Everyone, everywhere: Achieving universal health coverage through water, sanitation and hygiene

> **UHC Day Action Plan** December 2020



WaterAid

Critical actions to achieve safe and dignified healthcare for all



We urge Heads of Government and Health Ministers to take action, in line with WHO guidance, to ensure that urgent investment in water, sanitation and hygiene (WASH) for public health is central to securing progress towards universal health coverage and ensuring an effective response to global health threats.

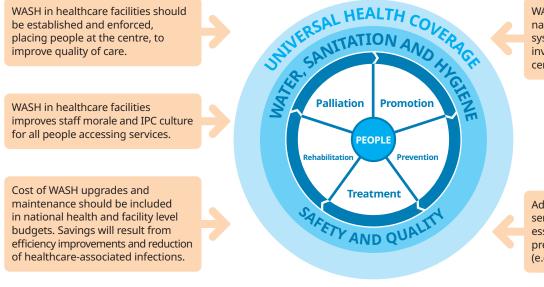
- Invest in WASH services, infrastructure, supplies and training for all frontline health workers – 70% of whom are women¹ – including cleaners and auxiliary staff, in accordance with the previously agreed WHA72.7 resolution² on WASH in healthcare facilities.
- Initiate nationwide mass public health information campaigns that include good hygiene practices tailored to meet the needs of all, as a critical part of containing the spread of COVID-19.
- Ensure indicators for access to WASH in healthcare facilities, communities and the most 'at risk' groups are embedded in national government monitoring and standards for universal health coverage – particularly for quality of care and pandemic preparedness – and the data is used to drive action towards universal health coverage.
- Ensure ministries responsible for water and sanitation are centrally involved in crossgovernment COVID-19 response and recovery structures, and health coordination mechanisms. Sharing data on WASH access for the most 'at risk' communities and where WASH is missing or insufficient in healthcare facilities.
- Development partners and multilateral organisations should urgently increase financial support for WASH services for communities and frontline health workers, including support for infrastructure and behaviour change. Official Development Assistance for WASH must be doubled in the short term to strengthen pandemic preparedness and response, and to strengthen the enabling systems that deliver sustainable services for all, prioritising those most at risk.

The foundations of safe, dignified care



WASH underpins human health and is essential in achieving universal health coverage. WASH plays a vital role in all four components of universal health coverage – for promotive, preventive, curative and rehabilitative services. Failure to improve WASH in healthcare facilities, homes, schools and public places will result in poor progress on public health targets, as well as an undue financial burden on health systems. Up to 90% of health workers do not adhere to recommended hand hygiene practices due to many factors, including the lack of an enabling environment. This puts health workers and their patients at risk of preventable infections. For example, hospital-born babies in low-income settings are at a higher risk of being affected by neonatal sepsis, with infection rates up to 20 times higher than in high-income settings.³ Yet, effective WASH and infection, prevention and control (IPC) will reduce the spread of all types of infections – including resistant ones.³

WASH in healthcare facilities underpins the provision and quality of promotive, preventive, curative and rehabilitative services, and the safe and quality service provision for achieving universal health coverage.



WASH indicators included in national health monitoring systems to track progress, guide investments and improve peoplecentred quality.

Adequate and resilient WASH services in healthcare facilities are essential for outbreak prevention, preparedness and control (e.g. Cholera, Ebola).

Adapted from a World Health Organization diagram.⁴

Build resilient systems

The COVID-19 pandemic has highlighted the WASH crisis within health systems and the importance of urgent collective action – not only to withstand this pandemic, but to build resilience against the threat of future health crises and to overcome health inequalities.

A 'best buy' in public health

Investing in WASH and IPC is a 'best buy' approach to public health. It improves the quality of care and environment at healthcare facilities, including hand hygiene and overall hospital hygiene, and aids the prevention of antimicrobial resistance (AMR) and healthcare-associated infections. It would take just one year for investment in WASH to pay for itself and produce savings for every dollar invested thereafter.³

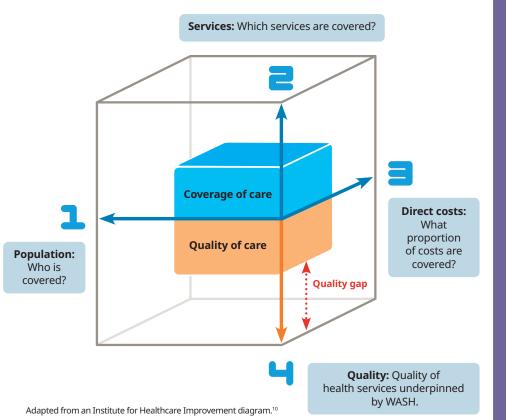
Safer primary care and childbirth

A lack of WASH in healthcare facilities compromises infection prevention and safe care for patients and health workers, as well as underpinning dignified and inclusive care. Improving WASH conditions can help establish trust in health services and improve health seeking behaviour, such as influencing pregnant women to seek prenatal care and facility-based delivery.⁵

A global survey of over one million women worldwide about their priorities for maternal health revealed that having access to WASH was the second most common demand.⁶ Every year in least developed countries, 17 million women give birth in healthcare facilities without adequate water, soap and toilets⁷ – compromising the dignity and safety of their care. Each year, up to one million mothers and newborns die from preventable infections linked with unclean birth environments. It is the lack of safe WASH in HCFs that will discourage women from giving birth in a facility or cause delays in them seeking care⁵ – putting their lives at further risk.

Investing in WASH is a 'no regrets' action

Securing good public health is impossible without access to clean water, soap and hygiene services for frontline health workers, their patients and communities. Handwashing is one of the most effective disease prevention methods available. Evidence suggests it can reduce cases of pneumonia by 50% and acute respiratory infection by 16–23%, while reducing risk of endemic diarrhoea by 48%.^{8,9}



WASH and affordable quality health services for all

To find out more go to: washmatters.wateraid.org/water-sanitationand-hygiene-in-healthcare-facilities

References

- 1. Iverson K, et al. (2019). Women's rights will drive universal health coverage. *The Lancet*. vol 394.
- 2. WHO (2019). Seventy-second World Health Assembly, WHA72.7 Agenda item 12.5 28 May 2019. Water, sanitation and hygiene in health care facilities.
- 3. WHO (2020). Combatting antimicrobial resistance through water, sanitation and hygiene and infection prevention and control in health care.
- 4. WHO. DELIVERING QUALITY, PEOPLE-CENTRED HEALTH CARE FOR ALL. The role of water, sanitation and hygiene in achieving quality universal health coverage.
- 5. Bouzid M, Cumming O, Hunter P R (2018). What is the impact of water sanitation and hygiene in healthcare facilities on care seeking behaviour and patient satisfaction? A systematic review of the evidence from low-income and middle-income countries. *BMJ global health.* vol 3, no 3, e000648.
- 6. The White Ribbon Alliance (2019). *What Women Want: Demands for Quality Healthcare from Women and Girls.*
- 7. WHO/UNICEF (2019). WASH in Health Care Facilities: Global Baseline Report 2019.
- 8. Curtis V, Cairncross S (2003). Effect of washing hands with soap on diarrhoea risk in community: a systematic review. *Lancet Infectious Diseases*. vol 3, no 5, pp 275-81.
- 9. Aiello A, Coulborn R, Perez V, Larson E (2008). Effect of hand hygiene on infectious disease risk in the community setting: a meta-analysis. *American Journal of Public Health*.
- 10. Barker P/Institute for Healthcare Improvement (2016). *Making Universal Health Coverage Whole: Adding Quality as the Fourth Dimension.*

The status of WASH in healthcare facilities

Yet globally, 1.8 billion people lack basic water services at their healthcare facilities. Water services on-site are lacking in over half (50.4%) of healthcare facilities in least developed countries, and one in four globally (24%).⁷

Two thirds of healthcare facilities in least developed countries lack basic sanitation services and one in three healthcare facilities do not have adequate amenities to clean hands where care is provided.⁷

This presents a critical weakness in health systems – a fundamental flaw in our collective armour for global health security and resilience. Governments and donors have neglected to invest adequately in the basics of clean water, soap and decent toilets for decades and, even now, hygiene investment is largely absent from efforts to strengthen health systems and national COVID-19 responses.

WaterAid

Registered charity numbers 288701 (England and Wales) and SC039479 (Scotland).