

Mentimeter Poll Results

Group A: What has been done to adapt WASH hygiene promotion to address COVID-19 and what have we learned about what works and doesn't work?

Use of multiple channels, multiple languages and influencers able to share the messages quickly.

Messaging doesn't work without infrastructure

Rapid coordination using WhatsApp groups with government and civil society to produce materials

Close collaboration and alignment with national taskforce

private sector involvement alongside other actors Table 2

Adapt to cultural food practices to target specific behaviours

Innovative Tech (QR Code), Limited knowledge to the technology

social media WASH BCC materials, some not work in rural context

Careful channel selection to reach the target audience(s) (preferably based on research)

Group A: What has been done to adapt WASH hygiene promotion to address COVID-19 and what have we learned about what works and doesn't work?

sign languages were included to make sure that everyone was getting these messages (inclusive approach)

Include multistakeholders

A lot of people are tired to apply hand washing while the pandemic is not over yet

Marginalized groups tend to be left behind in emergency

Keep messages simple and in line with WHO advice - including dos and don'ts

Installation of inaccessible facilities along with promotional materials

Socialization using hand sanitizer for individual and make public hand washing compartment

Made the messages and facilities to promote Hand hygiene inclusive

Group B: how do we know if our hygiene promotion during COVID-19 led to changes in hygiene behaviour?

from survey and FGD result, access increasing

awareness of the need to wash hands does not always means more handwashing is done

Difficult to measure change in a short time of doing campaign. What can see through observation on their practice and their engagement

observation how long the duration of handwashing in public facilities before and after the promotion

we can see with the pandemic individual sanitation equipment, there are not as much as at the mid year 2020. Not all of the public place still have a good han washing equipment, and not all the people clean their hands with hand sanitaizer anymore

to measure change needs to research at different points in time

Workshop Table Whiteboard Outputs

Q1: Promoting hygienic behaviour during COVID-19 - what has been tried and what works?

TABLE 2

- What types of WASH behaviours were targeted during COVID-19?
- How did we ensure our messages were inclusive and addressed gender and social norms?
- What was changed within the design of WASH behaviour change interventions in response to COVID-19? – messages, approaches?
- What was learnt with regards to inclusive WASH BCC within the COVID-19 pandemic? What will we use next time?

We used more community engaging people and channels (loud speakers)

QR codes, YT channel links were included in the posters so people could find more information about COVID-19

Butan:

sign languages - inclusive

materials ethnic minorities languages

How distribute the washing buckets? Are they distribute to each House or for a group of Household?

What are the risks of water in the buckets getting contaminated - either through long period of storage or not (broken) covered

Bhutan:
- developed and shared BCC materials using Braille, sign language (video), and also materials for intellectual disability and their caretakers
-also targeted the health care workers with the five critical junctures poster

Health messages don't trigger behaviour change. However with COVID-19 at least for handwashing, Covid created a sense of urgency that triggered behaviour change

Lao PDR: INGOs and GoV together with UN agencies . develop materials such as : posters, VDO clip, audio promotion. outreach to villages.
website to access information of COVID19 prevention
-health centres also promote and install additional handwashing station

TABLE 3

Welcome to
Live & Learn
discussion
group for Q2

Q2: Conceptualising and measuring change - how do we know if our hygiene promotion during COVID-19 led to changes in hygiene?

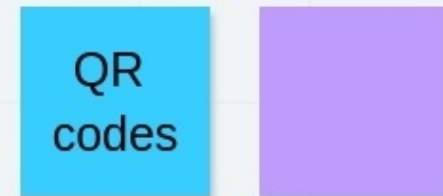
- What types of WASH behaviours were targeted during COVID-19 and where was the most change observed?
- Do we know whether our COVID-19-related BCC approaches were successful? How?
- What modifications required to existing approaches to monitoring and evaluating BCC due to the presence of COVID-19
- What was learnt with regards to monitoring WASH BCC within the COVID-19 pandemic? What will we use next time?

TABLE 4

Q1: Promoting hygienic behaviour during COVID-19 - what has been tried and what works?

Welcome to
Live & Learn
discussion
for Q1

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- What was changed within the design of WASH behaviour change interventions in response to COVID-19? – messages, approaches?
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Q2: Conceptualising and measuring change - how do we know if our hygiene promotion during COVID-19 led to changes in hygiene?

TABLE 5

WASH Behavior target:
- hand washing with soap

Number of household has HW facilities

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Do you think consumption of soap and/or alcohol can be used as a parameter of behaviour change? in the assumption that these are used more frequent than usual - if there is noted increase on consumption?

a very interesting campaign. I wonder if the song caught on nationally

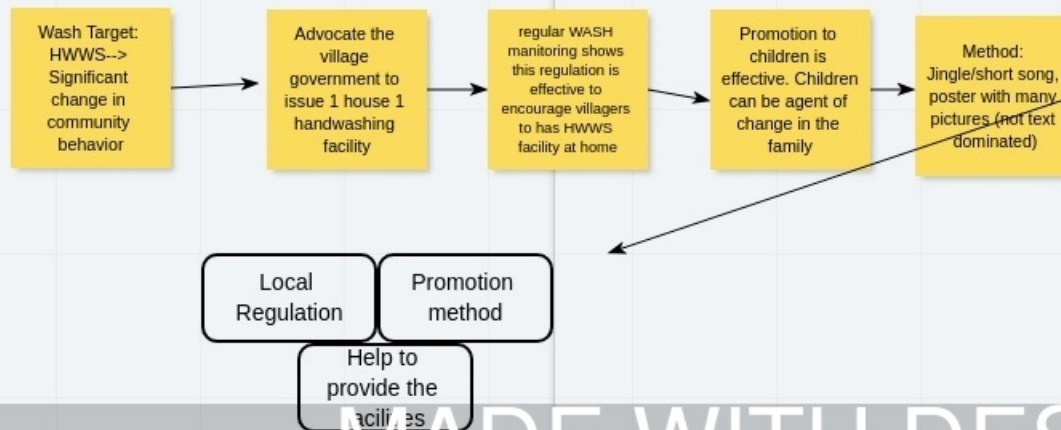


TABLE 6

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Drawing on existing research to inform campaign (e.g. channel selection for rural communities = radio)

If we could do it again... would do formative research to understand target audience better

Handwashing
Social Distancing
Stay Home
Dos and Donts

Translated into different ethnic languages, sign language and use of different media/outreach

Use of influencers and radio production