

# Hygiene Improvement Framework

Child mortality from diarrhea has declined by over 50% from 4.6 million deaths in 1980. Yet, a parallel reduction in diarrhea-related morbidity has not been seen, which seriously impacts children's health, nutritional status and learning abilities. Lack of safe water, basic sanitation and hygiene may account for as much as 88% of the disease burden due to diarrhea. In 2000, 1.1 billion people lacked access to safe drinking water, and 2.4 billion people did not have access to basic sanitation (WHO/UNICEF 2000). To facilitate further progress in reducing the overall morbidity associated with diarrhea, more attention will need to be paid to hygiene improvement interventions, which have been demonstrated to be effective in terms of public health impact.

Over the past two decades, USAID's support to child survival programs has

contributed to the mortality reduction through case management of diarrhea and use of oral rehydration, in combination with improved nutrition. Based on available scientific evidence, diarrhea prevention through hygiene improvement was added as an effective approach for reducing diarrhea morbidity. At the center of EHP's program is the Hygiene Improvement Framework (HIF)—a comprehensive approach to diarrhea prevention that addresses three elements: improving access to hardware (water, sanitation, and household technologies); hygiene promotion (promotion of hygiene behavior such as handwashing, safe excreta disposal, and safe household water management); and supporting an enabling environment to ensure the sustainability of hygiene improvements (policy improvement, partnerships, institutional strengthening).

