Country context

The Islamic Republic of Pakistan in South Asia is the world’s fifth most populous country with nearly 221 million inhabitants. Despite its rapid population growth, adequate sanitation has improved tremendously in Pakistan and today 60% in rural areas and 80% in urban areas have access to a basic sanitation service. Access to at least basic water supply has also improved and currently stands at more than 90% compared to 85% in 2010.

Progress in hygiene and sanitation is largely thanks to the longstanding work to provide sanitation access in Pakistan: projects like the Orangi Pilot Project (1980) and the Community Led Total Sanitation – CLTS approach (introduced as pilot in 2003 and then rolled out nationally in 2010 through the Pakistan Approach to Total Sanitation – PATS). These initiatives highlighted the importance of household access to sanitation and allowed it to gain momentum. Today, open defecation in Pakistan is virtually abolished in urban areas and is gradually declining even in rural areas, where it is now practiced by only 12% of the rural population. Yet, this means that around 15 million Pakistanis still practice open defecation, with ongoing efforts to lower these figures.

Access to hygiene in Pakistan has also seen substantial improvements over the years, with a growing number of handwashing facilities in households. According to the WHO/UNICEF Joint Monitoring Programme (JMP), in 2017, 44% of rural households and 74% of households in urban areas had access to handwashing facilities. Three years later, access to a handwashing facility with water and soap has increased to a remarkable 74% in rural areas and 90% in urban areas. This impressive and rapid increase in hand hygiene is in large part due to a concerted effort by the Pakistani Government and its development partners to put hand hygiene at the forefront of the development agenda. Nevertheless, even if access to a handwashing facility with soap and water at the
household level has considerably improved in Pakistan, a study\(^1\) from February 2021 found that only 51% of Pakistanis were actually washing their hands regularly and at key times, showing that access to handwashing facilities does not necessarily equate with appropriate and regular practice. Also, access to sanitation and hygiene in public spaces as well as schools and health care facilities (HCFs) is still lagging, but the Government of Pakistan is steadfast in its efforts to reach the SDG objectives.

This case study shares the success story of how Pakistan has promoted hand hygiene at every level: political, strategic, institutional, and financial. This was undertaken in the context of working towards achieving SDG 6.2: to achieve access to adequate and equitable sanitation and hygiene for all and end open defecation by 2030. The handwashing with soap program was rolled-out with concerted efforts in capacity development, inclusive programming, continuous monitoring, and evaluation and focusing on behaviour change by promoting a culture of handwashing at all levels and through various types of media.

**Zooming in: Acceleration achievements and key lessons learned**

The promotion of hand hygiene in Pakistan has benefited from several key activities that have considerably accelerated its implementation.

**High level political buy-in:** Handwashing with soap (HHWS) at key times is one of the pillars of the Prime Minister’s flagship Clean and Green Pakistan Program. The program’s other key pillars are safe drinking water, sanitation, solid and liquid waste management, and tree planting. As such, hand hygiene is ensured

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\(^1\) Gallup and Gilani, 2021
in an enabling environment where the key hardware is available to carry out the behaviour. The political leadership by the previous Prime Minister ensured that handwashing with soap grows in visibility and is promoted as a shared culture throughout the country at all levels of society. The political leadership and commitment to handwashing has signalled to Pakistan’s development partners the country’s determination to achieve the SDGs and, as a result, has gradually increased water, sanitation and hygiene (WASH) related international development assistance in Pakistan over the past ten years, growing from USD 81 million in 2010 to USD 187 million in 2019, with two years greatly exceeding the average due to various emergencies (USD 289 million in 2015 and USD 307 million in 2017).

A strategic national roadmap and regional costed implementation plans to promote HWWS: The Ministry of Climate Change has taken the lead in rolling out the ‘Hand Hygiene for All’ initiative, which is detailed in a comprehensive document titled “Hand Hygiene for All, Pakistan Roadmap – A country-wide approach to achieving sustainable universal hand hygiene”. The document clearly lays out the strategy and steps to ensure the implementation of hand hygiene across all sectors of society, notably the mainstreaming of hand hygiene in WASH policies and strategies which in turn impacts national development programs and investments. A detailed planning and monitoring strategy is proposed, focused on establishing a robust baseline on hand hygiene in all settings (schools, HCFs, markets, offices, households, etc.), including key hand hygiene indicators in existing surveys (Demographic and Health Surveys [DHS], Multiple Indicator Cluster Surveys [MICs], etc.) and future surveys. The roadmap does not shy away from the complexity of promoting a highly personal behaviour such as handwashing with soap at key times and looks at implementing different behaviour change interventions according to the different target populations. The issue of soap availability at all times and all handwashing stations is also discussed and taken into account in the planning and response. There are approximately 600 factories in Pakistan making soap, 450 in the unorganised sector and 150 in the organised sector.² The roadmap concludes with a detailed monitoring and evaluation framework with the objective, impact and outcome for each strategic objective outlined and with the current available baseline, target, means of verification and government entity responsible for its implementation. This roadmap is the master document on which each province of Pakistan will develop a costed implementation plan for hand hygiene. These documents outline in detail the activities and related investments needed over the period 2021-2030 to achieve hand hygiene for all.

Piggybacking on the ongoing COVID-19 hand hygiene campaigns to ensure COVID-19 protective behaviours are sustained beyond the pandemic: The response to the COVID-19 pandemic in Pakistan was rolled-out rapidly through the government, supported by UNICEF and other development partners. In record time over 1,400 HCFs benefited from the rehabilitation or installation of WASH facilities, including handwashing stations. In total over 4,200 additional handwashing stations were established in public spaces, while more than 2,100 schools were supported with handwashing facilities. Hygiene promotion efforts reached more than 30 million people. Over 120,000 young Clean Green Pakistan Champions were engaged in COVID-19 related work and helped promote hand hygiene. The youths were fully

mobilized to promote HWWS and other key protective behaviours at community level. Also, 8,696 frontline sanitary workers were trained to enhance their capacity in WASH and Infection Prevention and Control in HCFs and high-risk communities. These capable, trained, and experienced frontline workers are an asset to drive the hygiene behaviour messages at the community level beyond the COVID-19 pandemic. Furthermore, the Push technology that was developed to send phone users notifications to support community actions against COVID-19 is further developed to promote handwashing at key times. To widen the scope of mobile phone notifications, online influencers will be engaged to promote the handwashing messages and tap into the online community. The momentum developed during the COVID-19 hygiene behaviour campaign is currently garnered to roll-out the Hand Hygiene for All program.

**Sustainable inclusive programming at scale to increase supply and demand for hand hygiene:**
As outlined in the Hand Hygiene for All Roadmap, handwashing with soap at key times is integrated into all national, provincial, and communal WASH programs. The topic of handwashing with soap is integrated in all existing and future WASH related policies and strategies, roles and responsibilities, and hand hygiene objectives and outputs are clearly stipulated within each government institution. Planning and financing departments and key development partners are engaged in developing equity-based investment plans for hand hygiene. Knowledge and skills gaps are identified and addressed through trainings, and existing experience and knowledge (including from the Clean Green Pakistan Champions) are shared and scaled up. Regular monitoring and evaluation play a central role in ensuring targets are met. Finally, the WASH Behavioural Change Communication (BCC) strategy is under revision, ensuring hand hygiene is well articulated and messages are based on recent and robust formative research. Hence, hand hygiene is effectively tackled from all sides, leaving no room for improvisation so that, by 2030, everyone in Pakistan practices handwashing with soap at home, public places, and institutions.
Zooming out and looking forward: challenges and opportunities for achieving SDG 6 in the country

The vast efforts outlined in the 2021-2030 Hand Hygiene for All Roadmap as well as the detailed provincial costed implementation plans will require rigorous follow-up and monitoring. The main challenges for the plans’ effective implementation will be to get buy-in from provincial decision-makers, so that they allocate the required resources. Further, it will be crucial for all hand hygiene focal points (at central, provincial, district, tehsil [district sub-division], and village levels) to understand their roles and responsibilities and ensure they are capable of rolling-out the different hand hygiene programs at their level. It is important that training as well as continuous support are provided to the focal points so that they know they are both supported in their work and held accountable for delivering on the set targets in a timely manner.

During the COVID-19 pandemic, one of the key challenges was to make soap available for the entire population to carry out handwashing properly. According to a leading soap manufacturer in Pakistan, soap sales increased by 30% during the pandemic. Soap supply and price can become an issue if manufacturers cannot keep up with the demand. However, considering the number of soap manufacturers in Pakistan, supply should not become an issue if the manufacturers are properly supported, they have access to sufficient raw materials, and a robust supply chain is in place including last-mile access.

According to a study conducted by WaterAid Pakistan in June 2020, which assessed handwashing behaviours during the COVID-19 pandemic, key barriers to handwashing included both the unavailability and the cost of soap; nearly 66% of respondents indicated that soap was considered expensive for their families. Partnerships forged with soap producers through the Public-Private Partnership for Handwashing (PPPHW) coalition prior and during the COVID-19 hand hygiene campaign need to be continuously nurtured, and their long-term involvement (technical and financial) needs to be broadened and confirmed. Ensuring soap products are available at all price points will ensure that the more fragile sections of the community can also afford having soap at all times.

Another challenge often encountered in public spaces, such as public latrines, schools, HCFs, government offices, etc., is the continuous availability of soap at handwashing stations. The refilling of soap dispensers to ensure hand soap availability at all times is one of the toughest obstacles for programs. Research has shown that soap is often unavailable at public handwashing stations because dispenser liquid soap has either not been replenished regularly, or has been stolen or misused, or kept by a sanitation worker or cleaner and only made available upon request, something that few people do. During the COVID-19 pandemic response, soap was distributed to institutions and vulnerable communities to ensure continued supply. However, for handwashing with soap to remain a key behaviour post COVID-19, it will be essential to ensure that soap availability at handwashing stations at all times receives particular attention and continuous monitoring.

The development and implementation of the BCC campaign will simultaneously be a challenge and an opportunity. Past BCC campaigns in various countries in Asia have shown that changing or influencing a behaviour, such as handwashing with soap at key times, requires a considerable amount of time and repetition. Promotional messaging and other types of communication (information and
education driven, social media, mass media, etc.) need to be targeted according to each population type: youth, women, elderly, communities at risk, etc. The messaging style and content will need to evolve according to formative research data obtained. Hand hygiene promotion needs to be both reactive and adaptive. In the case of Pakistan and the hand hygiene program, which has set out hand hygiene activities over the next nine years, the BCC campaign development can become a real opportunity to create a state-of-the-art communication campaign. The Hand Hygiene for All program is target- and data-driven, and formative research is a crucial component in developing this campaign by looking at behavioural drivers, barriers, and vulnerabilities. Evidence-based behaviour change approaches and tools will be developed at the national level, and lessons from this process should be of interest to countries trying to develop similar campaigns of their own.

Early results from the implementation of the program have seen that non-traditional WASH actors (like informal soap producers) will need more support to ensure their buy-in and that handwashing stations need technical revisions and supervision to avoid non-functionality through e.g. vandalism. However, the program is seeing positive roll-out in schools, HCFs and communities, and the provinces are effectively playing their roles in developing costed implementation plans and allocating budget for key activities.

To conclude, although the Hand Hygiene for All program has just started its journey to have everyone washing their hands with soap at home, in public places and institutions by 2030, many pre-existing national WASH programs have ensured that hand hygiene can effectively be carried out in most Pakistani households. For over two decades, Pakistan has been implementing programs to provide access to safe drinking water and sanitation options, to promote open defecation free communities, and to promote hygiene in communities, schools and HCFs in order to provide a safer and healthier environment for its citizens. It is thanks to these previous WASH programs that the Hand Hygiene for All approach can effectively operate and succeed in its mission.