

# WASH IN HEALTHCARE FACILITIES: A GLOBAL HEALTH MOVEMENT

## Global Water 2020 Legacy Report June 2021

From urban hospitals to rural health centers, low-resource healthcare facilities around the world are providing care in dangerous environments, fostering infections and preventable deaths because they lack the most basic foundation for safe and dignified care: access to water, sanitation and hygiene (WASH). The neglect of the WASH crisis is widespread, *impacting thousands of healthcare facilities that serve nearly a quarter of the world's population*. **This lack of WASH inside healthcare facilities should be unimaginable; and so together, we began to imagine a different way.**

In just a few years, allies in the **health and WASH sectors** — implementers, funders, researchers, advocates, governments, and faith leaders — **have joined forces to accelerate progress in ensuring access to safe WASH in healthcare facilities**. For the hundreds of thousands of hospitals, health clinics and health posts where water supplies are limited, you've identified water sources, dug wells, and capped springs. Where toilets are absent or non-functioning, you've installed safe, private and dignified structures and maintained their cleanliness. You've upgraded sewage and waste management capabilities. And where soap was not available for hand washing, you've sought out hand hygiene facilities, especially at points of care, and included hygiene training. Where decades of WASH infrastructure had been left to decline (or where there was no WASH infrastructure at all), repair work and new construction are getting underway, with plans in place for operations and maintenance. **Thank you. We're just getting started.**

## WHERE WE ARE GOING

As Global Water 2020 prepares to sunset, **we have compiled a list of the key opportunities that we see on the horizon for WASH in healthcare facilities**. Implementers, advocates, healthcare providers, governments, donors, and civic and faith organizations each have a role in this next chapter and we strongly encourage more organizations and leaders to join in this call.

### 1. UPCOMING INITIATIVES TO TRACK AND SUPPORT

- **The Group of Friends for the UN Call to Action on WASH in Healthcare Facilities** will be launched in Fall 2021, to be comprised of Permanent Representatives who will leverage UN Member State commitments through increased cooperation and collective action, in response to the UN Secretary-General's Call to Action for universal WASH in healthcare facilities.
- **The Task Force on WASH in Healthcare Facilities, initiated by WHO and UNICEF**, will be formally announced in Fall 2021 and seeks to bring together public, private and philanthropic leadership to drive the global agenda on WASH in healthcare facilities by recognizing and responding to country needs.

## 2. OPPORTUNITIES FOR PARTNERS TO TAKE ACTION LOOKING AHEAD

### **REGIONAL AND COUNTRY-LED ACTION**

- Continue to build upon the **commitments and actions that were announced during the [Latin America & Caribbean](#) and [African](#) regional leadership summits**, through in-country advocacy and provision of technical support to governments.
- Track potential **upcoming regional leadership summits**, including in both the Middle East and South-east Asia, through the [WASHinHCF.org](#) listserv.
- Review the **WHO/UNICEF [country tracker](#)** (update planned for late 2021) to identify both advocacy objectives and ways in which to support governments.
- **Share success stories** of where governments are prioritizing WASH in healthcare facilities in their budgets and policies, for example through [Sanitation and Water for All](#).

### **PARTNERSHIPS**

- **Grow partnerships with major networks and influencers** who are demonstrating their commitment to WASH in healthcare facilities including: the Vatican's [Dicastery for Promoting Integral Human Development](#); the [African Council of Religious Leaders](#); global civic organizations like [Rotary International](#); First Ladies of Africa and Latin America; [World Vision](#) and [Hilton Foundation](#)-funded partnerships.
- **Support priorities** set forth by the UN Group of Friends for WASH in Healthcare Facilities.

### **FINANCING**

- Communicate **successful WASH in healthcare facilities investments**, through domestic public finance, foreign assistance, and major philanthropic contributions.
- Continue making the **[Return-on-Investment case for investors](#)**, in social, economic, and financial terms.
- Provide input and participate in USAID- and World Bank-funded collaborative WASH in healthcare facility projects emerging both from Headquarters and Missions.
- **Encourage the [Sanitation and Hygiene Fund](#)** to follow through on their explicit focus on WASH in healthcare facilities.
- Advocate for the **inclusion of WASH in healthcare facilities in international financial institutions' planning processes**, particularly through their field offices.

### **COMMUNITY OF PRACTICE**

- **Track best practices** and new partnership opportunities on [WASHinHCF.org](#).
- Join the **Community of Practice for WASH in Healthcare Facilities**, which Emory University will launch in September 2021, built upon the [2018-19 webinar series](#). All are welcome to join this knowledge exchange platform. Email [ldenny@emory.edu](mailto:ldenny@emory.edu) for more information or to join the listserv.
- Participate in the **[Health and WASH Interest Group](#) at CORE Group**, a space for practitioners to share experiences on WASH/health linkages, including healthcare facilities.

## **INTEGRATION WITH HEALTH SECTOR**

- Extend the inroads currently being made with the **antimicrobial resistance (AMR)**, **infection prevention and control (IPC)**, **maternal, newborn and child health (MNCH)**, **quality of care (QoC)**, and **health systems strengthening** communities, by working to speak their languages and extending support through WASH as a mechanism to achieve common goals.
- Leverage opportunities with **COVID-19 and global health security/pandemic preparedness**, including handwashing in clinical settings.
- Further efforts to recognize and **solidify the [role of cleaners](#) and environmental cleanliness** in healthcare facilities initiatives.
- Build upon **health-focused WASH tools** like World Bank toolkits for national WASH and health programs and USAID's [Clean Clinic Approach](#).

## **ADVOCACY AND COMMUNICATIONS**

- Be an **active participant in the communication networks**: when you see an opportunity that relates to you, act on it (e.g., a [news story](#) from IRC WASH about the First Lady of Burkina Faso's statements at the African Regional Summit). Augment data by telling stories of both the need and success to be memorable.
- Support **national actors to advocate in both low- and middle-income countries (LMICs)** and donor countries, through professional advocacy groups, and through global and regional platforms (e.g., [Sanitation and Water for All](#), [Sanitation and Hygiene Fund](#), [End Water Poverty](#), [Africa Health Budget Network](#), [Millennium Water Alliance](#), [White Ribbon Alliance](#), and [Global Health Council](#)) by providing resources (financial, technical), capacity building, and examples of successful advocacy efforts for WASH in healthcare facilities.
- Continue to **tap into global engagement opportunities**, especially focused on health platforms (see [annex](#) below).
- **Continue the drum beat**; advocacy and communications efforts designed to strengthen policies and programs take time to be successful, with multiple allies to carry shared messaging. Highlight the number of people served by facilities included in WASH programs.

## **RESEARCH & LEARNING**

- Develop and share **resources and case studies** on [WASHinHCF.org](#), cross-posting on multiple sites and in multiple WASH/health networks.
- **Document and share the lessons learned**, with specific focus on sustainability and accountability.
- **Evaluate programs** as they scale, documenting when possible the cost and other proxy indicators that demonstrate the benefit of WASH for healthcare services, such as patient satisfaction, patient uptake, and facility revenue.
- Conduct research on **gaps identified through the [literature review](#)** and the subsequent [synthesis](#).
- Inform the [JMP process](#), including helping to collect better information on environmental cleaning.

### 3. WHAT CAN I DO TOMORROW MORNING?

**Are you an elected official?** Review your policies, strategies, and budgets to determine whether WASH is included in healthcare facility management; prioritize funding for WASH, including both capital investment and ongoing operations and maintenance; invite WASH experts to participate in the planning and designing process; advocate for the monitoring of WASH in healthcare facilities; support national and subnational efforts to ensure that all healthcare facilities are on the path to sustainable WASH.

**Do you run a health system or a healthcare facility?** Prioritize funding for WASH, including both capital investment and ongoing operations and maintenance; seek input from a variety of stakeholders (including healthcare facility users and female healthcare workers) in developing improvement plans; work with WASH partners to develop improvement plans; encourage staff capacity building for WASH; monitor healthcare facility improvements and provide coaching and feedback; champion WASH services and a safety climate within healthcare facilities.

**Are you a healthcare worker?** Call for WASH services within your healthcare facility; support management to prioritize existing and new WASH services; champion a safety climate within the healthcare facility and hold your colleagues accountable to uphold a safe WASH facility; reach out to your Midwifery Association or Nursing Association to make calls for WASH at the national and subnational levels.

**Are you an NGO working on WASH?** Offer your expertise for WASH implementation to the Ministry of Health and health partners within the country, especially based on the country tracker of the [8 Practical Steps](#); seek out resources on health system strengthening to develop sustainable programs that are aligned with existing efforts within healthcare facilities; develop programs in coordination with health partners to align with ongoing health system strengthening efforts.

**Are you an NGO working on health?** Prioritize WASH as a component of healthcare facility improvement programming; invite WASH partners to the table during the planning phase and seek WASH expertise to participate in quality improvement programs; advocate for the inclusion of WASH in health strategies and programs and support calls for the inclusion of WASH in health budgets and foreign assistance.

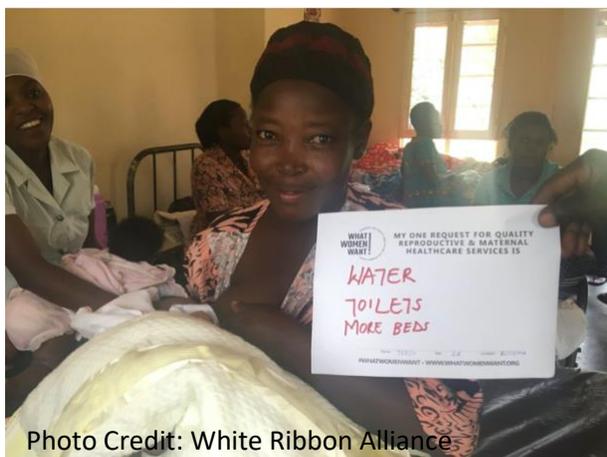


Photo Credit: White Ribbon Alliance



Photo Credit: Rotary India

## HOW WE GOT HERE: BUILDING MOMENTUM

WHO/UNICEF's definitive report on the lack of WASH in healthcare facilities, released in 2019, found that [one in four](#) healthcare facilities globally does not have access to basic water services. More [recent data](#) on the 47 Least Developed Countries showed that the situation is even more appalling, with 50% of healthcare facilities operating without basic water services, 63% without basic sanitation, and 26% without hand hygiene facilities at point of patient care. **Nearly two billion people must rely on these healthcare facilities for care** as healthcare workers put themselves at personal risk daily, unable to ensure that they 'first, do no harm'.

## IMPACT ON WOMEN AND GIRLS

**Women and girls suffer inexcusable healthcare dangers and indignities.** Women must haul their own water to a healthcare facility to give birth; mothers can't adequately clean themselves after giving birth; toilets are scarce, broken or filthy; nurses and midwives can't adequately wash their hands to keep themselves and their patients safe; healthcare staff, mostly women, live and work in squalor without the safety and dignity of sanitation and water for themselves. Maintaining menstrual hygiene and post-partum hemorrhage and bleeding are impossible without water, pads and waste management. **Mothers and newborns are at particular risk** when babies are brought into the world with unwashed hands, unclean beds and unsafe instruments to cut umbilical cords. Every year, [one million newborns die](#) within their first 24 hours, and nearly [300,000 women die in childbirth](#). Infections are among the leading causes of preventable death.

When the [White Ribbon Alliance](#) launched a global survey with the revolutionary, yet simple premise of asking women what they want for their maternal and reproductive health, responses from 1.2 million women and girls in 114 countries poured in. The [What Women Want campaign revealed exactly what women's healthcare lacks](#): the dignity and safety only available with access to water, toilets, soap, hygiene and menstrual hygiene products. WASH ranked second to respectful healthcare, and the links are clear.

## ADVOCACY EFFORTS: 2018 - 2020

In 2017, Global Water 2020, a time-limited advocacy and facilitation initiative with a specific focus on under-represented issues in water, turned its attention to the widespread lack of WASH in healthcare facilities. The goal was to catalyze action to ensure this issue would no longer remain the neglected global health crisis that it is. In 2018, several dozen private and public organizations met in Washington, DC, and agreed to address this neglected global health crisis through increased advocacy, assessments, technical assistance, implementation and funding.

But never could we have predicted that a global pandemic would put handwashing in the headlines. **COVID-19 has served to reaffirm that healthcare systems are ineffective at infection prevention and control (IPC) without WASH.** The need for WASH reaches far beyond COVID-19, and its the absence of WASH remains tragically felt when dozens of preventable and containable infections and diseases proliferate via unwashed hands and unclean surfaces every day. From deadly childhood diarrhea, sepsis, and cholera, to Ebola, antibiotic resistance, and more, the global health and economic consequences are steep.

**A historic [Call to Action](#) by UN Secretary-General António Guterres in 2018 generated much-needed attention and momentum:**

*"I am using the launch of the Water Action Decade to make a global call to action for water, sanitation and hygiene – or WASH — in all health care facilities. A recent survey of 100,000 facilities found that more than half lack simple necessities, such as running water and soap — and they are supposed to be healthcare facilities. The result is more infections, prolonged hospital stays and sometimes death. You must work to prevent the spread of disease. Improved water, sanitation and hygiene in health facilities is critical to this effort."*

**Responses to the Call to Action swiftly followed** from private philanthropy, aid agencies, NGOs, and faith-based non-governmental organizations (FBOs); and ministers of health, water, and finance. Influential leaders continue to [raise their voices](#) — from the [Dalai Lama](#) and [Pope Francis](#), to Henrietta Fore (Executive Director UNICEF) and Dr. Tedros Adhanom Ghebreyesus (Director-General World Health Organization); to [First Ladies](#) from Africa and Latin America. Hundreds of media stories have called attention to deplorable conditions and effective solutions.

**The growing global movement to get WASH into healthcare facilities is both a global health call and a moral call to action.** Welcome engagement by the faith community is significant. The faith community provides up to 50% of healthcare services in low-resource regions, where facilities suffer particularly poor WASH conditions.

With growing comprehension of the enormity of the crisis, hundreds of millions of dollars are being secured to strengthen whole health systems with WASH services; increased focus on sustainability is a fundamental new norm to stop the cycle of broken wells, toilets and pipes; and responses to COVID-19 have increased access to hand hygiene facilities. The estimated cost of achieving universal basic WASH standards in healthcare facilities in the 47 least developed countries is \$3.6 billion over 10 years, amounting annually to [30 cents per capita](#). When you consider that poor-quality care in LMICs imposes costs of [US\\$1.4 to \\$1.6 trillion per year](#) in lost productivity, the economic choice clear – it's a "[best buy](#)" for healthcare facilities, producing 50% return on investment.

## **LAYING FOUNDATIONS FOR THE FUTURE**

WASH is foundational to achieving objectives far beyond health — from curtailing malnutrition and increasing education, to family and workforce stability, to economic growth. As healthcare facilities move from centers of infection to the cornerstones of healthier and more prosperous communities, we will all be more secure when diseases that know no borders are prevented.

Dr. Maria Neira, Director of Public Health and Environment at WHO, offered what became a [kind of mantra](#) for so many of us: "**A healthcare facility without WASH is not a healthcare facility.**" Indeed, not one of us would choose to be treated in a facility without the dignity and safety of WASH. With your commitment, no one need be.

As Global Water 2020 sunsets, the team wishes to express our deepest gratitude to every one of you who has and every one of you who will step in to fill this pervasive global health gap. We celebrate the day when every newborn is welcomed into the world with clean hands; every woman gets the respectful care she deserves; and every doctor, cleaner, nurse and midwife has the ability to provide healthcare with the dignity and safety every one of us deserves.

## TIMELINE

Since the 2018 UN Call to Action, progress on WASH in healthcare facilities has greatly accelerated:

- **April 2019:** WHO and UNICEF release the [first baseline](#) of WASH in healthcare facilities, and launch their implementation strategy to respond to the Call to Action, which includes [ambitious targets and metrics for success](#).
- **May 2019:** The 194 Member States at the World Health Assembly unanimously pass a [Resolution on WASH in Healthcare Facilities](#) which aligns with the [8 Practical Steps](#) recommended to ensure sustainable WASH services into healthcare facilities worldwide.
- **June 2019:** White Ribbon Alliance's [What Women Want survey](#) reveals WASH in healthcare is second only to women's demand for dignity in their healthcare.
- **June 2019:** Financial institutions, corporations, philanthropies, NGOs, FBOs, and universities gathered in Washington, DC to announce dozens of [commitments](#) for funding, technical assistance, research, training, maintenance and advocacy for WASH in healthcare facilities. To-date, over 100 commitments have been made.
- **September 2019:** Hosted by Zambia, WHO and UNICEF call [a meeting of national governments](#) to help generate plans to achieve 100% WASH coverage in healthcare facilities by 2030.
- **January 2020:** [WHO cites](#) the absence of water, toilets, soap, and waste management in healthcare facilities among the most urgent global health challenges in the coming decade. This same month, the COVID-19 pandemic emerges a global health crisis.
- **October 2020:** PAHO hosts the first of the regional leadership summits on WASH in healthcare facilities, bringing together Ministries of Health and Water, [First Ladies](#), UN agencies, and partners in [Latin American and the Caribbean](#) to share progress and determine next steps.
- **November 2020:** [The Sanitation and Hygiene Fund](#) launches to address the sanitation, hygiene, and menstrual health crises as a new funding model that can operate at scale. WASH in healthcare facilities is listed as one of the key investment priorities.
- **December 2020:** WHO and UNICEF release the [Global Progress Report](#) on WASH in healthcare facilities, indicating some progress has been made but planning, monitoring, and financing remain inadequate.
- **March 2021:** The Catholic Church, the largest single unified provider of healthcare in the world, under the Vatican's Dicastery for Promoting Integral Human Development led by Cardinal Peter K. A. Turkson, [launches](#) the Catholic WASH in Healthcare Facilities Initiative, calling for WASH in all Catholic facilities, starting with a pilot program in 150 Catholic healthcare facilities in 23 countries.
- **April 2021:** WHO AFRO organizes the second regional leadership summit, which includes First Ladies, Ministers of Health, religious leaders, and partners.
- **May 2021:** During the 74<sup>th</sup> World Health Assembly, WHO provided a [progress report](#) on WASH in healthcare facilities and [Indonesia](#), [Malawi](#), [Philippines](#), and [Zambia](#) provided statements.
- **June 2021:** Faith-inspired funders, healthcare systems, organizations, and networks gather to [review progress](#) and look to what lies ahead for the faith-inspired sector.

## STATEMENTS OF SUPPORT

*"You must ensure that the sick and the valiant health-care providers throughout the world have access to the fundamental necessities of clean water and proper sanitation to prevent the uncontrolled spread of disease...Sustainable access to properly equipped and staffed health-care facilities" is "one of the strongest defenses against future public health crises."*

**- His Holiness the Dalai Lama**

*"This pandemic, however, is a stark reminder of the need to ensure adequate access to essential goods and services to our hospitals, health facilities, and birthing centers to prevent the disease...We cannot allow women and newborn babies to continue to die at or soon after birth due to lack of water to sanitize doctors, midwives, and other health workers, or due to a lack of sanitation and hygiene in the infrastructure itself. We all have a shared responsibility to change the future today in our nation"*

**- H.E. Mrs. Lígia Fonseca, First Lady of Cape Verde**

*"It is both scandalous and illogical that you should have so many healthcare facilities in the world that do not have access to clean water...infectious disease can be amplified in healthcare facilities. You saw this with the Ebola outbreak in 2014. The health of everyone on the planet is related to everyone else. Getting WASH into healthcare facilities is an effort that will help keep us all safe."*

**- Peter Laugharn, President& CEO, Conrad N. Hilton Foundation**

*"Water, which is used for purification in our ritual, also functions as a cleansing agent for hand-washing, hygienic procedures and for preventing and controlling infections...Access to water and related hygiene and sanitation should be a cause that unites the whole human family behind a universal priority. Nowhere is this need more critically felt than within the health care facility, especially in the labor unit and in their delivery chamber."*

**- Cardinal Peter K. A. Turkson, Prefect,  
Dicastery for Promoting Integral Human Development, Vatican**

*"If you can't do the basics forget the rest. Prevention, prevention, prevention."*

**- Dr. Tedros Adhanom Ghebreyesus, Director-General, World Health Organization**

## ANNEX: KEY GLOBAL WATER 2020 PUBLICATIONS

- [WASH in HCF Commitments Summary Document](#) (updated June 2021)
- [WASH in HCF Commitment Updates](#) (2020)
- [WASH in HCF Trailblazers Booklet](#) (2020)
- [No Regrets Investment Brief](#) (2020)
- [WASH in HCF Advocacy Toolkit](#) (updated 2021)
- [Progress Report on Faith-Inspired Action on WASH in HCF](#) (2021)
- [It's Not Just COVID brief](#) (2021)

## ANNEX: GLOBAL ENGAGEMENT OPPORTUNITIES

- [SDG High-Level Political Forum \(July 2021\)](#) – ensuring SDG 6 is visible despite being excluded from the theme, “Sustainable and resilient recovery from the COVID-19 pandemic, that promotes the economic, social, and environmental dimensions of sustainable development: Building an inclusive and effective path for the achievement of the 2030 Agenda in the context of the decade of action and delivery for sustainable development”
- [World Water Week \(August 2021\)](#) – WASH in HCF fits squarely within the theme “Building Resilience Faster”
- [World Patient Safety Day \(September 17, 2021\)](#) – messaging can center around COVID-19, AMR, etc. and the risk to patients (there are also several conferences on this topic happening around then, e.g., “[Global Experts Meeting on Frontiers in Patient Safety and Health](#)”)
- [UNC Water & Health Conference \(October 2021\)](#) – Major WASH conference which provides an opportunity to exchange experiences and best practices on WASH in HCF
- [FIGO World Congress of Gynecology and Obstetrics \(October 2021\)](#) – opportunity to engage OBGYNs on WASH in HCF
- [World Water Forum \(March 2022\)](#) – opportunity to strengthen the focus on health and WASH at the World Water Forum (triennial conference)
- [Global Health Security Conference \(June 2022\)](#) – relevant themes include multisectoral collaboration for Global Health Security governance and financing; civil society contribution; AMR; etc. (triennial conference)
- [Women Deliver Conference \(TBD, 2022\)](#) – opportunity to link WASH in HCF messaging with gender equality