Children under two years of age are at their most vulnerable stage of mental and physical development. Reducing infections and supporting good appetites by promoting hand washing have lifelong benefits. — The Lancet, 2008

Hand washing with soap before handling children’s food is key to protecting infant and young child nutrition in Bangladesh. Undernutrition accelerates rapidly from six to 24 months of age. Low nutritional intake and frequent infections are underlying causes of the problem. When caregivers and children do not wash their hands with soap and water before food preparation and feeding, it can lead to infections, poor appetite, and eventually malnutrition and death.

Each year, more than 2 million children worldwide under the age of five die from diarrhoea and pneumonia. Addressing the main barriers to proper hand washing before child feeding is a life-saving and cost-effective intervention for families in Bangladesh. It can help prevent the spread of common illnesses and reduce stunting, which has not shown much progress from 2007 to 2011.

**Impacts and risks of not washing hands with soap before child feeding**

Even when families feed their children the right foods, in the right quantities, the lifelong benefits of good nutrition are undermined when children become repeatedly sick from infections. Proper hand washing before food preparation and child feeding can:

- Reduce the spread of deadly diseases like pneumonia and diarrhoea—two of the leading causes of death in children less than five years old—and reduce the number of deaths from acute respiratory infections by one-quarter.
- Combat other illnesses, including intestinal worms, eye infections, skin infections, and avian influenza, and can prevent anaemia caused by parasitic infections.
- Prevent decreased appetite—a barrier to ensuring optimal feeding practices. And by reducing illnesses, hand washing can reduce the loss of vital nutrients that are critical to physical and cognitive development.

**Importance**

Hand washing with soap is the most cost-effective health intervention against diarrhoeal disease and reduces pneumonia. Complementary foods transmit pathogens if not hygienically prepared.
Good hand washing behavior linked to child feeding is not highly prevalent

In Bangladesh, formative research on hand washing and child feeding shows that mothers and caregivers do not practice good hand washing before food preparation and child feeding. It is associated with the following common barriers:

- **Lack of convenience**—Sixty-three percent of mothers report that the convenience of soap and water near the location of food preparation and child feeding affects their decision to properly wash hands with soap before food preparation and feeding a child.

- **Misperceptions about health risks**—Mothers with children less than two years of age do not strongly believe in the health benefits of proper hand washing. Only 15 percent of mothers believe that not washing hands with soap before feeding a child causes diarrhoea.

- **Lack of social pressure**—Sixty-six percent of mothers with children less than two years of age report that hand washing with soap is not common in their communities and therefore they do not have the support of social norms to follow this practice.

It works! We can improve hand washing practices by addressing convenience and improving awareness of health risks

A recent feasibility trial conducted in Bangladesh shows that we can improve mothers’ hand washing behaviors by placing water and soap near food preparation and child feeding areas, and building awareness that poor hand washing causes illness. During the trial, mothers’
perception that hand washing causes child illness increased from 14 to 75 percent. Almost two-thirds of households installed and maintained soap and water near the food preparation and child feeding area. This resulted in improvements in mothers’ hand washing behaviors from 12 to 79 percent before food preparation and child feeding. Similarly, the frequency and quality of complementary feeding also improved from 32 to 61 percent. The intervention included community-based actions, such as household visits, setting up water and soap (hand washing stations) nearby, group meetings for mothers, video showings, engaging influential social peers, and mass media.

We can more effectively prevent stunting by creating and sustaining health programmes that directly address individual barriers to proper hand washing practices and child feeding practices.

**Policymakers and programme implementers play a crucial role in improving hand washing and child feeding in Bangladesh**

It is essential for programme implementers to incorporate hand washing into complementary feeding counseling, and to incorporate child feeding into hygiene improvement programmes. Child nutrition will not improve unless we increase nutritional intakes and reduce infection rates—particularly among children less than two years of age. Policymaker support is vital for government programmes and encouraging public-private partnerships with international organizations, non-governmental organizations (NGOs), and soap manufacturers. Public-private partnerships have proven effective in helping scale up behavior change efforts.

Investments in health, education, and child survival are compromised when hand washing with soap before food preparation and child feeding is not commonly practiced. By emphasizing practical solutions that can be incorporated in infant and young child feeding and water, sanitation, and hygiene programmes, we can support all our efforts to improve the health and development of Bangladesh, and achieve the Millennium Development Goal of reducing child deaths and child undernutrition by two-thirds by 2015.

To improve hand washing and achieve better health and nutrition for all families in Bangladesh, policymakers and programme implementers must:

- Promote appropriate infant and young child feeding (IYCF) practices and related hand washing practices through home visits, courtyard meetings, community groups, mass media campaigns, schools, and community leaders.
- Emphasize hand washing with soap before child feeding. Improve feeding practices in water, sanitation, and hygiene improvement initiatives and integrated maternal, newborn, and child health programmes.
- Coordinate efforts across government sectors and partners.
- Integrate programmes that link complementary feeding with proper hand washing behaviors into the National Nutrition Services and National Hygiene Promotion Strategy for Water Supply and Sanitation in Bangladesh.
- Engage the private sector to invest in products and campaigns that address the importance and convenience of hand washing with soap, particularly linked to complementary feeding.
- Mobilize communities in Bangladesh to address the issue of hand washing linked to complementary feeding and improving IYCF practices.
- Scale up the promotion of hand washing with soap and complementary feeding through different national programmes.
Sources