

Instigating and sustaining behavior change in hygiene and beyond using the ABCD* process

(*Approach focused on Behaviour Change Determinants)

Background

SOLIDARITES INTERNATIONAL (SI) implements WASH projects in all of its 19 countries of intervention, but these sometimes lack impact in reducing the rate of waterborne diseases within targeted populations. Indeed, though the installation of infrastructure should make the environment more conducive to appropriate WASH behavior, it does not guarantee changes in behaviour in itself. SI developed the ABCD approach with the aim to help develop operational strategies for WASH projects and to reinforce the coherence between infrastructure building, awareness-raising and community mobilization activities. This poster is a summary of the results emating from capitalizing on 4 SI projects (Bangladesh, 2012 – RCA, 2013 – RDC, 2014 – Myanmar, 2014).

Why?

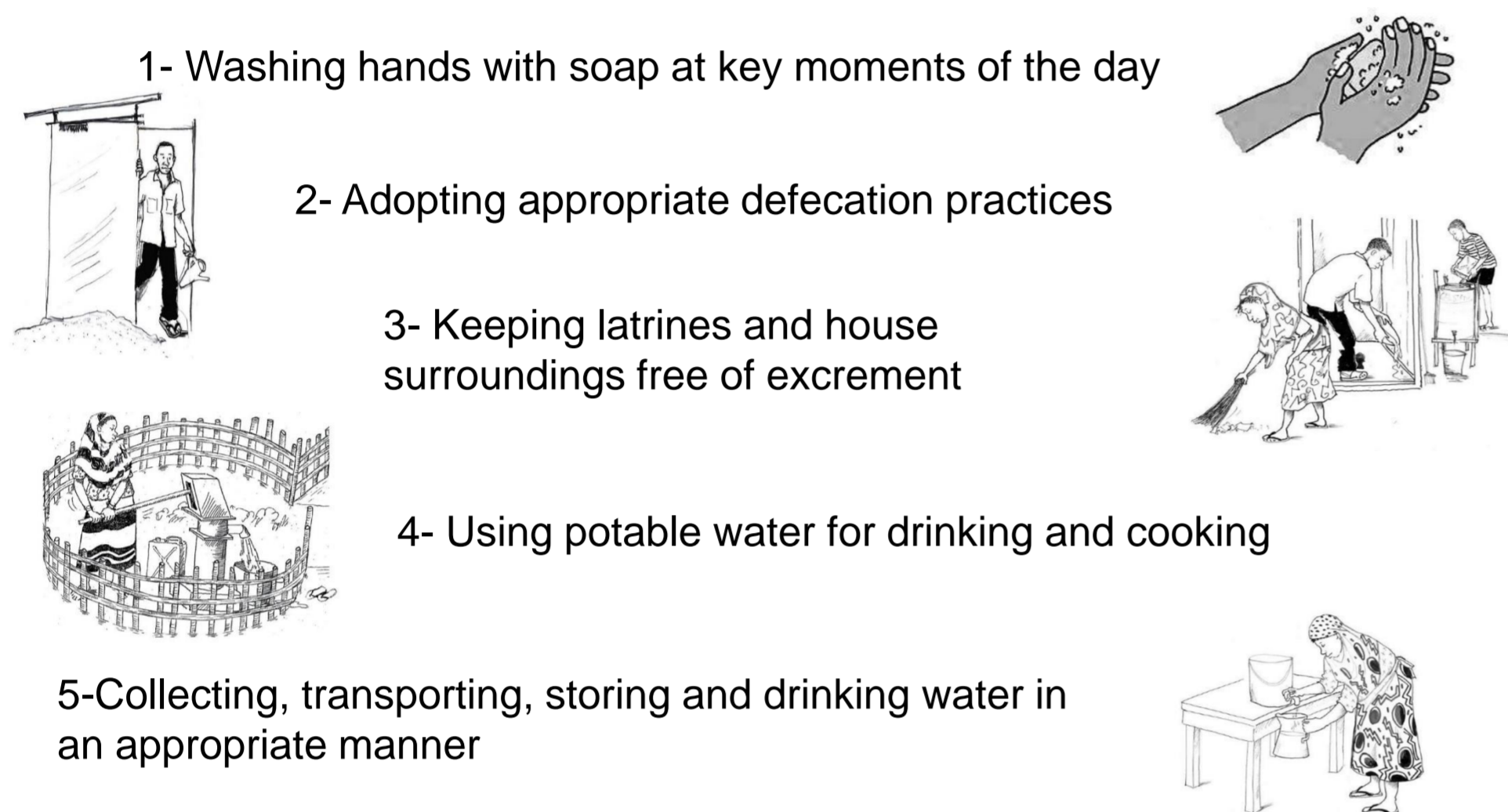
Improve WASH programs' quality and impact through:

- Adoption of appropriate and sustainable hygiene practices by targeted communities
- Use and maintenance of water supply and sanitation infrastructures

What?

ABCD is a socio-anthropological inspired approach developed by SI, based on an in-depth study of behaviors and their psychological, socio-cultural and environmental determinants in order to help professionals in the humanitarian and development fields through participative design of relevant and sustainable WASH interventions.

ABCD's 5 key behaviors



Internal and environmental determinants

Environmental determinants are divided into 3 circles of influence :

1. **Family** and close circle (*distribution of roles, decision power, budget management in the family depending on age, gender, etc.*).
2. **Community** (*relationships and social norms, local leaders, physical environment, access to safe drinking water, access to health center, markets, etc.*).
3. **Region or country** (*conflicts/natural disasters, administration system and laws, etc.*).

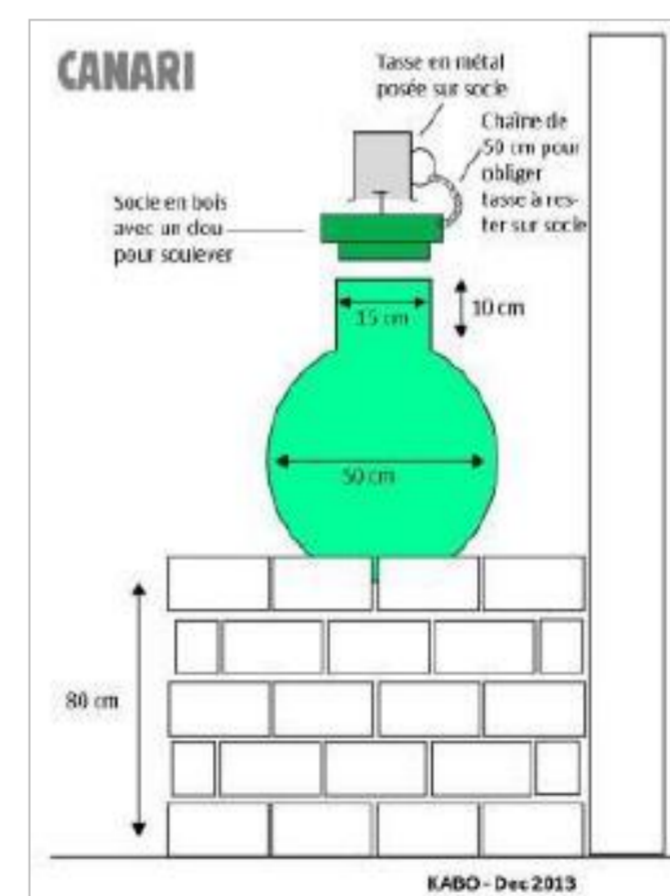
Internal determinants are composed of individual's psychological and physical elements: *knowledge about disease and its severity, motivations encouraging or preventing individuals to adopt appropriate behaviors such as prestige or shame, along with a person's perceived ability to repeat a behavior in time and injunctive norms.*

How? Methodology integrated into the project cycle:



Example of soft strategy:

In the DRC, an awareness campaign was developed to encourage the adoption of appropriate hygiene practices using the determinants of prestige, perceived cost of illness, fear of disease, maternal love and disgust. Messages based on these determinants were relayed through different communication tools such as posters, video projections, peer sensitization through local leaders and door to door visits



Example of hard strategy:

In CAR, makeshift of local water jugs equipped with a cover and placed on elevated pedestals as the use the determinant of prestige and the desire to consume fresh water prevented the use of jerrycans.

Future of the approach:

Although ABCD's methodological framework has been formalized, this framework remains flexible and can be adapted to different objectives for humanitarian and development projects, and throughout various intervention sectors (education, food security and livelihoods, etc.).