

Health and Hygiene Promotion Guidance Document for COVID-19 – 29 March 2020

Introduction

Conflict affected populations in Iraq, particularly IDPs and refugees in and out of camps and recent returnees, are already faced with public health risks associated with diseases outbreaks. The situation is currently exacerbated by specific vulnerabilities and challenges related to COVID-19, putting more strain on the IDPs/returnees/refugees and services provided to support them. Given the diverse actors involved in COVID-19 response (WASH, Health, CCCM, Protection, etc.), it is essential to have streamlined guidance on health and hygiene messages to be shared with local communities, who is best placed to deliver these messages, and how messages should be delivered. WASH Cluster Iraq has developed this COVID-19 health and hygiene promotion guidance document to facilitate effective health and hygiene promotion on COVID-19 to affected populations.

Who should be trained on health and hygiene promotion?

Actors responding to COVID-19 must ensure that interventions are adequately resourced with appropriately qualified and experienced full time staff members who can ensure that hygiene promotion efforts are carried out in a planned and systematic way. These staff should oversee Outreach Workers and Community Mobilizers at the community level while carrying out hygiene promotion activities.

Outreach Workers or Community Mobilizers are usually identified from within the community where health and hygiene promotion will take place. Particularly in camp settings, local community members are less likely to be traveling out of the camp, and therefore have a lower likelihood of carrying COVID-19 and becoming a vector of infection. The greater risk is that aid workers based outside of the camp could contract the virus and pass on to camp populations. Partners should limit the volume and frequency of movement in and out of the camp in order to promote effective social isolation and reduce the potential for infection. Given the concerns of a significant outbreak, partners can consider financial incentives as mobilisers will be expected to work longer and more consistent hours. However, ideally community members volunteer their time for the good of their immediate community.

It is not necessary to have a WASH, medical or health background to conduct COVID-19 health and hygiene promotion – even those with a medical background will still have to learn new skills in order to know how to use a community-based approach. Social workers or community organizers can make very effective health and hygiene promoters because they have usually been trained how to communicate with individuals and communities and how to motivate them to take action. Organizations should follow the sphere standards for hygiene promotion and have one hygiene promoter per 500 targeted individuals targeted, both in and out of camps.

What messages should be shared?

COVID-19 and symptoms

- COVID-19 is a novel (new) virus similar to the common cold, but with much more severe effects. It is in the same family as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS)
- Cases can range from asymptomatic to critical – around 80% are mild, 15% are severe, 5% are critical
- Key symptoms include high fever, dry cough, and trouble breathing – severe cases can result in pneumonia, severe acute respiratory syndrome, renal failure and death
 - As this is a novel virus, new symptoms may be discovered. For most up to date information, please visit <https://www.who.int/>
- Highest fatality rates are for elderly and people with pre-existing conditions (high blood pressure, diabetes, smokers) – however, young, healthy people have also had extremely severe cases

How COVID-19 is spread and treated

- COVID-19 is transmitted from a sick person to a healthy one, usually after close contact in closed places (e.g. in a household, workplace, or health care centers).
- It is transmitted through respiratory droplets when a sick person coughs or talks close to another one or coughs or touches a surface. This includes common practices, such as handshaking, hugging, cheek kissing, or touching surfaces where droplets have fallen, such as pens, tables, door handles, grocery items someone coughed on etc.

- Diagnostic tests have indicated COVID-19 infection from a variety of specimens including throat swabs from asymptomatic people and feces.
- Diagnostic test results do not necessarily mean that a person is contagious. People may have been exposed and infected but are NOT transmitting the virus. It is still advised for a person with a positive test to act as if they are contagious and self-quarantine.
- There is no specific treatment for COVID-19. However, many of the symptoms can be treated and therefore treatment is based on the patient's clinical condition.
- Supportive care for infected persons can be highly effective. However, proper measures must be put in place while treating an infected person to prevent spread of disease.

How to prevent COVID-19

- Handwashing – hand hygiene is the top prevention measure for COVID-19. This is the top method of prevention of COVID-19 infection. People should wash their hands for at least 20 seconds covering all surfaces or use an alcohol based hand sanitizer with at least 60% alcohol. Handwashing should occur at the following key times:
 - After coughing or sneezing
 - When caring for the sick (whether wearing gloves or not)
 - Before, during and after you prepare food
 - Before eating
 - After toilet use
 - When hands are visibly dirty
 - After handling animals or animal waste
 - After touching potentially contaminated surfaces (door handles, pens, phones, shelves or items in grocery stores and public places etc.)
- Social Distancing – Maintain a minimum of 1 meter (3 feet) distance between yourself and any other person, and preferably 2 meters (6 feet) if possible particularly one who is coughing or sneezing. When an infected person coughs or sneezes, they spray small droplets from their nose or mouth which may contain virus. If you are too close, you can breathe in the droplets, or the droplets may contaminate membranes of the nose, mouth and eyes.
- Avoid touching eyes, nose and mouth – Hands touch many surfaces and can be contaminated by the viruses that are discharged from an infected person and staying for a while on the surfaces. The contaminated hands can transfer the virus to your eyes, nose or mouth. From there, the virus can enter your body and can make you sick.
- Practice respiratory hygiene – Make sure you and the people around you follow good respiratory hygiene. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Safely dispose of the used tissue immediately and clean your whole upper limb or wash clothes at the earliest. By following good respiratory hygiene you protect the people around you from viruses such as cold, flu and COVID-19.

Correct use of Personal Protection Equipment

- Wear masks and gloves is not advised for healthy people with no symptoms. It is only advised to wear a mask and gloves if you are exhibiting symptoms or caring for someone exhibiting symptoms
- Masks are only effective when used properly, with the following steps:
 - Wash hands before removing mask from package
 - Only handle edges of mask when putting on – touching the front of the mask can contaminate the mask
 - While wearing the mask, do not touch your face – touching mask can transfer germs from your hand to your face, putting you at higher risk of infection
 - Remove mask when it becomes damp
 - To remove mask, first wash your hands. Then, remove from the elastic, avoiding touching the front of the mask. Immediately dispose in trash can with lid. Then, wash your hands again.
- Masks are for one time use only. Mask must be disposed of properly after use
- Masks and gloves may give the wearer a false sense of security. Gloves can still pick up the virus from surfaces and you can infect yourself by touching your face. The most effective ways of preventing COVID-19 infection are regular handwashing, social distancing, avoiding touching face, and practicing respiratory hygiene.
- PPE should still be used for typical WASH related activities, such as cleaning latrines and health care facilities with chlorine solutions or desludging activities.

What to do if a person suspects they have or have been exposed to COVID-19

- Practice self-quarantine – Stay home if you feel unwell. If you have had contact with a suspected or confirmed case of COVID-19, isolate yourself from other people for 14 days. Maintain at least one (1) meter distance from others while feeling ill or self-isolating, including family members. Use a mask if you are having respiratory symptoms such as cough or a runny nose. Family members who have also been exposed to this suspected case should follow the same precautions, even if they are not exhibiting any symptoms and feel well.
- Seek early medical care – If you have a fever, cough and difficulty breathing, seek medical attention as early as possible. Follow the directions of your local health authority. National and local authorities will have the most up to date information on the situation in your area. Calling in advance will allow your health care provider to quickly direct you to the right health facility. This will protect you and help prevent spread of viruses and other infections.

Where should the messages be shared?

The recommended approach for health and hygiene promotion is through household level visits as opposed to mass hygiene promotion, in order to avoid gathering of crowds, which is one of the methods of prevention of COVID-19. Hygiene promotion should be conducted by trained staff, community/block level volunteers, and in collaboration with CCCM/Health partners in camps. PPE is not currently advised for hygiene promoters. Instead, the cluster is recommending that social distancing be practiced, with hygiene promoters remaining at least one (1) meter distance from the household members, washing hands before and after each household visit, avoiding shaking hands, and holding household level sessions outside of the tent/building whenever possible. If they are visiting people who exhibit flu-like symptoms, the hygiene promoters are recommended to wear masks, which should be safely disposed after use, i.e., after getting damp.

Mass media campaigns may be more appropriate based on the fear of unknown visitors bringing the virus to their household. For partners planning to implement mass media campaigns, such as radio, social media, television or text messages, campaigns should be coordinated through the Health, WASH, and CCCM clusters to prevent duplication, ensure synchronization of messages, and facilitate coordination with government messaging.

When should the COVID-19 health and hygiene promotion occur?

Hygiene promotion activities should start as soon as possible, prior to identification of any cases in a location. Existing programs conducting hygiene promotion activities should adjust their messages to cover COVID-19 specific topics mentioned on page 2, in consultation with the Health and WASH clusters. Ideally, households would be visited once per week prior to an outbreak. Following a confirmed case, visits should be minimized and alternative methods of communication, such as text message and radio messages should be considered. Health, WASH, CCCM, and other actors conducting hygiene promotion should coordinate to ensure that visits are not overlapping and are providing complementary messaging. By starting messaging before an active outbreak, households will be better prepared to keep themselves safe and respond appropriately in case of a suspected or confirmed COVID-19 case.

Conclusion

Health and hygiene promotion is one of the key interventions to prevent the spread of COVID-19 throughout populations. By following this guidance, partners can ensure effective hygiene promotion covering all relevant topics on COVID-19. IEC materials produced by WHO/Health Cluster covering these messages in English, Arabic, and Kurdish can be found [here](#).

There currently is a large amount of misinformation circulating on social media and the internet. It is important partners rely on this guidance document for key messages on COVID-19. Actors are encouraged to refrain from sharing unsubstantiated information or participating in hypothetical discussions that may fuel uncertainty and panic in communities. Difficult questions can be referred by the partner organization to the WASH or Health Clusters for guidance on the correct response.

Additional resources developed by UNICEF on hygiene promotion for COVID-19 can be found at the following link: <https://drive.google.com/file/d/1WVoXOBfn1y-CfR5WDqdIpMniOeRBAGKB/view>

Additional Global resources are being collected by the Global WASH Cluster, and can be found at the following link: <https://docs.google.com/document/d/1YXrH8kQn8NGJOXOkpdxW-stsTsxM9L0PSRyMPkhNnOc/edit>