

A SOCIAL AND BEHAVIOR CHANGE STRATEGY

for Water Sanitation and Hygiene (WASH) Behaviors in Azraq Camp - Jordan



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Swiss Agency for Development
and Cooperation SDC



ACKNOWLEDGEMENT

This publication was funded by a grant from the Swiss Agency for Development and Cooperation (SDC) in support of Action Against Hunger's (ACF) *Community-based WASH Service Provision in Azraq Camp* project. The views expressed in this publication are the views of the author and do not necessarily reflect the views or policies of the SDC.

The author would like to acknowledge the active involvement and support of all participants in the strategy development workshop, comprising of Azraq camp volunteers, participants from ACF, UNICEF, World Vision International, Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), UNHCR, the European Union, and SDC. Special thanks to Razan Makahleh, Mohammed Miqdadi, Cindiya Siva, Naomi Rennard, Tom Heath and Pierre Marie Goimard for their constant support and valuable feedback and suggestions on the strategy document.

Author: Sona Sharma, Social and Behavior Change Advisor, Action Against Hunger US

Copyright © Action Against Hunger

All rights reserved. June 2023.

Unless expressly stated to the contrary, the copyright and other intellectual property rights, such as design rights, logotype and its including text and images, printed in this material remain the property of Action Against Hunger and may not be printed, copied, reproduced, republished, downloaded, posted, displayed, modified, reused, broadcast or transmitted in any way, expect for the user's own personal non-commercial use. Permission for any other type of use must be obtained from Action Against Hunger in written form.



CONTENT

ACKNOWLEDGEMENT	2
ABREVIATION	4
INTRODUCTION	5
SOCIAL AND BEHAVIOR CHANGE PRINCIPLES	7
SITUATION ANALYSIS	9
THEORY OF CHANGE FOR SOCIAL AND BEHAVIOR CHANGE	12
STRATEGIC APPROACH	13
SOCIAL AND BEHAVIOR CHANGE FRAMEWORK	15
Prioritization of Behaviors	15
Social and Behavior Change Objectives	16
Audience Segmentation	16
Key Messages	17
Bridges to Behavior Change Activities and Suggested Activities	20
ANNEXES	25
Annex 1: SBC Strategy Development Workshop Agenda	25
Annex 2: Complied SBC Framework	27



© Lys Arango for Action Against Hunger

ABBREVIATION

ACF	Action contre la Faim / Action Against Hunger
COVID-19	Coronavirus disease
DBC	Designing for Behavior Change
FGD	Focus Group Discussion
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
HH	Household
IBV	Incentive Based Volunteer
JOD	Jordanian Dinar
KAP	Knowledge Attitudes and Practice
KII	Key Informant Interviews
LSE	Life Skills Education
MEAL	Monitoring Evaluation and Learning
MHM	Menstrual Hygiene Management
NGO	Non-governmental Organization
SBC	Social and Behavior Change
SDC	Swiss Agency for Development and Cooperation
SRAD	Syrian Refugee Affairs Directorate
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WCR	WASH Community Representatives



INTRODUCTION

Azraq refugee camp located in Zarqa governorate was established in April 2014. As of June 2023, the camp continues to host **40,600 Syrian refugees**, with 61% of the population children, and 25% of all households female-headed (UNHCR, 2023).

The water supply system in Azraq has been operational since 2017 across the four villages of the camp and consists of 300 tap stands, two boreholes and two storage locations (each with 16 T-95 steel tanks). Based on data from UNICEF (2022), **the community is provided on average 2100 cubic meters of safe, treated water a day**, which is distributed across the camp via a gravity flow system. A distribution schedule is in place, with water pumped during two shift times each day in the morning and evening. Monthly data reported through ActivityInfo (2023) shows a range 53.5-76.3 million liters per month provided through the network in 2022 for **an average of 57 liters/person/day** – well above the locally agreed minimum standard of 35 liters/person/day and the SPHERE standard of 15 liters/person/day.

Latrine and shower facilities in the camp are organized through communal WASH blocks shared typically between three households and connected to water and greywater networks. However, based on an ACF and World Vision assessment (2022), 60% of the surveyed households are using private latrines (50% self-constructed latrines, and 10% constructed by WASH actors), 24% of households used communal latrines as private latrines not shared with other families, and 16% reported the use of communal latrines shared with other families.

Since 2015, ACF has been one of the main WASH actors in Azraq camp managing the operational management of the water supply system, communal latrines, water points, and the construction of household level latrines for most vulnerable households, and the establishment and monitoring of the greywater network in the camp. As part of this role, **ACF has been working with other WASH actors to ensure the WASH needs of the camp population are met**. Since 2017, ACF, with the support of UNICEF, have conducted community mobilization activities through an extensive volunteer network including **65 WASH Community Representatives (WCRs)**, **750 Lead Mothers**, and **65 Youth WCRs**. While ongoing efforts have been effective on many fronts, an increase in water consumption over the last two years, weak water pressure issues as well as vandalism of WASH infrastructure have resulted in **inequitable access to WASH resources and services**. There is also a recognized **need to influence social norms and behaviors** around water conservation and maintaining personal hygiene, including menstrual hygiene among the camp residents.

To address the issues and needs identified, ACF developed a social and behavior change (SBC) strategy using a systematic and participatory approach. The process involved conducting formative research, including a desk review of existing studies and primary qualitative data collection to understand the contextual

drivers, identify key behaviors and their barriers and enablers. This was followed by a participatory three-day strategy development workshop in February 2023 held with participants from ACF and Azraq Camp WASH actors, including UNICEF, UNHCR, GIZ, World Vision, the European Union and SDC. **Findings from the formative research formed the basis for brainstorming on prioritizing behaviors and other key components to develop the SBC strategy.** The strategy has been developed using the *Designing for Behavior Change (DBC) Framework* from the DBC¹ approach, adapted to the WASH context in Azraq camp, using critical inputs provided by participants during the workshop. The approach provides a behavior change framework that helps systematically build up a strategy using data and information gathered through the formative research. **The framework helps analyze each recommended or priority behavior** to identify the audience groups, key determinants that influence the behavior, changes in perception that are critical for the behavior change to take place and activities and messages that can enable the change.

The SBC strategy serves as a guiding document for ACF and WASH sector actors in Azraq camp to plan, **implement and track activities to influence social norms and enable behavior change that will contribute to improved WASH outcomes.** As part of this, the strategy defines a theory of change and the guiding SBC approach and principles used; articulates key objectives and results for the strategy; and delineates strategic elements to achieve the objectives including prioritized behaviors, priority groups and influencers, key messages, bridges to behavior change and recommended activities. **The strategy will be operationalized by ACF's Azraq WASH program during 2023 and 2024.**

¹ The Technical and Operational Performance Support (TOPS) Technical and Operational Performance Support Program. 2017. *Designing for Behavior Change: A Practical Field Guide*. Washington, DC: The Technical and Operational Performance Support Program. https://www.fsnnetwork.org/sites/default/files/designing_for_behavior_change_a_practical_field_guide.pdf



SOCIAL AND BEHAVIOR CHANGE PRINCIPLES

The five principles as outlined in the DBC approach are very relevant for this strategy:

1. Action is what counts, not beliefs or knowledge.

While knowledge and attitudes influence behaviors, increased knowledge or a positive attitude towards the behavior does not automatically lead to behavior change. Interventions need to be designed to inspire action.

2. Know exactly who the Priority Group is and look at everything from their point of view

Mindsets, beliefs, priorities and what appeals to groups differs based on age, gender, social status etc. Hence knowing exactly who the priority group is will help in understanding them better. Looking at everything from their perspective will result in more effectively designed messages and activities.

3. People take action when it benefits them; barriers keep people from acting.

While it is important to highlight the benefits to people through the activities, it is equally important to identify and address any barriers that prevent them from taking action.

4. All activities should maximize the most important benefits and minimize the most significant barriers.

The most important benefits of the behavior, including what the priority group perceives as the most important benefit and the most significant barriers need to be identified and the activities designed around those to amplify the benefit and take steps to reduce the barriers.

5. Base decisions on evidence, not conjecture, and keep checking.

While the strategy is based on evidence from the formative research, any decisions/modifications during implementation or mid-course corrections should also be based on feedback from monitoring and continuous checking with the communities.

In addition to the above, **the following principles** would be vital for effective implementation of the strategy:

- **Engaging in dialogue**

Ensuring a two-way communication in all activities helps actors understand what information needs there are in the target community and what they are concerned about, so that the field staff can share relevant information. It also helps build trust, as community members are able to express themselves and get information that they need.

- **Listening to the communities**

Listening to the community on a regular basis will help actors to understand what the drivers and barriers to adoption of the desired behaviors are. This information can then be used to adapt the key messages and solutions along the way, if necessary. It is important to remember that changing behavior is not easy for anyone.

- **Layering**

A single tool or channel is not enough to enable behavior change. There is a need for multiple tools and channels, used in synergy with each other to increase reach, recall and influence on behaviors.

- **Learning and adaptation**

The SBC strategy is to be treated as a living document, that will need to be updated based on monitoring data and periodic checks to understand what is working and what isn't working, and plan for mid-course corrections.

- **Gender and culturally sensitive**

Interventions and approaches determined by the strategy should not reinscribe prevailing social, gender and cultural norms that negatively impact WASH outcomes, and leverage social-cultural norms, including religious ones, that positively influence behavior. Where relevant, opportunities to effectively address harmful gender norms, and promote the decision-making, responsibilities and roles of women and girls should be considered.



SITUATION ANALYSIS

The formative research included desk review of existing studies, qualitative primary data collection through focus group discussions (FGDs) and key informant interviews (KIIs) with community members from the camp (including women, men, youth, persons with disability), community leaders (interest types), ACF WASH community volunteers and WASH actors including ACF and UNICEF staff. **The findings provide useful insights on important determinants for behavior change** related to water use and management; community ownership of WASH facilities; latrine use and maintenance; menstrual hygiene management (MHM) and other personal hygiene behaviors including, handwashing at critical times. **It also provided insight on the types of communication channels and community structures that can be leveraged in designing behavior change activities.**

Water use and management

In spite of the water supply surpassing the locally agreed upon minimum needs, the significant increase in water consumption and water pressure issues at many tap stands, results in **inequitable distribution**, the **rapid depletion** of water stores, and other issues arising from a lack of ownership among the camp residents. **Water wastage**, mainly at the tap stand level and lack of conservation practices at the household level are important issues that need to be addressed. It is commonly the case that **unregulated hose connections** are made between tapstands and individual shelters in order to provide a shelter level water supply. This 'illegal' practice leads to **increased unreliability of the water system** across the camp and **high water consumption**. Water conservation practices do exist at the household level, although as reported by WASH community volunteers, only roughly half of the families are currently practicing them. One of the incentives that exists for **water conservation at household level** is the weight involved in carry water from the tapstand to the shelter, and the limited pumping times at the camp. Religion is also a strong motivator reported for this practice, with the Prophet's saying 'do not waste water even if you are in a running river' quoted by the community.

Community ownership of WASH facilities

Recurrent and widespread vandalism of WASH infrastructure (ie public toilets, shower blocks, water tapstands etc.) is a major barrier to access of WASH services. All studies suggest **a lack of ownership and responsibility** on the part of the community towards public facilities. Reasons cited for vandalism ranged from people needing the parts for their homes to selling them to earn money or buy cigarettes.

The move towards self-constructed private latrines at shelter level and gaps in the availability of necessary supplies in the Azraq market have likely facilitated the vandalism of common facilities. While

most study respondents admitted to knowing about regular theft/vandalism, very few took any action. Further, a large number of camp residents are unaware of who is responsible for maintenance of communal WASH facilities.

Various studies have highlighted issues around **safety for women and girls in accessing WASH services**, both at the tap stand for water collection as well as in using communal latrines. Highlighting where resource competition for water exists, FGD participants reported where **some water points in the camp are controlled by individuals**. In addition, communal WASH facilities were deemed unsafe particularly due to a **lack of privacy** (gender segregation, locks), lighting (not included as part of the maintenance requirements for UNICEF contractors), and **the presence of dogs or men** around facilities. However, there is currently no recognition of the potential role of community members (women, men, girls and boys) in ensuring safety of women and girls in accessing WASH resources and the means by which the community can effectively alert this issue to relevant duty bearers.

Latrine use and maintenance

A growing number of families have shelter level private latrines (either self-constructed or constructed by WASH actors), and therefore a smaller number of families use communal latrines as reported through different studies. Many communal facilities are also **co-opted for private use**. Described challenges associated with communal facilities and accessibility needs (particularly for older persons and persons with disability), have likely precipitated the scale of self-constructed facilities, with families now resident in the camp for close to nine years.

For self-constructed latrines, **issues in meeting WASH technical quality standards** are present with ACF currently assessing all private latrines in the camp. Maintenance for these latrines are however not covered through private UNICEF contractors (solely in charge of public block latrines and block showers), though maintenance needs were reported for both private and communal latrines. **Challenges in maintaining and keeping the latrines clean** included lack of cleaning materials, lack of water, lack of repair tools and expensive metal sheets.

In addition, a stark difference in cleanliness was reported, with the private latrines considered more hygienic and clean than communal facilities, with women mostly responsible for this. For communal latrines, there is **no clear allocation of responsibility for cleanliness and hygiene** although families living close to the communal latrines are expected to keep them clean.

Menstrual hygiene management

All studies have revealed that a majority of women and girls do **use sanitary pads during menstruation and maintain some level of hygiene** during menstruation. Disposal of sanitary pads in waste bins after wrapping in plastic bags is also nearly universal. However, there are **challenges related to appropriate disposal** so that it does not get scattered on the streets by dogs as well as difficulty in finding plastic bags for disposal as reported by women and girls. **Privacy concerns** were a major challenge reported by women and girls. In addition, there are **many socio-cultural beliefs** (such as one should not shower during menstruation as it stops/reduces the blood flow) that impact personal hygiene during menstruation. There is also **a taboo** around talking about menstruation and accurate knowledge on the menstrual cycle, among both adolescent girls and boys.

Handwashing at critical times

The importance of handwashing with soap is very well accepted in the community. However, the recall of all critical times for handwashing appeared to be poor. **The three critical times** mentioned by most respondents were after using the latrine, before eating and when returning to the house from outside.

Critical times such as before feeding baby and after changing baby's diaper were mentioned by a very small proportion of people across the years.

Community structures and communication channels

Religious groups and sports groups were reported to be the most popular and meet regularly; however, it was **unclear whether they were organized groups** with a clear structure. Community members were keen on joining the religious groups to learn new things about their religion. Some also wanted to join the sports groups to be physically fit or become slim. As per the participants, people would be interested in joining groups that organize entertaining or competitive events. Among the **communication channels, community sessions** and **WhatsApp** are the preferred medium/platform for most age groups. **Facebook** groups also exist and can be explored further for engaging the communities.

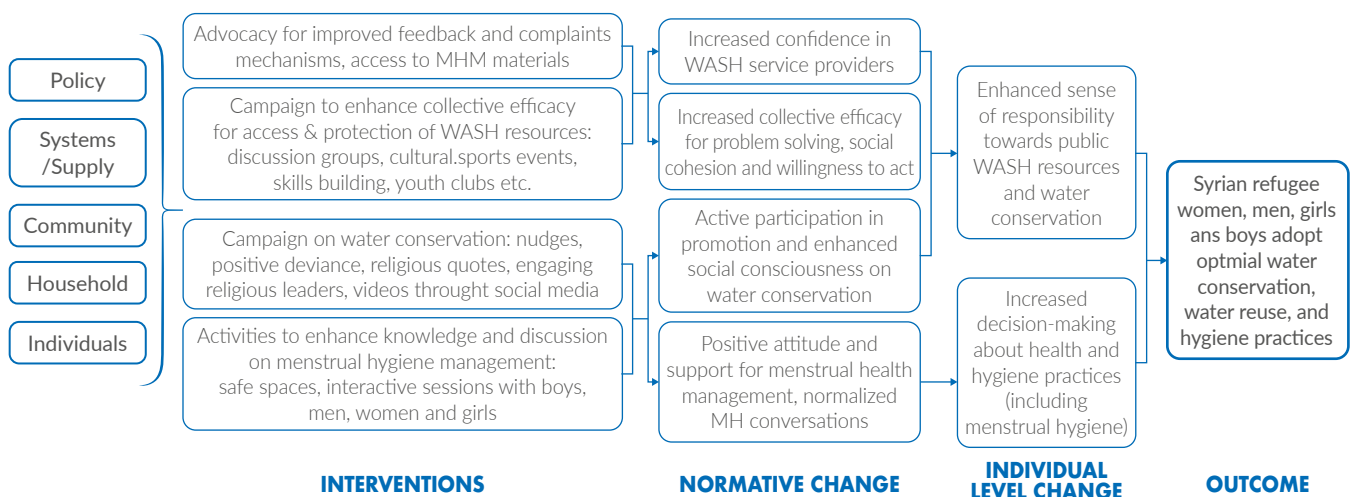


THEORY OF CHANGE FOR SOCIAL AND BEHAVIOR CHANGE

As per the formative research, **despite water supply being above the agreed upon standards and communal WASH facilities provided by different actors, there are inequities in access** to the facilities due to vandalism of WASH infrastructure, wastage of water and water pressure issues in the network. Lack of a sense of collective ownership and responsibility among the residents towards the public WASH resources, few people practicing water conservation (especially at tap stand level), insufficient income generating opportunities and a weak complaints and feedback mechanism are **some underlying reasons for the core issues**. For women and girls, taboos and cultural beliefs, poor as well as issues of privacy affect health and hygiene during menstruation.

Applying the socio-ecological model for behavior change and considering the formative research findings, the theory of change for SBC for WASH in Azraq camp is **based on the assumption that a combination of interventions** to enhance collective efficacy for protection of WASH services, amplify existing water conservation practices and advocacy for improved response to service requests would **lead to increase in willingness to act by the community members to prevent vandalism and conserve water**. On MHM, the assumption is that **if safe spaces are created for women and girls to express themselves and men and boys are sensitized** on their needs during menstruation, while also enhancing knowledge on the menstrual cycle and normalize talking about menstruation, there will be **an increase in decision making about hygienic practices**, especially during menstruation. Both these approaches would eventually lead to Syrian refugees in Azraq camp having **inclusive, increased and reliable access to WASH services**.

Figure 1: Theory of Change





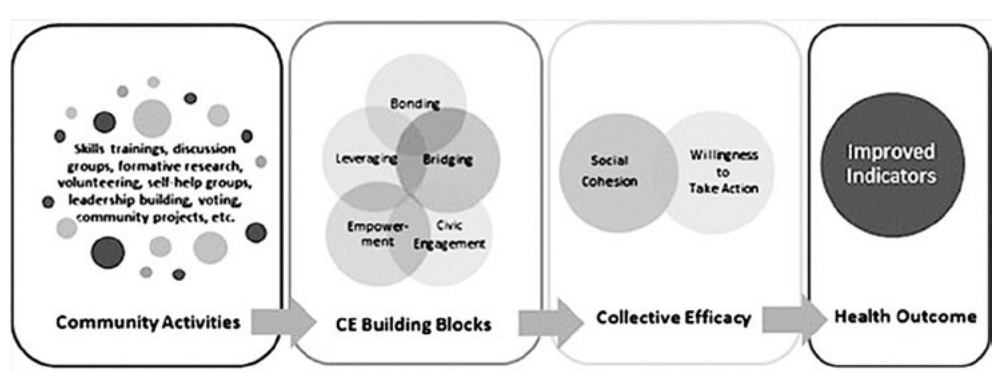
STRATEGIC APPROACH

The SBC strategy will focus on three overarching approaches; **a)** collective efficacy to prevent vandalism and ensure safe access to WASH resources for women and children; **b)** faith-based approach to promote water conservation at the tap stand and household levels; and **c)** addressing social norms to promote MHM.

- A.** Collective efficacy is broadly defined as the belief, willingness, and ability of a group to work together toward a common good. Vandalism, lack of safety measures for women and children to access WASH resources and irresponsible use of water all point to low levels of collective efficacy among Azraq residents to take action. One of the main strategic approaches would hence be to enhance collective efficacy through community level activities.

The approach will be based on a ‘mechanism of action’ postulated by a systematic review on the role of collective efficacy in reducing health disparities. The review revealed a **strong link between low collective efficacy and high neighborhood crime rates**. Collective efficacy also has been linked to **better community-level health outcomes** and **health-promoting behaviors**. The ‘mechanism of action’ shows how social capital (social bonding, social bridging, social leveraging), empowerment, and civic engagement can **increase a group’s social cohesion and willingness to act**, which can increase its **collective efficacy**, which can lead to improved **health outcomes** and reductions in health disparities (Figure 2 below).

Figure 2: Collective efficacy - Mechanism of action²



In this case, the community activities will be geared towards improving WASH outcomes.

² <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7012267/>

- B. Faith-based approach for behavior change in WASH has substantial evidence of success in different religions and many different contexts**^{3,4,5}. The influence of religion on water conservation and handwashing was brought out through the formative research findings in Azraq camp too. The approach includes activities to engage with religious leaders, identify relevant teachings within religious texts that promote the recommended behavior, and collaborate with the religious leaders to amplify the messages through their sermons and other religious activities. While **water conservation at the tap stand level** will largely be addressed through **collective efficacy**, at the **household level**, SBC initiatives will **leverage religious beliefs and amplify religious texts/quotes** that promote water conservation. Specifically relevant is the quote 'do not waste water even if you are in a running stream' from Prophet Muhammed. **Religious leaders** will be engaged in campaigns to promote water conservation behaviors, nudges used and positive deviants identified to act as champions within their neighborhood. **Religious social groups** can also be mechanized as part of this approach.
- C. Social norms are the unwritten rules followed by a community.** They inform group members how to construe a given situation, how to feel about it, and how to behave in it. They exert social influence on group members by prescribing which reactions are appropriate, and which are not.⁶ The formative research for this strategy revealed many challenges around menstrual hygiene, a prominent challenge being the social taboo around talking about menstruation. SBC initiatives for MHM will hence be **designed to influence social norms**, particularly around the taboo of talking about menstruation and beliefs such as not to shower during menstruation, which impact the health and hygiene behaviors. The approach will **sensitize the socio-cultural gatekeepers** (i.e. community leaders) and also reach out to men and boys to **normalize talking about menstruation**.

³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7012267/>

⁴ https://www.researchgate.net/publication/326234862_Research_brief_on_Faith-based_WASH_intervention

⁵ <https://www.devex.com/news/hygiene-and-hymns-why-wash-programs-need-faith-leaders-97561>

⁶ Abrams, D., Wetherell, M., Cochrane, S., Hogg, M. A., & Turner, J. C. (1990). Knowing what to think by knowing who you are: Self-categorization and the nature of norm formation, conformity and group polarization. *British Journal of Social Psychology*, 29(2), 97–119. <https://doi.org/10.1111/j.2044-8309.1990.tb00892.x>



SOCIAL AND BEHAVIOR CHANGE FRAMEWORK

The SBC strategy development workshop was planned using the DBC approach, to elicit inputs from participants based on the formative research and their extensive experience of working in Azraq camp. Recommended behaviors from the formative research were prioritized and SBC objectives determined using standard templates. The SBC framework from the DBC approach was used to identify audience groups, key messages, bridges to behavior change activities and activities for each high priority and medium priority behavior. **Each of these strategic elements are described below.** The detailed framework developed during the strategy development workshop is included as [Annex 2](#).

PRIORITIZATION OF BEHAVIORS

Behaviors recommended from the formative research findings have been **prioritized based on a criteria** that included the efficacy of behaviors in improving health and well-being of target groups and program outcomes, the current status of adoption of the behavior, key determinants and whether the barriers could be addressed through SBC interventions. **High priority** behaviors will be a priority, both **in terms of the timeline and level of effort** during implementation. All the recommended behaviors have been categorized as high priority or medium priority, as follows.

High Priority Behaviors

- Family members use water responsibly to reduce wastage and ensure water conservation.
- Community members take action to prevent vandalism of the WASH infrastructure.
- Community members ensure safety and privacy for women, girls and children while accessing WASH Facilities.
- Women and girls follow health and hygiene practices during menstruation (using hygienic materials, handwashing, frequency of change, personal hygiene, seek support from health providers for issues).

Medium Priority Behaviors

- Every individual washes hands with soap at all critical times.
- Owners of private latrines maintain cleanliness and hygiene in and around the latrines.

- Men, women, boys and girls regularly maintain personal hygiene.
- Families who share communal latrines monitor cleanliness and hygiene responsibilities.
- Women and girls appropriately dispose menstrual hygiene materials after use.

SOCIAL AND BEHAVIOR CHANGE OBJECTIVES

The strategy will work towards achieving the following objectives based on the high priority behaviors identified **by the end of year 2 of the project**.

- Increased proportion of men, women, girls and boys who implement recommended practices to reduce water wastage or conserve water.
- Community members demonstrate increased collective-efficacy to protect the WASH infrastructure.
- Increase in local solutions implemented by the community towards making access to public WASH facilities safer and more private for women, girls and children.
- Increased confidence among women and girls (aged 12-45) to practice optimal menstrual health and hygiene/Increase in the proportion of women and girls (12–45 years) who report following health and hygiene practices during menstruation.

AUDIENCE SEGMENTATION

Priority audiences and influencers have been identified **for each behavior**, recognizing that different audience groups would respond differently to SBC activities and messaging. However, to aid effective targeting and designing of creative approaches during implementation of the strategy, the key audience segments for each broad domain identified are included in the table below.

Approach	Primary Audience	Influencers
a) Collective efficacy to prevent vandalism*	· Women and men in the age group of 25-35 years*	Community Leaders (<i>Mukhtar</i>), religious leaders (<i>Sheikh, Imam</i>), WASH volunteers, NGO staff, teachers, family elders
b) Collective efficacy to ensure safe access to WASH resources for women and children	· Women and men in the age group of 25-35 years	Community leaders, religious leaders, WASH volunteers, NGO staff
c) Water conservation at tap stand and household levels	· Women and men in the age group of 25-35 years** · Adolescent girls and boys in the age group of 10–19 years · Children in the age group of 6–9 years	School teachers, community leaders (<i>Mukhtar</i>), religious leaders (<i>Sheikh, Imam</i>), WASH volunteers, NGO staff
d) Menstrual hygiene Management	· Girls and women in the reproductive age group (12–49 years)	Sisters, mothers, aunts, adolescent boys, husbands/partners of women in reproductive age, school teachers, community leaders (<i>Mukhtar</i>), Religious Leaders (<i>Sheikh, Imam</i>), WASH volunteers, NGO staff

* While some qualitative responses in the formative research identified that **vandalism was very often done by children and teenage boys/young adults**, they are **not being included as a primary audience** for two reasons: **1)** the behavior being promoted is for the community to take collective action to prevent vandalism, and is not directed at the perpetrators since there is no concrete evidence of who they are. **2)** while there may be some children and teenagers/young adults doing acts of vandalism, directly addressing them as a primary audience runs the risk of creating a stigma against this group.

** While the efforts will need to **include older and younger women and men**, a smaller segment has been identified based on **the age structure of the population** in Azraq camp. In addition to helping in making the creatives more effective and focused, it is also anticipated that this group would be **better placed to lead, demonstrate and influence change** among all age groups.

KEY MESSAGES

The key messages have been developed for each behavior, keeping in mind the findings from the formative research including the barriers and enablers that need to be addressed. However, the messages are essentially **the core content for communication**, which will need to be tweaked or modified based on the SBC activity or materials that they are used for. They will also form **the basis for overarching creative treatment** that will need to be developed for each set of activities/campaigns to address the three domains identified as the strategic approach for SBC. Key messages for each of the high and medium priority behaviors, primary audience and barriers to address are included in the table below.

No.	Behaviors	Intended Audience Groups	Barriers and Enablers	Key Messages
High Priority Behaviors				
1	Family members use water responsibly to reduce wastage and ensure water conservation	<p>Priority groups</p> <ul style="list-style-type: none"> Men (25–35 years) Women (20–45 years) Adolescent girls and boys (12–19 years) <p>Influencers</p> <ul style="list-style-type: none"> Teachers Community leaders (<i>Mukhtar</i>) Religious leaders (<i>Sheikh, Imam</i>) WASH volunteers NGO staff Parents/caregivers of adolescents Older siblings Aunts 	<p>Barriers</p> <ul style="list-style-type: none"> Overuse of water and leakages/broken taps in the tap stands Children waste water while doing the dishes etc. <p>Enablers</p> <ul style="list-style-type: none"> Water conservation practices do exist roughly in about half the households Religion is a distinct motivator reported for this practice 	<ul style="list-style-type: none"> ‘Do not waste water even if you are on running river.’ - Prophet Mohammad Take care of water resources today for your family tomorrow. Using water responsibly can ensure that your family has sufficient water for your daily needs. Show your family and neighbors that you care, by being careful while using water resources. Water is precious, let’s save it for drinking and not waste it by playing. Many responsible residents in our camp use different practices to conserve and reuse water. Are you one of them? Carrying water from the tap stand to the home is not easy. We can conserve water with simple practices such as: <ul style="list-style-type: none"> Reusing the water from laundry dishwashing, washing vegetables etc. to clean the floor of the house/shelter; Closing the tap properly after every use; Closing the tap at the tap stand once you have collected the water. Every drop of water is precious. A little of water saves you. A lot of water drowns you. So if we use less water and responsibly, we will be saved as there will be water available for a longer time. But if we use a lot of water and waste it, we will soon be left with no water.

No.	Behaviors	Intended Audience Groups	Barriers and Enablers	Key Messages
2	Community members take action to prevent vandalism of the WASH infrastructure	<p>Priority Groups</p> <ul style="list-style-type: none"> Male and female community members (25–35 years) <p>Influencers</p> <ul style="list-style-type: none"> Maintenance committee members (24) (16 males, 8 females) (above 18 years) Wash committee representative's Religious leaders Lead mothers IBV's Community centers facilitators 	<p>Barriers</p> <ul style="list-style-type: none"> Lack of community ownership Lack of clarity on who is responsible for preventing or reporting vandalism. Reasons for not taking any action including being wary of creating conflict, the social norm that women cannot confront men or that men who confront children would be reported for child abuse <p>Enabler</p> <ul style="list-style-type: none"> Community members are well aware of the positive consequences of preventing the vandalism 	<ul style="list-style-type: none"> 'Do not do mischief on the earth, after it has been set in order.' (From Quran) Preserve public property, each of us will benefit with more water for our families and better health and hygiene. You have the power to save resources – use it well. Every hand can contribute to maintain a good tap stand. Water equals life, let's preserve our lives. Let the water network be free from vandalism, so that you can receive your water without leakage. Your misuse of infrastructure exposes your life to a health crisis. We have a shared responsibility to reduce vandalism. The responsibilities for the water and sanitation operation, maintenance and cleaning are established.
3	Community members ensure safety for women, girls and children while accessing WASH Facilities	<p>Priority group</p> <ul style="list-style-type: none"> Adult male and female community members (aged 25–45 years) <p>Influencers</p> <ul style="list-style-type: none"> Facilitators of community center Religious leaders Community leaders Camp management WASH actors in the camp WASH representatives Community centers staff 	<p>Barriers</p> <ul style="list-style-type: none"> Children under 18 heading a household Less recognition of the community members about their role in providing protection to women while collecting water Safety issues related to accessing WASH facilities (lights) <p>Enabler</p> <ul style="list-style-type: none"> Common agreement that the community cares about safety issues that affect children and women 	<ul style="list-style-type: none"> Water is for everyone, let us make it safe for women, girls and children also to collect the water they need. It is our collective responsibility to make the use of communal latrines safe for women and girls. Give others the right to get their share of water. A lot can be achieved when we work together to ensure safe access for women, girls and children to collect water and use communal latrines. Simple steps that we can take to ensure safety for women, girls and children to use communal latrines: <ul style="list-style-type: none"> Ensure the latrine door is lockable from inside; Identify creative ways to patch any holes in the structure; Advocate with the maintenance contractor to install lights; Accompany the woman/girl/child; Contribute resources to keep a covered waste bin inside or near the latrine.
4	Women and girls follow health and hygiene practices during menstruation (using hygienic materials, handwashing, frequency of change, personal hygiene, seek support from health providers for issues)	<p>Priority group</p> <ul style="list-style-type: none"> Women in the reproductive age (19–49 years) Adolescent girls (10–19 years) Husbands/partners of women in the reproductive age group Adolescent boys (10-19 years) <p>Influencers</p> <ul style="list-style-type: none"> Teachers Mothers Grandmothers Peers Sisters (big sisters) Youth representatives Health workers 	<p>Barriers</p> <ul style="list-style-type: none"> Cost of materials Lack of availability of materials Resistance of men to have awareness raising activities and talk openly about menstrual health Misconceptions around menstruation such as one should not take a shower during menstruation Menstruation considered a bad thing hence women and girls feel conscious while disposing sanitary napkins or changing them even in private latrines and girls are not able to talk about their problems to anyone to seek support Lack of cleanliness in communal latrines and no facility for handwashing 	<ul style="list-style-type: none"> Personal hygiene during menstruation is very important to prevent infections and stay healthy. Following hygienic practices during menstruation will have long lasting effects. The practices to be followed are: <ul style="list-style-type: none"> Use hygienic, clean menstruation materials (disposable sanitary pads); Change sanitary pads every 3-4 hours; Continue with personal hygiene practices (showering, cutting nails, handwashing with soap, clean clothes especially underclothes). Seek support from a health worker for any problems, they are there to help you. Menstruation is a normal, natural, body function. There is no need to be ashamed of it. For men and boys: <ul style="list-style-type: none"> Menstruation is a natural body function, it is normal to talk about it like any other body function. It is however a painful process physically and mentally for women and girls and they need all your support during this time.

No.	Behaviors	Intended Audience Groups	Barriers and Enablers	Key Messages
Medium Priority Behaviors				
5	Every individual washes hands with soap at all critical times	<p>Priority group</p> <ul style="list-style-type: none"> · Heads of households (average age 42 years, majority between 26–50 years) · Young people (aged 20–35 years) · Adolescents (10–19 years) · Children (6–10 years) <p>Influencers</p> <ul style="list-style-type: none"> · Health workers · Hygiene promoters · WASH volunteers · IBVs · Teachers · Religious leaders · Facilitators at the Makani centers 	<p>Barriers</p> <ul style="list-style-type: none"> · Lack of soap availability · Lack of basins for handwashing at household and WASH facility · More importance is given around 3 critical times, (i.e. after using the latrine, before eating and when returning to the house from outside) <p>Enablers</p> <ul style="list-style-type: none"> · The importance of handwashing with soap is understood well by the community, especially after the COVID-19 outbreak · Handwashing is an integral part of religious rituals 	<ul style="list-style-type: none"> · Proper way to wash hands(5 steps): <ul style="list-style-type: none"> - 1. Wet your hands with water. - 2. Apply enough soap to cover your hands. - 3. Rub your hands together. - 4. Use one hand to rub the back of the other hand and clean in between the fingers. - 5. Do the same with the other hand. · Wash your hands in all these critical times to prevent diseases (could explore making a song or poem from this message): <ul style="list-style-type: none"> - Before: Eating, cooking food, breastfeeding or feeding a child; - After: Eating, using toilets, playing (for children), changing a baby’s diaper/cleaning the baby’s feces, taking care of pets or farm animals, dumping waste.
6	Owners of private latrines maintain cleanliness and hygiene in and around the latrines	<p>Priority group</p> <ul style="list-style-type: none"> · Heads of households <p>Influencer</p> <ul style="list-style-type: none"> · ACF WASH volunteers · Community leaders · Religious leaders 	<p>Barriers</p> <ul style="list-style-type: none"> · Lack of cleaning materials and tools · Cultural constraints, as some refugees were living with very basic WASH facilities <p>Enabler</p> <ul style="list-style-type: none"> · Need for wider community training including women on maintenance so they know the basics of how to identify and deal with any malfunctioning of a WASH facility was expressed by the community 	<ul style="list-style-type: none"> · Cleaner toilet means a healthier life. · Clean restroom promotes good health. · Leave the latrines clean, so that those who come after you find it comfortable. · Cleanliness and hygiene inside and around the latrines is the responsibility of every family member. · Small steps that you can take to keep your latrine clean and prevent diseases: <ul style="list-style-type: none"> - Flush after every use; - Keep a small, covered waste bin for sanitary napkins; - Do not let water accumulate inside or near the latrine; - Clean with disinfectants every day/alternate day.
7	Men, women, boys and girls regularly maintain personal hygiene	<p>Priority groups</p> <ul style="list-style-type: none"> · Young men, women in the age group of 15–35 years · Boys and girls (10–14 years) <p>Influencers</p> <ul style="list-style-type: none"> · WASH representatives · Religious leaders · Care givers · Community centers staff · Health staff 	<p>Barriers</p> <ul style="list-style-type: none"> · Men not available during implementation hours · Hygiene supplies availability is a challenge <p>Enabler</p> <ul style="list-style-type: none"> · Religious text promoting personal hygiene practices 	<ul style="list-style-type: none"> · Hygiene is a part of faith. · Maintaining your personal hygiene prevents diseases like diarrheal and head lice. · If we take these small steps to ensure personal hygiene, we can all be safe from many diseases and infections: <ul style="list-style-type: none"> - (list the key actions based on preventing diseases that have high prevalence in the camp)

No.	Behaviors	Intended Audience Groups	Barriers and Enablers	Key Messages
8	Families who share communal latrines monitor cleanliness and hygiene responsibilities	<p>Priority Group</p> <ul style="list-style-type: none"> · Heads of households (25–45 years) <p>Influencers</p> <ul style="list-style-type: none"> · ACF WASH volunteers · Community representative and leaders · SRAD · NGOs and UN- agencies 	<p>Barrier</p> <ul style="list-style-type: none"> · Lack of cleaning materials and tools · Most people are unaware about who is responsible for maintenance of latrines · Most people (91%) believed that the owners of the houses near the public bathrooms have taken these bathrooms; therefore, they are responsible for cleaning them 	<ul style="list-style-type: none"> · If you miss and make a mess help reduce the cleaner's stress. · Together hand in hand let us use the communal latrines properly. · Let's be together to fix the communal latrines. · If you and I take up the responsibility ourselves, the communal latrines will always be clean. · Throwing the garbage in the bathroom siphon will create problems for each one of us – let us be responsible and help ourselves too. · Infectious diseases such as cholera, diarrhea, hepatitis, etc. can be transmitted while using dirty bathrooms. · Maintenance of the communal latrines is the responsibility of UNICEF (or contractor name) in your area. You can contact them via...
9	Women and girls appropriately dispose menstrual hygiene materials after use	<p>Priority group</p> <ul style="list-style-type: none"> · Women in reproductive age (15–49 years) · Adolescent girls (10-14 years) <p>Influencers</p> <ul style="list-style-type: none"> · Lead mothers · Hygiene promoters · Youth representatives' midwives · Male members of HH 	<p>Barriers</p> <ul style="list-style-type: none"> · Difficulty in finding plastic bags · Disposing them discretely · Lack of place to dispose pads in the communal latrines · Dogs tear bags in which sanitary napkins are disposed · Taboo around menstruation, which makes it difficult to talk about the issues around disposal too 	<ul style="list-style-type: none"> · Disposing sanitary napkins in the waste bin instead of throwing in the latrine pit, will avoid clogging of the sewage network. · Appropriate and safe disposal of sanitary napkins will not only save us from any embarrassment and clogging problems but is also essential to prevent infections and possible diseases.

BRIDGES TO BEHAVIOR CHANGE ACTIVITIES AND SUGGESTED ACTIVITIES

While the SBC framework details the bridges to behavior change activities and activities for each behavior, these have been summarized below under each broad strategic approach. **Bridges to activities** are more specific descriptions of what one should do to address the issue revealed by the research. It identifies those **perceptions of the priority group, which are critical for the behavior change** to take place. The activities identified will need to ensure integration of the necessary components/messaging for the bridges to activities to be achieved.

1. Enhancing collective efficacy

The bridges to activities that are essential to achieve for this approach are:

- Increased perception around that preventing vandalism is a shared responsibility.
- Improved maintenance skills set among the community group.
- Increased perception around the culture of reporting (Vandalism-Misuse) in the camp.
- Increased perception that it is a collective responsibility to ensure safety for women girls and children while accessing WASH facilities.
- Increased recognition of safety and privacy concerns faced while accessing WASH facilities.

- Community members believe that they are capable of keeping a safe environment for all.

A series of community level activities aimed at **bonding, empowerment and civic engagement** as well as **individual skill development** activities will be planned to achieve the above bridges.

Integration of the approach in planned activities under the project

- **Group meetings with community leaders**

Meetings with community leaders, religious leaders and other key influencers is a **current program activity** included in the project proposal. To apply the strategic approach on enhancing collective efficacy, the meetings would include **seeking inputs/ideas from the influencers** on collective action to reduce/eliminate vandalism and increase water conservation practices. If required and feasible, **four additional meetings could be held** (one in each village), focusing on this aspect. The focus of the discussion would need to be **clearly geared towards solutions** that the community can themselves implement. Activities that can **instill a sense of pride** among the community to have zero vandalism in their area, would be encouraged.

- **Social events**

Hygiene promotion/awareness sessions are part of the ongoing activities. Some of these sessions would be planned as events to encourage social cohesion. The IBVs would identify sports groups and cultural/religious groups in their area and through them organize **1-2 events a month in each village**. The identified groups would be responsible to decide on the nature of the event and take the lead in organizing them. Every event would integrate messages around **collective responsibility and the strength of taking collective action**. Every event would also include a **brief interactive session** of 30 minutes to an hour, where-in different topics related to the high priority behaviors could be discussed, with a focus on eliminating vandalism, water conservation and latrine cleanliness and maintenance. The importance of caring for each other, ensuring that even the most vulnerable families have equal access to water, could be emphasized in these sessions, action points discussed and followed up in subsequent sessions.

- **Campaign on global days**

Nine events have been planned under ACF's project to promote water conservation. At least half of these events would be organized to promote social cohesion and collective action. To do this, the events would be planned and implemented **in collaboration with the cultural/religious groups** identified in each village – the campaign messages would prominently include collective action to preserve public WASH resources and safety for women and children in addition to water conservation. Campaign themes such as '*Care today for water tomorrow*' '*When we work together, we flourish together*' '*I Care, We Care – together we can make a difference*' could be **used to plan the messaging and activities**. The campaign activities would be decided by the community members who are part of the cultural/religious groups and **followed up by messages/memes** on WhatsApp, Facebook and other popular social media.

- **Community dialogue sessions**

This activity is currently planned between camp residents and key WASH service providers and stakeholders, to provide formal opportunities to feed into the management and information around WASH service needs in the camp. From the strategy, it is recommended that the sessions would be designed so that it is **not just about complaints or needs** from the community on WASH services but also a **platform to showcase/deliberate** on what the community can do to improve the situation. To do this, initially the IBVs/WASH volunteers would identify positive deviants/positive practices in the community for water conservation/preventing vandalism/adequate maintenance of communal latrines in the area in **advance and share them as positive practices** from the community to tackle the issues, before taking on the complaints.

New activity proposed

- **Multi-media campaign**

Based on the inputs from the SBC strategy development workshop, **a short intensive burst of a media campaign** using multiple media will be planned in the first three months to **kick off the implementation of the strategy**. This would include a mix of videos, memes, audio messages, traditional songs and theatre/plays, launch of a camp newsletter etc. aimed at **promoting collective action** to prevent vandalism, making it safe for women and girls to access WASH services. The central idea for the campaign or the theme could be developed through a **2-3 hour workshop** (or maybe a competition among youth) with young people in each village.

2. Faith based approach

The **bridges to activities** relevant for this approach are:

- Increase perception that reducing wastage will help us get sufficient water for our needs.
- Increase perception that recycling of gray water will sustain the household's share of clean water.
- Increase perception that by not wasting water the people are following their religion and religious teachings.

Integration of the approach in planned activities under the project

- **Puppet shows or theatre** (preferably local groups)

A series of performances would be organized as part of the pilot intervention. Three to four shows could be organized for each village to cover all areas/plots. **The puppet shows** would primarily **target children** and would mainly highlight their role in water conservation – the small things that they can do to make a large difference. **Theatre/plays** would be targeted at **the youth and adults**, where, in addition to water conservation, the plays could also emphasize making it safe for women and children to access water resources and the importance of caring for the public WASH resources/services.

New Activities Proposed

The project includes **an activity to pilot and evaluate interventions** to enhance water conservation practices. All activities proposed as part of the faith based approach could be included as the pilot intervention.

- **Sensitization meeting with religious leaders**

An initial meeting would be held as **a dialogue with the leaders** on water conservation and **seek their support** in identifying relevant religious text/quotes that can be used to promote water conservation. As preparation for the meeting, the team would approach one or two religious leaders or those well versed with the religious texts to initially **identify some text that prominently relate to water conservation**. These will be shared during the larger meeting to **initiate a dialogue on other texts/quotes** that can be effectively used to promote water conservation. The meeting would also be used to **identify platforms** where the leaders could emphasize on water conservation – both at the tap stands and household level.

- **Exchange learning between households**

In this activity, **group meetings** could be held for every 10-12 households where different

household representatives can share what they do for water conservation. **Positive deviants would be identified in advance** and a discussion facilitated on the importance of it especially from a religious perspective and what more can be done by every household. If feasible, religious leaders could also be invited to these meetings to share their support. **WhatsApp groups of these households** could be created for them to share pictures and updates on how they are going about implementing what was discussed in the meetings. These could be brief, **one hour meetings held once a month**. The follow-up meetings after the first one could include **discussions on problems faced and potential solutions**, in addition to the benefits experienced by those who were able to adopt the practices.

- **Interactive sessions with youth and teachers**

WASH community representatives will facilitate interactive sessions with young people (18–25 years) for them to further promote water conservation among their peers and with teachers who in turn can **conduct sessions with children in schools**. These would be sessions with **games and activities**. Online games could also be explored for young people with access to smart phones. Depending on budget availability and other activities planned, WCRs could conduct the interactive sessions **twice a month for around 6 months**.

- **Nudges**

Nudges are small changes introduced in the everyday environment, that influence decisions related to recommended behaviors. For example, when the tap is opened/running, if a clamp is attached to the jerrycan in a way that it is not possible to remove the jerrycan without first closing the tap, that would nudge the decision to close the tap. Or, if there is a sticker right next to the tap with a strong visual of a thirsty person and a message that closing the tap would show that you care for those who don't get enough water/for the vulnerable people in the community.

3. Addressing social norms approach

The bridges to activities to be achieved are:

- Increased perception that it is normal to talk about menstruation and menstrual health.
- Increased accurate knowledge on the menstrual cycle and support required by women and girls.
- Increased confidence in the value of following hygienic practices during menstruation.

Activities would be geared towards achieving the above-mentioned bridges and would include:

Adolescent girl support group sessions/MHM curriculum (creating a safe space), sessions through the Makani facilitator – coloring book and games on the menstrual cycle for demonstration with both girls and boys, experience sharing with peers (mothers group, couples), training on MHM for wash volunteers, interactive sessions with separate groups of boys, men, women and girls, campaign on Global Days such as International girl child day, International Women's day, etc., reiteration of the messages through WhatsApp, plays and videos and workshops to create handicrafts for menstrual health and hygiene (such as disposal bags, storage box etc.).

Integration of the approach in planned activities under the project

- **Interactive group sessions with women, girls, boys and men**

Information group sessions with women and girls, men and boys are **part of the project workplan**. The approach of addressing social norms would be consciously integrated into these sessions,

which will need to be separate for each group. The sessions would be made interactive with some sessions being planned as **workshops to develop handicrafts for menstrual hygiene** (disposal bags, storage box etc.). The topics for each session could begin with **understanding gender and gender norms** and how they affect both men and women. The topic of menstrual hygiene could be introduced subsequently. **Storytelling** would be an effective tool to use in these sessions. Some sessions would specifically focus on **addressing the taboo and misconceptions** related to menstruation. Each session would be **planned using the Care Group lessons model**⁷ where in there is a mix of dialogue, songs/games, using pictures/SBC materials and ending with a commitment from the participants on a behavior that they would adopt. **The commitments** are then **followed up in the subsequent meetings**. Sessions with girls and women could also be planned at the Makani centers and innovative materials used such as coloring books, games to promote menstrual health and hygiene as well as normalize talking about menstruation.

Other activities already planned such as Global days, LSE curriculum pilot with girls and facilitating improvements in communal latrines, should all consciously integrate this approach. Engaging community leaders, teachers and other influential in the community could do this. Some tried and tested **ways to influence social norms** are:

- Initiating a dialogue with the key reference groups, getting them on board with the need to change the norm and promoting the new norm through these reference groups.
- Community dialogue where-in there is open discussion on the pros and cons of a particular norm in the community, where -in we ensure that positive deviants (those who are already in favor of the norm change) participate in these dialogues.
- Organized diffusion is another tested method of influencing social norms, where-in first new knowledge is created within a group of selected participants. Initially the participants are asked to share the knowledge with one member of the community/family and then to more members of the community in a systematic manner, which is followed up/tracked by the field staff.

⁷ Sample of a Care Group Lesson Plan
<https://drive.google.com/file/d/112reS0yiaNzPrj5n53fagnzj7sKvSaj9/view>



ANNEXES

ANNEX 1: SBC STRATEGY DEVELOPMENT WORKSHOP AGENDA

Development of Social and Behavior Change Strategy for WASH in Azraq Camp

Date: February 21-23, 2023 • Venue: Al Qasr Hotel, Shmeisani, Amman

Workshop Objectives:

- Gain a common understanding of overarching SBC concepts and principles.
- Review the context and findings from the formative research in Azraq camp.
- Utilize the findings to develop key components of an SBC strategy for WASH.

Timing	Session	Method/Facilitation
Day 1, February 21, 2023		
9:00 - 9:30 am	Participant introductions, Workshop Objectives	Ice breaker
9:30 - 10:00 am	Introduction to Social and Behavior Change, SBC Process	Simulation exercise and presentation
10:00 - 10:30 am	How adults 'really' learn (Adult Learning Principles)	Reflection and discussion
10:30 - 11:00 am	Two-way communication	Drawing exercise
11:00 - 11:10 am	Break	
11:10 - 11:35 am	Introduction to the WASH project	Presentation & discussion
11:35 - 12:15 pm	Formative research summary: Findings from desk review and additional research	Presentation and Q&A
12:15 - 1:00 pm	Understanding behavior change determinants	Discussion & group work
1:00 - 1:45 pm	Lunch break	
1:45 - 2:20 pm	Exercise	Group activity
2:20 - 3:20 pm	Prioritization of key behaviors	Presentation, group work
3:20 - 3:30 pm	Break	
3:30 - 4:25 pm	Defining Behavior Change Objectives	Presentation, group work
4:25 - 4:30 pm	Wrap up	

Timing	Session	Method/Facilitation
Day 2, February 22, 2023		
9:00 - 9:30 am	Recap of Day 1	
9:30 - 11:00 am	Behavior Change Framework: Barriers, enablers, audience segmentation	Overview presentation followed by Group work
11:00 - 11:15 am	Break	
11:15 - 12:00 pm	Behavior Change Framework, partially compiled	Presentation by groups, discussion/feedback
12:00 - 1:00 pm	Behavior Change Framework: Key messages, bridges, activities	Overview presentation and group work
1:00 - 2:00 pm	Lunch break	
2:00 - 3:30 pm	Behavior Change Framework: Key messages, bridges, activities	Group work continued
3:30 - 3:40 pm	Break	
3:40 - 4:20 pm	Behavior Change Framework presentation by groups	Presentation by groups and feedback
4:20 - 4:30 pm	Wrap up	
Day 3, February 23, 2023		
9:00 - 9:30 am	Recap of Day 2	
9:30 - 10:00 am	Understanding barriers to behavior change	Role play and Improv Presentation, group work
10:00 - 11:00 am	Strengthening key messages	World Café method
11:00 - 11:10 am	Break	
11:10 - 12:00 pm	Understanding bridges to activities	Plenary discussion
12:00 - 1:00 pm	Complete/modify bridges to activities	Group work
1:00 - 2:00 pm	Lunch break	
2:00 - 3:00 pm	Storytelling activity (Open ended and close ended stories)	Reading stories and discussion
2:30 - 3:15 pm	Completing activities in SBC framework	Groupwork (World Café)
3:15 - 3:25 pm	Break	
3:25 - 4:00 pm	Introduction to monitoring and evaluation of SBC interventions	Presentation
4:00 - 4:30 pm	Workshop closing, evaluation and next steps	

ANNEX 2: COMPLIED SBC FRAMEWORK

Water Conservation and Use

Behavior 1 - Family members use water responsibly to reduce wastage and ensure water conservation

Priority groups and influencers

Priority groups

· Men (25–35 years) · Women (20–45 years) · Adolescent girls and boys (12–19 years)

Influencers

· Teachers · Community leaders (*Mukhtar*) · Religious leaders (*Sheikh, Imam*) · WASH volunteers · NGO staff · Parents/caregivers of adolescents · Older siblings · Aunts

Barriers and enablers from formative research

Barriers

· Overuse of water and leakages/broken taps in the tap stands are considered the main causes of water wastage.
· Children waste water while doing the dishes etc.

Enablers

· Water conservation practices do exist at the household level, although only roughly half of the families are currently practicing them.
· Religion is a distinct motivator reported for this practice.
The Prophet's saying '*Do not waste water even if you are in a running river.*' was quoted.

Other research findings

· There was a general agreement that the camp residents to a great extent practiced water conservation inside the caravans because it is time and energy-consuming to collect water as they need to fill barrels with water and carry it back to the caravan.

Key Messages

- '*Do not waste water even if you are on running river.*' - Prophet Mohammad"
- Take care of water resources today for your family tomorrow.
- Using water responsibly can ensure that your family has sufficient water for your daily needs.
- Show your family and neighbors that you care, by being careful while using water resources.
- Water is precious, let's save it for drinking and not waste it by playing.
- Many responsible residents in our camp use different practices to conserve and reuse water. Are you one of them?
- Carrying water from the tap stand to the home is not easy. We can conserve water with simple practices such as:
 - Reusing the water from laundry, dishwashing, washing vegetables etc. to clean the floor of the house/shelter;
 - Closing the tap properly after every use;
 - Closing the tap at the tap stand once you have collected the water.
- Every drop of water is precious.
- *A little water saves you. A lot of water drowns you.* So if we use less water and responsibly, we will be saved as there will be water available for a longer time. But if we use a lot of water and waste it, we will soon be left with no water.

Bridges to activities

- Increase perception that reducing wastage will help us get sufficient water for our needs.
- Increase perception that recycling of gray water will sustain the house-hold share of clean water.
- Increase perception that by not wasting water the people are following Prophet Mohammad's teachings.

Activities

- Sensitization meeting with Religious Leaders: seek their support in identifying relevant religious text/quotes that can be used to promote water conservation.
- Exchange learning among households about the gray water.
- Awareness sessions by WCR for youth and teachers.
- Puppet and shadow theatre.
- Care groups for mothers and fathers.
- Nudges at the tapstand and communal latrines. (for example a sticker with a picture of hands collecting water or visuals to close the tap when not in use etc.)
- Competition between blocks on water conversation (role play) & community building event.

Community Ownership of WASH Resources

Behavior 2 - Community members take action to prevent vandalism of the WASH infrastructure

Priority groups and influencers

Priority groups

- Male and female community members (25–35 years)

Influencers

- Maintenance committee members (24) (16 males, 8 females) (above 18 years) · Wash committee representative's · Religious leaders · Lead mothers · IBV's · Community centers facilitators

Barriers and enablers from formative research

Barriers

- Lack of incentives system.
- Stealing of the infra structure.
- Different studies indicated that the persons stealing the parts or destroying them were either school children or young men. The reasons for stealing/vandalizing ranged from people 'needing these parts' to need for money/lack of livelihood.

Enablers

- Community members are well aware of the positive consequences of preventing the vandalism.

Other research findings

- Lack of clarity on who is responsible for preventing or reporting vandalism.
- Reasons for not taking any action including being wary of creating conflict, the social norm that women cannot confront men or that men who confront children would be reported for child abuse.

Key Messages

- *'Do not do mischief on the earth, after it has been set in order.'* (From a religious text)
- Preserve public property, each of us will benefit with more water for our families and better health and hygiene.
- You have the power to save resources – use it well.
- Every hand can contribute to maintain a good tap stand.
- Water equals life, let's preserve our lives .
- Let the water network be free from vandalism, so that you can receive your water without leakage.
- Your misuse of infrastructure exposes your life to a health crisis.
- We have a shared responsibility to reduce vandalism.
- The responsibilities for water supply and maintenance of communal latrines is as follows:
 - UNICEF: Responsible for water network and Contact Number:
 - Imdad: Responsible for ...Contact number:
 - ACF: Responsible for.... Contact Number:

Bridges to activities

- Increased perception around the community ownership.
- Improved perception around house hold rights and the org. accountability
- Increased perception that preventing vandalism is a shared responsibility.
- Improved maintenance skills set among the community group.
- Increased culture of reporting (vandalism/misuse) in the camp.

Activities

- Group meetings with community leaders: seeking inputs/ideas from the influencers on collective action to reduce/eliminate vandalism and increase water conservation.
- Organizing social events: identify sports groups and cultural/religious groups in each area and through them organize 1 event a month in each village.
- Campaign on global days: World Water Day, World Toilet Day .
- Reactivation of the accountability in the partnership with the community center by:
 - 1. Community dialogue for WASH related issues with actors: to also showcase/deliberate on what the community can do to improve the situation;
 - 2. IEC stickers and flyers and WhatsApp memes on best practices related to WASH facilities with specific messages related to reduce vandalism;
 - 3. Assigning tap stand focal point to organize water collection schedule at water points.

Behavior 3 - Community members ensure safety for women, girls and children while accessing WASH Facilities

Priority groups and influencers

Priority groups

- Adult male and female community members (aged 25–45 years)

Influencers

- Facilitators of community center · Religious leaders · Community leaders · Camp management · WASH actors in the camp · WASH representatives · Community centers staff

Barriers and enablers from formative research

Barriers

- Children under 18 heading a house hold.
- Less recognition of the community members about their role in providing protection to women while collecting water.
- Operational maintenance for WASH facilities.
- Safety issues related to accessing WASH facilities (lights).
- Lack of communication effective methods/enablers for WASH related issues.

Enablers

- Common agreement – The community cares about safety issues that affect children and women.

Other research findings

- Some water points are controlled by men.
- The lack of safety and privacy is also highlighted by the privatization of communal latrines and the overt preference to build household latrines in lieu of what is being provided communally.
- In KAP 2021, the percentage of respondent that do not feel safe and do not feel privacy in using WASH block latrines doubled in comparison with KAP 2020 (from 9% to 18%).

Key Messages

- Water is for everyone -Let us make it safe for women, girls and children also to collect the water they need.
- It is our collective responsibility to make the use of communal latrines safe for women and girls.
- Give others the right to get their share of water.
- A lot can be achieved when we work together to ensure safe access for women, girls and children to collect water and use communal latrines.
- Simple steps that we can take to ensure safety for women, girls and children to use communal latrines:
 - Ensure the latrine door is lockable from inside;
 - Identify creative ways to patch any holes in the structure;
 - Advocate with the maintenance contractor to install lights ;
 - Accompany the woman/girl/child;
 - Contribute resources to keep a covered waste bin inside or near the latrine.

Bridges to activities

- Increase perception that it is a collective responsibility to ensure safety for women girls and children while accessing WASH facilities.
- Improved reporting and referral system through WCR's.
- Increase recognition of safety and privacy concerns faced while accessing WASH facilities.
- Community members believe it is their responsibility/that they are capable of keeping a safe environment for all.

Activities

- Campaign on global days: International Women's day, International day of the girl child.
- Organizing social events: identify sports groups and cultural/religious groups in each area and through them organize 1 event a month in each village.
- Community meetings to develop action plan for enhancing safety.
- Meetings with Religious Leaders and Community Leaders to sensitize and deliberate on how to make it safer for women girls and children.
- Campaign on collective responsibilities (mainly through Whatsapp, traditional songs and theatre).

Latrine Use and Maintenance

Behavior 4 - Owners of private latrines maintain cleanliness and hygiene in and around the latrines

Priority groups and influencers

Priority groups

- Heads of households

Influencers

- ACF WASH volunteers · Community leaders · Religious leaders

Barriers and enablers from formative research

Barriers

- Lack of cleaning materials and tools.
- Cultural constraints, as some refugees were living with very basic WASH facilities.
- On the cleanliness of private latrines built by WASH organizations 20% of the latrines interior cabin is dirty, 37% has a lot of flies, and 33% percent has a hand washing facility in or around the latrines cabin.

Potential enablers

- Need for wider community training including women on maintenance so they know the basics of how to identify and deal with any malfunctioning of a WASH facility was expressed by the community.

Other research findings

- 50% use self constructed latrines, 10% have private 10% latrines built by WASH organizations.
- 57% maintain the self-constructed latrines by themselves, 29% said it was never maintained, 10% said they reach out to community plumbers and 4% said through UNICEF contractors.
- Cleaning of the latrines is mostly done by women and girls.

Key Messages

- Cleaner toilet means a healthier life.
- Clean restroom promotes good health.
- Leave the latrines clean, so that those who come after you find it comfortable.
- Cleanliness and hygiene inside and around the latrines is the responsibility of every family member.
- Small steps that you can take to keep your latrine clean and prevent diseases:
 - Flush after every use;
 - Keep a small, covered waste bin for sanitary napkins;
 - Do not let water accumulate inside or near the latrine;
 - Clean with disinfectants every day/alternate day.

Bridges to activities

- Increase the ownership of every family member for maintenance and cleanliness of the private latrine.
- Increase perception that a clean and hygienic and well maintained latrine will prevent diseases and keep the family healthy.

Activities

- Story telling sessions with small groups of men, women, adolescents and children.
- Competitions on cleanliness and hygiene.
- Develop a regular newsletter for the camp(highlighting the planned activity).
- Leaflets on tips for identifying and dealing with malfunctions in latrines developed and distributed (or could even be short videos on WhatsApp).

Behavior 5 - Families who share communal latrines monitor cleanliness and hygiene responsibilities

Priority groups and influencers

Priority groups

- Women, girls, boys and men · Heads of households (25–45 years)

Influencers

- ACF WASH volunteers · community representative and leaders · SRAD · NGOs and UN-agencies

Barriers and enablers from formative research

Barriers

- Reliance from refugees on organizations to maintain the public facilities.
- Lack of cleaning materials and tools.
- Cultural constraints, as some refugees were living with very basic WASH facilities.
- Most people are unaware about who is responsible for maintenance of latrines: 33% reported that UNICEF contractor does the maintenance of the latrines, 22% said they themselves maintain it, 7% said community plumbers, and 39% reported that no maintenance was done.

Enablers

- n/a

Other research findings

- Communal latrines were inappropriate, very dirty and there is no safety or privacy.
- The presence of dogs also made it unsafe at night.
- Most people (91%) believed that the owners of the houses near the public bathrooms have taken these bathrooms; therefore, they are responsible for cleaning them.

Key Messages

- If you miss and make a mess help reduce the cleaner's stress.
- Together hand in hand let's use the communal latrines properly.
- Let's be together to fix the communal latrines.
- If you and I take up the are responsibility ourselves, the communal latrines will be always be clean.
- Throwing the garbage in the bathroom siphon will create problems for each one of us – Let us be responsible and help ourselves too.
- Infectious diseases such as cholera, diarrhea, hepatitis, etc. can be transmitted while using dirty bathrooms.
- Maintenance of the communal latrines is the responsibility of UNICEF (or contractor name) in your area. You can contact them via...

Bridges to activities

- Increase the community efficacy (or self-efficacy among community members) for being jointly responsible for cleaning of communal latrines.
- Increase perception that clean and hygienic latrines will protect their health from diseases.
- Increase knowledge on actors responsible for maintenance of communal latrines and how to reach them.

Activities

- Group interactive sessions with users of communal latrines to encourage monitoring cleanliness and hygiene in communal latrines.
- Checklists for monitoring cleanliness developed for every communal latrine and displayed outside the latrine.
- Leaflets on tips for identifying and dealing with malfunctions in latrines developed and distributed (or could even be short videos on WhatsApp).

Personal Hygiene Behaviors

Behavior 6 - Every individual washes hands with soap at all critical times

Priority groups and influencers

Priority groups

- Heads of households (average age 42 years, majority between 26–50 years) · Young people (aged 20–35 years) · Adolescents (10–19 years) · Children (6–10 years)

Influencers

- Health workers · Hygiene promoters · WASH volunteers · IBVs · Teachers · Religious leaders · Facilitators at the centers

Barriers and enablers from formative research

Barriers

- Lack of soap availability (Access).
- Lack of basins for handwashing at HH and WASH facility.
- The knowledge of critical times for handwashing reveals that more importance is given to around 3 critical times, i.e. after using the latrine, before eating and when returning to the house from outside.

Potential enablers

- The importance of handwashing with soap is understood well by the community, especially after the COVID-19 outbreak.
- Handwashing is an integral part of religious rituals.

Other research findings

- The other critical times mentioned for handwashing before preparing food (42%), after coughing or sneezing (22%), before feeding your children (21%), after taking care of pets or farm animals (6%), after eating (2%), after changing baby's diapers and after dumping waste (0.3% each).

Key Messages

- Wash your hands with soap to prevent diseases and infection.
- Wash your hands in all these critical times to prevent diseases (could explore making a song or poem from this message):
 - Before: eating, cooking food, breastfeeding or feeding a child;
 - After: eating, using toilets, playing (for children), changing a baby's diaper/cleaning the baby's feces, taking care of pets or farm animals, dumping waste.

Bridges to activities

- Increase the perception that handwashing at all critical times is very important to prevent negative consequences on an individual's life (health and wellbeing).
- Improve the individuals knowledge and enhance understanding on the critical times of handwashing

Activities

- Handwashing demonstration and awareness sessions, separate by gender targeting all groups. Implemented by WASH volunteers.
- Campaigns during celebrations of WASH global days (handwashing, www, toilet day), including a series of pre-designed WhatsApp and Facebook messages, posters/leaflets.
- Training for WASH volunteers including facilitation, communication skills and presentations skills.
- Implementation Initiatives and campaigns from the community.
- Video from the WASH Reps showing the proper way to do handwashing and how to remember critical times to wash hands.
- Booklet for children.
- Puppet shows.

Behavior 7 - Men, Women, Boys and girls regularly maintain personal hygiene

Priority groups and influencers

Priority groups

· Young men · Women (in the age group of 15-35) · Boys and Girls (10-14 years)

Influencers

· WASH representatives · Religious leaders · Care givers · Community centers staff · Health staff

Barriers and enablers from formative research

Barriers

· Men availability during implementation hours.
· Hygiene supplies availability.

Potential enablers

· Religious text promoting personal hygiene practices.

Other research findings

· KAP shows limited handwashing for some critical time vs other critical times.

Key Messages

· Hygiene is a part of faith.
· Maintaining your personal hygiene prevents common diseases such as skin infections and diarrhea.
· If we take these small steps to ensure personal hygiene, we can all be safe from many diseases and infections:
- *(list the key actions based on preventing diseases that have high prevalence in the camp)*

Bridges to activities

· Increase perception on the positive impact of personal hygiene on health and well being.
· Increase the perception that adopting personal hygiene practices is a critical part of our religion.
· Demonstration of the benefits of maintaining good personal hygiene practices.
· On the other hand the risks and disadvantages of bad hygiene practices. Both from religious and health perspective.

Activities

· Religious leaders to spread messages in circles and Friday prayer (for example).
· IEC material on quotes form *Qur'an* and *Sunnah* that are related to personal hygiene.
· Sessions and material related to the health benefits for good hygiene and risks of bad practices.

Menstrual Hygiene Management

Behavior 8 - Women and girls follow health and hygiene practices during menstruation

(using hygienic materials, handwashing, frequency of change, personal hygiene, seek support from health providers for issues)

Priority groups and influencers

Priority groups

· Women in the reproductive age (19–49 years) · Adolescent girls (10–19 years) · Husbands/partners of women in the reproductive age group · Adolescent Boys (10-19 years)

Influencers

· Teachers · Mothers · Grandmothers · Peers · Sisters (big sisters) · Youth representatives' · Health workers

Barriers and enablers from formative research

Barriers

· Cost of materials considered on the monthly expenses of HH.
· Lack of availability of materials.

Potential enablers

· n/a

Other research findings

· Knowledge of the menstrual cycle is poor among women, girls, men and boys.
It is considered bad blood that is disposed off by the body.

Key Messages

- Personal hygiene during menstruation is very important to prevent infections and stay healthy.
- Following hygienic practices during menstruation will have long lasting effects. The practices to be followed are:
 - Use hygienic, clean menstruation materials - Disposable sanitary pads;
 - Change sanitary pads every 3-4 hours;
 - Continue with personal hygiene practices (showering, cutting nails, handwashing with soap, clean clothes especially underclothes).
- Seek support from a health worker for any problems, they are there to help you.
- Menstruation is a normal, natural, body function. There is no need to be ashamed of it.
- For men and boys:
 - Menstruation is a natural body function, it is normal to talk about it like any other body function.
 - It is however a painful process physically and mentally for women and girls and they need all your support during this time.

Bridges to activities

- Increase the awareness of community members on the menstrual Hygiene best practices.
- Increase the perception that it is normal to talk about menstruation and menstrual health.
- Increase accurate knowledge on the menstrual cycle and support required by women and girls.

Activities

- Adolescent girls support group/MHM curriculum (create a safe space).
- Sharing experiences with peers (mothers group, house to house couples).
- Training on Menstrual Hygiene for wash volunteer.
- Interactive sessions with separate groups of boys, men, women and girls. Makani facilitator – coloring book and games on the menstrual cycle for demonstration with both girls and boys. Training for younger girls on menstrual hygiene.
- Campaign on Global Days such as International girl child day, International Women's day, etc. using videos, theatre, WhatsApp messages, plays and Puppet shows
- Interactive activities such as games, introduction to menstrual cycle tracking app etc.
- Handcrafts activities for menstrual items (disposal bags, storage box, cabinet).

Behavior 9 - Women and girls appropriately dispose menstrual hygiene materials after use

Priority groups and influencers

Priority groups

- Women in reproductive age (15–49 years) · Adolescent girls (10-14 years)

Influencers

- Lead mothers · Hygiene promoters · Youth representatives' · Midwives · Male members of HH

Barriers and enablers from formative research

Barriers

- Difficulty in finding plastic bags.
- Disposing them discretely.
- Lack of place to dispose pads in the communal latrines.
- Dogs tear bags in which sanitary napkins are disposed.
- Taboo around menstruation, which makes it difficult to talk about the issues around disposal too.

Enablers

- n/a

Other research findings

- n/a

Key Messages

- Disposing sanitary napkins in the waste bin instead of throwing in the latrine pit, will avoid clogging of the sewage network.
- Appropriate and safe disposal of sanitary napkins will not only save us from any embarrassment and clogging problems but is also essential to prevent infections and possible diseases.

Bridges to activities

- Increase perception around action efficacy when menstrual hygiene materials are appropriately disposed after use.

Activities

- Include discussion on how and why sanitary napkins need to be disposed appropriately during interactive sessions.
- Messages with visuals on appropriate disposal to be distributed through WhatsApp.

