



# The RHD Endgame Strategy: Evidence Brief #9

Improving access to soap and other consumables for washing hands or bodies

'Washing People' is one of nine Healthy Living Practices (HLP) developed by Nganampa Health Council to describe, define and focus on what people need to live healthy lives within homes. Being able to wash hands and bodies requires sufficient access to functioning health hardware (e.g. taps and sinks), water and consumables such as soap and towels.

Households with limited financial resources may not prioritise the acquisition of health hygiene resources such as soap.<sup>2</sup> Products may not be available, may be prohibitively expensive or may be perceived to be too expensive relative to other needs.<sup>3,4</sup> There are anecdotal reports that some Aboriginal and Torres Strait Islander people want better access to soap and other hygiene consumables and ask health clinics to provide them.<sup>5</sup> Reducing costs or improving access to health hygiene consumables may have the greatest impact in remote settings where the cost of groceries and consumables are generally higher than in non-remote locations.<sup>6</sup>

Internationally, a small number of programs have explored the effects of providing soap to households, and a handful of programs have been implemented to improve access to consumable hygiene equipment for Aboriginal and Torres Strait Islander people.

The existence of some small-medium scale programs provides evidence on the feasibility of consumables distribution. These include the Squeaky Clean Kids initiative, funded in 2017 to distribute 200,000 bars of free soap to 63 Aboriginal communities in Western Australia over a two-year period. Evaluation of this apporach has not been published. Research has also been undertaken to explore the role of traditional bush medicines and soaps to increase washing behaviour which may offer a participatory, strengths-based approach to increasing the use of soap made by and for Aboriginal and Torres Strait Islander people.

The cost of hygiene consumables distribution is likely to be low relative to other strategies to improve access to health hardware for washing people. However, ongoing consumable costs could be vulnerable to changes in funding arrangements without robust evaluation of program success. Distribution processes for hygiene consumables could be scaled up relatively promptly. However, issuing hygiene consumables may be stigmatising, particularly if recipients are perceived as 'dirty' or unclean or without addressing the broader barriers such as inadequate plumbing or household maintenance. It should be undertaken carefully, and in consultation with community leaders.

## Recommendations

• Soap and other hygiene consumables distribution may be a useful adjunct to other programs aiming to improving Healthy Living Practice 1, but should not be used in isolation.

#### **About the END RHD CRE**

In 2014, The End Rheumatic Heart Disease Centre of Research Excellence (END RHD CRE) was established to address the urgent need for a comprehensive, evidence-based plan to eliminate rheumatic heart disease across Australia.

Bringing together leading experts from 16 institutions across Australia and backed by a grant from the National Health and Medical Research Council (NHMRC), the CRE has synthesised the collective experience of communities, clinicians, Aboriginal Community Controlled Health Organisations, and government and non-government organisations – as well as more than 25 years of research – to tackle this need head on.

The result is *The RHD Endgame Strategy: The blueprint to eliminate rheumatic heart disease in Australia by 2031.* Outlining the best existing evidence-based strategies to prevent new cases of RHD in Australia and improve the lives of those already living with the disease, The RHD Endgame Strategy was launched in October 2020 and can be viewed at telethonkids.org.au/rhd-endgame.

## **Acknowledgements**

The RHD Endgame Strategy is a product of collaboration between researchers, Aboriginal and Torres Strait Islander leaders, communities and people with lived experience.

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# References

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