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# **CLEAN HANDS FOR ALL: A TOOLKIT FOR HYGIENE ADVOCACY**

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**Global Handwashing Partnership, 2018.**

**Prepared by the Global Handwashing Partnership Secretariat with design by FHI 360's Design Lab.**

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## SECTION

## 1

# INTRODUCTION

## Welcome to the Global Handwashing Partnership's Handwashing Advocacy Toolkit!

This toolkit includes tools and resources to help hygiene advocates ensure that handwashing with soap is recognized as critical to health and development. It is designed to help users develop the ideas, tools, and messages to:

- Advocate to specific audiences to take action to promote and facilitate handwashing;
- Integrate handwashing messaging into existing advocacy campaigns and messages; and
- Engage others to advocate for handwashing.

This toolkit includes an overview of why hygiene matters in the context of the Sustainable Development Goals (SDGs), a short advocacy introduction, and suggestions on audiences, delivery mechanisms, and objectives for hygiene advocacy. It also includes tips for social media, meetings with policy makers, and other common advocacy activities.

This toolkit builds on existing guidance on how to develop effective advocacy plans, notably UNICEF's [Advocacy Toolkit](#). We encourage you to adapt the messages and templates in this toolkit to best fit your audience.

In this toolkit, we focus on advocacy directed at decision makers who have the power to improve the enabling environment for handwashing with soap. This includes financing, infrastructure, policy, and other factors that make hygiene behaviors possible. This toolkit does not focus on direct efforts to increase handwashing rates through public information, educational campaigns, or behavior change.

The Global Handwashing Partnership (GHP) is a network of organizations working together to promote handwashing with soap. We recognize hygiene as a pillar of international development and health, and as an effective and affordable 'do-it-yourself vaccine' that prevents infections and saves lives. Our partners include leading organizations working in the WASH, health, nutrition, education, economic development, and global equity sectors.

## QUESTIONS?

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If you have questions about this toolkit, or suggestions to improve or adapt it, please contact us at [contact@globalhandwashing.org](mailto:contact@globalhandwashing.org).

## SECTION

## 2

## BACKGROUND: HYGIENE AND THE SUSTAINABLE DEVELOPMENT GOALS

### Why Hygiene Matters

The Global Handwashing Partnership focuses on handwashing with soap as a critical element of hygiene to achieve the SDGs. Handwashing with soap improves health and saves lives by preventing infections; and positively affects health, nutrition, education, equity, and the economic development of countries.<sup>1</sup>

Access to handwashing facilities, as well as handwashing behaviors, vary widely between and within countries. Vulnerable and marginalized populations are often least likely to have access to hygiene facilities and practices. Even when handwashing stations are available, proper handwashing with soap is still practiced inconsistently. Poor hygiene results in children and adults suffering from preventable diseases like diarrheal diseases and foodborne illness,<sup>2</sup> people missing school or work, and more.



### CRITICAL TIMES FOR HANDWASHING WITH SOAP

*Hands should be washed with soap after using the toilet; after cleaning a child's bottom (or any other contact with human excreta, including that of babies and children), and before any contact with food, such as before eating or before preparing food. Children and adults should also wash their hands after playing or working outside, or touching animals and their dwellings.*

Source: Global Handwashing Day  
2017 Planner's Guide

Hygiene matters not only for health; good hygiene removes barriers to education, economic opportunity, and equity.

### The Sustainable Development Goals

In 2015, the United Nations adopted the Sustainable Development Goals (see figure 1).<sup>3</sup> The goals cover 17 themes, but all are connected. Progress in one area can support the achievement of other goals; but a lack of progress towards one goal can prevent others from being achieved.

Hygiene is included in Goal 6: *Ensure access to water and sanitation for all*. Within this goal, Target 6.2 reads: *by 2030, achieve access to adequate and equitable sanitation and hygiene for all, and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations*. This target will be measured by Indicator 6.2.1: *Proportion of population using safely managed sanitation services, including a hand-washing facility with soap and water*.

The presence of hygiene in the SDGs marks only the beginning of a process to ensure that handwashing is universally accessible and practiced. When the SDGs were adopted in 2015, more than 648 million people did not have access to clean water, 2.3 million had no safe toilet facility, and 1,400 children were dying every day from diarrheal diseases.<sup>4</sup> To learn more about the role of hygiene in attaining the SDGs, read our [Advocacy Brief](#).

Now, governments, their partners, and stakeholders are working to be sure that where everyone has access to improved water and sanitation, and can practice good hygiene.

The SDGs provide an unprecedented platform to promote hygiene and to drive action. At the same time, the ambitious SDG agenda requires advocates to drive progress within countries towards better hygiene, and to engage a wide range of audiences in understanding hygiene’s role in health, economic growth, education, nutrition, and more.

Figure 1: Sustainable Development Goals



## SECTION

## 3

## HYGIENE ADVOCACY OVERVIEW

### Advocacy Essentials

Advocacy employs information and messages to make a desired decision or action more likely.<sup>5</sup>

Advocates use their voices to change the world by influencing others to act. UNICEF defines advocacy as: *“The deliberate process, based on demonstrated evidence, to directly and indirectly influence decision makers, stakeholders and relevant audiences to support and implement actions that contribute to the fulfillment of children’s and women’s rights.”*<sup>6</sup>

For the GHP, key descriptions of successful advocacy include:

- **Targeted and action-oriented:** Advocates seek to influence a specific audience to take a specific action, and plan their methods accordingly.
- **Deliberate:** Good advocacy requires planning, coordination, and measurement.
- **Evidence-based:** Advocates base recommendations and requests on evidence generated through research.
- **Collaborative:** Advocacy is most effective when organizations, individuals, and other groups work together.

Advocacy allows civil society organizations, community groups, and others to influence elements of the enabling environment that fall outside their direct control. Through advocacy, groups can use their influence to have an impact on far more people than they could reach alone. Advocacy can engage decision makers to remove or remove barriers related to policy, investment, and infrastructure; these in turn improve health and development.

### Advocates and Messengers

The Global Handwashing Partnership believes that anyone can be an advocate. Being an effective hygiene advocate does not always require special training or having the term ‘advocacy’ in your job title. An effective advocate is someone who is credible and familiar with the issue at hand, has a strong passion for the issue, and has a story to tell.

Advocacy messages should be delivered by people who are influential to your target audiences. Civil society has an important role to play in leading advocacy and partnering with governments to drive progress, promote accountability, and maintain transparency. Community groups, professional associations, and organizations, NGOs, school or faith-based groups, etc. can all lead advocacy. The private sector can, and should, play a role in advocacy by using their influence to push changes that are beneficial not only for their businesses, but for the health and development of the communities they serve.

Advocacy does not have to be performed by one individual, one organization, or one group. In fact, partnerships with other organizations or collaboration between sectors can strengthen advocacy.

## Audiences

Hygiene advocates should direct their work towards decision makers—people who have the power to make a positive change. This typically includes policy makers, as well as other decision makers like school administrators, healthcare facility managers, and local officials.

Governments are a major audience for hygiene advocacy, and they have a critical role in leadership and accountability for reaching the SDGs. However, it's important to remember that the SDGs won't be achieved by governments alone. Decision makers in the private sector, in communities, and in other areas must be engaged as well. Examples of audiences for hygiene advocacy include:

- Decision makers and associations in health systems, schools, workplaces, etc.;
- Employers, unions, or businesses stakeholders;
- Policy makers on national, provincial, district, and local levels;
- Managers and implementers of programs related to hygiene.

## Objectives for Hygiene Advocacy

Hygiene advocacy focuses on influencing an audience to take a specific action to improve hygiene, and in turn improve health and quality of life. Here are some examples of actions that decision makers can take to improve hygiene:

- Ensure that people have access to handwashing facilities with soap and water in public places like schools and in health facilities, at points of care, in or near sanitation facilities, and where food is prepared or eaten.<sup>7</sup>
- Include efforts to improve hygiene into national policies, indicators, or strategic plans, with an emphasis on using effective behavior change approaches. This includes efforts related to water, sanitation, health, nutrition, or other areas.

- Provide education about handwashing to the public and to leaders, such as teachers, health workers, and employers.
- Address inequities within populations and ensure that vulnerable populations are not left out of efforts to improve hygiene.

For additional information on advocacy objectives for schools, healthcare facilities, and workplaces, as well as sample messages, please see Annex 4: *Hygiene advocacy in key settings*.

## Overcoming Financing Gaps

A 2015 World Bank Report found that historic levels of investment would need to be tripled to cover the capital costs of basic coverage of water, sanitation, and hygiene for SDG 6. This includes approximately \$2 billion for hygiene to meet the SDG target. In many countries and regions, particularly rural areas, a much larger increase would be needed.<sup>8</sup> Significantly larger investment is needed to cover long-term costs like maintenance, service delivery, and behavior change efforts. Without those investments, covering capital costs will have only a short-term effect.

Despite most governments having plans to reach low-income or otherwise vulnerable communities, only about 25% of WASH financing has been spent on expanding basic WASH coverage to those communities.<sup>9</sup> Awareness and commitment-making alone will not achieve success. Nearly all actions that will drive progress in handwashing require financing.



Advocates have several roles to play in overcoming financing gaps. These include:

- Pushing for investment in handwashing, and ensuring efficiency of existing investments, including for populations that are more difficult or costly to reach;
- Advocating for non-traditional funding models where appropriate, such as hygiene funds that combine public and private funding;
- Working with all levels of government to develop finance strategies and budgets that allocate resources for monitoring outputs and results;
- Mobilizing participation from communities, the private sector, and other stakeholders to develop affordable solutions, share cost burdens, and ensure efficiency in investments.



Photo by Jessica Scrantion

## SECTION 4

## THE CASE FOR HYGIENE: KEY EVIDENCE

The case for hygiene as a human right, and a critical part of the success of the SDGs, is strong. The evidence in this section lays the groundwork for an effective argument for hygiene.

### Handwashing with soap saves lives and protects health

- Evidence shows that better handwashing practices could cut the rate of acute respiratory infections (including pneumonia) by **more than 20%**,<sup>10</sup> and diarrheal diseases by nearly **50%**.<sup>11</sup>
- Evidence shows that hygiene is as important as water and sanitation in preventing diarrhea.<sup>12</sup>
- Handwashing with soap can help reduce undernutrition, which contributes to **73%** of diarrheal deaths each year.<sup>13</sup> Handwashing with soap and clean drinking water could reduce the loss of nutrients through diarrhea and reduce stunting in children under 5 by up to **15%**.<sup>14</sup>
- Proper hand hygiene compliance can lead to a **40% reduction** in healthcare associated infections.<sup>15</sup>

### Current handwashing practices are far below what they should be

- Currently, national averages of access to soap and water in households range from **below 10%** to nearly **100%**.<sup>16</sup>
- To achieve SDG 6, a report of **140 countries** found that in those countries alone, **4.8 billion** more needed access to a place to wash their hands.<sup>17</sup>
- It is estimated that **19%** of people globally wash their hands after contact with excreta.<sup>18</sup>

- On average, only **40%** of healthcare workers or fewer adhere to recommended hand hygiene practices.<sup>19</sup>

### Each year, millions of deaths and illnesses occur that could be prevented through proper handwashing

- Healthcare-associated infections affect an average of **1 in 10 patients** each year.<sup>20</sup>
- In 2015, More than **500,000** children under five died from diarrhea, and **900,000** died from pneumonia.<sup>21</sup>
- Every year, **1.4 million children** do not live to celebrate their fifth birthday due to diarrhea and pneumonia.<sup>22</sup> Many of these deaths could be prevented through handwashing with soap.
- It is estimated that handwashing with soap could save approximately **230,000** lives per year.<sup>23</sup>

### Handwashing leads to educational, economic, and equity benefits

- Diarrhea is responsible for children missing **272 million** schooldays each year. Handwashing with soap at critical times could help reduce school absenteeism **40-50%**.<sup>24</sup>
- Removing barriers to good hygiene can result in better health, stronger economies, more effective education, and a more equitable world.<sup>25</sup>

### Investments in handwashing lead to a high return

- An investment of **\$3.35** in handwashing promotion brings the same health benefits as **\$11 investment** in latrine construction, **\$200 investment** in household water supply, and an investment of thousands of dollars in immunizations.<sup>26</sup>

- A 2013 study indicated that in some developing countries, diarrhea and pneumonia incur costs of more than **\$12 billion per year**, while estimated a national handwashing program would be less than **\$100 million** and bring **\$2-5 billion in savings**.<sup>27</sup>
- National handwashing behavior change programs have been estimated to provide **up to a 92-fold** potential return on investment.<sup>28</sup>
- Hand hygiene interventions have been shown to be effective in reducing resistant infections in hospitals; one model estimated that each increase of **1%** in hand hygiene compliance could save nearly **\$40,000** in MRSA-related healthcare costs per year.<sup>29</sup>

For many more facts to support your advocacy work, visit the Handwashing Facts section of the [Global Handwashing Day Planner's Guide](#).



## HYGIENE IN THE RIGHT TO WATER

When advocating for hygiene, data and evidence on the health and economic benefits of hygiene are important tools. However, it's important to remember that hygiene is also a basic right. Hygiene is included in the human right to water and sanitation, which affirms that every person has the right to water for personal and domestic uses, including hygiene. Read more about the human right to water and sanitation [here](#).

## Developing advocacy messages

As an advocate, you should aim not only to inform your audience of the importance of hygiene, but to inspire, motivate, and drive action. No single message will be effective for every audience, and some audiences may need multiple messages. To create strong advocacy messages, consider what best responds to the needs of your community, including:

- the situation you want to change,
- what will motivate your audience, and
- how messages will be delivered.

Messages will be most effective when your audience can see a role for themselves, a specific action they can take, and a clear result.

You may also need to adapt these messages for the delivery mechanism(s) you plan to use, and to link them to the actions or policies you want your audience to take. Some formats will allow you to make more complex arguments, while others will require you to develop short messages that are easy to absorb.



## TAILORING SAMPLE MESSAGES: CONSIDER ADDING THESE ELEMENTS

- Health, education, and finance data from your country
- Success stories from your community
- Findings from studies being conducted in your area
- Statements from local influencers and supporters
- Pictures of good or bad handwashing practices and of enhanced or unmaintained facilities
- Connections to current events, relevant strategies, and known policy priorities

*Adapted from [GHD Planner's Guide](#)*



## SECTION 5

## TOOLS AND DELIVERY MECHANISMS FOR HYGIENE ADVOCACY

This section provides examples of tools for hygiene advocacy, and presents samples you can draw from to get your messages to your audiences. These tools are designed to work together. For example, a social media campaign paired with an advocacy brief can create both around an issue and share analysis with decision makers. The materials in this toolkit are not exhaustive, and may need some adaption to be relevant to your work, but aim to spark creative ideas for your hygiene advocacy.

### Outreach to Decision Makers

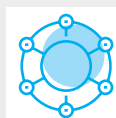
One of the most effective ways to make your voice heard is to speak directly to decision makers, either in writing, through communication channels (e.g., media outlets), or in person. National-level decision makers, such as those within ministries of planning, finance, WASH, public health, and education are important audiences, as are their regional-, provincial- or district-level counterparts.

When meeting or communicating with policy makers, it is important to provide evidence-based information, action-oriented solutions, and practical advice. Use persuasive arguments, and support them with solutions (when possible, make a specific policy request) and existing initiatives. Remember to keep your communications focused on your key point, and easily understandable, especially for individuals unfamiliar with the subject matter. For many policy makers, information about the return on an investment in hygiene, or the cost of failing to invest in hygiene, is particularly important.

Other examples of effective ways to communicate with policy makers include publishing policy briefs, convening expert discussion groups or consultations, and circulating sign-on letters or petitions. Here are examples of materials useful to communicate with decision makers:

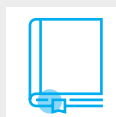
- Policy brief: [Water, Sanitation, and Hygiene Brief](#). Global Health Briefing Book. Global Health Council.
- Sign-on Letter: [Post-2015 Hygiene Advocacy Sign-on Letter](#). Global Handwashing Partnership

### TIPS FOR EFFECTIVE ENGAGEMENT WITH POLICY MAKERS



- **Make a connection:**

Start from common ground and clarify your shared values. For example, you may want to start a meeting by stating that you and the policy maker both care about children's futures in your country, and can work together to improve them.



- **Balance data and storytelling:**

While data matters, it doesn't always tell the whole story. Use stories and experiences to bring data to life.



- **Offer solutions and benefits**

Be clear not only on what will be gained from an action, but what will be lost if no action is taken.



- **Speak their language:**

Whenever possible, use examples, research, or stories from the context most familiar to the policy maker. Avoid technical jargon.

*Social Service Workforce Alliance. (2017). Global Advocacy Toolkit for the Social Service Workforce. Available: <http://www.socialserviceworkforce.org/resources/global-advocacy-toolkit-social-service-workforce>*

- Letter to Policy Maker: [GAPDD Toolkit](#), DefeatDD

## Traditional and Social Media

Media, in many forms, can be a powerful tool to get your advocacy messages out. Media can help others learn about the need for hygiene, and possibly join as advocates. It can also put the focus—and pressure—on decision makers to act.

**Traditional media** (e.g., newspapers, television, or radio news) can be engaged by pitching ideas for stories, inviting media to events, or submitting content like letters to the editor or op-eds. Op-eds allow hygiene advocates to express their views in their own name in a newspaper or other publication. Before submitting a letter or op-ed, be sure to read your target publication’s guidance. You can also write (or engage others to write) blog posts, which may receive media coverage, but often strike a less formal tone.

For an example of an op-ed focused on handwashing, read [Speaking Up for Patient Safety, and Survival](#) by Tina Rosenberg, published in the New York Times in 2011. Note how this op-ed includes actionable recommendations for health workers, health facility managers, and patients. The piece uses data to support the author’s argument, and ties handwashing to another issue recently covered by the newspaper. This piece was written by a well-known author — engaging someone with a strong reputation and credibility related to an issue can be an effective way to make op-eds more credible.

For more tools and advice for working with the media, read [Engaging with the Media: A companion to the advocacy toolkit for influencing the post-2015 development agenda](#), by the Sustainable Development 2015 Program. The toolkit explains criteria that journalists often use to select stories to cover, and uses [this BBC story](#) about menstrual hygiene management in India as an example.

## 8 TIPS FOR ADVOCACY AND SIGN-ON LETTERS

1. **Address** your letter to someone who can influence relevant decisions.
2. **Consider** using an attention-getting opening hook, like a surprising fact or something that links hygiene to the recipient’s interests.
3. **Succinctly state** the issue and purpose of the letter.
4. **Explain** who the letter sender(s) are and why you have an interest in the decision.
5. **Elaborate** with specific information where available, such as the state of handwashing in your country, or the cost per DALY saved.
6. **State** what you would like the recipient to do.
7. **Let the recipient know** how they can contact you or where they can access further information.
8. **Thank** the recipient for their consideration.

*Adapted from [GHP Post-2015 Hygiene Advocacy Toolkit](#)*

**Social media** is an effective and accessible way to share advocacy messages. Social media can be used to highlight the importance of hygiene, engage with policy makers or their staff, share stories, and more. Creating a social media toolkit is one way to encourage others to join your cause. Social media toolkits can ensure that different organizations or individuals engaged in advocacy have the same core messages, while allowing for adaptation. The [Global Handwashing Day social media toolkit](#) is one example and has reusable messages for Twitter, Facebook, and other platforms.

### Community Events

Events in your community provide an important chance to advocate for hygiene. There is a wide variety of community events that could include hygiene advocacy, but some examples could include:

- When celebrating the first day of school, draw attention to how your local school does, or does not, support the practice of handwashing with soap.
- Talk about the importance of hygiene at community meetings. Emphasize ways to overcome barriers to hygiene, to build group commitments to maintain good hygiene, or other effective behavior change strategies.
- Share information about the importance of handwashing at holidays or faith-based events.
- Ensure access to handwashing facilities at community festivals or in public places like markets and parks.

You can also organize community events specific to hygiene, such as marches to demand fulfillment of citizens' rights to water and hygiene, or poster campaigns to demand better facilities at your local health clinic. To help you plan an event in your community, [check out these tips](#) on event planning.

## 5 THE GHP'S TOP 5 SOCIAL MEDIA TIPS

1. **Know your audience:** Take some time to understand the key points that will motivate your audience, as well as their preferred social media platforms, most active times of day, and relevant hashtags or accounts they follow.
2. **Keep it simple:** Remember that readers on social media are presented with lots of information in a very short time. Keep your messages simple and easy to understand, with one key point per message.
3. **Include an action:** Be sure your messages include something for the reader to do. This can be as simple as a link to read more, or a request to share your post.
4. **Build two-way communication:** Don't just send out messages. Reply to others, share others' posts, and use hashtags.
5. **Use videos, pictures and infographics** to make eye-catching social media messages.

## Advocacy Days

Advocacy days provide an opportunity to draw attention to hygiene. It is important to also be sure they are used to drive action. For example, handwashing advocates can use the increased attention around Global Handwashing Day to meet with policy makers, publish op-eds with specific requests, or organize community actions. For example, DefeatDD used a social media campaign and in-person meetings around World Water Day 2014 to push policy makers in the US to pass the Water for the World Act. Read the [case study](#) to learn how DefeatDD leveraged an advocacy day for long-term change

Hygiene messages can be included in days that aren't specifically about hygiene. For example, [World Health Worker Week](#) could serve as an opportunity to talk about the importance of hygiene in health facilities, or [World Water Day](#) could be used to highlight the importance of water in hygiene.



## HYGIENE- RELATED ADVOCACY DAYS

**World Water Day** - 22 March

**World Health Day** - 7 April

**World Immunization Week** - 20 April

**Hand Hygiene Day** - 5 May

**Menstrual Hygiene Day** - 28 May

**Global Handwashing Day** - 15 October

**World Pneumonia Day** - 12 November

**World Toilet Day** - 19 November



## SECTION 6

## PLANNING, TRACKING AND MEASURING ADVOCACY

It is important to track and measure any advocacy effort you plan. Monitoring is critical to ensure your advocacy plan is on track to meet the objectives you desire. For example, your end goal may be to achieve a target in one of these areas:

- Hygiene included in relevant policies, strategies, and training packages;
- Presence of handwashing facilities with soap and water in the home, schools, and health care facilities; or
- Funding allocated for hygiene plans, strategies, or programs.

To achieve your goal, you will need to identify your audiences and understand what would motivate them

to act. This will help you determine or develop your messages, select messengers, and decide on advocacy mechanisms. These elements combine to form activities, which are the core of your advocacy plan. Annex 2 includes an infographic of key questions and a planning worksheet to help define your advocacy plan.

A strong theory of change is an important tool in advocacy planning. A theory of change shows how each element of an advocacy plan contributes to your overall objective. See figure 2 (below) for a sample theory of change. To learn more about theories of change for advocacy, read the ORS Impact brief on [10 Theories to Inform Advocacy and Policy Change Efforts](#).

**Figure 2: Sample Advocacy Theory of Change**

Objective: To convince the Department of Education to mandate that all schools have appropriate handwashing facilities for students and staff.

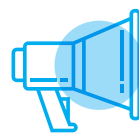
Activity	Output	Outcome	Impact
Inform and engage policy makers	<ul style="list-style-type: none"> <li>• 15 meetings with decision makers</li> <li>• 2 advocacy briefs</li> </ul>	Policy makers understand the rationale, need, and impact of handwashing facilities in schools, and have access to expert advice on details of policy.	Policy introduced and passed to mandate appropriate handwashing facilities in all schools.
Mobilize champions to join advocacy efforts	<ul style="list-style-type: none"> <li>• 2 op-eds placed by influential champions</li> <li>• 15 champions use social media to promote handwashing in schools</li> </ul>	Champions influence policy makers and raise visibility of issue.	
Build public support	<ul style="list-style-type: none"> <li>• 3 op-eds and 2 radio stories inform public and connect them to ways to take action</li> </ul>	Members of the public understand the need for handwashing in schools and pressure policy makers.	



In each area you seek to influence, it will be critical to develop specific targets and design your activities to meet those. Even when your advocacy goal may be clear, it is important to measure the effectiveness of your advocacy efforts. This allows advocates to change strategies if needed, and can build an effective case for continued investment in advocacy. Important elements to monitor include:

- **Status of your plan:** Are your activities happening as planned and on schedule?
- **Reach of your messages:** How many times are your messages getting to your desired audience? This could be measured by number of policy meetings, numbers of event attendees, social media metrics, etc.
- **Impact of advocacy work:** While your ultimate advocacy goal may be far off, it is also possible to measure results that could lead to your goal such as changes in beliefs, knowledge, or attitudes among your target audience.

To learn more about how to measure an advocacy campaign, read the [Sustainable Development 2015 Advocacy Toolkit: Influencing the post-2015 development agenda](#).



## ASSESSING CONTRIBUTION OF ADVOCACY EFFORTS

Advocacy takes place in dynamic environments, and advocates focus on understanding how their work contributes to change, even when change takes time. To learn more about how to evaluate the contribution of advocacy efforts, read [Monitoring and Evaluating Advocacy by UNICEF](#).

## CONCLUSION

Handwashing with soap can prevent some of the most common causes of death and illness. For everyone to receive the benefits of handwashing, the behaviors, enabling environments and infrastructure need to be in place. Advocates have a vital role to play in building the investments, policies, and support needed to ensure everyone washes their hands with soap at all critical times. The tools and ideas in this document aim to support your advocacy work as you lead change in your community. Continue reading for tools to plan your advocacy work; messages for hygiene advocacy in schools, healthcare facilities, and workplaces; and recommended resources. For additional ideas, support, or tools, contact the Global Handwashing Partnership at [contact@globalhandwashing.org](mailto:contact@globalhandwashing.org).

# ANNEXES

## RECOMMENDED RESOURCES:



### Advocacy Guidance

- UNICEF [Advocacy Toolkit](#)
- Global Social Service Workforce Alliance [Global Advocacy Toolkit for the Social Service Workforce](#)
- UN Special Rapporteur on the human right to safe drinking water and sanitation [Realizing the Human Right to Water: A handbook](#)



### Sustainable Development Goals

- WaterAid [Global Goals Toolkit](#)
- CIVICUS, [Stakeholder Forum](#), UNDESA, IFP. [Advocacy Toolkit: Influencing the Post-2015 Development Agenda \(2014\)](#)
- Sustainable Development Solutions Network. [Getting Started with the SDGs: A guide for stake-holders](#)
- UNW-DPAC. [Implementing WASH: Information brief](#)



### Financing

- WaterAid, [Financing universal access to water, sanitation and hygiene by 2030](#)
- IRC, [Financing WASH: how to increase funds for the sector while reducing inequities](#)



### Sources for Hygiene Information and Research

- Global Handwashing Partnership [Resource Library](#)
- DefeatDD [Resources Page](#)



### Graphics and Pictures

- Plan International, [WASH & the lifecycle of a girl](#)
- Find photos to use: [Photoshare](#) or [Flickr](#)
- Make your own infographics: [Piktochart](#) or [Canva](#)

## ADVOCACY PLANNING WORKSHEET

Use this worksheet to start to develop your advocacy plan. This sheet will help you organize your ideas, and can be used by one organization or as a tool to develop collaborative advocacy plans. The content in this worksheet is based on the Map Your Advocacy Impact Strategy Infographic by PATH, which is available in Annex 3.

<p><b>Advocacy Issue:</b> What problem needs to be solved? What's causing it?</p>	
<p><b>Advocacy Goal:</b> What change do you plan to influence?</p>	
<p><b>Decision Makers and Influencers:</b> Who has the power to take action? Who is influential to them?</p>	
<p><b>Interests:</b> What motivates your decision makers? What do they already think or know about your issue?</p>	

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<p><b>Opposition and Obstacles:</b> Who or what could get in the way of your advocacy goal?</p>	
<p><b>Assets and Gaps:</b> What strengths and resources will help you meet your goal? What is missing?</p>	
<p><b>Key partners:</b> How can you collaborate with others to meet your goal? Which groups would be most important?</p>	
<p><b>Tactics:</b> Which activities are most likely to help you achieve your goal?</p>	
<p><b>Most powerful messages:</b> What do your targets need to hear you be motivated to act? How should these messages be delivered?</p>	

# PATH ADVOCACY IMPACT STRATEGY INFOGRAPHIC



Advocacy has been part of PATH's work since our founding 40 years ago. Today our team of advocacy professionals around the world works at all levels with governments, civil society, the private sector, and other development partners to advance policy initiatives that result in better health outcomes for women, children, and families.

For more information, visit <http://sites.path.org/advocacyandpolicy> or email us at [advocacyandpolicy@path.org](mailto:advocacyandpolicy@path.org)

## Map Your Advocacy Impact Strategy

Answers to these simple questions will provide an effective **10-PART PLAN** to help you achieve important health policy changes and accountability

### What is your advocacy **issue**?

This is the first, and most critical, stage of the process. Your issue should be specific and clear, align with your organization's mission, and be realistically addressed through advocacy within five years. You'll also need evidence about why your issue is a problem.

### What is your advocacy **goal**?

This is your policy solution to the issue—or what you'd like a policymaker to do to address it. Describe the change you would like to see, how that change will happen, the timeframe, and which institution needs to act to make it happen.

### Who are the **decision-makers & influencers**?

Identify the specific decision-makers who have the power to give you what you want and the influencers who can persuade them to act. These are the individuals who can say yes or no to your goal, so be specific.

### What are their **interests**?

Try to understand your issue from each of your decision-makers' perspectives. Consider their level of awareness and current feelings about the issue and identify what might motivate them to be supportive. The most effective strategy will meet your decision-makers where they are and move them toward your point of view.

### What **opposition & obstacles** exist ?

It's important to understand who may resist or oppose your goal in order to design tactics and messages to reduce their influence on key decision-makers. Also, identify obstacles—like competing priorities, political controversy, or insufficient resources—that might hinder progress.

### What are your advocacy **assets & gaps**?

Your assets are the skills, expertise, and resources you have to conduct advocacy activities. Conduct a thorough inventory of your assets, as well as anything you're missing to get the job done.

### Who are your **key partners**?

Be strategic about the partners you choose and how you partner with them. Good partners bring new constituents to an issue, demonstrate wide-scale support, improve your ability to reach and persuade a wider set of decision-makers, help mitigate opposition, and yield additional expertise, skills, and resources.

### What are your **tactics** ?

Be selective about your advocacy tactics. The best activities are the ones most likely to have an immediate and direct impact on your target decision-makers or key influencers. When designing your tactics, consider whether they address your decision-makers' interests, help lessen the influence of any opposing groups, and align with your advocacy assets.

### What are the most powerful **messages**?

Use what you know about your decision-makers' interests to develop a compelling message about your advocacy goal. Your message should briefly introduce the issue, connect it to your decision-makers' interest, address the solution, and end with a clear "ask." It is important to also identify people who can deliver that message most effectively.

### How will you **measure success**?

Policy change can take time, so don't just focus on the end point of your goal. Develop measurement benchmarks along the way so you'll know you're making progress and to help you refine your advocacy strategy as needed.

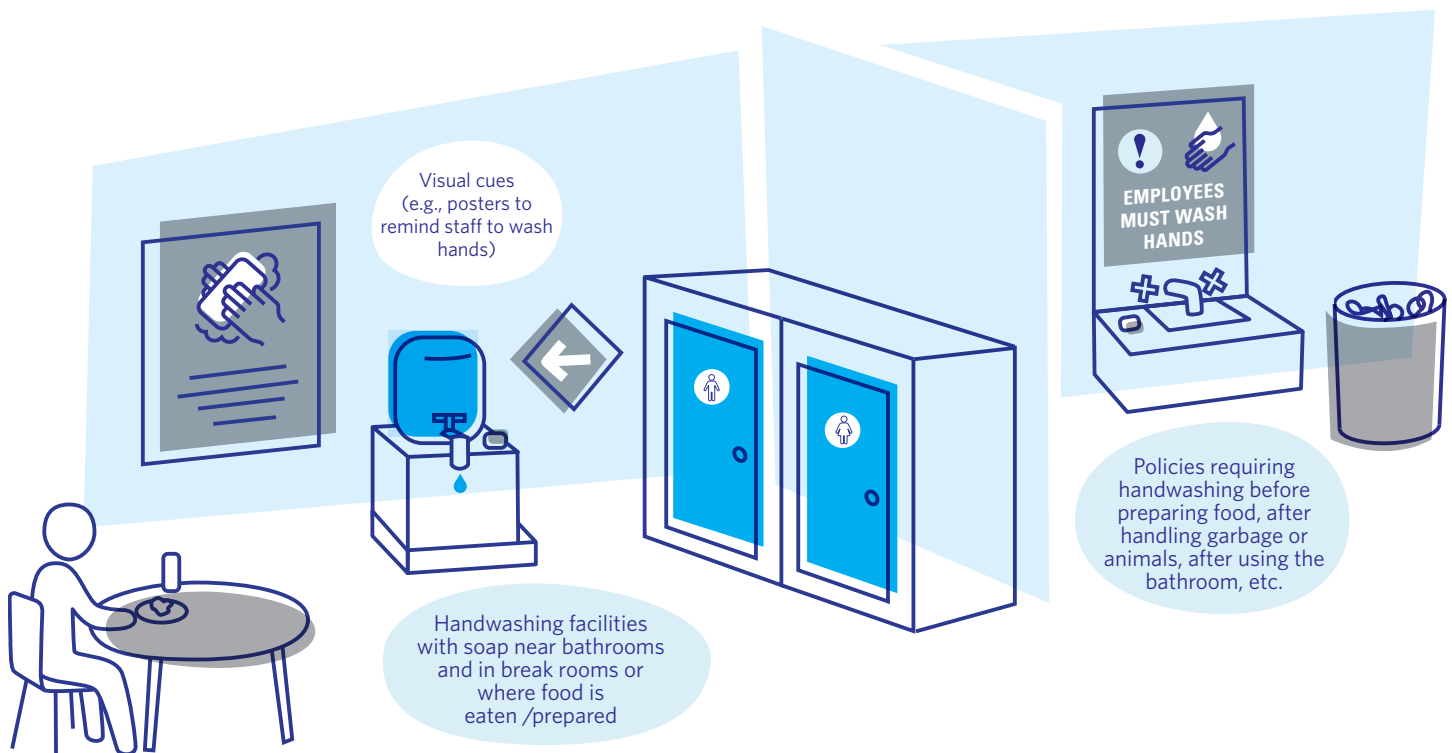
## HYGIENE ADVOCACY IN WORKPLACES

Handwashing is a simple, effective way to help workers stay healthy and productive. Workplaces must provide appropriate supplies, facilities, and support to ensure that workers wash their hands with soap at critical times. Good hygiene in the workplace can help keep employees in good health, which strengthens productivity, revenue, and ultimately economies. Through access to handwashing supplies and facilities, workplace policies that support or mandate handwashing with soap, and hygiene promotion, businesses can help their employees develop good handwashing habits. This will benefit the health and well-being of workers, improve profit and productivity for employers, and strengthen economies.

Improved hand hygiene isn't defined as only the presence of handwashing stations in the workplace. It includes:

- Working handwashing stations supplied with soap in washrooms or near toilets; near where food is prepared and consumed; and in other critical areas, including where workers are farming or coming into contact with animals.
- A consistent supply of hand hygiene supplies, and sinks or handwashing stations designed to make handwashing user-friendly.
- Policies that require handwashing at critical times in the workplace for all staff.

### KEY ELEMENTS OF HANDWASHING IN WORKPLACES





## Desired Advocacy Outcomes

Examples of advocacy outcomes in workplaces include:

- Hygiene included within workforce and labor policies, such as licensure and employment codes.
- Building and workplace regulatory infrastructure standards updated to include the design, construction, maintenance of hygiene facilities.
- Hygiene facilities with soap available and accessible to all workers at all critical times.
- Hygiene programs implemented in workplaces, including efforts that ensure vulnerable populations are included.
- Education for employees on hand hygiene around the benefits of hygiene.



## Suggested Messengers

- Workers' groups or labor unions
- Local business councils
- Commerce advisory boards
- Corporate employee affairs councils



## Suggested Audiences

- Legislative workforce committees
- Business managers
- Supply chain managers
- Ministries of Health and WASH
- Business regulators, such as ministries of industry, interior or labor



## Talking Points

The following sample messages can be used to illustrate the benefits of investing in hygiene facilities in the workplace:

- Loss of productivity due to illnesses associated with poor sanitation and hygiene is estimated to cost many countries up to 5% of GDP.<sup>30</sup>
- For every \$1 invested in water and sanitation, \$4.30 is generated in economic returns through increased productivity.<sup>31</sup>
- Every hour, 38 workers die from diseases caused by a lack of sanitation and hygiene.<sup>32</sup>
- Global economic loss due to poor WASH is estimated to be \$260 billion annually.<sup>33</sup>



## Recommended Reading

- CEO Water Mandate's Scaling Corporate Action on WASH in Supply Chains [white paper](#)
- International Labour Office WASH@Work [self-training handbook](#)
- UN-Water World Toilet Day 2016 WASH & jobs [fact sheet](#)



## HANDWASHING ADVOCACY IN HEALTHCARE SETTINGS

Hand hygiene in healthcare settings prevents infections, protects staff and patients, and is essential to providing basic health services. Unsafe hygiene practices can result in negative consequences, including antimicrobial resistance (AMR) and healthcare-associated infections (HCAI), which pose life-threatening risks to patients. Yet, 35% of healthcare facilities in low- & middle-income countries lack soap and water for handwashing.<sup>34</sup> The inability to offer basic hygiene services and adhere to hygiene compliance compromises the delivery of safe care and presents serious health risks to those seeking treatment.

Improved hygiene isn't defined as just the presence of handwashing stations in a health facility, but also includes:

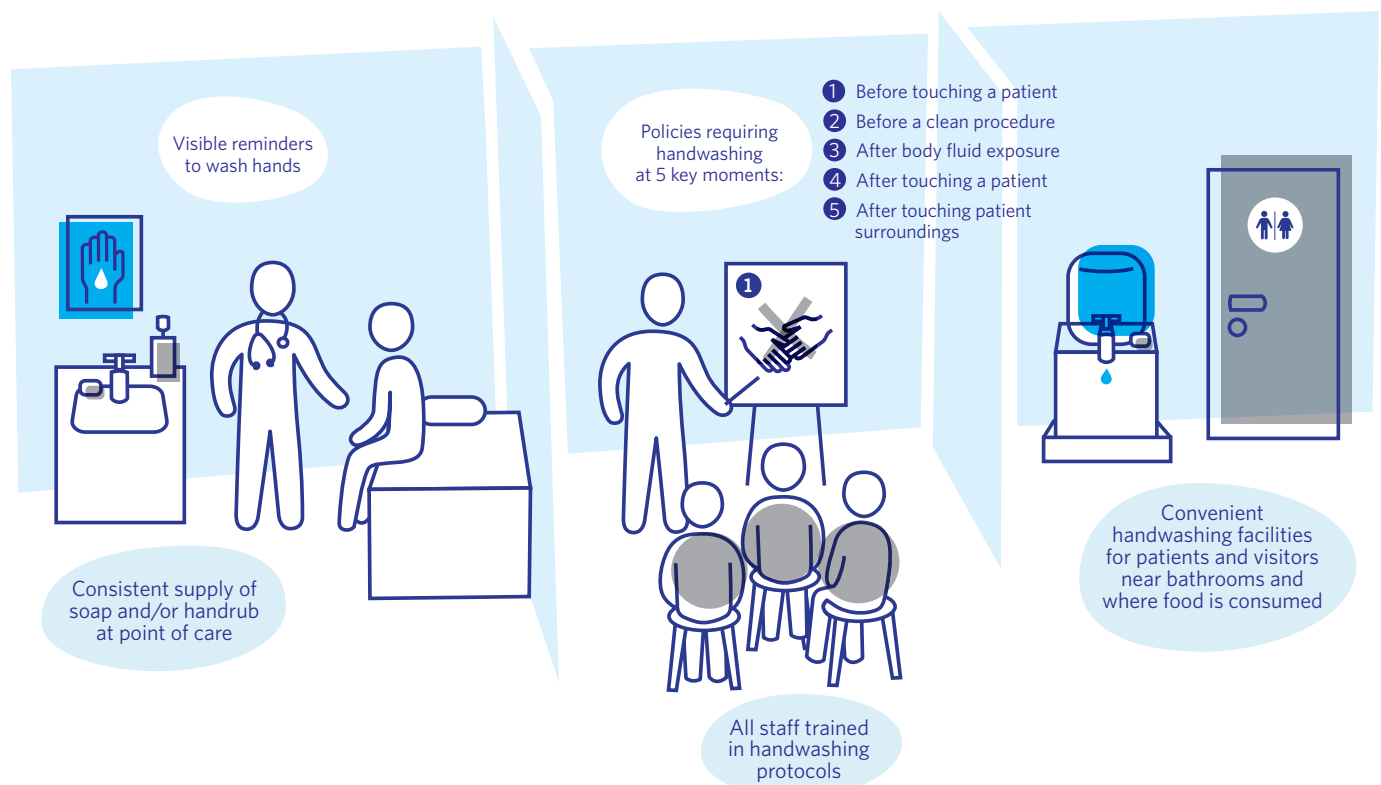
- Functioning handwashing stations within 5 meters of toilets, at entrances and exits to healthcare

facilities, in all treatment rooms, and per every 20 beds in recovery wards.<sup>35</sup>

- Sinks and handwashing stations designed to make handwashing easy and accessible for all healthcare facility (HCF) users, including those who perform procedures, care for patients, and handle medical waste (receptacles should also be installed for the disposal of medical waste).
- Behavior change strategies promoted that encourage hand hygiene at key moments among staff and patients.
- Medical equipment, devices, and surroundings disinfected before/after procedures; sanitary gloves used during all patient interactions.

Refer to [WHO's Essential Environmental Health Standards in Health Care guide](#) for more detailed information on hand hygiene in healthcare facilities.

### KEY ELEMENTS OF HANDWASHING IN HEALTHCARE FACILITIES





## Suggested Advocacy Outputs & Targets

Examples of advocacy outcomes in healthcare facilities include:

- Hygiene embraced within national health policies with defined, measurable indicators related to hygiene in healthcare facilities.
- Systems created and implemented to monitor hygiene compliance in HCFs.
- Hygiene integrated into HCF-based interventions and initiatives.
- Education for patients and communities on rights and expectations for hygiene in HCFs.
- Inequities addressed to ensure vulnerable populations aren't excluded in efforts to improve hygiene in HCFs, and hygiene facilities designed to lower barriers to use.
- Hygiene compliance and facilities safeguarded when understaffed, overcrowded, or facing health crises.



## Suggested Messengers

- Community health councils
- District health delegates
- Medical associations
- Healthcare worker unions



## Suggested Audiences

- Health and WASH ministries
- Legislative health committees
- Regional/district-level health councils
- Health advisory boards
- Hospital administrators



## Talking Points

The following sample messages can be used to illustrate the benefits of investing in hygiene facilities in healthcare settings.

- Nearly 15% of patients acquire HCAs, which can increase length of hospital stays by between 5 and 29.5 days.<sup>36</sup> Hand hygiene can reduce HCAI spread by 40%.<sup>37</sup>
- Productivity losses and other expenses caused by HCAs cost some countries as much as \$19 billion annually, while 40% of all health system spending can be avoided by improving quality care, IPC adherence, and hygiene coverage.<sup>38</sup>
- Presently, 700,000 deaths each year are attributable to antimicrobial resistance and it is estimated that by 2050, genetic resistance to antimicrobial treatments will kill 10 million people worldwide annually.<sup>39</sup>
- By 2030, approximately \$700 billion extra healthcare costs will be associated with AMR unless additional investment is made.<sup>40</sup>



## Recommended Reading

- [Hygiene in HCFs fact sheet](#), Global Handwashing Partnership
- [Joint Action for Universal Access & Improved Quality of Care](#), Joint Monitoring Program / Water Supply and Sanitation Collaborative Council
- [Delivering quality, people-centered health care for all](#), World Health Organization

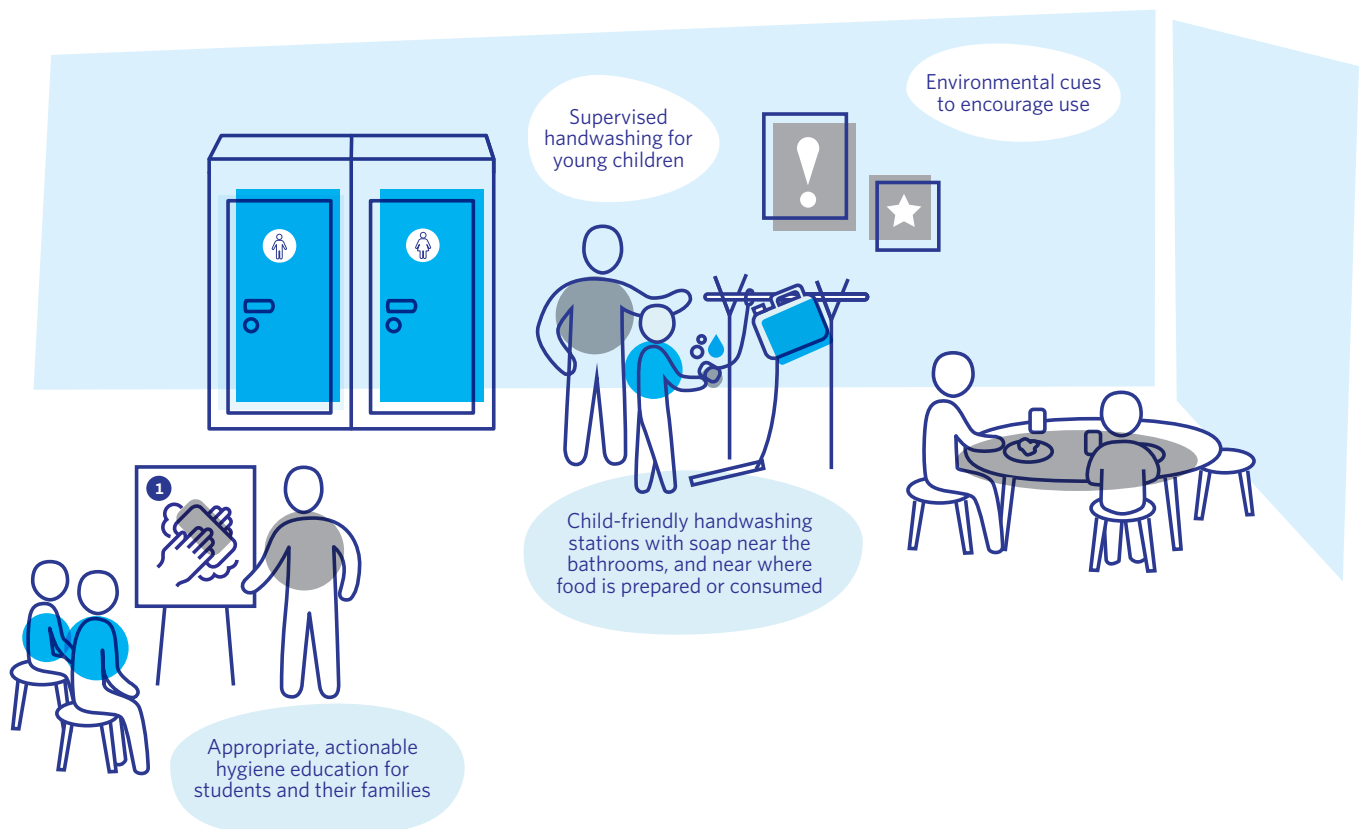
## HYGIENE ADVOCACY IN SCHOOLS

Without handwashing facilities in schools, children are more susceptible to illness, and less able to learn and grow. Lack of hygiene facilities leads to missed school days, both from health effects of poor handwashing and lack of access to menstrual hygiene at schools. As children are 40% more likely to acquire diarrheal infections from school than at home,<sup>41</sup> educators have an important role to play in ensuring handwashing in the school setting and helping students establish lasting hygiene habits. Schools must provide adequate handwashing stations with soap within a reasonable distance to toilets and a reliable water source, as well as provide appropriate hygiene education for students and their families.

Criteria for appropriate hygiene in schools include:

- Working handwashing stations supplied with soap in or near sanitation facilities and where food is prepared or consumed.
- Appropriate, actionable hygiene education for students and families.
- Separate handwashing stations made available for staff/teachers and students.
- Sinks or handwashing stations designed to make handwashing user-friendly.
- Handwashing station with soap in school health facility, if applicable.<sup>42 43</sup>

### KEY ELEMENTS OF HANDWASHING IN SCHOOLS





## Suggested Advocacy Outcomes

Examples of advocacy outcomes in schools include:

- Hygiene embraced within national education policies with defined, measurable indicators.
- Community-based education campaigns on hygiene's role in school settings disseminated.
- Inequities addressed that ensure vulnerable populations are not excluded in efforts to improve hygiene in education settings and facilities designed to lower barriers to use.
- Education for students on hand hygiene and menstruation provided in schools, and practiced and promoted beyond the school setting.
- School-based hygiene facilities safeguarded and handwashing with soap promoted in schools during emergencies and health crises.



## Suggested Messengers

- Local school boards
- Parent-teacher associations
- Teachers' unions
- Local health councils
- Youth associations



## Suggested Audiences

- Education, health & WASH ministries
- National health boards
- Education advisory boards
- Legislative education committees
- School administrations



## Talking Points

The following sample messages can be used to illustrate the benefits of investing in hygiene facilities in school settings.

- More than 40% of diarrhea cases in schoolchildren result from transmission in schools.<sup>44</sup>
- Each year, children lose 443 million school days because of water-related illnesses, of which 272 million are lost due to diarrhea alone.<sup>45</sup>
- More than a million children die each year due to diarrhea, but handwashing with soap could prevent two-thirds of those deaths.<sup>46</sup>
- School-based handwashing programs and interventions can result in up to a 54% reduction in absenteeism.<sup>47</sup>



## Recommended Reading

- [Raising even more clean hands: Advancing Health, Learning and Equity through WASH in Schools.](#) UNICEF.
- [Maintaining the Momentum: Advancing health, learning and equity through WASH in Schools.](#) UNICEF WASH in Schools.

## REFERENCES

- 1 Global Handwashing Partnership. Hygiene Advocacy Toolkit. 2015. <https://globalhandwashing.org/resources/hygiene-advocacy-toolkit/>.
- 2 Hygiene Fast Facts. Centers for Disease Control and Prevention. 2013. [https://cdc.gov/healthywater/hygiene/fast\\_facts.html](https://cdc.gov/healthywater/hygiene/fast_facts.html)
- 3 United Nations. SDGs knowledge platform: Communications materials. Date unknown. <http://un.org/sustainabledevelopment/news/communications-material/>
- 4 WaterAid. Briefing Note: WASH advocacy and the Global Goals for Sustainable Development. 2015. Retrieved from: <http://wateraid.org/>
- 5 Sosin M. Advocacy: A Conceptualization for Social Work Practice, Oxford Journals, 1983; 28(1): 12-17.
- 6 UNICEF. Advocacy Toolkit. 2010. [https://unicef.org/evaluation/files/Advocacy\\_Toolkit.pdf](https://unicef.org/evaluation/files/Advocacy_Toolkit.pdf)
- 7 WHO UNICEF Joint Monitoring Programme. Post-2015 WASH Targets and Indicators. 2014. Retrieved from: <https://wasdhdata.org>
- 8 Hutton G, Varughese M. The Costs of Meeting the 2030 Sustainable Development Goal Targets on Drinking Water, Sanitation, and Hygiene. World Bank. 2016. <http://worldbank.org/en/topic/water/publication/the-costs-of-meeting-the-2030-sustainable-development-goal-targets-on-drinking-water-sanitation-and-hygiene>.
- 9 Niera M, Wijesekera S. Achieving the SDG WASH targets. Sanitation and Water for All. Washington DC: 19 April 2017. <http://sanitationandwaterforall.org/wp-content/uploads/download-manager-files/JMP-GLAAS%20-%20FINAL.pdf>
- 10 Aiello, AE, Coulborn RM, Perez V, Larson EL. Effect of Hand Hygiene on Infectious Disease Risk in the Community Setting: A Meta-Analysis. Am J Pub Health, 2008; 98(8): 1372-81.
- 11 Curtis V, Cairncross S. Effect of washing hands with soap on diarrhoea risk in the community: A systematic review. Lancet Infect Dis, 2003; 3(5), 275-81.
- 12 Cairncross S, et al. Water, Sanitation and Hygiene for preventing diarrhea. Int J Epidemiol, 2010.
- 13 USAID. Role of Nutrition in ending preventable child and maternal deaths: technical guidance brief. 2016. <https://www.usaid.gov/what-we-do/global-health/nutrition/role-nutrition-ending-preventable-child-maternal-deaths>
- 14 Fenn B, et al. An evaluation of an operations research project to reduce childhood stunting in a food-insecure area in Ethiopia. Public Health Nutr, 2012; 15(9): 1746-54.
- 15 Kampf G, Löffler H, Gastmeier P. Hand Hygiene for the Prevention of Nosocomial Infections. Dtsch Arztebl Int, 2009; 106(40): 649-55.
- 16 WHO UNICEF Joint Monitoring Programme. Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines. 2017. Retrieved from: <https://washdata.org/>
- 17 Hutton, Varughese. The Costs of Meeting the 2030 Sustainable Development Goal Targets on Drinking Water, Sanitation, and Hygiene. World Bank. 2016.
- 18 Freeman M, et al. Hygiene and health: systematic review of handwashing practice worldwide and update of health effects. Trop Med Int Health, 2014; 19(8): 906-16.
- 19 WHO. Health care without avoidable infections: The critical role of infection prevention and control. 2016. <http://apps.who.int/iris/bitstream/10665/246235/1/WHO-HIS-SDS-2016.10-eng.pdf>
- 20 WHO. Health care without avoidable infections: The critical role of infection prevention and control. 2016.
- 21 UNICEF. Data: Monitoring the situation of children and women. 2017. <https://data.unicef.org/topic/child-health/diarrhoeal-disease/>
- 22 Why Handwashing. Global Handwashing Partnership. 2016. <https://globalhandwashing.org/about-handwashing/why-handwashing/>
- 23 Curtis, Cairncross Effect of washing hands with soap on diarrhoea risk in the community: a systematic review. Lancet, 2003.
- 24 Bowen A, et al. A cluster-randomized controlled trial evaluating the effect of a handwashing promotion program in Chinese primary schools. Am J Trop Med Hyg, 2007; 76(6): 1166-73.
- 25 Why Handwashing. Global Handwashing Partnership. 2016.
- 26 Walker DG, Hutubessy R, Beutels P. WHO guide for standardisation of economic evaluations of immunizations programmes. Vaccine, 2010; 28(11): 2,356-9.
- 27 Fischer Walker CL, et al. Global burden of childhood pneumonia and diarrhea. Lancet, 2013; 381: 1405-16.
- 28 Townsend J, Greenland K, Curtis V. Costs of diarrhoea and acute respiratory infections attributable to not handwashing: the cases of India and China. Trop Med Int Health, 2017 Jan; 22(1):74-81.
- 29 WHO. Evidence of hand hygiene to reduce transmission and infections by multi-drug resistant organisms in health-care settings. Date unknown. [http://who.int/gpsc/5may/MDRO\\_literature-review.pdf](http://who.int/gpsc/5may/MDRO_literature-review.pdf)
- 30 World Toilet Day: 19 November. United Nations. Date unknown. <http://un.org/en/events/toiletday/>

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- 31 IRC & Simavi. The need for water and toilets at schools, health centres, the work place and prisons. 2014. [https://ircwash.org/sites/default/files/wash\\_away\\_from\\_the\\_home\\_formatted\\_mg.pdf](https://ircwash.org/sites/default/files/wash_away_from_the_home_formatted_mg.pdf)
- 32 New initiative introduced on World Water Day supports business action towards the SDG on universal access to water and sanitation. World Business Council for Sustainable Development. 2016. <http://wbcsd.org/Clusters/Water/News/New-initiative-introduced-on-World-Water-Day-supports-business-action-towards-the-SDG-on-universal-access-to-water-and-sanitation>
- 33 UN-Water. World Toilet Day 2016: Toilets and Jobs. 2016. [http://un.org/en/events/toiletday/assets/img/posters/fact\\_sheet\\_toiletsandjobs\\_EN\\_3.pdf](http://un.org/en/events/toiletday/assets/img/posters/fact_sheet_toiletsandjobs_EN_3.pdf)
- 34 WHO/UNICEF. Water, Sanitation and Hygiene in Healthcare Facilities: Status in low- and middle-income countries and way forward. 2015. [http://who.int/water\\_sanitation\\_health/publications/wash-healthcare-facilities/en/](http://who.int/water_sanitation_health/publications/wash-healthcare-facilities/en/)
- 35 WHO. Guidelines on Hand Hygiene in Health Care: First Global Patient Safety Challenge Clean Care is Safer Care. 2009. [http://apps.who.int/iris/bitstream/10665/44102/1/9789241597906\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/44102/1/9789241597906_eng.pdf)
- 36 Patient Safety Fact File. WHO. 2014. [http://who.int/features/factfiles/patient\\_safety/en/](http://who.int/features/factfiles/patient_safety/en/)
- 37 Kampf, Löffler, Gastmeier. Hand Hygiene for the Prevention of Nosocomial Infections. Dtsch Arztebl Int, 2009.
- 38 Patient Safety Fact File. WHO, 2014. Retrieved from: [http://who.int/features/factfiles/patient\\_safety/en/](http://who.int/features/factfiles/patient_safety/en/)
- 39 Antimicrobial Resistance: Tackling a crisis for the health and wealth of nations. The Review on Antimicrobial Resistance, 2014. Retrieved from: [https://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations\\_1.pdf](https://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations_1.pdf)
- 40 World Bank Group. Drug-Resistant Infections: A threat to our economic future. 2017. <http://documents.worldbank.org/curated/en/323311493396993758/pdf/114679REVISED-v2-DrugResistant-Infections-Final-Report.pdf>
- 41 WASH and Education. WASH Advocates. Date unknown. <http://washadvocates.org/learn/wash-and-education/>
- 42 UNICEF. Water, Sanitation, and Hygiene in Schools: Child Friendly Schools Manual. 2012. [https://www.unicef.org/publications/files/CFS\\_WASH\\_E\\_web.pdf](https://www.unicef.org/publications/files/CFS_WASH_E_web.pdf)
- 43 WHO. WASH Standards for Schools in Low-Cost Settings. 2009. [http://who.int/water\\_sanitation\\_health/publications/wash\\_standards\\_school.pdf](http://who.int/water_sanitation_health/publications/wash_standards_school.pdf)
- 44 WASH and Education. WASH Advocates, n.d.
- 45 WASH and Education. WASH Advocates, n.d.
- 46 SuperAmma Campaign for Changing Hand Washing Behavior. SuperAmma. 2013. Retrieved from: <http://superamma.org/>
- 47 GIZ/UNICEF. Fit for School Three Star Approach for WASH in Schools Field Guide. 2013. [https://unicef.org/wash/schools/files/UNICEF\\_Field\\_Guide-3\\_Star-Guide.pdf](https://unicef.org/wash/schools/files/UNICEF_Field_Guide-3_Star-Guide.pdf)

