

Home-Based Care

Reference Guide for COVID-19



 coregroup

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This reference guide will be updated periodically, for the most current version go to: bit.ly/COVID19HomeCare

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Acknowledgements

CORE Group convenes global community health professionals to share knowledge, evidence, and best practices, and then translates these practices into the real world with a direct impact.

This home-based care guide has been put together by a group of partners working collectively, globally, as the Home-based Care CORE Group working group. Partners include: World Vision, Curamericas Global, Food for the Hungry, Hesperian Health Guides, Relief International, PATH, International Federation of Red Cross and Red Crescent Societies, Save the Children, Nutrition International, IMA World Health, RTI, International Rescue Committee, FHI 360, Last Mile Health and Clinton Health Access Initiative.

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Background

This guide provides recommendations to nonprofits, the Red Cross Red Crescent network, and community organizations who are designing programs and materials in response to COVID-19 in low- and middle-income countries. This guide was designed as a supplemental tool for organizations who coordinate community-based education and support for COVID-19 prevention and response and/or who work specifically with community health workers (CHWs) (including trained community health volunteers) to reach households with one-on-one counselling and information. The content, however, can be adapted for other purposes including general COVID-19 home care guidance of internal and external staff members, COVID-19 hotlines, and as an accompaniment to provider discharge orders or community-based provider recommendations for home care. Key recommendations are highlighted at the top of each section for easy integration into field materials, guides, and training resources. Adaptations of recommendations for low-resource settings are provided throughout and in the annex. Information from this guide can be directly copied into materials or adapted for use.

This guide focuses on three main areas: how to support a person whose condition warrants home care because of non-severe symptoms and home care is recommended by local jurisdictions; how to prevent the spread of COVID-19 in the home; and how to provide emotional support to family members. While this manual provides information on danger signs of COVID-19, it should not be used as a guide for when and how a person who has COVID-19 (or its symptoms) should seek medical care. All content adapted to different countries should reflect local policy guidelines and recommendations.

Information from this document was sourced from organizations such as the World Health Organization, Centers for Disease Control and Prevention, UNICEF, and other leaders in public health. For additional information see references.

Much remains to be learned about the repercussions, prevention, and transmission of COVID-19. *Therefore, this manual will be reviewed and updated every month.* Each time information is updated, changes will be highlighted and listed at the beginning of the document.

The collaborators of this document recognize that COVID-19 has created additional economic, emotional, and physical stressors for people around the world. Many have lost loved ones to the virus and even more have lost their livelihoods and stability. We hope that this manual provides clear, concise messaging and technical advice to help implementing organizations and field teams navigate these difficult times.

Modifications since last publication

Updates for publication July 16th, 2020 (Issue #2)

- **Background (Page 3):** Additional uses for this document were updated to include for organizations who coordinate community-based education and support for COVID-19 prevention and response; internal and external staff guidelines for home-based care and infection prevention; training for COVID-19 hotline response teams; and an accompaniment to provider discharge orders or community-based provider recommendations for home care.
- **Symptoms and patient stability (Page 7):** The inability to wake or stay awake; bluish lips or face were added to emergency warning signs. Those experiencing any of the warning signs listed should seek care immediately.
- **Ending isolation after symptoms or confirmed COVID-19 (Page 12):** Updated per WHO recommendations (previously used CDC criteria) people with symptoms can leave isolation 10 days after symptom begin, plus at least 3 additional days; without symptoms (including without fever and without respiratory symptoms). People without symptoms can leave isolation 10 days after positive test for COVID-19.
- **Face masks (Page 14):** Based on WHO mask guidance published on June 12th 2020 (table included), we updated language about who, when and what type of face masks should be worn, the purpose of mask wearing, and the need for education on proper mask care and usage, as well as other hygiene measures should be provided along with promotion of the use of face masks.
- **Other key behaviors in and for members of the household (Page 16):** Information on how time, proximity and number of people increases risk exposure.
- **New section on food security and nutrition (Page 24)**

Introduction

What is COVID-19

COVID-19 is a disease caused by a coronavirus, which is a small virus (too small to see without a microscope), that can spread between people. COVID-19 causes flu-like symptoms such as a dry cough, shortness of breath, fever, weakness and body aches (a comprehensive list of symptoms is included subsequently in the document.). COVID-19 mostly affects the respiratory system. While most infections are not dangerous, it can cause pneumonia (a serious infection of the lungs), other health problems, and can be deadly in severe cases.

How does COVID-19 spread?

Coronavirus enters your body through the mouth, nose, and eyes. Most transmissions are believed to occur when an infected person breathes, coughs, or sneezes near you and the respiratory droplets enter the body through the mouth, nose or eyes. It is likely the virus can also be transmitted by touching an infected surface, then touching your eyes, nose or mouth. There is no evidence of transmission from mom to baby, breastfeeding, urine/feces, from pets, or through blood. Most people who show symptoms will get sick about 5-6 days after getting infected, but coronavirus can live in the body for up to 14 days before signs of illness appear. Some people, especially children, can be infected and never get sick. Children are less likely to show the same clinical symptoms as adults. People can have coronavirus and not know it and transmit the virus to others.

The role of the CHW – patient monitoring and communication during isolation

Community health workers (CHWs) have a vital role to play during this time. Being community-based, they have a unique lens to the needs of their community members.

- **Educate**
 - Educate people with COVID-19 or its symptoms and household members on:
 - When to seek medical attention
 - Home and personal hygiene
 - How to care for the person suspected of having COVID-19 while minimizing risk of further infection in the household
 - The importance of routine health services within the community
 - Address questions raised by community members
 - Address myths and misinformation circulating in communities
- **Communicate**
 - Communicate with households on a daily basis and be available for communication (e.g. provide family with phone number to reach you) in order to provide support and monitor the health of the person with COVID-19 or its symptoms
 - Help the person with COVID-19 or its symptoms establish communication with a local health provider for the duration of the home care period
- **Connect**
 - Inform community leaders about COVID-19 transmission, care and prevention
 - Link homes to referral and other resources being offered by the Ministry of Health (MoH) and agencies in the area (food distribution and voucher programs, distribution of sanitation supplies such as handwashing stands, soap, and disinfectant, etc.)
 - Help coordinate with community resources to ensure basic needs of family and support family in maintaining isolation (for example food, medicine, drinking water, etc.)

Local resources

It is recommended that CHWs (including trained community volunteers) carry a list of local services for easy connection and referral. NGOs can complete this list in the local context as a support resource. Examples of services to include on this list are provided below.

Type of resource	Location	Contact information
Ministry of Health Hotline number		
(Other) Hotline number		
COVID-19 testing site		
Food vouchers and nutritional support		
Domestic abuse support		
Sanitation supplies		
Childcare		
Police station		
Health center		
Referral health center		

Section 1: Understanding symptoms

Symptoms and patient stability

Key messages:

- Most people with COVID-19 will have fever, dry cough, or tiredness
- Most people will get better - symptoms usually last a few days and subside after a week
- If the person develops any of these emergency warning signs, seek care immediately
 - Difficulty breathing or shortness of breath (this is the most common)
 - Chest pain or pressure
 - New confusion, or loss of speech or movement
 - Inability to wake or stay awake
 - Bluish lips or face

- **Common symptoms of COVID-19 include:**
 - Fever or chills
 - Dry cough
 - Tiredness/fatigue
- **Some people have one or more of the following:**
 - Muscle or body aches and pains
 - Sore throat
 - Diarrhea
 - Nasal congestion or runny nose
 - Nausea and vomiting
 - Conjunctivitis
 - Headache
 - New loss of taste or smell
 - Rash on skin, or discoloration of fingers or toes
- **If any of the emergency warning signs/symptoms listed below develop, the person should seek care immediately**
 - Difficulty breathing or shortness of breath
 - Chest pain or pressure
 - New confusion, or loss of speech or movement
 - Inability to wake or stay awake
 - Bluish lips or face
- **The most serious danger from COVID-19 is inability to breathe.** Treatment for severe cases will include oxygen and a mechanical ventilator, available only in health care facilities
To determine if someone has trouble breathing:
 - With proper training, CHWs and family members can monitor the respiratory status of people with COVID-19 or its symptoms. Those with more than 20 breaths per minute should be referred.
 - CHWs and family members can ask the following questions to help determine if referral is necessary:
 - “Do you have shortness of breath doing a task that you would otherwise normally not have symptoms doing?”
 - “Is walking a short distance more difficult today than it would have been a month ago?”
 - “Do you have shortness of breath at rest when you are sitting?”

- **Special advice for adults over age 60 and people with underlying health conditions**
Underlying conditions include HIV, diabetes, heart conditions, TB, malnutrition, chronic lung conditions, kidney disease undergoing dialysis, liver disease, severe obesity, cardiovascular disease, chronic respiratory disease, cancer, and those who are immunocompromised.
 - Adults over 60 and those with underlying health conditions are more likely to develop serious symptoms if infected with COVID-19. These individuals should be referred to a clinic if they show fever and one additional symptom of COVID-19, even if that symptom is mild.
 - People over age 60 with mild symptoms or those with underlying comorbidities (such as cardiovascular disease, chronic respiratory disease, diabetes, and cancer) should contact a health facility. If possible, these people should be cared for in a health facility rather than receive care at home.
 - Monitor household members who are over 60 more carefully, symptoms can quickly move from mild to severe.
- **A person under age 60 with mild symptoms such as fever, cough, headache, and tiredness will likely not require hospitalization and may be safely managed at home as long as they can be followed up and cared for by family members**
 - Most of these cases will recover without complications; however, if conditions change please follow the advice above.
 - Home care may also be considered when inpatient care is unavailable or unsafe (e.g. capacity is limited, and resources are unable to meet the demand for health care services), the person is stable enough to receive care at home, resources for access to food, water and other necessities are available, the other household members are capable of adhering to sanitation precautions.
 - The age and underlying conditions of other household members should be considered when determining whether to recommend home care or isolation at a facility.
- **The decision to provide home or facility-based care requires careful clinical judgment and should be informed by an assessment of the safety of the patient’s home environment.**

Case and contact definitions

Countries may need to adapt case definitions depending on their local epidemiological situation and other factors.

- **Suspect Case**
 - Fever + cough OR shortness of breath; AND having been in direct physical or face-to-face contact with a confirmed or probable COVID-19 case in the last 14 days prior to symptom onset
 - Fever + cough OR shortness of breath; AND history of travel to or residence in location reporting transmission of COVID-19 disease during 14 days of symptom onset; or
 - Fever + cough OR shortness of breath; AND requiring hospitalization; AND not being able to fully explain an alternative diagnosis based on symptom
- **Probable Case**
 - A suspect case for whom test results were inconclusive; or
 - A suspect case for whom testing could not be performed
- **Contact**
A contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case
 - Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;

- Direct physical contact with a probable or confirmed case;
- Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment; or
- Other situations as indicated by local risk assessments.

Note: For confirmed asymptomatic cases, the period of contact is measured as the 2 days before through the 14 days after the date on which the sample was taken which led to confirmation.

Section 2: Home-based care

Caregivers for those with COVID-19 or its symptoms

Key Messages:

- Choose a caregiver who is in good health and has no underlying chronic conditions (including age) and can follow proper protective behavior.
- Limit the number of caregivers
- Ensure that the person with COVID-19 or its symptoms rests, receives nutritious meals and stays hydrated
- The caregiver should always wear a mask when in contact with person with (symptoms of) COVID-19

- **How to choose a Caregiver**
 - The caregiver should be someone who is in good health and has no underlying chronic or immunocompromising conditions such as high blood pressure, HIV, TB, diabetes, lung or heart problems (see list in Section 1).
 - Limit the number of caregivers. Ideally, only one person is providing care to the person with COVID-19 or its symptoms.
 - Ideally the caregiver is someone who lives in the home, can provide frequent care and is able to wear a face mask.
- **Management of non-severe cases**
 - The person with COVID-19 or its symptoms should:
 - Rest as often as possible.
 - Drink plenty of water from a container that is separate from other family members.
 - Eat plenty of nutritious food such as fruits, vegetables, and meat.
 - Remedies to help alleviate symptoms of COVID-19. Note that these do not cure COVID-19.
 - **Fever:** Use cool cloths for feeling too hot, or a blanket for chills. Use paracetamol (acetaminophen) for discomfort or to lower fever. For an adult, give 1000 mg every 6-8 hours. **Do not** give more than 4000 mg per day.
 - **Cough:** Cough medicines do not cure a cough and are best avoided. Gargling with warm saltwater several times a day may help. Breathing steam in a hot bath, with a humidifier, or by covering your head with a towel over a pan of hot water may help.
 - **Chest pain:** A heating pad or a hot compress (cloth dipped in hot water and then wrung out) on your chest may lessen pain.
 - **Aches and pains:** Take paracetamol (acetaminophen) for pain (same dose as for fever), especially if pain keeps you from resting or sleeping.
 - **For difficulty breathing:** Breathing steam (see cough, above) and drinking warm fluids may help lessen mucus in the lungs and help open airways. The caffeine in a cup of coffee or black tea may also help. Do not smoke or be around smoke.
- **Contact the nearest health facility if symptoms get considerably worse or if the person develops any of the serious symptoms.**

Home isolation and room set up

Key messages:

- The person with COVID-19 or its symptoms should stay isolated in a well-ventilated single room (i.e. with open windows) separate from others who do not have symptoms
- Person with COVID-19 or its symptoms should stay 2 meters away from others (1 meter minimum - 2 meters is around two arm lengths)
- Person with COVID-19 or its symptoms should wear a mask when around other people
- Handwashing equipment and soap (or sanitizer) should be readily available
- Keep rooms well-ventilated
- If house space is limited, prioritize keeping those who ages 60 and older and those who have medical conditions isolated from the person with COVID-19 or its symptoms

Persons in the household belonging to high-risk groups (e.g. the elderly, or people with underlying conditions (see list in Section 1)) should be especially careful to avoid contact with the person with COVID-19 or its symptoms and with objects that they come in contact with.

- **Home and sick room setup**
 - The person with COVID-19 or its symptoms should stay isolated in a well-ventilated single room (i.e. with open windows) separate from others who do not have symptoms.
 - All people in a household with COVID-19 or its symptoms can be isolated in the same room.
 - The person with COVID-19 or its symptoms should have a waste bag in their room for used tissues, face masks, and other waste; waste should go into the unsorted garbage.
 - Ensure that shared spaces (e.g. kitchen, bathroom) are well ventilated (keep windows open).
 - Use dedicated linen and eating utensils for the person with COVID-19 or its symptoms; these items may be reused after they are cleaned with soap and water.
- **Physical distancing and limiting exposure**
 - Person with COVID-19 or its symptoms should stay at least 2 meters away from others (two arm lengths). Mark 2 meters with chalk or place an object as a reminder to family.
 - The caregiver should limit the length of time they spend with the person with COVID-19 or its symptoms. Longer exposure can lead to increased risk of transmission. There is no safe amount of time to be exposed to someone with COVID-19 or its symptoms.
 - Household members without symptoms should stay in a different room or, if that is not possible, maintain a distance of at least 2 meters from the person with COVID-19 or its symptoms (e.g. sleep in a separate bed).
 - The person with COVID-19 or its symptoms should put on a mask and maintain a distance of 2 meters from others when leaving the “sick room” or when others enter the sick room.
 - Limit the movement of the person with COVID-19 or its symptoms in the house and minimize their presence in shared spaces.
- **Visitors should not be allowed until the person with COVID-19 or its symptoms has completely recovered and has no signs or symptoms of COVID-19 (see more information in section below on when to come out of isolation).**

When space in the home is limited

- If house space is limited, prioritize keeping those who are ages 60 and older and those who have underlying medical conditions isolated from the person with COVID-19 or its symptoms

- If the person who has COVID-19 or its symptoms does not have an extra room to isolate alone in, instruct them to:
 - Wear a face mask
 - Minimize time with other family members as much as possible
 - Aim to keep 2 meters distance from others in the home
 - If only one bed is available and no other sleeping space is an option, sleep head to toe to avoid breathing in the same air as the sick person
 - Wash hands frequently with soap for at least 20 seconds
 - Avoid touching surfaces (disinfect surfaces regularly – see Section 3 on home sanitation section)
 - Sanitize surfaces after breathing/sneezing/coughing on or touching them
 - Dispose of your own personal waste (e.g. tissues) and wash hands immediately
 - Keep windows and doors open to increase ventilation

Contacts and ending home isolation

Key messages:

- Contacts should be quarantined for 14 days from the last day of exposure to monitor their health
- People with symptoms can leave isolation 10 days after symptom begin, plus at least 3 additional days without symptoms (including without fever and without respiratory symptoms)
- People without symptoms can leave isolation 10 days after positive test for COVID-19

Contacts of a person who has COVID-19

See definition of a contact in Section 1: Case and contact definitions.

- Contacts should be quarantined for 14 days from last exposure
- Contacts should follow protocols for seeking medical attention based on symptoms

Criteria ending Isolation in the “Sick Room”

- For people with symptoms: 10 days after symptom begin, plus at least 3 additional days without symptoms (including without fever and without respiratory symptoms)
- For people without symptoms (asymptomatic): 10 days after positive test for COVID-19

For example, if a patient had symptoms for two days, then the patient could be released from isolation after 10 days + 3 = 13 days from date of symptom onset; for a patient with symptoms for 14 days, the patient can be discharged (14 days + 3 days =) 17 days after date of symptom onset; for a patient with symptoms for 30 days, the patient can be discharged (30+3=) 33 days after symptom onset).

Section 3: Preventing the spread of COVID-19 in your home

Home sanitation

Key messages:

- Sanitize home surfaces often/daily
- Person with COVID-19 or its symptoms should avoid sharing items and physical contact
- Person with (symptoms of) COVID-19 should wash their own handkerchiefs or linens
- Any item leaving the isolation room should be considered contaminated with the virus

- **Sanitize with a .1% (1000 ppm) hypochlorite solution** (See Annex 1: Bleach to water ratio to make a household disinfectant)
- **Sanitation in the “sick room”, the room of person with COVID-19 or its symptoms**
 - Clean frequently touched surfaces in the room where the person with COVID-19 or its symptoms is being cared for with soap and water daily and then disinfect them (for example: bedside tables, bed frames, and bedroom furniture). If possible, any cleaning of possibly contaminated surfaces within their room should be done by the person with COVID-19 or its symptoms.
 - Gloves, masks, and other waste generated during home care should be placed into a waste bin with a lid in the room of the person with COVID-19 or its symptoms. Waste should go into the unsorted garbage.
- **Clean and disinfect bathroom and toilet surfaces at least once daily**
 - If the person with symptoms is sharing a bathroom with others, they should disinfect the surfaces after using the bathroom, so that others who follow are not exposed to infection.
 - Regular household soap or detergent should be used first for cleaning, and then, after rinsing, apply disinfectant solution (see Annex 1).
 - Gloves and protective clothing (e.g. plastic aprons) should be used when cleaning surfaces. Either utility or single-use gloves can be used. Perform hand hygiene before putting on and after removing gloves.
 - After use, utility gloves should be cleaned with soap and water and decontaminated with 0.1% sodium hypochlorite (bleach) solution. Single-use gloves (e.g. nitrile or latex) should be discarded after each use.
- **Washing Laundry**
 - Clean the clothes, bed linen, and bath and hand towels of the person with COVID-19 or its symptoms using regular laundry soap/detergent and hot water and dry thoroughly.
 - Gloves and protective clothing (e.g. plastic aprons) should be used handling clothing or linen soiled with body fluids. Perform hand hygiene before putting on and after removing gloves.
 - Place contaminated linen into a bag or discard. Do not shake soiled clothing or linen and avoid contaminated materials coming into contact with skin and clothes.
- **Food safety**
 - The person with COVID-19 or its symptoms should not cook food.
 - If possible, the person with COVID-19 or its symptoms should eat in the separate area, preferably their “sick room”. If they cannot, they should stay at least 2 meters away from other members of the household during meals or eat at a different time than other people in the household.
 - Handwashing is especially critical to reducing the spread of COVID-19 and should be done before and often while preparing and serving food.
 - Wash fruits and vegetables to rid them of possible outside contamination.
 - Wipe food bottles and cans with a disinfectant before being opened or stored.

- Clean all pots, dishes, bowls, and utensils with soap and water, and store them in a clean, safe place.
- **Sharing of items and physical contact**
 - Avoid other types of exposure to contaminated items from the person with COVID-19 or its symptoms (e.g. do not share toothbrushes, cigarettes, eating utensils, dishes, drinks, towels, washcloths, or bed linen).
 - Avoid physical contact (e.g. hugs, hands shaking, etc.) with adult family members

Face masks

Key messages:

- Mask use alone cannot protect you from COVID-19. Hand hygiene, distancing and cleaning are also needed along with mask use to reduce the risk of transmission
- Masks primarily help prevent the spread of COVID-19 to others rather than protecting the wearer. Simply put, by wearing a mask, you protect others. When others wear a mask, they protect you
- Medical masks should be worn by anyone with COVID-19 or its symptoms, caregivers, and household members of those with COVID-19 or its symptoms, and people who are ages 60 or above or who have underlying health conditions. If no medical masks are available, a cloth mask can be used. Cloth masks should be worn in areas where it is recommended by local authorities or in areas of widespread transmission where social distancing cannot be maintained
- Children under age 2 and anyone not able to remove the face mask themselves should not wear a face mask
- Face masks or face coverings should cover both nose and mouth
- When the face mask is taken off, it should be removed by touching only the elastic bands or strings and pulled away from the face at arm's length; the front and inside parts of the mask should never be touched (assume it is contaminated)
- Wash hands immediately after removing the mask
- Wash cloth masks with soap and water after use. Dispose of paper masks after each use

- **General Mask Use**
 - Masks must be worn and handled correctly in order to reduce the risk of transmission. See Annex 3 “How NOT to wear a mask” and “How to put on/remove a Face Mask”
 - Handwashing and social distancing should be emphasized alongside mask recommendations.
 - People should avoid touching their face while wearing the mask
 - Hands should be washed thoroughly with soap immediately after removing the face mask.
 - Masks should stay in place and not be touched or handled during use as it is possible for virus particles on the outside of the mask to enter your nose/mouth/eyes when it is moved.
 - Hands should be washed thoroughly with soap if the mask is touched or adjusted
 - When the face mask is taken off, it should be removed by touching only the elastic bands or strings and pulled directly away from the face at arm's length; the front and inside parts should never be touched.
 - Replace mask as soon as it becomes damp or ripped.
 - Do not share a mask between members of a household.
- **Medical masks**
 - See who should wear medical masks and where they should be worn in the table below.
 - The person with COVID-19 or symptoms should wear a medical mask as much as possible to contain respiratory droplets and secretions. This mask should be changed at least once daily.

- Do not reuse non-cotton/cloth, single-use, disposable masks.
 - If you must reuse, put it in a separate paper bag after each use. Rotate their use so you only use each mask once every 5 days allowing the virus to die before next use
- Video on how to wear a medical mask
https://www.youtube.com/watch?time_continue=9&v=adB8RW4I3o4&feature=emb_logo

● **Cloth masks**

Medical masks are more effective at reducing transmission than cloth masks. Given limited accessibility of medical masks, a cloth mask can be used if medical masks are not available. See how to make a no-sew cloth face mask in Annex 2.

- See who should wear cloth masks and where they should be worn in the table below.
- The best cloth face masks:
 - Have at least 3 layers of cloth. Ideally, the inner layer of the mask is made from water absorbent material such as a cotton or cotton-blend. The outer layer from a water-resistant fabric (such as polypropylene, polyester). It is not recommended to coat the mask with compounds such as wax.
 - Are made of non-elastic cloth (choose a cloth that does not stretch easily).
 - Are made of cloth that is durable and can withstand high temperatures (60°C or more)
 - Are snug against your face.
 - Are made from a thick fabric (aim for a fabric that, when held up to the sun, the light does not outline the individual fibers).
- Wash cloth masks with soap and hot water each day or when they become wet or soiled.
 - If hot water is not available, wash mask with soap/detergent with room temperature water, followed by either: boiling mask for 1 minute, or soaking mask in .1% chlorine for one minute and then thoroughly rinsing.
- If possible, have multiple masks to allow time for washing/drying.
- Video on how to wear a fabric mask
https://www.youtube.com/watch?v=ciUniZGD4tY&feature=emb_logo

Mask	Who: Masks should be used for	Where: Settings
Medical mask (surgical or procedural masks that are flat or pleated)	• Health workers	• Health care settings within the clinical areas
	• People caring for suspect or confirmed cases of COVID-19 outside of health facilities	• Home settings with a sick person
	• Anyone with symptoms suggestive of COVID-19	• Any setting in the community
	• People aged 60 or over • People with underlying health conditions	• Public settings where physical distancing cannot be maintained
Non-medical (cloth) mask	• People in the general public in areas with no or limited capacity to implement control measures, including physical distancing of at least 1 meter • People in crowded transport	• Public settings • Workplaces • Public transport – bus, metro, etc.

Handwashing and home-based handwashing stations

Key Messages:

- Wash hands with soap when entering home and before touching face. If you have the virus on your hands and touch your eyes, nose, or mouth you could infect yourself with the virus.
- Wash hands after touching frequently touched surfaces such as doorknobs, phones, dishes, etc. as they could be contaminated with virus.
- Regular soap and water are the best means to clean the disease from your hands.

● When to wash hands

- After any type of contact with people with COVID-19 or symptoms or their immediate environment.
- Before and after preparing food, before eating, after using the toilet.
- After coughing or sneezing/touching used tissues.
- After touching shared common surfaces or objects (doorknobs, phones, etc.).
- Before touching your face after caring for someone who has COVID-19 or its symptoms.
- Before seeing older people or those more at risk to illness (see list in Section 1).
- Before and after breastfeeding or touching a baby.
- When you return home from being out (arrive from store/work, etc.).
- After handling animals or any waste.

● If hands are not visibly dirty, an alcohol-based hand rub can be used. For visibly dirty hands, use soap and water.

● How to wash hands (see pictures in Annex 4)

- Wet hands with clean, moving water.
- Apply soap and lather hands by rubbing them together with the soap. Be sure to lather the backs of hands, between fingers and under nails.
- Scrub hands for at least 20 seconds (can hum happy birthday song twice).
- Rinse hands under clean, moving water.
- Dry hands with clean towel or air dry.
 - It is preferable to use disposable paper towels to dry hands. If these are not available, use clean cloth towels and replace them frequently.
- See Annex 4 for how to wash your hands if in water-constrained environments.

Other key behaviors in and for members of the household

Key Messages:

- Stay home as much as possible. All household members should avoid leaving the home. If you must leave the home, practice maintaining distance and handwashing
- Do not touch your eyes, nose, and mouth with unwashed hands
- Avoid crowds, including social gatherings of any size
- People should limit the amount of time they spend with other people - risk increases with the number of people one is exposed to, the duration of time spent with them and the proximity, or how close they are together

Hand and respiratory hygiene

- Don't touch your eyes, nose, and mouth with unwashed hands.
- Cover your coughs and sneezes. If you cough or sneeze, cover your mouth and nose with a tissue or use the inside of your elbow.
- Don't touch frequently touched surfaces in public areas, such as counters and handrails.
- Wear a cloth face covering to help slow the spread of COVID-19.

Physical distance

- **Stay home as much as possible**
 - All household members should avoid leaving the home. If you must leave the home, practice maintaining distance, wearing a mask, and handwashing.
 - People should limit the amount of time they spend with other people - risk increases with the number of people one is exposed to, the duration of time spent with them and the proximity (or closeness) to others.
- **Be aware of your distance to others when outside the home**
 - Keep at least 2 meters (2 arm lengths) away from people when outside your household.
 - Avoid touching frequently touched surfaces such as handrails and doorknobs.
 - Avoid crowds, including social gatherings of any size.
- **Avoid public transportation (such as a van or bus). If you must use public transportation:**
 - Maintain 2 meters (two arm's length) of distance from other passengers as much as possible.
 - Sit near an open window.
 - Wash your hands or use hand sanitizer as soon as possible after leaving public transportation.
 - Don't ride in a car with members of different households.

Section 4: Caring for children and routine health services

Child feeding during illness

Key Messages

- Breastfeeding mothers should continue to breastfeed
- If a mother has respiratory or other COVID symptoms, she should wash her hands with soap and water before and after contact with the infant and use a face mask when feeding or caring for the infant
- If a mother has COVID-19 or its symptoms, do not separate her and her infant, unless she is unable to care for the infant

- It is important to protect babies and young children from losing weight when they become sick, whatever the cause. To do this:
 - Breastfeed more frequently.
 - Continue to follow recommended infant and young child feeding guidelines.
 - For children over six months, continue to provide food and fluids (including breastmilk).
 - Add another meal during recovery.
 - Use responsive feeding techniques to encourage sick children to eat and drink.
 - See this link for more information and counseling cards for child feeding when COVID-19 is suspected or confirmed: <https://www.advancingnutrition.org/news-events/2020/04/24/infant-and-young-child-feeding-recommendations-when-covid-19-suspected-or>

Breastfeeding and COVID-19

- **If a mother has COVID-19 or its symptoms, she should continue breastfeeding**
 - There is no conclusive evidence to suggest the virus is transmitted to infants via breastmilk
 - The benefits of breastfeeding far outweigh any risk of transmission.
 - There is high quality evidence showing that breastfeeding reduces neonatal, infant and child mortality and improves lifelong health and development in all geographies and economic settings.
- **Mothers with COVID-19 or its symptoms should practice the following hygiene behaviors when breastfeeding**
 - Breastfeeding mothers should wear a face mask to reduce the possibility of droplets with COVID-19 being spread to her infant.
 - Mothers should always wash hands with soap and water at critical times, including before and after contact with the infant.
- **In situations when severe illness in a mother with COVID-19 or other complications prevents her continuing direct breastfeeding, mothers should be encouraged to express milk**
 - Expressed breastmilk can be stored without refrigeration for up to 4 hours and in a refrigerator for up to 4 days.

Childcare and routine health services during COVID-19

Key Messages

- If a mother has COVID-19 or its symptoms, do not separate her and her infant, unless she is unable to care for the infant. While caring for the infant she should wear a mask, and wash hands with soap and water at critical times, including before and after contact with the infant

- During the outbreak it is critical to continue ANC, health facility delivery, postnatal care, newborn, and well-baby clinic (immunization and growth monitoring) services at the health facility
- Continued care-seeking for sick children must be encouraged for the management of major causes of childhood illness as should essential community-based services including for malaria, pneumonia, diarrhea and wasting
- Those without chronic conditions or who are below age 60 should continue to seek routine health services

- **If a mother has COVID-19 or its symptoms, she should continue to care for her child as she is able. She should adhere to the following:**
 - Wash hands frequently with soap and water or use alcohol-based hand rub, especially before touching the baby.
 - Regularly clean and disinfect surfaces.
 - Wear a cloth or disposable mask while feeding (see instructions on mask use in Section 3).
 - Continue to ensure her child receives on-going essential services for routine medical visits.
 - Mother and child should maintain physical distancing from other people (2 meters or 2 arm lengths).
 - Mother and child should avoid touching eyes, nose and mouth.

Routine and essential health services

- **Health facilities have been instructed to sanitize waiting areas and consultation rooms and have hand-washing stations for all clients. To further protect yourself and others during doctor's visits:**
 - Wear a cloth or disposable mask while feeding (see instructions on mask use above)
 - Wash your hands before and upon leaving the health facility
 - Maintain 2 meters (2 arm lengths) distance
 - Attend the visit alone or with as few other people from your household as possible
- **It is very important to seek medical care early and follow instructions from a health care provider if a child becomes sick with symptoms of fever, cough, difficulty breathing that are typical of COVID-19 or another type of illness such as diarrhea.**
 - Mothers and families can be advised that among the few cases of confirmed COVID-19 infection in children, most have experienced only mild or asymptomatic illness.
- **Children should continue to attend regular doctor's appointments and keep his/her vaccinations and growth monitoring up to date. This will reduce the possibility of infection with other viruses. Children should continue to:**
 - Receive their routine immunizations during COVID-19
 - Go to the health facility for well-baby services such as growth monitoring, vitamin A supplementation where recommended and deworming.
 - Care-seeking for sick children should be encouraged for the management of major causes of childhood illness including for malaria, pneumonia, diarrhea and wasting.
 - Childhood diarrhea needs to continue to be treated, even during COVID-19.
 - Ideally, parents should keep zinc/ORS available in their home in case of an episode of childhood diarrhea. If not, caregivers should seek care at the health facility, and not delay
- **Pregnant women should continue to seek ANC, health facility delivery, postnatal care, and newborn services at the health facility during COVID-19**
 - Antenatal care, delivery, postnatal care, and newborn care are considered essential.
 - Unless it is absolutely impossible, women should attend appointments alone and that children should not be brought to the health facility for ANC and FP consultations.

- During the outbreak ANC, delivery, PNC, and newborn services at the health facility will be adapted to ensure safety by accommodating social distancing, provision of protective equipment, and ensuring safe handwashing practices.
- Maintaining a healthy diet and good nutrition during pregnancy, taking iron/folic acid and any other prenatal supplements is important, especially at this time.
- Pregnant women should be cautioned that home births carry serious risks to mother and child.
- **Adults and children with chronic conditions such as TB and HIV are at higher risk for severe symptoms if infected with COVID-19 should reduce contact with the health facility.**
 - Those with chronic conditions should continue to be monitored remotely by CHWs to ensure adherence to treatment, monitoring of complications and encouragement to continue taking prescribed medication.
 - If possible, they should be provided with greater supply of medication in order to reduce the need to visit the health facility.
- **Those without chronic conditions AND who are below age 60 should continue to seek routine health services.**

CHWs and routine home visits

- **If CHWs come for routine household visits, they should:**
 - Conduct the visit outdoors if possible.
 - If entering the household, CHWs should remain at least 2 meters (two arms lengths) away during the visit.
 - CHWs are encouraged to adopt low/no touch techniques, however if they must touch a person (e.g. to measure a child), they should wear a mask and wash their hands thoroughly before and after they do so.
- **It is important that women still have access to family planning methods during COVID-19**
 - The CHW should counsel the women on their family planning options during this time and provide oral contraceptive pills to the women if that is part of their responsibilities.
 - The CHW can also refer a woman to the nearest health facility if she wants to use injectable family planning methods, like Depo or Sayana Press. The IUD may not be a priority of the health system during this time.
 - The CHW should also counsel clients that COVID-19 can be spread through kissing or through direct contact.

Section 5: Household emotional support

Key Messages:

- Recognize that different people within your household will have different stressors
- As much as possible, reduce sources of stress by seeking information from reliable sources and reducing the time spent consuming news (1-2 times per day, rather than every hour)
- While providing responsive care to children may be difficult during this time, spending time with children and talking and playing with them will help children feel loved and secure

Helping adults

Be aware that in addition to stress from loss of certain sources of income and the absence of childcare support, the mere acts of social isolation, quarantine, and distancing can affect you and your family's psychological well-being.

- **Recognize that different people within your household will have different stressors.**
 - Older adults, especially in isolation and those with cognitive decline/dementia, may become more anxious, angry, stressed, agitated, withdrawn, overly suspicious during the out- break and while in quarantine.
 - Share simple facts about what is going on and give clear information about how to reduce risk of infection in words older people with/without cognitive impairment can understand. Repeat the information whenever necessary.
- **If you feel that you are becoming angry:**
 - Explore what is really behind your anger
 - Be aware of your anger warning signs
 - Identify your triggers
 - Learn ways to cool down quickly
 - Find healthier ways to express your anger
 - Stay calm by taking care of yourself
 - Recognize if you need professional help
- **As much as possible, reduce sources of stress by:**
 - Seeking information from reliable sources and reducing the time spent consuming news (1-2 times per day, rather than every hour).
 - Seeking support from family and friends via phone, email, text, etc.
 - Setting aside some time each day to do something enjoyable—e.g., talking to a friend over the phone.
 - Trying to maintain daily routines (including not skipping meals) and make time for physical activity and sleep.
 - Using meditation or prayer to relieve stressful thoughts and feelings.
 - Engaging in activities that in the past have helped with managing adversity.

Helping children

- **Provide extra support to your children during COVID-19**
 - During times of stress and crisis, it is common for children to seek more attachment and be more demanding on parents.
 - Discuss COVID-19 with your children in an honest and age-appropriate way. If your children have concerns, addressing them together may ease their anxiety.

- Children will observe adults' behaviors and emotions for cues on how to manage their own emotions during difficult times.
- While providing responsive care to children may be difficult during this time, spending time with children and talking and playing with them will help children feel loved and secure.
- Many children will be affected by school closures. It is important to keep children active and learning while still practicing physical distancing. Some example activities:
- Observe what seems to catch a child's attention or interest and provide her/him with more playthings of that type.
- Since children are likely to spend more time indoors, within the courtyard or outdoors (if indoor space or courtyard does not have enough space) and not in the company of their friends. Provide them with playthings made from locally available child-friendly, safe materials.
- **Teach your children about COVID-19 and respiratory and hand hygiene**
 - About the virus: Have a conversation with the children about COVID-19 to understand what they really know about it. Validate their feelings and emotions and let them know all feelings are okay and provide assurance that this pandemic will eventually come to an end. Correct any inaccurate information and educate them about the disease.
 - Draw or find pictures of virus/microbes that can be colored by children (e.g. <https://www.chrichmond.org/blog/7-pages-of-fun-during-covid-19-a-kid-friendly-coloring-book>)
 - Read books or magazines together. Here is a suggested short story compilation that can be printed to explain COVID-19 to children; <http://www.elsiestayshome.com> or "My Hero is You, Storybook for Children on COVID-19" by the Inter-Agency Standing Committee (IASC) Reference Group on Mental Health and Psychosocial Support in Emergency Settings (IASC MHPSS) and is available in many languages
 - Handwashing: Teach children to wash their hands. Explain that handwashing can keep them healthy and stop the virus from spreading to others. Help the child make a routine around handwashing—e.g., "we always wash hands after we come home."
 - Handwashing games with rhymes. Have a special song or a rhythm that you do every time you and the child wash hands. This will make handwashing fun for the child and allow her/him to remember how long she/he must wash their hands.
 - Face masks: Explain personal protective equipment (PPE)/masks to children so that they are not scared to wear them or of people who are wearing them.
 - Inform children that masks are just as important as getting dressed or washing hands - make it part of their daily routine. To make a child feel comfortable with the notion of wearing a mask, first put a mask on a puppet or doll and then invite the child to try a mask.
 - To make a child feel comfortable with the notion of wearing a mask, first put a mask on a puppet or doll and then invite the child to try a mask.
 - Social Distancing: Role-play with the child, or with the use of dolls or puppets describe how to maintain social distancing from others.
 - Disinfecting home: Make cleaning and disinfecting the house into a fun game.

Section 6: Supporting those impacted by domestic violence and sexual assault

Key Messages

- If a victim of domestic abuse: keep information on domestic violence hotlines, social workers, child protection or nearest police station, and accessible shelters and support services. Be discreet so that your partner or family members do not find this information.
- Reach out to supportive family members or friends who can help practically (e.g. food, childcare) as well as in coping with stress
- Develop a safety plan for their and their children's safety in case the violence gets worse

Helping adults

Community members should be made aware of the increased risk of domestic violence during this pandemic and the need to keep in touch with and support those subjected to violence, and to have information about where help for survivors is available.

- It is important to ensure that it is safe to connect with domestic violence victims when the abuser is present in the home, and that intervention will not lead to more harm for the victim or the person intervening.
- Understand that new abusive behavior may be related to stress caused by the COVID-19 pandemic, so the abuser may also need support.
- **Individuals experiencing domestic violence may find it helpful to:**
 - Reach out to supportive family members or friends who can help practically (e.g. food, childcare) as well as in coping with stress.
 - Keep information on domestic violence hotlines, social workers, child protection or nearest police station, and accessible shelters and support services available. Be discreet so that your partner or family members do not find this information.
 - Develop a safety plan for their and their children's safety in case the violence gets worse.
 - This includes keeping phone numbers of neighbors, friends, and family whom you can call or go to for help
 - Have accessible important documents, money, and a few personal things to take with you if you need to leave home immediately
 - And plan how you might leave the house and get help (e.g. transport and destination addresses)

Supporting children who experience trauma and abuse

- Discuss the social and economic impact of COVID-19 and what that means to families, including yours (feelings of anxiety, isolation, fear, etc.) with your children.
- Explain that different people respond differently to stressful situations and some can become violent and abusive.
- Encourage them to report any abuse whether actual or perceived and assure them that all information will be kept confidential.
- If you suspect abuse or a child expresses abuse, do not ignore it. Address it by either discussing it with family members and/or reporting it to appropriate authorities. Be sure to think it through or discuss with someone you trust before acting, as the action you choose to take can lead to more harm for the child.
- If abuse persists, the victim(s) should be removed from the abusive environment.

Section 7: Household food security and nutrition

Key Messages

- Be aware of and support options for food, water and resource delivery in the community
- If families are under isolation, help identify neighbors or family that can help with food and water delivery
- Try to limit shopping trips, and do not send the caregiver of the person with COVID-19 or its symptoms
- Families need nutritious food and water to maintain health, including during COVID-19
- Continue to meet the unique nutritional needs of those in the household, especially pregnant and lactating women, and young children
- Family members with chronic conditions (such as hypertension, heart disease, diabetes, etc.) should avoid sugar, salt, and fat

Food security

Caring for a COVID patient in your family can impact the entire household's food security. The entire family needs safe, nutritious food and water to maintain the health of the entire family.

- **If your family is struggling to secure adequate food and clean drinking water, inquire if there are programs to help acquire food or water treatment in your community.**
 - If due to local quarantine rules your family must stay in the home, then coordinate with neighbors to deliver food to your home.
 - CHWs, community leaders, and households themselves should work to identify homes in need of nutritional support (including continuation of feeding supplement programs) and help arrange for food, water, and resource delivery for families under isolation.
- **When shopping for food:**
 - Designate a person who is not caring for the person with COVID-19 symptoms. This individual should wear a face mask and practice physical distancing while outside the home.
 - As able, leave children and others unnecessary for the shopping trip at home.
 - Wash hands before and after shopping trips.
 - Try to limit the frequency of shopping trips.

Nutrition

- **While caring for someone with symptoms of COVID-19, be mindful of all the family members' nutritional needs. All household members should eat a well-balanced diet and drink plenty of water.**
 - People who eat well-balanced meals tend to have stronger immune systems, a lower risk of chronic illnesses and infectious diseases, and better overall health.
 - Consuming healthy and filling meals that meet all household members nutritional needs can also contribute to the physical and mental health of your family members as they care for the COVID patient.
- **Prioritize healthy, nutritious foods over foods that deliver little nutrition. Avoid heavily processed food and drink such as soft drinks and salty snack products. Eat a combination of different foods, including:**
 - Staple foods (e.g. cereals such as wheat, barley, rye, maize or rice, or roots such as potato, yam, taro or cassava). Use fortified staples where possible.
 - Legumes (e.g. lentils, beans)

- Vegetables and fruit (clean all fresh fruits and vegetables)
- Foods from animal sources (e.g. meat, fish, eggs, and milk).
- **Continue to meet the unique nutritional needs of those in the household. These may include:**
 - Pregnant and lactating mothers should continue preventative supplementation as per local guidance (e.g. daily iron and folic acid).
 - Lactating mothers should eat an additional 1-2 meals a day
 - Parents should continue home fortification with micronutrient powder for children 6-23 months of age.
 - Malnourished toddlers and children who are part of a feeding program should continue to receive feeding supplements.
 - Family members with other chronic conditions (hypertension, heart disease, diabetes, etc.) should avoid sugar, salt, and fats.
- **Food Safety: practice good food safety to prevent foodborne illness.**
 - Wash hands thoroughly before preparing or handling food for yourself or family members and keep food preparation surfaces and tools clean and sanitized.
 - Keep foods clean (e.g. wash vegetables and fruit with potable water).
 - Separate raw and cooked foods.
 - Cook raw foods thoroughly.
 - Keep foods at safe temperatures (below 5°C or above 60°C).
 - If refrigeration is not possible explore other options like digging a hole, using cold water, etc.

Annex 1: Bleach to water ratio to make a household disinfectant

Note: The brands listed in this table were selected by the US Army Public Health Command in their document [Preparing and Measuring High Chlorine Concentration Solutions for Disinfection](#). They were identified as commonly used brands. This table is not an endorsement of these brands.

Bleach Brand; Country Manufactured or Used	% Active Chlorine (base strength)	Volume of Water Added to 1 Part Bleach to Prepare a 1,000 ppm Concentration	Examples (1 teaspoon = 5mL; 1 tablespoon = 14.78mL)
JIK (Kenya, Liberia), Ajax (Jamaica)	3.5%	1:34	3 teaspoons bleach to 500mL water 1 tablespoon bleach to 500 mL water
Bref Javel (Senegal)	4%	1:39	5 teaspoons to 1L water
Household Bleach (USA, Indonesia, Canada); ACE (Turkey)	5.25%	1:52	2 teaspoons bleach to 500mL water
Blanquedor, Cloro (Mexico)	6%	1:59	1 teaspoons bleach 250 mL water
Household bleach (USA) (Clorox® and other brands)	8.25%	1:82	2.5 teaspoons bleach to 1L water
Blanquedor (Mexico), Lavindina (Bolivia)	10%	1:99	1 teaspoon bleach to 500mL water
La Croix Eau (Guinea)	14%	1:139	1.5 teaspoons to 1L water

Annex 2: How to make a face mask for home use

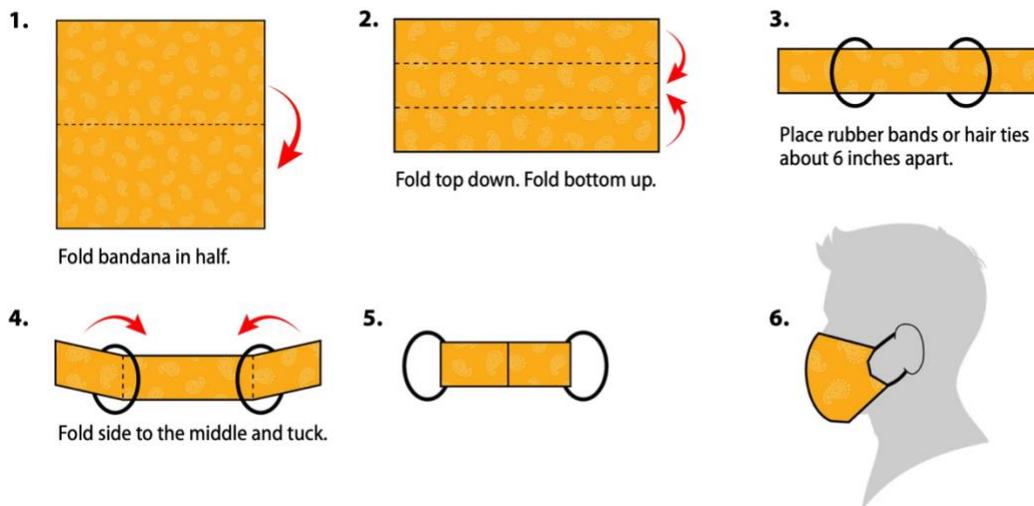
- Materials needed: Square piece of cotton cloth 50cm x 50cm (or 20 inches x 20 inches, around 2 hand lengths). You can use a cotton cloth: shirt, bandana, hand towel or other cotton cloth, 2 rubber bands or elastic hair ties. Use a fabric that, when held up to the sun, light does not outline the individual fibers.
 - Fold cloth in half
 - Fold into thirds by folding the top and bottom toward the center
 - Place folded cloth through the rubber bands and space them so there are 15cm between the rubber bands (15cm is around two palm widths); Fold the cloth to the middle
 - Place rubber bands around ears with folded portion of fabric covering the nose and mouth
 - Adjust so that it fits comfortably on your face

Bandana Cloth Face Covering (no sew method)

Materials

- Bandana (or square cotton cloth approximately 20"x20")
- Rubber bands (or hair ties)
- Scissors (if you are cutting your own cloth)

Tutorial



Annex 3: How to wash and wear a face mask



Annex 3.5: How NOT to wear a face mask

How **NOT** to wear a facemask



Do not wear the mask below nose



Do not push mask under your chin to rest on your neck



Do not leave chin exposed



Do not wear mask loosely with gaps on the sides



Do not wear mask so it covers just the tip of your nose

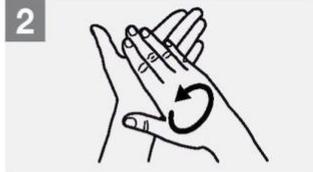
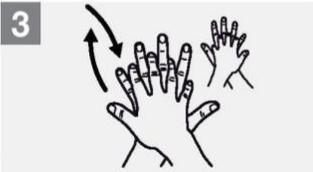
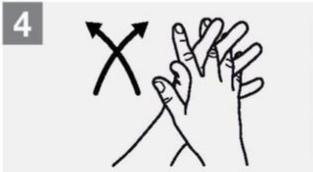
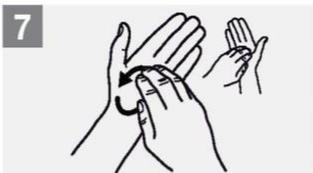
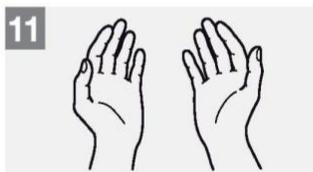


Do not wear a mask off of your face. Such as on the top of your head or on your chest

4

Annex 4: Handwashing Instructions and handwashing in water-constrained environments

Handwashing Instructions

 <p>0</p>	 <p>1</p>	 <p>2</p>
<p>Wet hands with water;</p>	<p>Apply enough soap to cover all hand surfaces;</p>	<p>Rub hands palm to palm;</p>
 <p>3</p>	 <p>4</p>	 <p>5</p>
<p>Right palm over left dorsum with interlaced fingers and vice versa;</p>	<p>Palm to palm with fingers interlaced;</p>	<p>Backs of fingers to opposing palms with fingers interlocked;</p>
 <p>6</p>	 <p>7</p>	 <p>8</p>
<p>Rotational rubbing of left thumb clasped in right palm and vice versa;</p>	<p>Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;</p>	<p>Rinse hands with water;</p>
 <p>9</p>	 <p>10</p>	 <p>11</p>
<p>Dry hands thoroughly with a single use towel;</p>	<p>Use towel to turn off faucet;</p>	<p>Your hands are now safe.</p>

Handwashing instructions where water is limited

Instructions

Step 1: Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.

Step 2: Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.

Step 3: Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.

Step 4: Rinse your hands well under clean, running water.

Step 5: Dry your hands using a clean towel or air dry them.

Explanation

Step 1: Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.

- Why? Because hands could become contaminated if placed in a basin of standing water that has been contaminated through previous use, clean running water should be used. However, washing with non-potable water when necessary may still improve health. The temperature of the water does not appear to affect microbe removal; however, warmer water may cause more skin irritation and is more environmentally costly.
- Turning off the faucet after wetting hands saves water, and there are few data to prove whether significant numbers of germs are transferred between hands and the faucet.
- Using soap to wash hands is more effective than using water alone because the surfactants in soap lift soil and microbes from skin, and people tend to scrub hands more thoroughly when using soap, which further removes germs.

Step 2: Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.

- Why? Lathering and scrubbing hands creates friction, which helps lift dirt, grease, and microbes from skin. Microbes are present on all surfaces of the hand, often in particularly high concentration under the nails, so the entire hand should be scrubbed.

Step 3: Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.

- Why? Determining the optimal length of time for handwashing is difficult because few studies about the health impacts of altering handwashing times have been done. Of those that exist, nearly all have measured reductions in overall numbers of microbes, only a small proportion of which can cause illness, and have not measured impacts on health. Solely reducing numbers of microbes on hands is not necessarily linked to better health. The optimal length of time for handwashing is also likely to depend on many factors, including the type and amount of soil on the hands and the setting of the person washing hands.

Step 4: Rinse your hands well under clean, running water.

- Why? Soap and friction help lift dirt, grease, and microbes—including disease-causing germs—from skin so they can then be rinsed off of hands. Rinsing the soap away also minimizes skin irritation. Because hands could become contaminated if rinsed in a basin of standing water that has been contaminated through previous use, clean running water should be used.

Step 5: Dry your hands using a clean towel or air dry them.

- Why? Germs can be transferred more easily to and from wet hands; therefore, hands should be dried after washing.

Tippy Tap

BUILD YOUR OWN TIPPY TAP

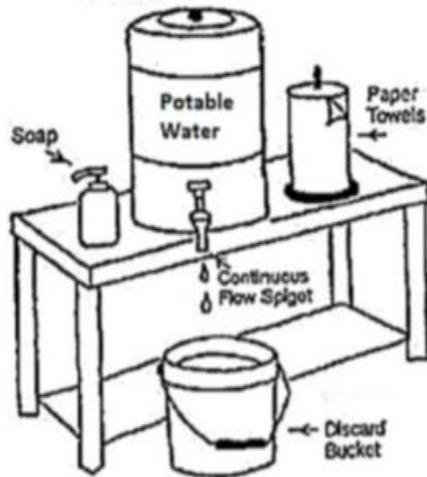
tippytap.org



1. Dig two holes 18in deep and about 2ft apart
2. Place the forked sticks, ensure they are level
3. Fill holes with soil & rocks, and pack tightly
3. Heat the nail and make holes in the water container
4. Make a hole in the soap and thread string
5. Hang container & soap and fill with water
6. Attach string to water container
7. And to foot lever stick
8. Use gravel as basin to capture water



Example of handwashing stand from local materials



Soapy water

Take an empty 1500ml bottle and fill with water; Add 30 grams of laundry detergent; Shake bottle to mix; Take off bottle cap and make a hole with a nail; Put the cap back on.



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