

# WASH in health in Malawi

## Background

WaterAid's Global Strategy 'Everyone, Everywhere 2030' states that access to safe water, sanitation and good hygiene practices integrated within the health sector is critical to achieving objectives of sustainable development.

WaterAid's current global advocacy priority is the integration of water, sanitation, and hygiene (WASH) into global, national and local policies and programmes to improve child survival rates and health outcomes – this is known as **Healthy Start**. An advocacy toolkit was developed to support country programmes to deliver the Healthy Start programme. This was very timely and relevant given that the Sustainable Development Goals encourage the WASH sector to address the issue of WASH in health-care facilities through the primary goal of universal access to WASH by 2030.

## National-level context

In 2013-14 a national scoping study was completed in Malawi to understand how WASH links with health, in particular child and maternal health, in several districts including Nkhosakota, Kasungu, Mchinji and Chikwawa. The studies demonstrated that:

- Health facilities did not have adequate toilets, with some having no toilet at all for clients.
- The few toilets available were not inclusive (not suitable for pregnant women).
- There was no running water in the maternity wings of most health facilities.
- Generally most of the health facilities did not have water within the premises, resulting in pregnant women collecting water from outside, in some cases travelling more than 1km.
- Health facilities did not have placenta pits and incinerators.
- Access rates to safe water at the district level appeared to be high, but when looking at the community and village level they were very low. For example, the access rate in the district of Kasungu was more than 80%, but in the area of Chilowamatambe, Kasungu, access was 30%.



## Lessons

Before developing the Healthy Start programme, WaterAid Malawi reflected on their WASH in health experiences and identified a number of lessons:

1. Work with and through a more strategic portfolio of partners. Programmes have benefited from leveraging the skills and expertise of a diverse portfolio.
2. Engage with donors to influence government priorities. To support the sustainability of interventions within health-care facilities, WaterAid Malawi are continuing to:
  - Spend enough time with communities to ensure buy-in, mentorship, and an in-depth understanding of issues.
  - Work with district councils to monitor interventions and intensify supervision during project implementation, to ensure quality delivery.
  - Develop sustainability plans at the design stage, which include an assessment of how the community will continue this (such as setting up community maintenance funds).
  - Continue to conduct Post-Implementation Monitoring Surveys.
3. Work with the private sector and provide communities with relevant information from which to make informed choices, for example, helping them to understand which technology is most appropriate to their needs.

## Spotlight: Healthy Start programme planning and design

Implementation of the programme started in April 2016. It targets 16 health facilities and five communities surrounding each facility with the following interventions:

- Solar powered pumps for safe water, including installing piped water in maternity wings.
- Construction of inclusive toilets (to be built after extensive consultations with pregnant mothers).
- Construction of placenta pits.
- Strengthening of district-level coordination systems for maternal and neonatal health.
- Empowerment of citizens, especially mothers, on their rights to WASH and quality health services.
- Detailed needs assessments in health-care facilities and capacity building on infection prevention.
- Development and implementation of facility improvement plans, with a particular focus on WASH.
- Promotion of good sanitation and hygiene behaviours, and provision of water in selected health-care facility catchment communities.

In preparation for Healthy Start, WaterAid Malawi held meetings with strategic stakeholders to build buy-in and increase positive engagement. Meetings have been conducted with national-level and district-level stakeholders in project districts, and include meetings with directorates of child and maternal health and preventative health, and with district health officers and district councils.

This has resulted in WaterAid Malawi being included in the working groups of child health, preventative health and reproductive health. The team has also successfully created media interest linking WASH to maternal health.

During the design of the programme, WaterAid Malawi also engaged key stakeholders from health-care facility staff, district health management teams, and the national Ministry of Health. This ensured that the programme design responds to constraints in a way that ensures sustainability of the interventions.

### Top lessons to share on WASH in health

- 1. Use data to influence decision makers.** For WaterAid Malawi, the Water Point Mapping tool has been crucial because it identified that the distribution of water points did not adhere to Government policies. Current data on WASH in health-care facilities shows very low levels of toilet availability – 18%, 40% with no soap and water for handwashing and most without running water in the delivery room.
- 2. Empowerment of citizens on their rights to WASH** resulted in citizens demanding that a health-care facility be opened after it had not been operating since its construction seven years earlier because of lack of water. The Government provided a borehole to the facility in response to citizens' demand, and the facility opened. Empowerment of health-care facility user committees is vital in generating demand for quality services
- 3. Community involvement is key to decision making.** As above, community demands ensured the Government provided a borehole, enabling the facility to open.
- 4. Involve key Government stakeholders at the start of interventions.** In Rumphi district, involvement of the district coordination team in strengthening stakeholder coordination, promoting responsive planning and engagement with communities generated good results. For example district stakeholders are now proactively engaging with communities, resulting in productive dialogue between communities and duty bearers, and ensuring equitable allocation of resources for programmes coming into the district.

Study based on focus group discussions by IOD Parc held with WaterAid staff and partners, as part of the UK Department for International Development's Programme Partnership Arrangement final evaluation, 2016.

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