HIV
- More severe in HIV+ children



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Pulled Together Existing Evidence Base

- WASH – HIV Briefs (2006, 2008)
- Literature Review and Programmatic Implications
- Integration Meeting in Malawi (CRS, WHO, USAID/HIP)





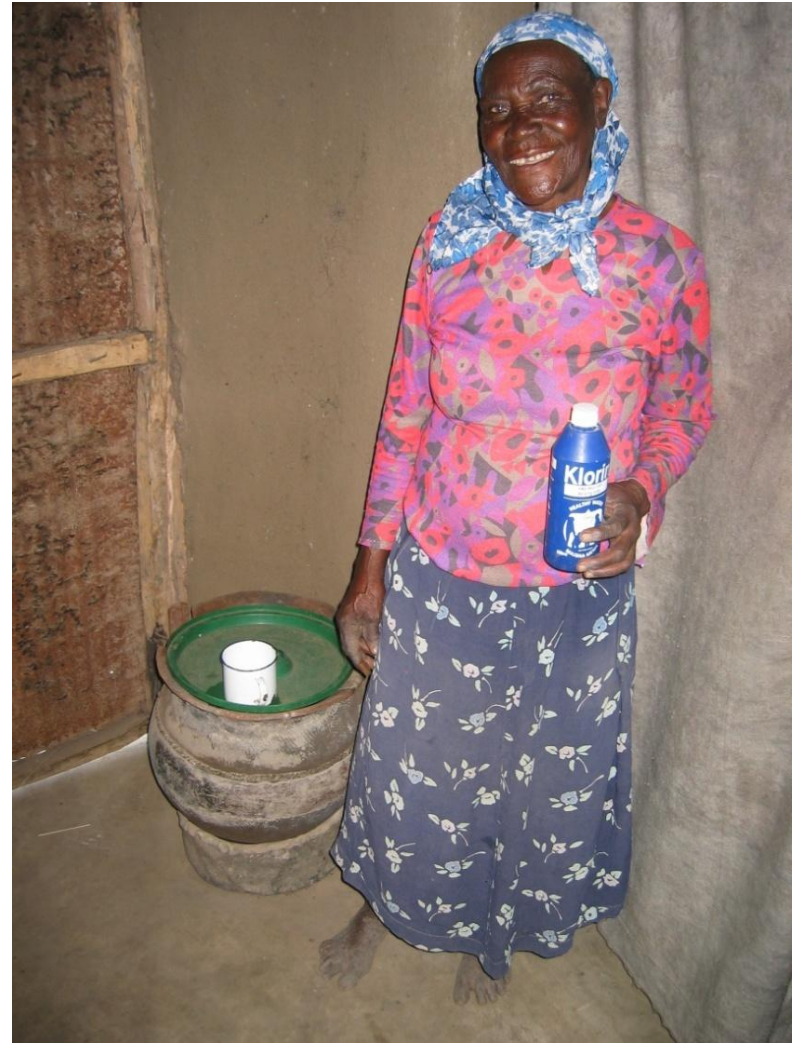
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Guidance for How to Integrate

- Policy
- Programming





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Integration at different levels

- Global
- USG
- WASH-HIV Countries
 - Ethiopia
 - Uganda
 - Kenya
 - Tanzania





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Country-level Integration points

- Home-based Care (in Ethiopia, Uganda, Kenya)
- Orphans and Vulnerable Children
- Counseling and Testing
- Prevention of Maternal to Child Transmission
- Nutrition and HIV
- HIV considerations into WASH





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Country WASH - HIV Integration Roll Out

- Review guidance on WASH within HIV policies and guidelines at all levels
- Form a Community of Practice with existing implementing partners
- Identify country-specific Small Doable Actions to help improve WASH practices
- Provide tools & training to enable WASH-HIV integration into HIV programs
- Built capacity for WASH-HIV integration



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Critical WASH behaviors





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Sanitation

*Safe disposal of
feces*



Bed Bound Client



Weak Client



Mobile Client



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Bedpan

Plastic Pants



Bedside Commode





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Menstrual Blood Management

- Clean a bedbound woman using universal precautions to protect from HIV transmission
- Dispose or cleans blood soaked material
- Use adequate material to absorb blood





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Capacity Building

Different levels of capacity

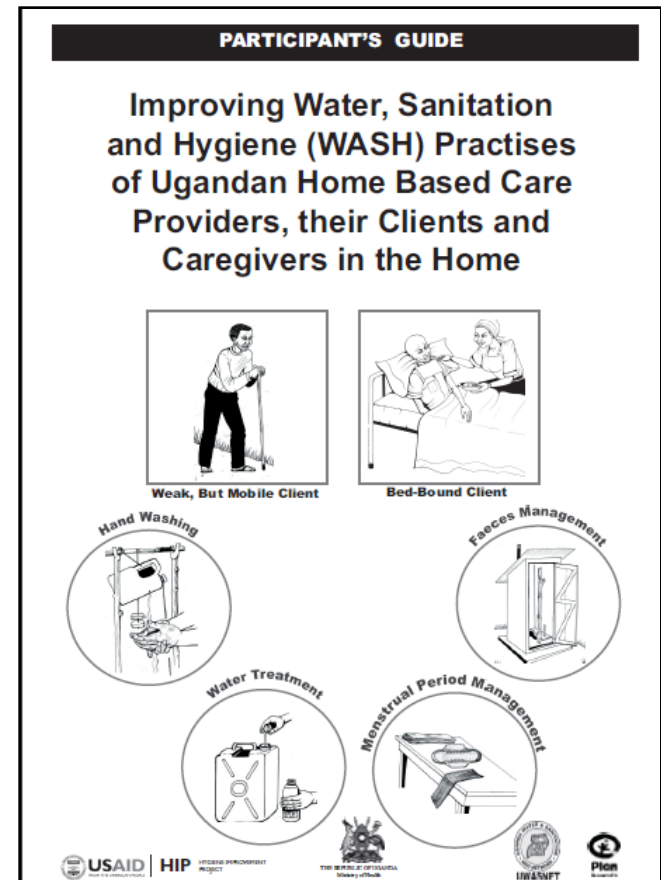
- National
- Institutional
- HBC worker
- Caregiver



WASH-HIV Integration Toolkit

Five components:

- Training Manual & Handouts
- Participant's Guide
- Assessment Tool
- Counseling Cards
- WASH-HIV Integration Indicators





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Training Manual Content

- Module 1: Introductory Activities
- Module 2: WASH Intro, Link to HIV
- Module 3: Intro WASH Behavior Change
- Module 4: Hand Washing
- Module 5: Making Water Safe to Drink
- Module 6: Handling Feces
- Module 7: Menstrual Blood Management
- Module 8: Negotiating Behaviors
- Module 9: Action Planning; Tracking Progress



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Tools:

Negotiating small doable actions using pictorially based assessment and counseling tools

ASSESSMENT TOOL

HAND WASHING

How do you wash your hands?



Do not wash hands. (frowny face)



Use water only and "dip" hands. (frowny face)



Use pouring water and ash. (happy face)



Use pouring water and soap. (happy face)

WATER TREATMENT

How do you treat your water?



Do not treat. (frowny face)



Setting/decanting (frowny face)



Filtering through cloth (frowny face)



Chlorinate (happy face)



Boil (happy face)

FAECES DISPOSAL

How do you get rid of faeces?



Open defecation (frowny face)



Bury faeces (happy face)



Use latrine (happy face)

MENSTRUAL RAG CLEANING FOR RE-USE

How do you clean menstrual rags for re-use?



Do not wash. Dry and reuse. (frowny face)



Rinse in water and dry. (frowny face)



Wash with soap and water and dry. (happy face)



Soak 20 minutes in Jik and water. Wash with soap and water. Dry in sun. (happy face)



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WASH & HIV Training Numbers

Uganda

- 23 HBC orgs – 4 with intensive follow up
- 73 master trainers
- 214 outrch workers
- HBC org sub-group seeking funding

Ethiopia

- 12 organizations
- 78 master trainers
- 400+ outrch workers
- 125 facility workers



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Lessons Learned

- Small doable actions are common among countries
- Building a COP is critical but requires a driving, committed champion
- Partnering with existing programs allows for true integration even with limited resources
- Improving WASH practices requires attention to enabling technologies, particularly hand washing and sanitation hardware
- Placing WASH in a broader context reduces stigma



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Challenges for the Future

- WASH should be incorporated more systematically into other areas of HIV as noted
- Water and sanitation programs need more support to incorporate HIV considerations
- Water collection is risky...and can facilitate HIV transmission among women
- Urban sanitation is a huge problem and is exacerbated in the HIV context
- Financing for WASH – HIV integration is limited