

DRAFT

Safe Feces Disposal for Adults

Safe Disposal of Feces for Mobile People Latrine use at all times:

- Use improved latrine during day and night time
- Make sure the waste is dropped properly in the pit
- Cover the latrine after use with a cover with a handle

Latrine improvements:

Comfortable and safe stand

 Use a burned brick or clay to make a comfortable stand

<u>Hole</u>

- Make size of the hole "reasonable" so that children and adults can safely use latrine
- The size of the hole should be the size of the bottom of a small bucket

Wall and door

 Make walls and door with available and affordable materials. The door should have a lock.

Roof

 Construct the roof of the latrine from (locally) available materials

Wash hands with water and soap, ash, or leaves after using the latrine

Negotiating Safe Feces Disposal for Mobile Adults

Scenario—Negotiation with Juma to Help Him and Adult Members of his Household Dispose of Feces Safely

Juma lives in the neighborhood of Dar. He is married with two children, aged thee and six years old. Juma and his family own a one-bedroom house with a small yard. Juma does not have a latrine, and there are traces of feces around the house. Juma and his wife have a bedpan, but it is used only by children for defecation during night time. Juma and his wife defecate in the open during the day and at night.

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Practice How to Effectively Negotiate Safe Feces Disposal for Mobile Adults

Ask two volunteers to spend 10 minutes preparing a role play on how to negotiate safe feces disposal for mobile adults with Juma.

After 10 minutes, ask the two volunteers to do the simulation. Ask the other participants to observe and then provide feedback.

Summarize and highlight how and what to do in each negotiation step.

- Assess the current WASH practices. Using the assessment card explore the following: the place where adults and children defecate during the day and at night; If no latrine is available, is there space for constructing a latrine? Does the household use a bedpan, and if so, where are the feces disposed of?
- Congratulate Juma for having and using a bedpan at night.
- Identify one behavior to be negotiated.
- Identify the set of SDA to help improve the practice and what is available at the household level to help improve the practice.
- Identify the SDA to be negotiated.
- Select the appropriate counseling card to help negotiate the set of SDA leading to improved behaviour.
- Negotiate the SDA.
- Make an appointment to follow up.

Sub-Session 11:3 Teach Caregivers How to Provide WASH Care

Purpose

To strengthen the skills of HBC providers so they can train caregivers to provide WASH care to bedbound PLHIV.

Objectives

- Discuss and practice how to teach caregivers proper hand washing technique and how to treat drinking water
- Discuss and practice how to teach caregivers to provide WASH care to bedbound PLHIV with diarrhea or to a bedbound HIV- positive woman with menses.

Estimated Time

Review Objectives	5 minutes
Teach a Caregiver Proper Hand Washing Technique	10 minutes
Teaching Caregivers How to Treat Drinking Water with	10 minutes
WaterGuard	
Teaching Caregivers How to Treat Drinking Water by Boiling	10 minutes
Teaching Caregivers to Care for Bedbound People with	15 minutes
Diarrhea	
Teaching a Caregiver How to Handle and Dispose of	15 minutes
Menstrual Bloodstained Materials Safely	
Total time	65 minutes

Advance Preparation

- Review steps on how to teach somebody a new or an improved behavior
- Review the counseling cards on caring for a bedbound person with diarrhea or an HIV- infected bedbound woman with menses

Supplies needed

Ensure supplies needed for teaching each new or improved behavior is available in the home.

Content

CHBC providers will teach the caregiver and the entire household proper hand washing technique and how to treat drinking water. The steps to follow when teaching an adult to learn a new skill are the same, irrespective of the skill being taught and include the following:

- Gather materials
- Select counseling cards
- Explain the skill to be taught (proper hand washing, treating drinking water...)
- Demonstrate
- Ask caregiver to practice new behavior
- Give feedback on what caregiver did
- Solicit caregiver's questions and give answers
- Make appointment for follow up

This is referred to as learning by doing.

The following section describes how to apply these steps to hand washing and treating drinking water.

Teach a Caregiver Proper Hand Washing Technique

The table below describes the actions that CHBC provider should implement when teaching a caregiver proper hand washing technique.

Steps	Actions
Gather materials	Gather the following materials:
	 Tippy tap/kibuyu chirizi with water
	 Soap or soap alternatives such as ash, leaves
 Select counseling cards 	Counseling cards
	 Proper hand washing technique
	 Hand washing at critical times
 Explain the skill to be 	Proper hand washing involves the following actions:
taught	 Wet your hands
	 Rub at least 10 times with soap/ash/sand
	 Rub in between fingers, under the nails, up to
	the fist, in the back of hands
	 Rinse with water
	Dry in the air
• Demonstrate	Practice the actions listed above
Special instructions	List the critical times for hand washing:
	 After cleaning the baby's bottom
	 After using the latrine
	Before eating
	 Before preparing food
	 Before and after caring for a sick person
Ask caregiver to practice new behavior	Observe and note what is well done and what is missing or not well done
Give feedback on what caregiver did	Congratulate the caregiver for trying and explain what was well done and what needs to be improved and how
Solicit caregivers' questions and give answers	
Special instructions	Ask the caregiver to repeat the critical times for hand

	washing. If they are correctly stated, congratulate caregiver, if not give the correct answer.
Make appointment for follow up	Agree with the caregiver on a date for follow-up visit

The CBHC provider explains to the caregiver that the role of soap, ash, or leaves is to loosen the germs from the skin. The function of running water from the tippy tap is to remove germs. Air drying hands prevents recontamination from a dirty towel or dirty clothing.

The following section presents two water treatment options: WaterGuard and boiling.

Teaching Caregivers How to Treat Drinking Water with WaterGuard

The steps for treating drinking water with WaterGuard are listed in the table below.

Steps		Actions
	her materials	20-liter jerry can or clay pot full of water and cover, pot, stove or fireplace, clean cup, and glass
• Sele	ect counseling cards	 Drinking water container Drinking water treatment Cup, glass, and jug covered upside down
• Exp	plain the skill to be taught	 Fill 20-liter jerry can or clay pot with water Put a tablet of WaterGuard in the water container and shake Wait for 30 minutes
• Der	monstrate	Practice all the above and drink some, then ask the caregiver to taste and ask the caregiver what s/he thinks about the water s/he just tested
• Spe	ecial instructions	 Always use one WaterGuard tablet to treat 20 liters of water Always keep the water container covered by attaching the cover to the container with a string When serving drinking water: Tilt the jerry can and pour drinking water directly into a clean jug, cup, or glass Draw drinking water from the clay pot with a clean ladle and pour into a clean cup or glass Wash cup, glass after each use with water and soap and put upside down on a clean tray, basin, or cupboard Keep drinking water container out of reach of children and animals
	c caregiver to practice new avior	Encourage the caregiver to practice and record what is well done and what is not well done.

Give feedback on what caregiver did	Start with what was done properly and then explain what needs improvement and how to improve
Special instructions	Ask caregiver to repeat the special instructions.
Make appointment for follow up	Set a date with caregiver for follow up

The following section presents how to teach caregivers to treat drinking water by boiling

Teaching Caregivers How to Treat drinking Water by Boiling

The steps for treating drinking water by boiling it are listed in the table below.

Steps	Actions
Gather materials	20-liter jerry can or clay pot full of water and cover, clean cup and glass
Select counseling car	Drinking water containerDrinking water treatment
	Cup, glass, and jug covered upside down
• Explain the skill to be	-
taught	Boil it until large bubbles appear
	• Let the water cool
	 Transfer into a clean narrow-neck container (jerry can or clay pot)
Demonstrate	 Practice all the above and drink some, then ask the caregiver to taste and ask the caregiver what s/he thinks about the water s/he just tested
Special instructions	 Boiled water is safe to drink for only 24 hours. Water should be dumped out of the container before a new batch of water is boiled and stored. Always keep the water container covered by attaching the cover to the container with a string When serving drinking water: Tilt the jerry can and pour drinking water directly into a clean jug, cup, or glass Draw drinking water from the clay pot with a clean ladle and pour into a clean cup or glass Wash cup, glass after each use with water and soap and put upside down on a clean tray, basin, or cupboard Keep drinking water container out of reach of children and animals
Ask caregiver to prac new behavior	Encourage the caregiver to practice and record what is well done and what is not well done
Give feedback on wh caregiver did	Start with what was done properly and the explain what needs improvement and how to improve
Special instructions	Ask caregiver to repeat the special instructions

Make appointment for follow up	Set a date with caregiver for follow up

Teaching Caregivers to Care for Bedbound People with Diarrhea

What are the Challenges in Safe Feces Handling and Disposal for Bedbound People?

- Getting a frail person out of bed to go to the latrine is not always possible
- Cleaning someone in bed after an episode of diarrhea
- Helping a person too weak to get out of bed to get to a latrine or sit on a bedside commode and be able to pass urine or open her/his bowel while in bed
- Cleaning a person who has an episode of diarrhea in bed or in general without soap
- Changing a bed without clean or alternative bedding
- Having an episode of diarrhea when the sick person is alone

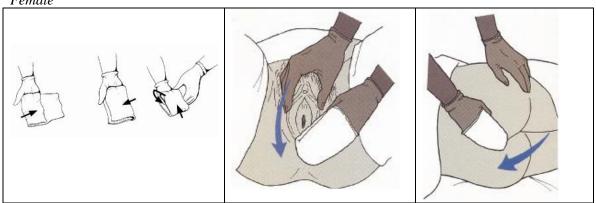
The steps to follow when teaching a caregiver how to care for a bedbound person with diarrhea are listed in the table below.

Steps	Actions
Gather materials Explain the skill to be taught	 A jug with water and soap A bucket with water and soap A pair of gloves Bed sheets Counseling card Ensuring privacy Preparing to give the care: wash hands, wear gloves, prepare materials e.g., clean cloth, soap, water, towel, cloth sheet Cleaning the perineal area Turning the bedbound person to the side Cleaning the anal area Changing the bed sheet and clothes and placing the bedbound person in a comfortable position and covering him/her Soaking, washing, and drying the stained bed sheet and clothes Washing hands
Demonstrate	See tasks and illustrations below
Ask the caregiver to practice Observe and give feedback	Encourage the caregiver to practice and record what is well done and what is not well done What went well, what needs to be improved, and how

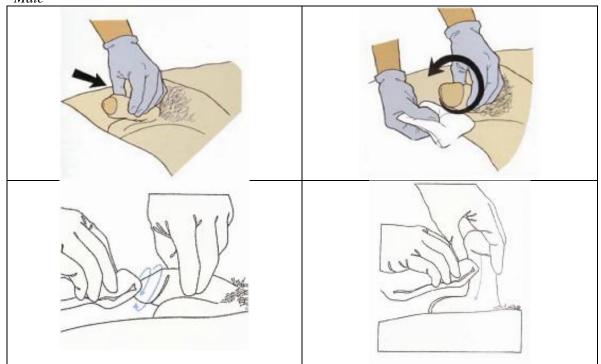
Demonstrate How to Care for a Bedbound Person with Diarrhea

- Ensure privacy
- Prepare to give care: wash hands, fill a bucket with water, collect soap, wear gloves → show the counseling card
- Clean perineal areas

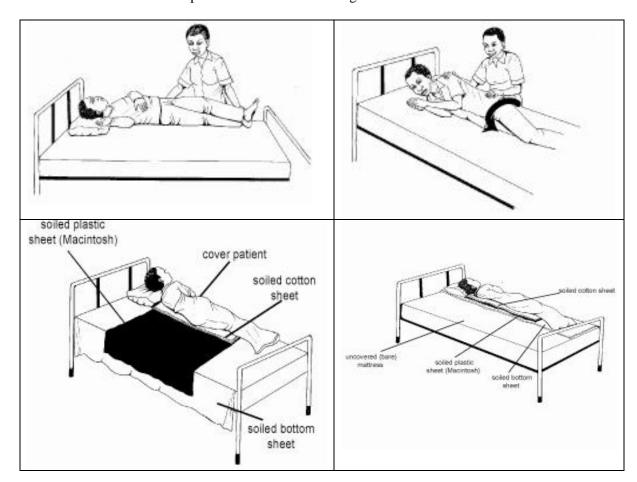
Female



Male



• Turn the bedbound person to the side and change the bed sheet



• Clean the anal area as described in the box below

Cleanse Anal Area

The side-lying position allows the rectal area to be cleaned well.

- Ask the client to turn on his/her side. If s/he is unable to move on his/her own, turn the client on his/her side.
- Use the rinsed cloth to clean around the rectum in the buttock area by wiping in the direction of "front to back" (penis to rectum) for men and (vagina to anus) for women, removing any feces, blood, urine, and/or other body fluid.
- Rinse, cleanse the area.
- Pat the area dry with a clean, dry cloth.
- Place the bedbound person in a comfortable position and cover him/her
- Soak, wash, and dry the stained bed sheet and clothes
- Wash hands

A few clients may be weak and need help to dispose of feces safely. The following section describes how to make a commode or a potty chair and how to get the client up to the bedside potty chair.

Helping a Weak PLHIV Use the Toilet

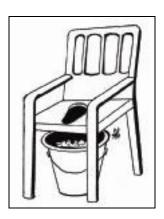
Basic Steps to Construct a Bedside Potty Chair

Step One: Make a wooden stool or use an existing chair that can be modified.

Step Two: Cut a round hole in the middle of the stool/chair that fits the client's buttocks.

Step Three: Smooth the hole to avoid bruising, cuts, etc.

Step Four: Put a bucket beneath the hole in the stool or chair.



Below are instructions for how to get a client up to the bedside potty chair to change the soiled linens.

Steps to Get the Client up to the Bedside Potty Chair

Step One: Wash your hands, prepare the materials you need (chair, pillow, tissue or clean cloth for cleansing the perineum, etc). Come to the client and communicate what you are going to do.

Step Two: Place the bedside potty chair at the head of the bed. Help the client dangle his/her feet over the side of the bed, making sure his or her feet touch the floor. Help the client put on clothing, a cloth, or a robe to maintain his/her privacy and dignity.

Step Three: Stand in front of the client who is sitting up on the bed. Have them place their fists on the bed by their thighs. Make sure the client's feet are flat on the floor. Place your hands under his or her arms. Your hands should be around the shoulder blades. Have the client lean forward. Brace your knees against the person's knees, and block his or her feet with your feet. Ask the client to push the fists into the bed and to stand on your count or at signal that you agree

upon with the client. Pull him/her up into a standing position as you straighten your knees.

Step Four: Support the client in the standing position. Keep your hands around their shoulder blades. Or, alternatively, you could put a belt (gait belt) around the waist of the client to help you maintain your hold. Continue to block the client's feet and knees with your feet and knees. This helps prevent falling.

The following section describes how to care for HIV-positive bedbound women with menses.

Teaching a Caregiver How to Handle and Dispose of Menstrual Bloodstained Materials Safely

This section describes how to teach caregivers to handle and dispose of menstrual bloodstained materials and outlines the challenges associated with the process.

Challenges Involved in Caring for HIV-Positive Women with Menses

What are the risks associated with coming into contact with blood from menstruation?

→ If the caregiver has wounds on the hands, the caregiver can contract HIV if the menstrual blood of the HIV-positive woman touches the caregiver's wounds.

Challenges associated with caring for HIV-positive bedbound women with menses:

- Reluctance among women to talk about how to handle menstrual blood or to accept help from someone with this task
- Direct contact with bloodstained piece of cloth or napkin
- Caregiver not wearing gloves when caring for sick HIV+ women
- No adequate place to store bloodstained materials
- Bed and sheet stained with blood
- No soap available at home

Caregivers should always protect hands and wear gloves when caring for an HIV-positive bedbound woman with menses.

Safe Handling and Disposal of Menstrual Bloodstained Materials from an HIV-Positive Bedbound Woman with Menses

The following section outlines the tasks caregivers should carry out when caring for an HIV-positive bedbound woman with menses.

Gather the materials:

- A jug with water and soap
- A bucket with water and soap
- A pair of sheets
- A pair of gloves
- Clean pad, piece of cloth
- Counseling card