

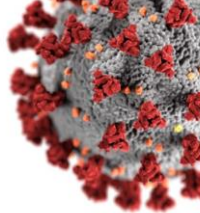
WASH and COVID-19 in Humanitarian Settings: How can we improve hygiene behaviors?

Moderator: Les Roberts

Speakers: Sian White, Caroline Muturi and Hani Taleb



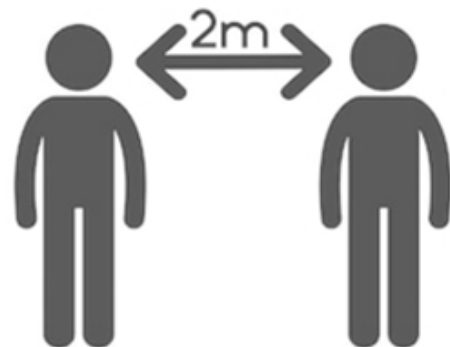
WASH & COVID 19



- Handwashing infrastructure
- Handwashing products
- Handwashing behaviour

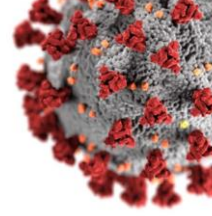


- Cleaning more often
- Disinfecting frequently touched surfaces



- Maintaining 2m distancing
- Reducing unnecessary travel
- Protecting vulnerable individuals

What makes COVID-19 response programmes in crises so important?



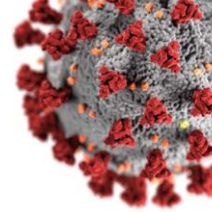
Crisis-affected populations may have

- Greater difficulties accessing health, social and economic services
- Limited access to water, sanitation, and hygiene infrastructure
- Limited engagement with mass or social media
- Greater likelihood of living in crowded environments
- More likely to be marginalised and stigmatised



Photo: Tom Heath, ACF

Learning from previous outbreaks



Increased exposure and messaging



Perceptions of risks change



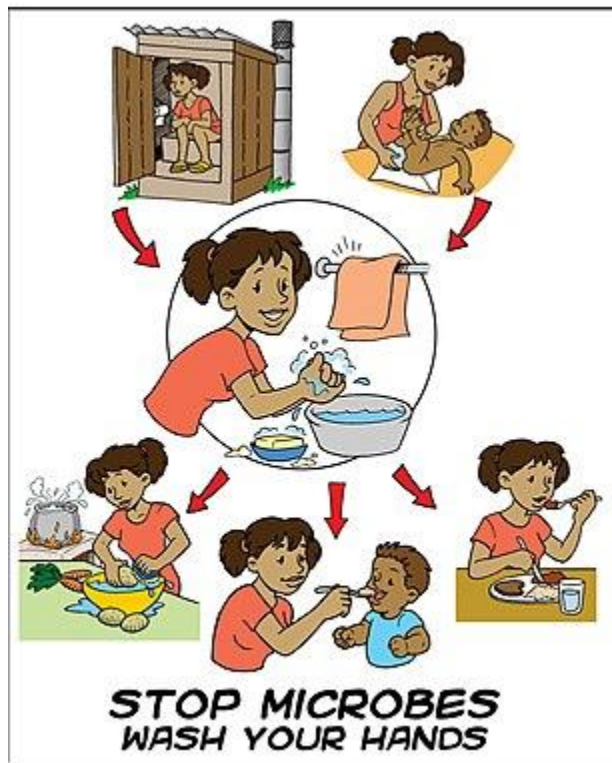
New norms emerge



Preventative hygiene behaviours increase

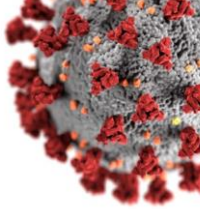
Enabling behaviour in difficult circumstances: Clearly define behaviours

Maintain
personal
hygiene



Enabling behaviour in difficult circumstances:

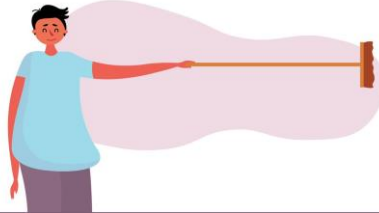
Make guidance relevant to the context & population



To protect yourself and your family from the Coronavirus, keep a distance of **2 metres** from others.



2 metres = 200 cm = 6 feet 7 inches



Broom out at arms length

To protect yourself and your family from the Coronavirus, keep a distance of **2 metres** from others.



2 metres = 200 cm = 6 feet 7 inches



About a length of a cow



Fully stretch out your arm.
When you are about 2 meters*
away from someone, their
face fits into your hand
roughly like this.**

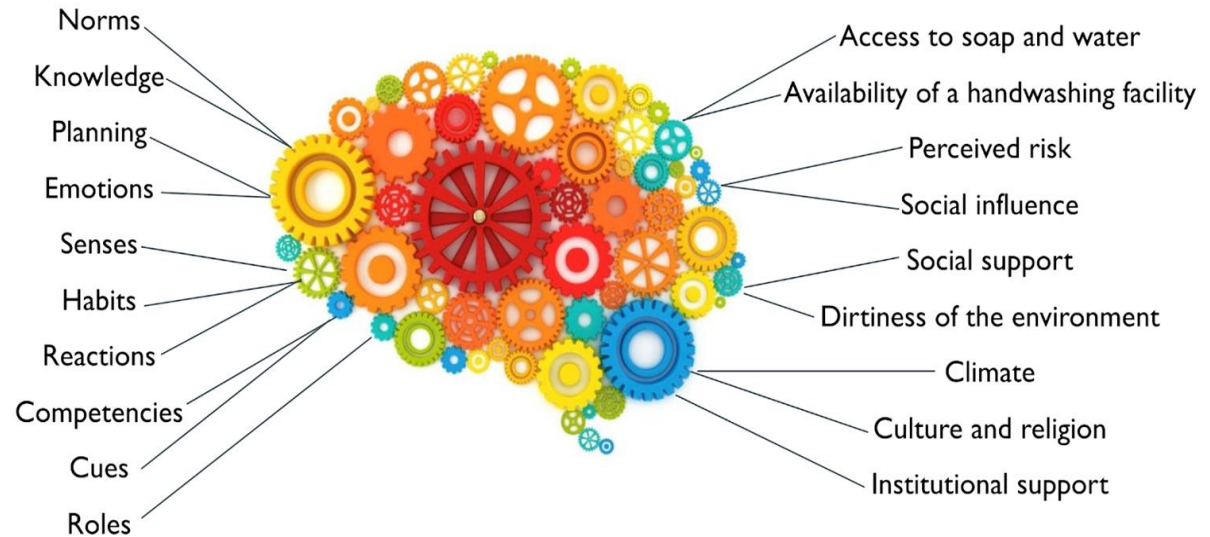
*Minimum distance required to prevent
person-to-person spread of Covid-19.
**Based on adult averages.



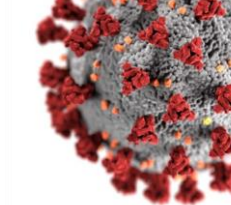
Enabling behaviour in difficult circumstances:

Address all barriers to behaviour

In outbreaks we tend to rely on knowledge and fear to drive behaviour - overlooking many other key determinants.

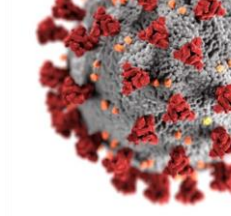
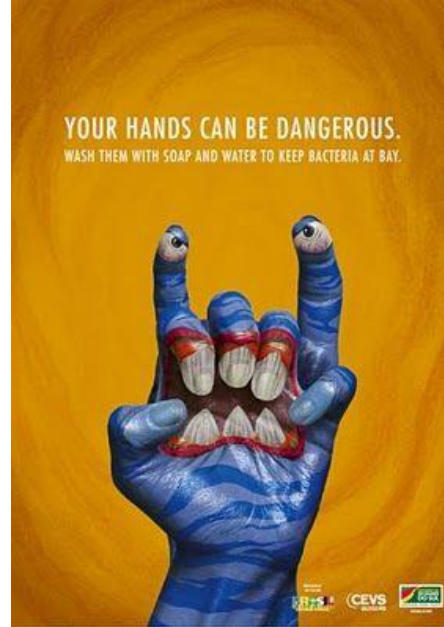


Enabling behaviour in difficult circumstances: Make it easy and desirable to do

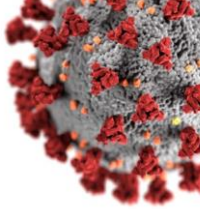


Enabling behaviour in difficult circumstances: Get people's attention

Crisis populations may be hard to reach this means you need to be more creative.



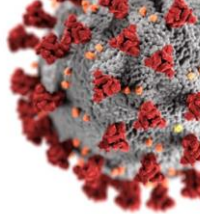
Other general principles for hygiene promotion during COVID-19 response



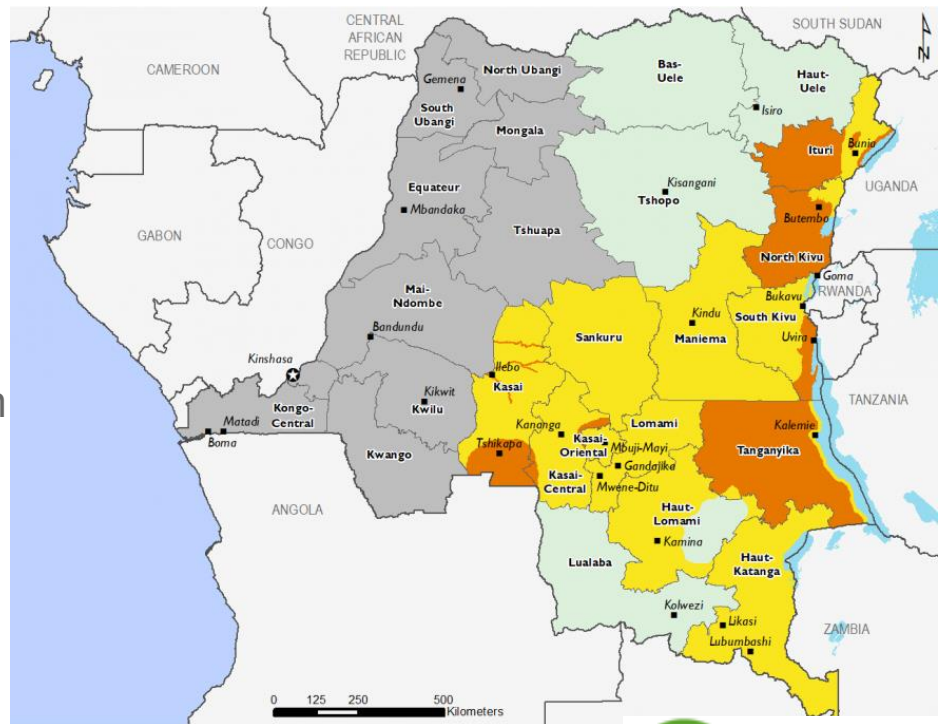
- Plan for a range of circumstances and continue to assess risks
- Make the most of ‘windows of opportunities’
- Coordinate with others (including non-traditional actors)
- Engage with communities throughout the response
- Acknowledge and address other needs
- Encourage community level action and a sense of community spirit



Case study 1: Democratic Republic of Congo



- **Number of cases:** 1,102 (94% in Kinshasa - 1,032)
- **Number of deaths:** 44
- **Access to basic handwashing facilities:** 4%
- **Literacy:** 77%
- **Number of people in need:** 13.1 million
- **Number of displaced people:** 3.8 million
- **Context:** Ongoing Ebola response + COVID-19 preparedness in North Kivu (8 cases, 0 in Butembo & Mangina)



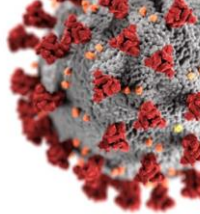
Community perceptions

- Confusion on symptoms, transmission and severity between Ebola and COVID-19
- COVID-19 perceived as a disease of the rich
- COVID-19 seen as something to keep politicians and humanitarians in business following the reduction in Ebola cases
- Perception that there is a COVID-19 vaccine but that this is being withheld from the community
- COVID-19 is associated with witchcraft



What is being done by our organisation?

- Capacity building of staff and community groups on COVID-19
- Regular dialogues with targeted community groups on COVID-19 related risks and prevention behaviours
- Installation of hand-washing stations in public places
- Increasing soap distribution
- Community perception tracking using a tool on mobile phones

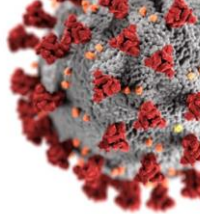


What else is being done?

- Increasing access to information on COVID-19 using culturally appropriate channels such as local radio stations
- And preferred languages French, Lingala and Swahili (orientation of journalists)
- Working with local artists and religious leaders to develop songs and key information on COVID-19 in other local languages such as Kinande
- Plans to do interactive shows through local television stations



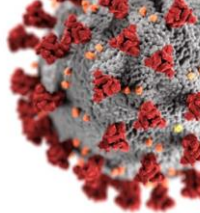
What had to be considered for COVID-19 programmes given the fragile context?



- Community-centred approach is critical
- Regular risk analysis by the team & community groups
- Integration of the hardware and software in the hotspots or high-risk areas
- Focus of WASH activities in Health Care Facilities
- Greater engagement with women because they are primary caregivers



What is working well?

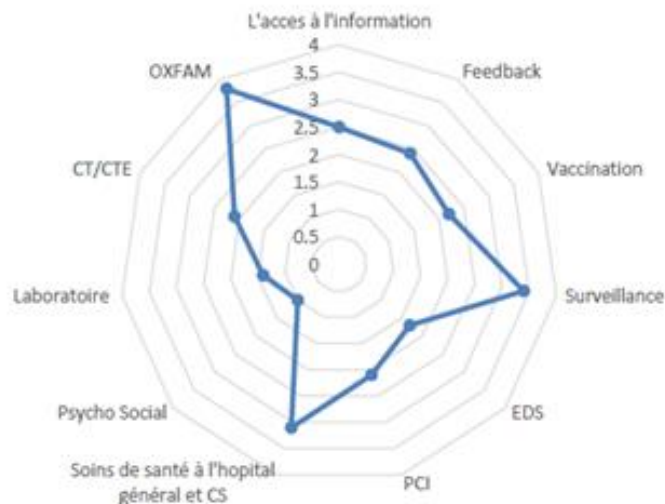


INCREASED COMMUNITY TRUST:

- A well-established community network comprising of the CACs (Cellule d'Animation Communautaire), women groups and religious leaders
- Oxfam's community engagement strategy: advocacy done at MOH led Ebola/ COVID-19 taskforce level to adapt response activities by different pillars based on the community feedback
- Oxfam's presence in the province for several years has availed the 'time' to build trust with the communities

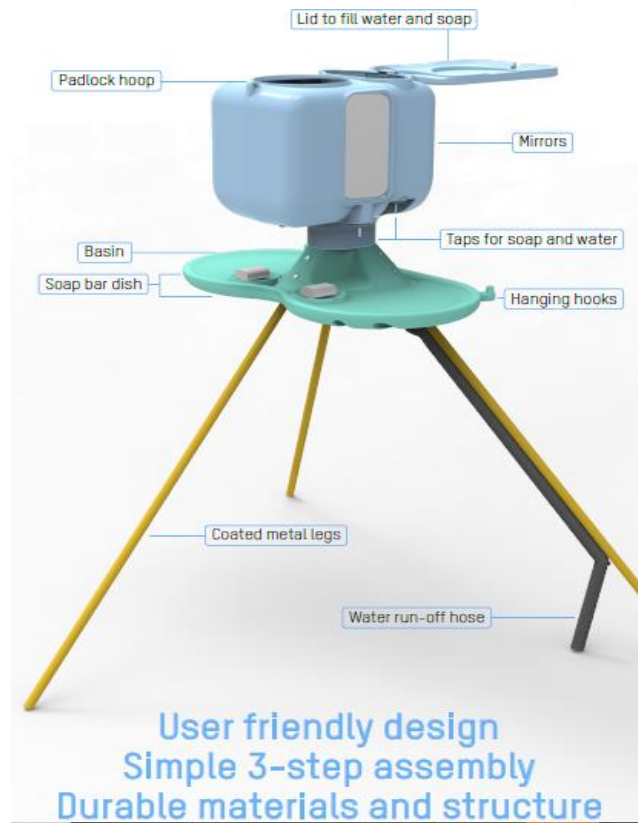
TROIS CELLULS DANS AIRE DE SANTE DE MUKUNA : 27
JUN 2019

— TROIS CELLULS DANS AIRE DE SANTE DE MUKUNA : 27 JUN 2019 MULEMYA (7)



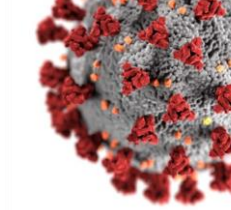
What are key challenges?

- Lack of an enabling environment to support handwashing behavior - water scarcity & inadequate handwashing devices
- Poor enforcement of guidelines - business as usual with continued mass gatherings makes it hard to encourage physical distancing
- Misconceptions about the similarity and differences between Ebola & COVID-19
- Variations in implementation packages due to attempts to adapt the current Ebola response in line with the COVID-19 reality
- Lack of knowledge transfer between staff involved in Ebola (in Nord Kivu) and those implementing COVID-19 response in Kinshasa



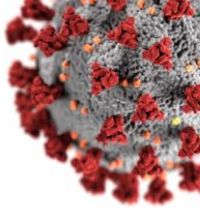
Case study 2: North West Syria

- **Number of cases:** 0 cases in NWS (47 in other parts)
- **Number of deaths:** 0 deaths in NWS (3 in other parts)
- **Access to basic handwashing facilities:** 71%
- **Literacy:** 81%
- **Number of people in acute need:** 1.1 million out of 4.1 (27%)
- **Number of displaced people:** 2.7 million out of 4.1 (66%)



Community perceptions

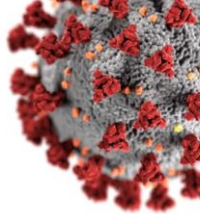
- Not dangerous according to 10% of community v.s 20% of leaders.
- No COVID-19 cases yet in NWS, no need to take precautions.
- First time we have skies with no warplanes and bombs, we can't stay home now!
- We suffered death since 2011 because of war, why bother if few more die?
- Authorities and international community do not care, why should we?



What is being done by our organisation?

The Corona Awareness Team with WHO and UNICEF support is:

- Dispatching awareness teams
- Organizing public campaigns
- Utilizing existing aid networks
- Training aid workers
- Increasing water and soap access
- Improving communication with religious leaders and de facto authorities

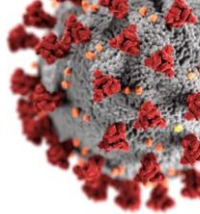


What else is being done?

- Disinfection of public facilities
- Change in aid distribution mechanisms
- Pilot distant learning
- Recreational activities for children
- Enhancing use of social media



What had to be considered for COVID-19 programmes given the fragile context?



- **Weak/destroyed health infrastructure:** A plan to enhance hospital capacity and add community isolation centers
- **Lack of community knowledge:** Enhanced RCCE activities
- **Beaten economics:** A plan to scale up aid in non-health sectors
- **Ideas to improve social distancing.**



What is working well?

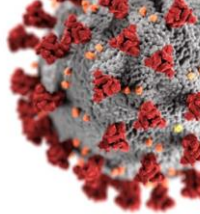
- **Border crossing restriction both within and outside Syria:** main reason for 0 cases in NWS, although Syrian government-controlled area and other parts has 48 cases, and Turkey has about 140,000



UDER

Relief Experts Association

What are key challenges?



- Fragmented authorities and different reactions to COVID-19 threat, more is required from UN negotiators.
- Weak infrastructure.
- Lack of proper housing.
- Lack of prevention material and financial resources.
- No cases of COVID-19 in the area despite testing by EWARN.
- Insufficient community knowledge.



