



Webinar #5

Surge Training: Emergency WASH

11 October 2022

Good webinar behaviour



- Please keep your microphone on mute and your video switched off
- If in need of technical assistance, please send a message to Jessie at +6019 779 9374
- The total length of the webinar will be 1 hour 15 mins (presentation, followed by Q&A session at the end)
- If you have any question, please raise it during the Q&A session at the end or post them in the chat box

Resource persons



Wendy Neoh is the Senior Officer, Emergency WASH based at the IFRC Asia Pacific Regional Office. She works closely with WASH and Health counterparts in Asia Pacific National Societies and IFRC delegations in the region. Her main responsibilities are to strengthen emergency WASH preparedness and response through technical and programme management support.

Before joining the IFRC in 2014, she was managing and implementing developmental WASH programmes in various Southeast Asia and South Asian countries, at a Malaysian-based NGO.



Jessie Lucien is the Health Programme Officer, who is providing technical support for the web platform and the webinar series, as well as managing administrative and financial matters, in relation to the surge training in Indonesia.

She has been providing support to the Health and WASH team in the IFRC Asia Pacific Regional Office since 2013.

Resource speaker



Suvechhya Manandhar is the PMER Coordinator for WASH Division in Nepal Red Cross Society. She has been involved in WASH sector for the last six years. Her main responsibilities are to strengthen WASH in PMER sector and generate reports for different WASH projects.

She has prior experience of working in different departments within the National Society. Suvechhya is a member of the IFRC surge roster.



Hygiene promotion in emergencies

Surge training: Emergency WASH

Learning objectives



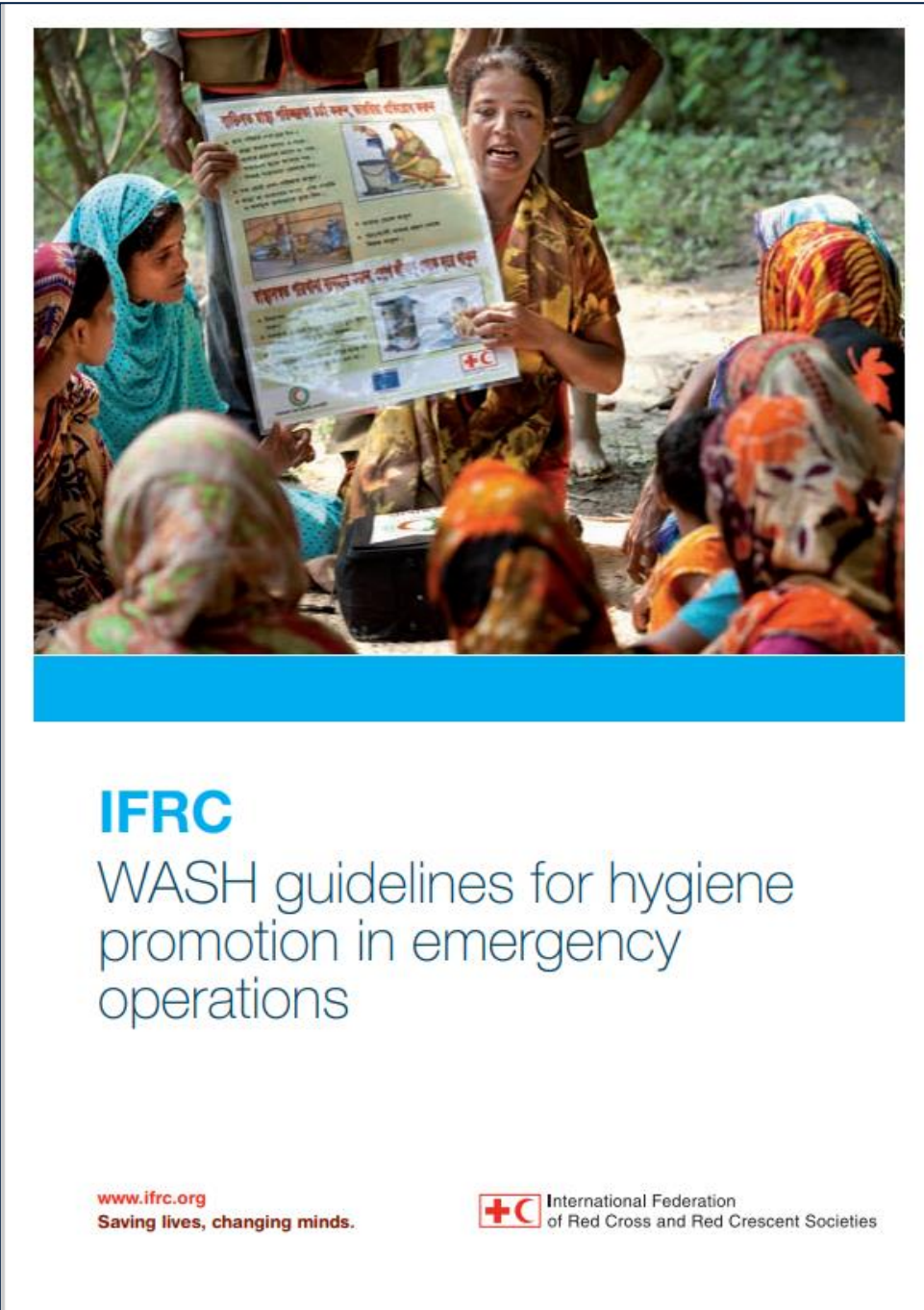
- What is hygiene promotion
- Why do we do hygiene promotion in emergencies
- How do we do hygiene promotion in emergencies

What is hygiene promotion in emergencies?



Based on the IFRC WASH guidelines for hygiene promotion in emergency operations, hygiene promotion in emergency is defined as:

A planned, systematic approach delivered by RCRC staff and volunteers; to enable people to take action to prevent water, sanitation and hygiene-related diseases by mobilising and engagement of the affected population, their knowledge and resources; and to maximize the use and benefits of water and sanitation items and facilities



[IFRC WASH guidelines for hygiene promotion in emergency operations](#)

Hygiene promotion priorities

Risky behaviours  → Good hygiene behaviours

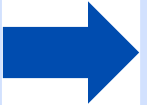
Unsafe excreta disposal



Safe excreta disposal



Not washing hands with soap



Effective hand washing with soap

Unsafe handling of water



Reducing contamination of household drinking water



Why do we do hygiene promotion?

- **Optimal use of hardware facilities**

- Ensure facilities are used in the intended way
- Discussions with users can improve design of facilities
- Systems need to be set up to ensure maintenance of facilities

- **Enable participation and accountability**

- Inculcate a sense of ownership
- As a way to gain beneficiary feedback and to gauge satisfaction



Why do we do hygiene promotion?

- **Linkage with health condition/status**

- Close linkage between health status/condition with HP activities for e.g. link between the practice of hand washing with soap with incidence of diarrheal cases → 50% reduction

- **Facilitate behavioural change**

- Gradual process of working closely with communities
- Building on local knowledge
- Studying and promoting existing beliefs/traditional practices
- Designing appropriate communication tools
- Defining motivation strategies and encouraging practical steps towards positive practices



Behavioural change in emergencies



Can behaviour change happen quickly?

Yes it can!
(when people are enabled to change)

Be realistic of what you can change –
focus on key risky behaviours
KEEP IT SIMPLE AND ACTIONABLE!



Often driven by fear of diseases – may be a strong motivator initially but people often go back to old habits and behaviours

Sphere standards: Hygiene promotion

Hygiene promotion standard 1.1: Hygiene promotion

People are aware of key public health risks related to water, sanitation and hygiene, and can adopt individual, household and community measures to reduce them.

- **Key indicators:**

- % of affected HHs who correctly describe three measures to prevent WASH-related diseases
- % of target population who correctly cite two critical times for handwashing
- % of HHs that store water in clean and covered containers
- ...



Sphere standards: Hygiene promotion



Hygiene promotion standard 1.2: Identification, access to and use of hygiene items

Appropriate items to support hygiene, health, dignity and well-being are available and used by the affected people

- **Key indicators:**

- 2 water containers per HH (10-20L; 1 for collection, 1 for storage)
- 250g of soap for bathing per person per month
- 200g of soap for laundry per person per month
- Soap and water at a handwashing station (1 station per shared toilet or 1 per HH)
- Potty, scoop or nappies to dispose of children's faeces



Sphere standards: Hygiene promotion



Hygiene promotion standard 1.3: Menstrual hygiene management

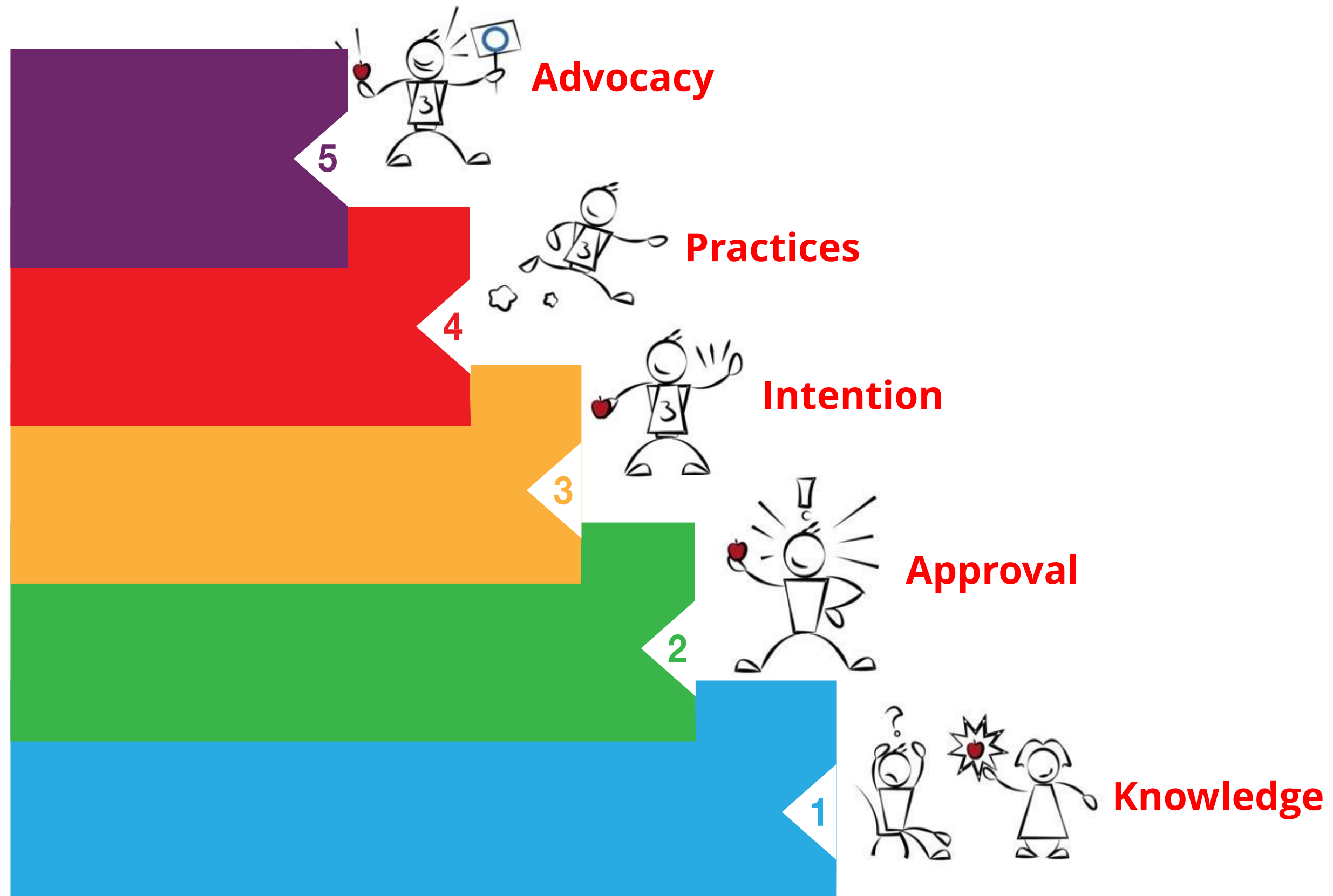
Women and girls of menstruating age, and males and females with incontinence, have access to hygiene products and WASH facilities that support their dignity and well-being

- **Key indicators:**

- % of women and girls of menstruating age provided with access to appropriate materials for menstrual hygiene management
- % of recipients who are satisfied with menstrual hygiene management materials and facilities
- % of people with incontinence that use appropriate incontinence materials and facilities
- % of recipients that are satisfied with incontinence management materials and facilities



Behavioural change communication (BCC ladder)



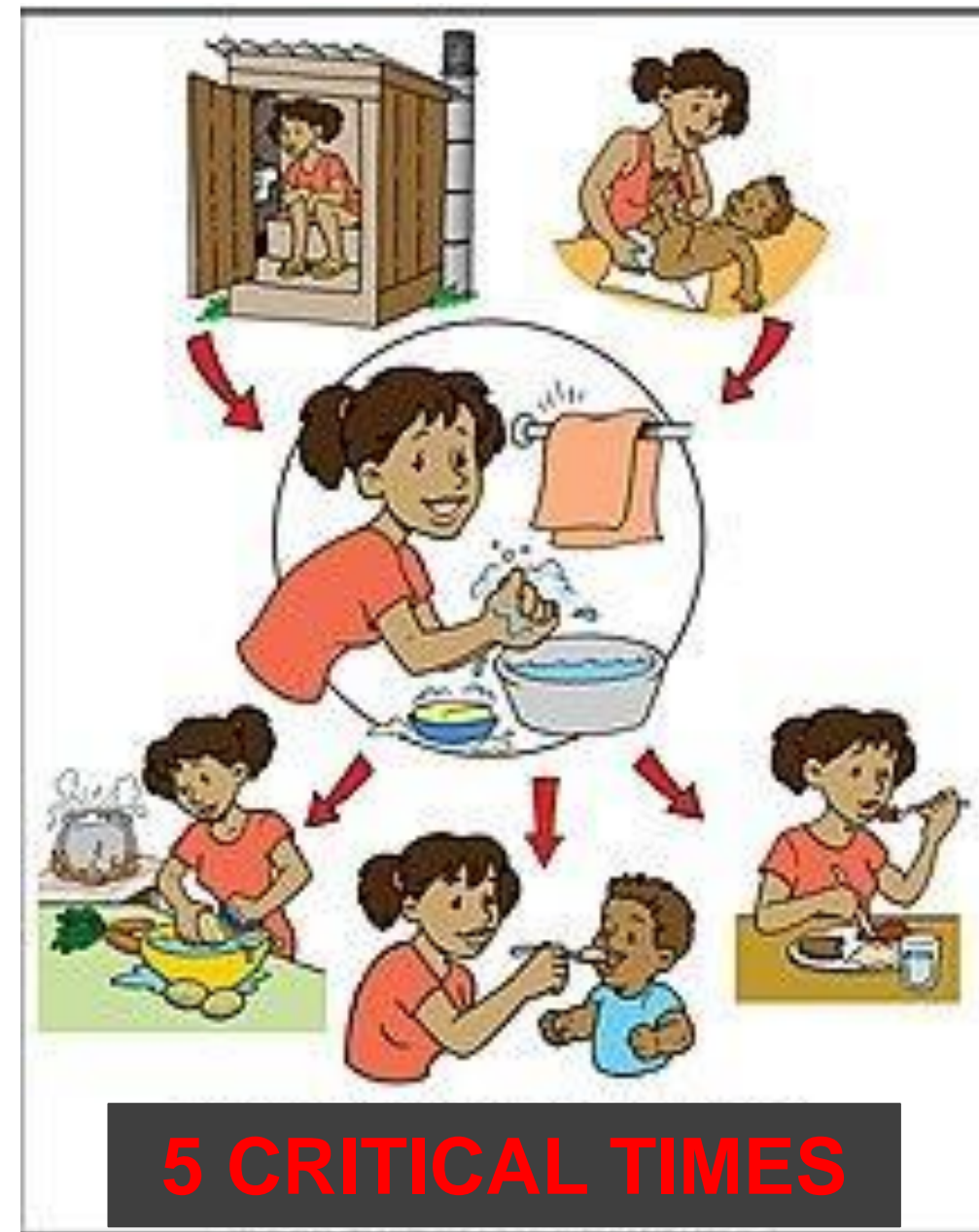
5W2H to consider when planning BCC



- **What** information needs to be communicated?
- **Why** does this information need to be communicated?
- **How** will the information be communicated?
- **Who** will communicate the information and who will receive it?
- **Where** will we give this message?
- **When** should the information be communicated?
- **How often** does the message need to be communicated?

3 attributes of a good BCC message

- Keep the message **simple**
- State a **benefit**
- Include a **call to action**



Common pitfalls in hygiene promotion



Too much focus on...

- 1-way messages without listening to different groups in the population
- Designing promotional materials (e.g., posters, leaflets) before understanding the problems properly
- Personal hygiene

Not enough focus on...

- Practical actions that people can take and how to communicate
- How to address many behaviours and audiences at the same time
- Listening and having discussions or dialogues for people to clarify issues and specific needs
- Appropriate communication methods or tools
- Operation and maintenance of facilities
- Understanding and building on existing local knowledge, beliefs or traditional practices

A brief look at the 8 steps



Step 1: Identifying the problem



Step 2: Identifying target groups



Step 3: Analysing barriers and motivators for behaviour change



Step 4: Formulating hygiene behaviour change objectives



Step 5: Planning



Step 6: Implementation



Step 7: Monitoring and evaluation



Step 8: Review, re-adjust



[IFRC WASH guidelines for hygiene promotion in emergency operations](#)

Integration with other services



HP in the field could be integrated with other activities such as:

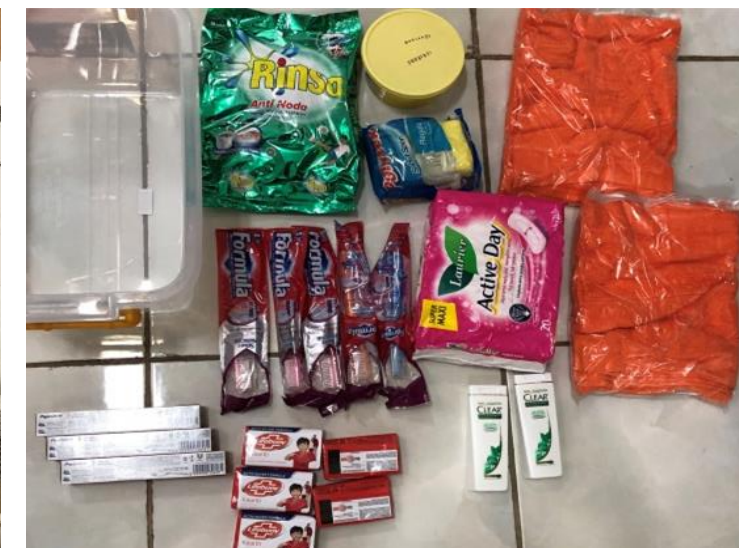
- Psychological social support activities with children and some adults (in urban areas)
- Vector control activities (in rural areas)
- During health services (medical treatment)



Tools for implementation

Using the HP box

- Contains useful items that hygiene promoters can use to rapidly start HP activities
- Items such as coloured papers, megaphone, 'snake and ladder' game, puppets, etc. – the content of HP box should be contextualised to the country



Tools for implementation – community tools



Three-pile sorting



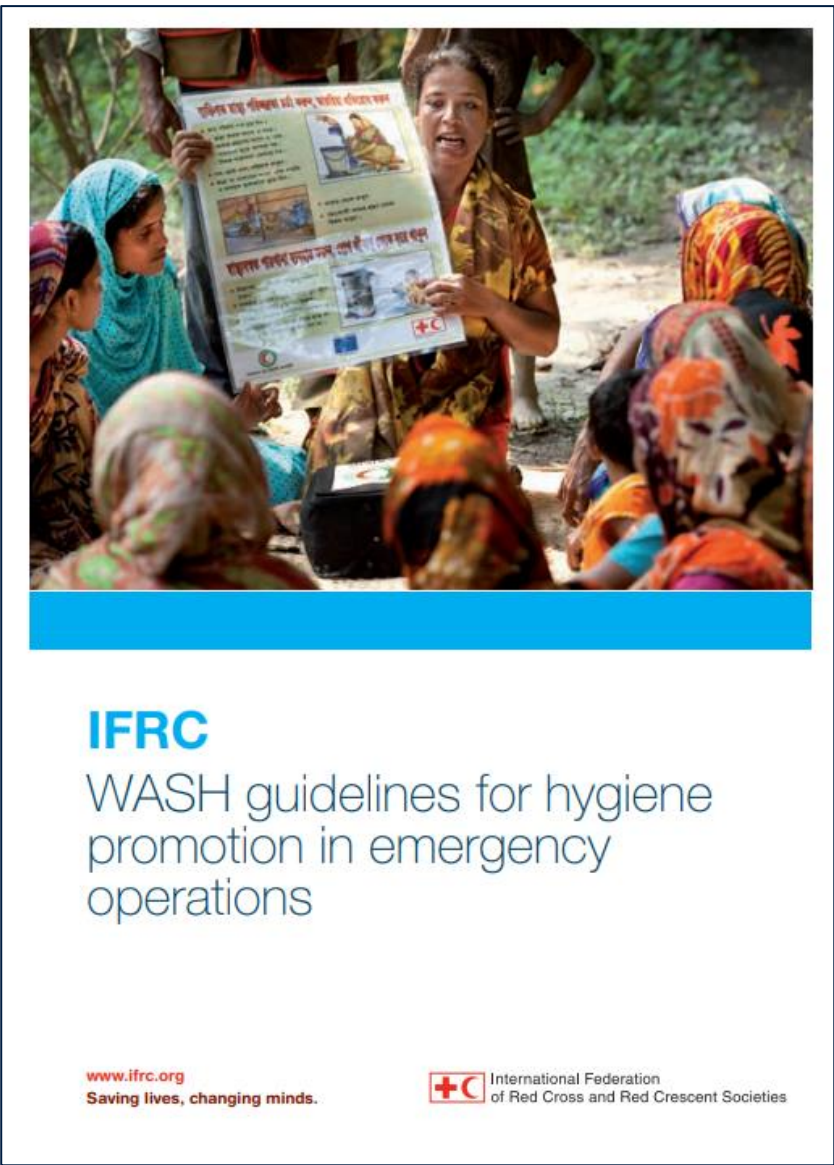
Pocket chart voting



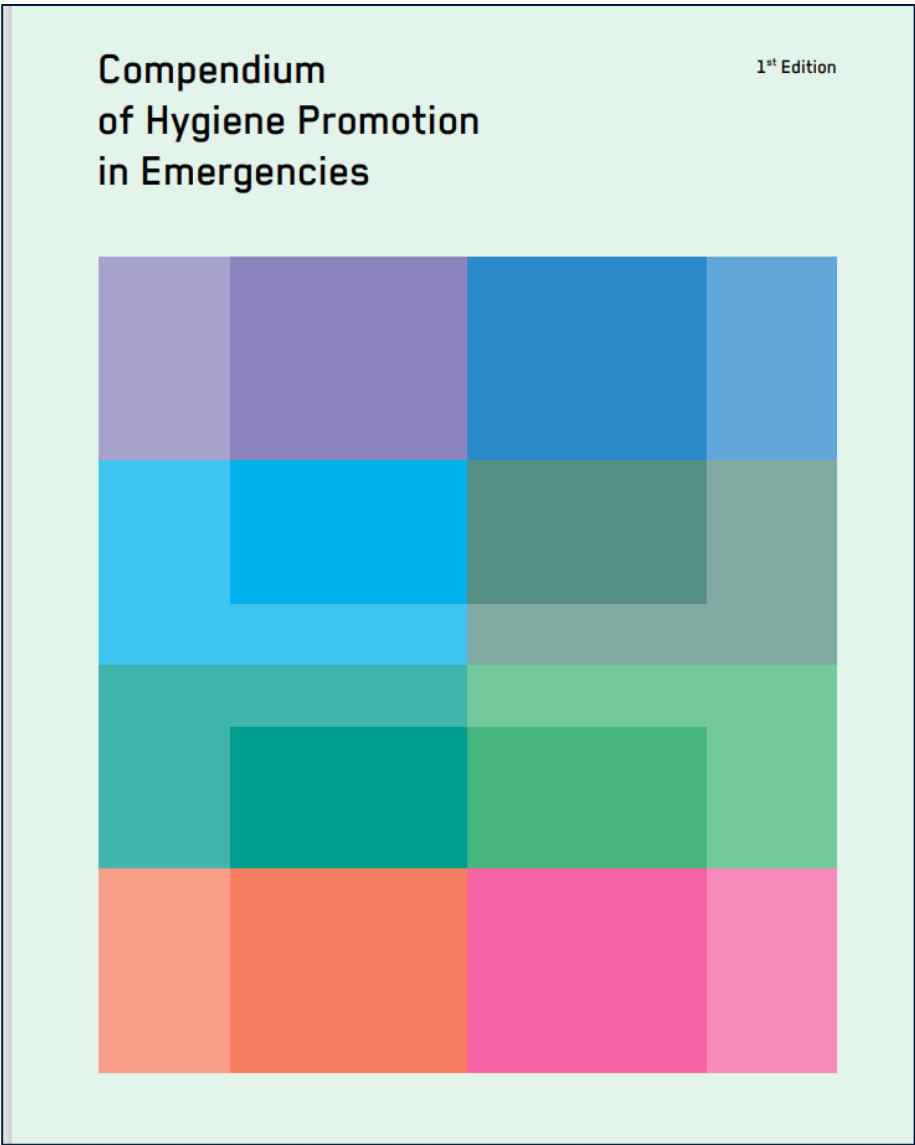
Key HP resources



[Emergency Hygiene Promotion – Watsan Mission Assistant](#)



[IFRC WASH guidelines for hygiene promotion in emergency operations](#)



[Compendium of hygiene promotion in emergencies](#)

Key messages



- **Hygiene promotion:** a systematic approach for people to take action to prevent WASH related diseases drawing on the affected population's knowledge and resources and supporting their mobilisation and engagement
- **Software and hardware activities** need to go hand-in-hand, and with **other related sectors** for e.g., Health and Logistics
- As the HP team, we also need to provide inputs to the overall emergency WASH programme or emergency operations **to avoid gaps/overlapping** with the other active sectors
- We need HP to help **change risky habits**, to ensure WASH facilities are utilised, and promote participation and accountability
- HP messaging needs to be **simple, targeted and calls people to action**
- **Utilize existing resources** – IEC materials, community participatory tools, standard list of indicators and objectives, assessment questionnaires, surveys, etc. – don't reinvent the wheel, instead adapt and contextualize from existing resources



Menstrual hygiene management

Surge training: Emergency WASH

Learning objectives



- To have a basic understanding of what is menstrual hygiene management (MHM)
- To have an awareness of items related to MHM in emergencies
- To know about available resources related to MHM

Some big figures

The world has around **7.7 billion** people in it, of which approximately **3.8 billion** are female
(for every 100 women on the planet, there are 101.7 men)

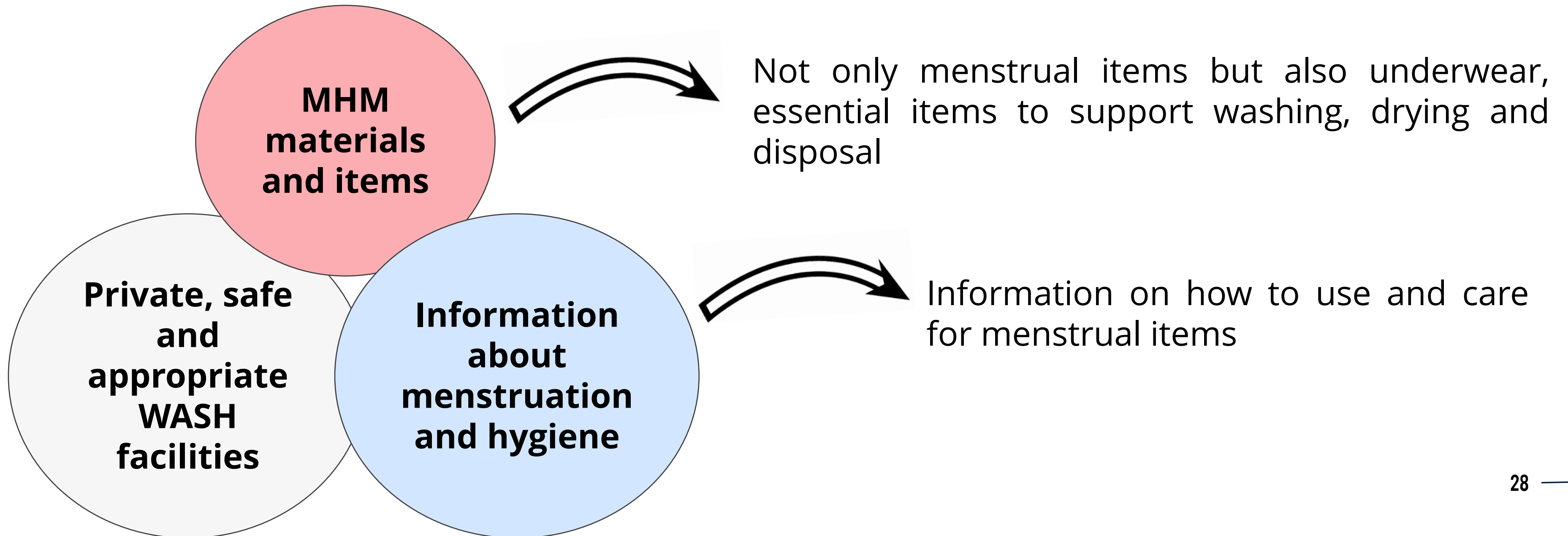
In any one month, approximately **800 million women and girls menstruate**, of which **26 million of them are displaced girls and women**

Over **500 million** women and girls lack adequate facilities for MHM



What is MHM?

- A range of actions and interventions that ensure women and adolescent girls can privately, safely and hygienically manage their menstruation with confidence and dignity.
- A comprehensive, effective MHM response has 3 components:



What are the risks if we don't address MHM?



- **Loss of dignity, embarrassment and physiological stress**
 - Lack of latrines, bathing areas, private washing and drying areas, disposal methods
 - Concern of leaks and smell, unsure how to manage menstruation (particularly young girls)
- **Potential gender-based violence**
 - When girls and women wait for the dark to visit latrines or when there is no safe place to change/dispose pads
- **Irritation/infections**
 - Women with no other options but to use old, dirty or damp cloth to absorb menstrual flow, leading to irritation/infection; some women might also have nothing available to absorb the blood
- **Girls are often forced to stay home from school and fall behind in education**
 - Lack of segregated, private and appropriate sanitation facilities at school.
 - Girls tend to miss anywhere from 10-20% of school days - sometimes, they drop out of school completely

What are the risks if we don't address MHM?



BREAKING NEWS **BREAKING NEWS** **BREAKING NEWS** **BREAKING NEWS** **BREAKING NEWS** **BREAKING NEWS**

Third of girls in South Asia miss school during periods - study

By Annie Banerji, Thomson Reuters Foundation 3 MIN READ f t

NEW DELHI (Thomson Reuters Foundation) - More than a third of girls in South Asia miss school during their periods, often because they lack access to toilets or pads, and many receive no education about menstruation before reaching puberty, a study showed on Tuesday.

The report by charity WaterAid and UNICEF found most countries in the region fell well short of the World Health Organization standard of one toilet for every 25 girls, making it difficult for students to attend school during their periods.

In one district in Nepal there was just one toilet for every 170 girls, it said.

[Third of girls in South Asia miss school during periods - study | Reuters](#)



“If a woman goes inside the family’s home during her period, three things will happen. “A tiger will come; the house will catch on fire; and the head of the house will get sick.”



“My first time was in winter. It was so cold that I had to light a fire to warm myself, but the smoke was so thick and the window so small that I could hardly breathe. So I had to put it out.”

How do adolescent girls and women manage their periods?



Reusable sanitary pads



Reusable sanitary cloth



Disposable sanitary pads



Tampon



Menstrual cup

Effective MHM response: What are the needs?



Materials

- No. of sanitary materials used
- Type of sanitary materials used (also accompanying items such as underwear, soap, etc.)

Design of facilities

- Facilities that ensures privacy, dignity and safety of users
- Facilities that enable proper disposal of sanitary materials and/or washing and drying of sanitary materials

Information

- Proper use/care and disposal of sanitary materials
- Accessibility to preferred sanitary materials

Myths/ Beliefs

- Presence of traditional beliefs/practices that are barriers for women and girls to access facilities, sanitary materials, etc



C. Safe and private with door latch/internal lock

G. A shelf/hook to store/hang belongings

B. Water for users to wash themselves with and to wash menstrual materials

D&E. Waste bin with lid, with clear sign on how to dispose menstrual waste

H. Accessibility to people with mobility issues

A. Adequate nos. of toilets; separated with clear signage from male facilities

I. Light source, inside and outside

F. Walls, door and roof are made of non-transparent materials with no gaps or spaces (small gap above the door could be present to encourage ventilation)

What's in a MHM kit?



MHM Kit A: Disposable pads; **MHM Kit B:** Reusable/washable pads; **MHM Kit C:** Tampons

MHM Kit A: Disposable pads	MHM Kit B: Reusable/washable pads	MHM Kit C: Tampons
Underwear, cotton, not white or light colour (x3)		
Bathing soap, minimum 100 g		
Instructions for use and care		
Plastic bucket with lid, 6-10 L, non-transparent		
Carry bag		
6 packs of disposable sanitary pads - min. 8 pads/pack	At least 6 reusable/washable sanitary pads	Tampon, light flow, box of 10
-	Laundry soap, minimum 200 g/500 ml	Tampon, normal, box of 10
-	Rope, at least 4 m length	
-	Pegs, min. pack of 8	

Key MHM resources



Watsan MissionAssistant

This site ▾ Information and Resources ▾ Emergency WASH ▾ Developmental WASH ▾ **Public Health WASH** ▾ Urban WASH ▾
Cross-Cutting issues ▾ Events ▾ Audiovisual ▾ For WASH staff and delegates ▾

Menstrual Hygiene Management (MHM)

Menstrual hygiene management, or MHM, refers to a range of actions and interventions that ensure that people who menstruate can privately, safely and hygienically manage their menstruation with confidence and dignity. MHM is not only about distributing pads or providing education to girls. Effective MHM actions have three main components: i) MHM materials and supportive items, ii) Private, safe and appropriate WASH facilities, and iii) Information on menstruation and hygiene (including taboos and cultural beliefs).

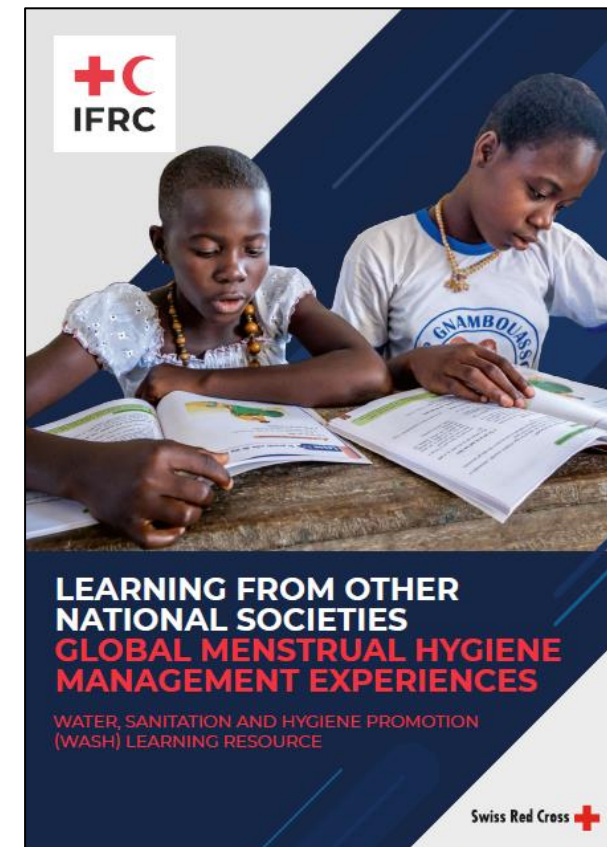


NEW: Have a look at [the new IFRC MHM global case study collection from RCRC National Societies](#), both in emergency and long-term contexts.

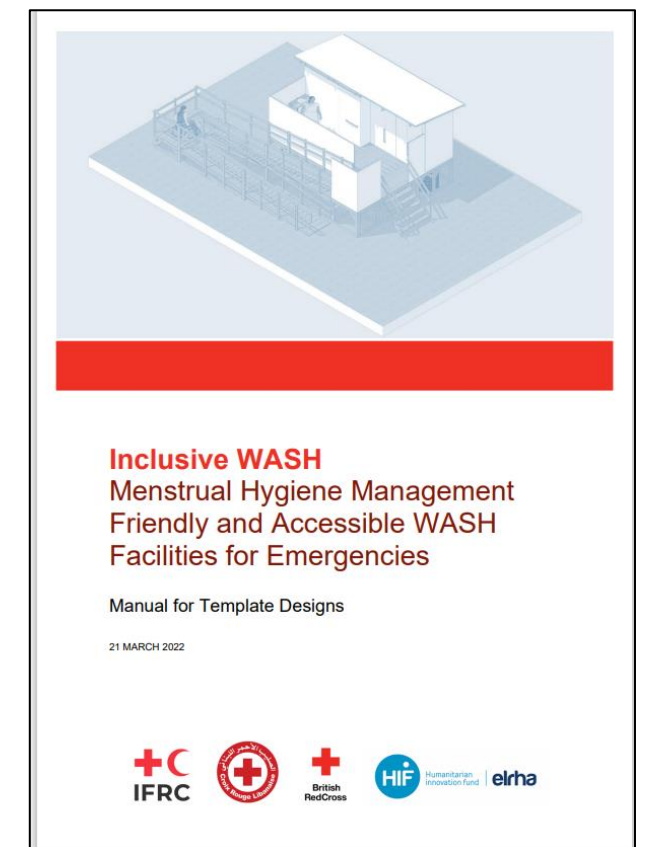
You will find “how-to” recommendations, tips that NS has learned, and tools developed through implementing MHM programs that others can learn from, adapt, and apply in their own MHM actions.



[IFRC Addressing menstrual hygiene management \(MHM\) needs, Guide and tools for Red Cross and Red Crescent Societies](#)



[Learning from other National Societies, Global menstrual hygiene management experiences](#)



[Inclusive WASH - MHM friendly and accessible WASH facilities in emergencies](#)

Key messages



- Women and girls face a **number of challenges around menstruation in emergencies** – lack of sanitary materials, loss of privacy, anxiety and embarrassment, cultural taboos and restrictions, and inadequate facilities.
- If menstrual needs are not addressed, women and girls may **face infections, risk of violence, restricted movement and inability to attend distributions or access services.**
- MHM is a **range of actions and interventions** that ensure women and adolescent girls can privately, safely and hygienically manage their monthly menstruation. The **3 components in a comprehensive, effective MHM response** are:
 - MHM materials and items
 - Private, safe and appropriate WASH facilities
 - Information on menstruation and hygiene
- Always consider **local needs, context and MHM requirements** in planning your MHM response!

Q&A session



What's next



- Link to the dedicated **website** will be emailed by end of today (where you can find resources, webinar recordings, etc.).
- The **quiz** will cover key messages from the webinar presentation (*tip: refer to the presentation slides & listen to the recording if need be, before taking the quiz!*). The quiz will be valid from now onwards until **5pm KL time, 13 Oct 2022**.
- For this last webinar, there will be **15 questions** with a passing mark of **80%**. You will be allowed **2 attempts** for each quiz and for each attempt, you will be given **30 mins** to complete. You will need to pass all quizzes to be eligible to apply for the face-to-face training in November.
- By participating in this webinar, you will be now added to our regular **Health and WASH newsletter mailing list**. If you prefer not to receive these newsletters, please unsubscribe at any time by clicking the link in the newsletter.

What's next



- Finalization of list of eligible participants based on results from the 5 quizzes – to be communicated to your National Society
- Further requirements from eligible participants:
 - Two e-learning courses available on the IFRC Learning Platform
 - Expression of interest form

If you have any questions in relation to the webinar series or the surge training, please drop a line to wendy.neoh@ifrc.org