



Global Handwashing Day

15 October 2020

Global Handwashing Day (GHD) is a global advocacy day dedicated to increasing awareness about the importance of hand hygiene, especially through handwashing with soap, and triggering lasting change from the policy-level to community-driven action.

The current COVID-19 pandemic has highlighted the critical role hand hygiene plays in disease transmission. The theme reminds us of the need to take immediate action on hand hygiene across all public and private settings to respond and control the COVID-19 pandemic. Hand hygiene must become everybody's business. It also reminds us of the need to build on the current momentum to make hand hygiene a mainstay in public health interventions beyond the pandemic and create a culture of hand hygiene.

Handwashing is also good investment of employees and is good for business:

- Avoiding preventable illness and prevent lost days of work
- Productivity can be increased/maintained

Handwashing should be aligned with CSR and business objectives.

Recent research (Haston et al., 2020) suggests that since the pandemic, people were more likely to remember to wash their hands after experiencing respiratory problems, before eating in a restaurant and before eating at home. Despite this 1 in every 4 people still don't wash their hands relating to these actions:

- **After** using the bathroom
- **Before and after** preparing or eating food
- **After** coughing, sneezing or blowing their nose
- **Before and after** touching eyes, nose or mouth
- **After** going to a public place and touching frequently touched surfaces
- **Before and after** touching mask

Hand hygiene impacts health and COVID-19.

Handwashing with soap can help reduce the transmission of a range of diseases:

- Handwashing can reduce diarrheal diseases by **30% to 48%**.
- Handwashing can reduce acute respiratory infections by **20%**.
- Handwashing plays an important role in reducing the transmission of outbreak-related pathogens such as **cholera, Ebola, shigellosis, SARS** and **hepatitis E**.
- Hand hygiene is protective against **healthcare-associated infections** and reduces the spread of **antimicrobial resistance**.
- Hand hygiene may contribute to the reduction of **Neglected Tropical Diseases**.

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Handwashing is also key in the fight against COVID-19. Handwashing with soap destroys the outer membrane of the virus and thereby inactivates it. One study found that regular handwashing with soap can reduce the likelihood of COVID-19 infection by **36%**.

‘Hand Hygiene for All’ in the COVID-19 response.

Making hand hygiene available and accessible for all requires a multi-faceted, society-wide approach. First, this means an urgent need for improvement in access to sustainable hand hygiene services (handwashing facilities, regular water supply, soap or alcohol based handrub [ABHR]). Second, behavior change interventions should address the full range of drivers to support optimal hand hygiene behavior. And finally, components such as policy, coordination, regulation and financing which underpin hand hygiene services and behavior change need to be strengthened.

Improving access to hand hygiene facilities, soap and water

For people to be able to practice hand hygiene, they need hand hygiene facilities that are **conveniently located and easy to use**. People are more likely to wash their hands if they have soap and water present **near the handwashing facility**.

Hand hygiene access within households

- **60%** of the world’s population has access to a basic handwashing facility.
- Many high-income nations have almost universal coverage of basic handwashing facilities, yet in the world’s least developed countries only **28%** of people have access to basic handwashing facilities.
- In 42 of the 78 countries which the **JMP** has data for, less than half of the population have a basic handwashing facility at home.
- Currently, there are 17 countries where more than **10 million** people lack handwashing facilities.
- Only **47%** of basic handwashing facilities are ‘fixed’. This is a problem because people are much less likely to keep soap and water at ‘mobile’ handwashing facilities and may therefore wash their hands less frequently. The availability of soap and water at handwashing facilities **varies substantially**. In Ethiopia, for example only 0.1% of households had soap and water at the handwashing facility where as in Iraq 91% of people had these items available.
- In some counties, whole districts, or regions may have **lower access** to handwashing facilities. For example, only **12%** of households in the Kuntaur Region of the Gambia have access to basic handwashing facilities while in the West Region **68%** of people have such facilities.
- We have made limited progress on closing the gap in hygiene access between urban and rural populations, with only **34%** of people in rural areas having access to a basic handwashing facility. In rural areas of **Sierra Leone** people are 24% less likely to have access to soap and 11% more likely to have insufficient water than those in urban regions.
- There are also inequities within populations. For example, in **51 out of 82 countries** with disaggregated JMP data, basic handwashing coverage among the richest wealth quintile was at least twice as high as coverage among the poorest quintile. In Nepal, **95%** of people in the richest wealth quintile have a basic handwashing facility, while only **38%** of people in the poorest wealth quintile do. Vulnerable groups such as **people with disabilities**, older people, **displaced populations** and indigenous populations also typically have reduced hygiene access and may have increased hygiene needs.
- In **120 countries**, we do not have any reliable information about access to handwashing facilities. The COVID-19 pandemic provides a unique opportunity for actors to track and document infrastructural improvements.

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Improving Hand Hygiene Behaviors

Having access to handwashing facilities, soap and water is an important first step but this needs to be complemented with actions to change handwashing behavior at an individual and societal level so that handwashing becomes a long-term habit and a norm. Below we highlight some evidence-based recommendations for changing handwashing behavior.

- **Hygiene promotion is one of the most cost effective public health interventions in general** and for **COVID-19** prevention. However, this does not mean that it is easy or cheap to implement. Hygiene promotion should not be thought of as a one-off event but rather an adaptive process that gets revised and adjusted in order to support sustained change.
- **It is valuable for people to know the health benefits of handwashing, how to wash their hands and the critical times it should be practiced.** However, programs that focus only on **hygiene education** typically do not achieve **behavior change**. This is because most people know about handwashing and because hygiene behavior is influenced by a **range of determinants**.
- **Try changing the physical environment to cue and enable handwashing behavior.** For example, a **study** in Bangladesh showed that painting footprints on the path between the toilet and the handwashing facility increased handwashing behavior by 64% in schools. Another **study** in a displacement camp found that putting toys in soap made handwashing more fun for children and made them 4 times more likely to wash their hands with soap.
- **Handwashing behaviors naturally increase during outbreaks, but work should be done to ensure sustainable behavior long-term.** When people are suddenly **flooded with information** about a new pathogen and subsequently experience fear, they perceive that they are at risk, and see social norms changing to adapt to the pandemic. Unfortunately, the effect of outbreaks on hygiene behavior is short-lived. As fear subsides or if the outbreak becomes endemic and normalized, hygiene behavior will **decline** too. The key role of response agencies is to learn about the priorities for local populations, enable handwashing behavior (e.g. through infrastructure and products) and motivate practice by positioning it as the 'right thing to do'. Yet, during outbreaks, actors often **compromise** on the program design process in order to respond quickly. This can result in populations often becoming disengaged and bored with hygiene promotion programs because they **don't seem relevant to their experiences** of the pandemic. Rapid assessments or even short periods of learning from communities are critical for developing acceptable, relevant and context-adapted programs. During crises, it is also particularly important to share information between actors and to learn from and engage populations throughout the **project design and implementation**.



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Systems change, policy, planning and financing

COVID-19 has reminded decision makers about the importance of hand hygiene, but systems may need to be reimagined to sustain a culture of hand hygiene. This may include structural reforms within governments and institutions; enhancing the institutional, regulatory and legal foundations for hygiene access and hygiene promotion; implementing inclusive hygiene programming at scale, integrating hygiene programming across various sectors; and monitoring and enforcing hygiene requirements in public and private commercial settings, including schools and health care facilities.

Link to English video <https://youtu.be/fpXh2XHwMmE>



References:

Centers for Disease Control and Prevention and Global Handwashing Day 2020