



POLICY BRIEF | JUNE 2022

Commitments towards hand hygiene: Analysis of National, State and District level programmes, finances, and capacities

INTRODUCTION

In India, 65% of the population has access to basic hygiene services i.e., access to handwashing facility on premises (in household) with soap and water (60% in rural and 82% in urban). 29% of India's total population has access to handwashing facility on premises, however, lack either soap or water in the same (37% of rural and 16% of urban India, respectively). And, around 3% of India's population has access to no handwashing facility on premises (3% of rural and 2% of urban).

Hygiene behaviours prevent diseases and promote good health, and also have long-term economic implications. Hand washing with soap is a recognized cost-effective public health intervention. In India, hand hygiene has been addressed as part of school WASH initiatives, or in the context of health awareness

programmes. The Government of India has also recognised the importance of hand washing, primarily during the Swachh Bharat Mission (Phase 1), especially to handwashing after defecation. The COVID-19 pandemic has highlighted the need for handwashing with soap as critical for the prevention of disease transmission. Likewise, the Government of India has mentioned its importance in the various awareness messages released for Covid-19 prevention.

Hand hygiene promotion (hand washing with soap, particularly) in India, however, so far has been ad hoc in nature – dependent on a specific government programme or as a response to disaster. To reap the social and economic benefits, and prevent public health disasters in the future, there is an urgent need to mainstream hygiene promotion.

In response to the COVID-19 pandemic, UNICEF and WHO had launched a global initiative named Hand Hygiene For All (HH4A) in June 2020, to catalyze and scale up action on hand hygiene.

This initiative aims to mobilise Governments and partners from the developmental, educational and research, private and civil society sectors to strengthen hand hygiene compliance in all settings including schools, health centres, worksites, public settings, especially amongst the poor and vulnerable populations. **In this regard, countries have been encouraged to develop a Country Road map on HH4A based on the global guidance.**

Towards this, there is a need to prioritise hygiene promotion and accordingly allocate budgets. It is important but first to understand the existing financial commitments made towards hand hygiene. An attempt towards the same was made in the project - 'Assessing financial possibilities in existing schemes and capacity requirements for hygiene programming in India'.

The project, funded by the UNICEF India Country Office, carried out by IRC with the support of Centre for Budget and Governance Accountability and Centre for Youth and Social Development, aimed to:

1. Track the budgets allocated for hand hygiene in existing government programmes
2. Conduct a gap analysis and provide recommendations on leveraging existing commitments for hygiene promotion.

A series of small studies were initiated to capture the existing commitments at the national level and at the state level, and the implementation of the same at the district level. The assessment focussed on 5 ministries, namely the Ministry of Jal Shakti (MoJS), Ministry of Health and Family Welfare (MoHFW), Ministry of Education (MoE), Ministry of Women and Child (MoWCD) and the Ministry of Panchayati Raj (MoPR). At the state level, the relevant departments were assessed. The state selected for this study was Odisha.



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KEY FINDINGS

Delivery of WASH services depends on a complex WASH system, made up of multiple actors and factors. The complex WASH system comprises of nine interrelated building blocks. Using the building block lens to understand the hand hygiene system in India, our analysis reveals the following:



POLICY & LEGISLATION

Lack of a comprehensive policy or strategy at the national and state level to promote the adoption of hand hygiene.



PLANNING

There is lack of awareness, especially at the grassroots levels, in terms of utilizing existing mechanisms to further hand hygiene goals. Our district analysis brought forth lack of awareness of the rural local government representatives in utilizing the local government planning mechanism – the Gram Panchayat Development Plans – to plan for hand hygiene



INSTITUTIONS

There is a need for a nodal ministry at the centre and a nodal department at the state level to lead hand hygiene initiatives. There is, additionally, need for capacity building of individuals in the central ministry, state departments and district offices to understand the significance of hygiene and accordingly plan, budget, and implement strategies for its promotion.



FINANCE

While hand hygiene finds mention in several central and state schemes, it is not visible in the central or state budgets, making it difficult to track.



INFRASTRUCTURE

Despite the pandemic, studies on the ground shows key institutions such as health centres continue to lack handwashing with soap infrastructure.



MONITORING

There is need for a regular monitoring mechanism to monitor hand hygiene practice (including infrastructure).

KEY RECOMMENDATIONS (1/4)

POLICY & LEGISLATION

NATIONAL	STATE	DISTRICT
<ul style="list-style-type: none"> / There should be a hand hygiene policy at the national level that comprehensively addresses hand hygiene in various settings. / Further, components for hand hygiene must be incorporated in all schemes of relevant in a phased approach - evolving from an emergency response to it being integrated and mainstreamed as a sustained component. / The national government should establish clear policy that relates to both service availability that facilitates handwashing, including readily available water and soap, and the behaviours required to ensure hand hygiene is common practice in all relevant settings. 	<ul style="list-style-type: none"> / A comprehensive strategy on hand hygiene that cuts across sectors which includes identifying a nodal department for planning and convergence to leverage efforts should be developed at the state level. / State and rural local governments should establish clear policy that relates to both service availability that facilitates hand washing, including readily available water, and the behaviours required to ensure hand hygiene is common practice in all relevant settings. 	<ul style="list-style-type: none"> / N/A

PLANNING

NATIONAL	STATE	DISTRICT
<ul style="list-style-type: none"> / The office plans of all ministries must include designated space for handwashing, with durable and functional handwashing facilities, and display of information, education, and communication to promote handwashing behaviour. 	<ul style="list-style-type: none"> / The flagship programmes of departments of Panchayati Raj, Drinking Water, Rural Development, Health and Family Welfare, Education, and Women and Child Development should have components of hand hygiene planned and budgeted for, on an annual basis, to ensure hand hygiene promotion and the functionality of facilities (creation of new ones where required) 	<ul style="list-style-type: none"> / As panchayats are responsible to ensure hand-hygiene in public and institutional spaces, provisions need to be made to capacitate the Panchayati Raj Institutions to include hand hygiene component, including promotion and infrastructure, into the Gram Panchayat Development Plan process and allocate budgets accordingly. / The line departments should provide the support required for this to be implemented and monitored.

KEY RECOMMENDATIONS (2/4)

INSTITUTIONS

NATIONAL	STATE	DISTRICT
<ul style="list-style-type: none"> / The national government should assess existing capacities with respect to hand hygiene interventions and strategies, identify gaps and develop capacity-building strategies based on the rigorous application of best practice. / Further, convergence amongst the Ministries to leverage hand hygiene interventions in respective schemes must be increased. Improved convergence with a possibility to share similar responsibilities can enhance existing schemes on hand hygiene interventions. 	<ul style="list-style-type: none"> / State and rural local governments should assess existing capacities with respect to hand hygiene interventions and strategies, identify gaps and develop capacity-building strategies based on the rigorous application of best practice. / Further, convergence amongst the Departments to leverage hand hygiene interventions in respective schemes must be increased. Improved convergence with a possibility to share similar responsibilities can enhance existing schemes on hand hygiene interventions. 	<ul style="list-style-type: none"> / Gram Panchayats should be provided guidance on incorporating measures to improve hand hygiene (infrastructure and behaviour change) in the Gram Panchayat Development Plans, and on utilization of Panchayat funds for the same. / Gram Panchayats, additionally, need to be provided adequate guidelines/instructions on the placement of hand hygiene facilities, taking into consideration long term requirements, beyond the pandemic. / Trainings on hand hygiene should go beyond Covid-19 response and be included in the manuals of the duty bearers and functionaries on a regular basis. Further, this may be included in SBM II, which looks at ensuring the overall cleanliness of a village. / Inclusive channels of communication should be adopted to strengthen promotion of hand hygiene. IEC material should be available in vernacular languages, and formats appropriate for children with disabilities. Appropriate nudges in the communication, and in the planning of hand hygiene (location) need to be considered. / To promote hand hygiene at the community level, an approach of convergence can be adopted such that the ground level staff of different departments are involved in spreading awareness on hand hygiene.

KEY RECOMMENDATIONS (3/4)

\$ FINANCE

NATIONAL	STATE	DISTRICT
<ul style="list-style-type: none"> / The Union government budget should show the hand hygiene component in the schemes across Ministries to be able to track and monitor the budget in case there are any issues of utilization. Budgets for hand hygiene should include costs of keeping the facilities functional as well as information, education and communication products to promote hygiene behaviour. / The ambit of Swachhta Action Plan should be widened to include hand hygiene within the schemes of the Ministries. / The 15th Finance Commission guideline recommending 60% of funds allocated to rural local bodies on water and sanitation schemes should be extended to include promotion of hand hygiene as well. / Further, the national government should seek ways to ensure public spending has the maximum impact possible and stimulates investments from households, private sector and CSR funds. 	<ul style="list-style-type: none"> / Hand hygiene interventions should be reflected in the State government budget. / There should be transparency in state budgets so that hand hygiene components are visible, can be tracked and monitored in case there are any issues of utilization. Budgets for hand hygiene should include costs of keeping the facilities functional as well as information, education and communication products to promote hygiene behaviour. / Further, the State government should increase budgetary allocations for hand hygiene across schemes and programmes in the social sector, especially the Departments of Health and Family Welfare, Education and Women and Child Development. / Additionally, an assessment of the IEC budgets – tracking the trends in allocation, expenditure, and nature of expenditure – should be conducted. The assessment should include an analysis of bottlenecks and recommendations for trouble shooting. The cost of such an assessment should be incorporated in the IEC component. / The state government should seek ways to ensure public spending has the maximum impact possible and stimulates investments from households, private sector, and CSR funds. 	<ul style="list-style-type: none"> / Budgets for hygiene promotion must include costs to increase access to and functionality of handwashing facilities, and information, education and communication products to encourage appropriate use of the same. / Gram Panchayats must utilize the Central Finance Commission grants, 60 percent (can be increased to 70 per cent depending on the need) of which needs to be spent on Water, Sanitation and Hygiene, to provide hand-washing facilities in public places. A communication (advisory, order) should be issued from the state department for panchayati raj to reiterate that the 60% of the funds can also be used towards hand hygiene.

KEY RECOMMENDATIONS (4/4)

INFRASTRUCTURE

NATIONAL	STATE	DISTRICT
<ul style="list-style-type: none"> / To encourage widespread adoption of good hand hygiene behaviour, offices of all ministries must lead with example. Thus, they must ensure that the offices are equipped handwashing facilities (durable, functional and with grey water management) and information, education, and communication material to encourage use. / The national government should encourage innovation, particularly within the private sector to roll out hand hygiene for all, in all settings. This can be done with existing industry and academic institutional partnerships, like FICCI, etc. 	<ul style="list-style-type: none"> / The state recognizes the need to converge the activities of the nodal department with that of department of skilling to ensure a steady supply of skilled entrepreneurs and personnel for creation and maintenance of handwashing facilities. 	<ul style="list-style-type: none"> / There should be functional hand hygiene facilities (including grey water management) in all institutions, such as primary healthcare centres, anganwadi centres, etc. The maintenance cost of hygiene infrastructure in institutions needs to be included in the maintenance grant of the institution. The maintenance grant may need to be revised for more budget allocation. / The line department at the district may link activities with the Industrial Training Institutes to ensure availability skilled entrepreneurs and personnel to meet the creation and maintenance needs.

MONITORING

NATIONAL	STATE	DISTRICT
<ul style="list-style-type: none"> / The national government should address the need for collecting consistent data on hand hygiene in order to monitor and hence inform decision-making and make investments strategic. The data should be aligned to feed into the reporting for the Joint Monitoring Programme. <p>A comprehensive monitoring framework for can be adopted to strengthen and update existing monitoring systems and surveys, such as the National Sample Survey, National Family and Health Survey, etc.</p> <p>There should be requirement at the national level for regular hand hygiene data collection and consolidation at the district level, to inform decision-making and strategic investments.</p>	<ul style="list-style-type: none"> / Monitoring of hand hygiene activities within the schemes should be done so as to ensure that outcomes on hand hygiene are met. / State along with the local rural governments (PRIs) should address the need for collecting consistent data on hand hygiene to monitor and inform decision-making and make investments strategic. This data should be available in the public domain. 	<ul style="list-style-type: none"> / The monitoring of the hand hygiene facilities (including access and functionality of facilities) and behaviour and practice of using the facilities at the Gram Panchayat level need to be regularly captured and consolidated by the respective Districts. This data should be made publicly available and guide annual planning, budgeting for hand hygiene, as required.

REVIEWED DOCUMENTS OF THE FOCUS MINISTRIES OF THE GOVERNMENT OF INDIA

I. Ministry of Jal Shakti

1. Guidelines for Swachh Bharat Mission (Gramin), 2019.
2. Operational Guidelines for the implementation of Jal Jeevan Mission (Har Ghar Jal), 2020.
3. Manual: IEC for ODF Plus, Swachh Bharat Mission, 2021.

II. Ministry of Health & Family Welfare

1. Indian Public Health Standards (IPHS) Guidelines for Sub-Centres, Primary Health Centres, Community Health Centres, Sub-District/Sub-Divisional Hospitals (31 to 100 Bedded), District Hospital (101 to 500 Bedded), Revised 2012.

III. Ministry of Education

1. Samagra Shiksha, An Integrated Scheme for School Education, Framework for Implementation, 2021.
2. Guidelines of the National Programme of Nutritional Support to Primary Education,

2006 (Mid-Day Meal Scheme).

3. Circular- CBSE/DIR(ACAD)/2021, Cir. No. Acad-99/2021, October 12, 2021, Celebration of Global Hand Washing Day (GHD) on 15th October 2021.
4. Guidelines on Food Safety and Hygiene for School level kitchens under Mid-Day Meal Scheme, 2015.

IV. Ministry of Women & Child Development

1. The Report of the Committee for Analysing Data of Mapping and Review exercise of Child Care Institutions under the JJ (Care and Protection of Children) Act, 2015 and Other Homes, 2018.
2. ICDS Mission- The Broad Framework of Implementation, 2011.

V. Ministry of Panchayati Raj

1. People's Plan Campaign for GPDP 2021-22
2. Framework for Implementation of Rashtriya Gram Swaraj Abhiyan

REVIEWED DOCUMENTS OF THE FOCUS DEPARTMENTS OF THE GOVERNMENT OF ODISHA

I. Department of Panchayati Raj and Drinking Water

1. Guidelines for Implementation of the scheme, 'Ama Gaon, Ama Bikash', 2018

II. Health and Family Welfare

1. Record of Proceedings 2021-22, National Health Mission, Odisha

III. School and Mass Education

1. Outcome Budget, 2019-20, School & Mass Education Department Government of Odisha

2. Activity Report for 2019-22, School & Mass Education Department, Govt. of Odisha
3. MDM, Annual Work Plan & Budget, 2021-22, School & Mass Education Department, Govt. of Odisha

III. Women and Child Development & Mission Shakti

1. Training and Awareness Generation material on Hand Hygiene, Department of Women & Child Development, Mission Shakti, Govt. of Odisha

RESOURCES

1. UNICEF, 2021. Hand Hygiene for All Country Roadmap Guidance Document. Available at <https://globalhandwashing.org/wp-content/uploads/2021/09/Guidance-to-HH4A-country-roadmaps-.pdf>

2. UNICEF, 2021. 2021 Factsheet: GLOBAL HANDWASHING DAY. Available at <https://globalhandwashing.org/wp-content/uploads/2021/08/GHD-2021-Fact-Sheet.pdf>

3. UN Water and WHO, 2021. Hygiene: UN-Water GLAAS findings on national policies,

plans, targets and finance. Available at <https://www.unwater.org/app/uploads/2020/06/GLAAS-hygiene-highlight-2020.pdf>

4. WHO and UNICEF, 2021. State of the World's Hand Hygiene: A global call to action to make hand hygiene a priority in policy and practice. Available at <https://www.unicef.org/media/108356/file/State%20of%20the%20World%E2%80%99s%20Hand%20Hygiene.pdf>

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