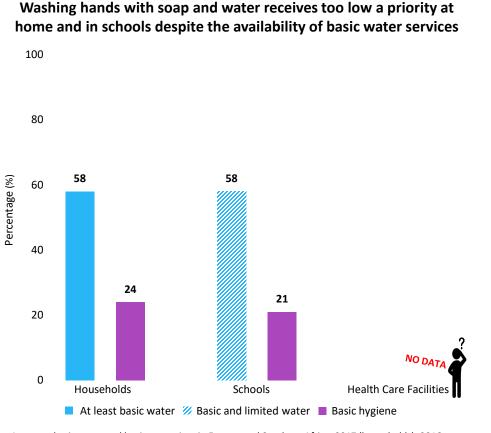
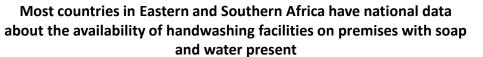
Hygiene Baselines pre-COVID-19 MP Hygiene basennes pro UNICEF Regional Office for Eastern and Southern Africa

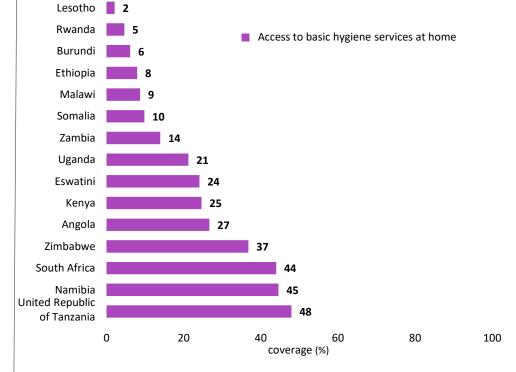
www.washdata.org

| Only 24 percent of households in Eastern and Southern Africa have a dedicated place for washing hands with soap and water on premises | | Т Ф | | | T | ₩ | | Ť |
|--|----|--------|----------|----|------|---|--|---|
| Only 20 percent of schools in Eastern and Southern Africa have hand-washing facilities with soap and water available students | to | | A | Ť | Ť | Å | | |
| We do not know the proportion of health care facilities in Eastern and Southern Africa that have functional handwashing facilities with soap and water or hand sanitiz | | ₩ | | NO | DATA | ₩ | | Ť |

- Frequent and proper hand hygiene is one of the most important measures that can be used to prevent infection with the COVID-19 virus
- There are two main routes of transmission of the COVID-19 virus: respiratory and poor hygiene
- The COVID-19 virus has not been detected in drinking-water supplies, and based on current evidence, the risk to water supplies is low
- Currently, there is no evidence about the survival of the COVID-19 virus in drinking-water or sewage
- Conventional, centralized water treatment methods that use filtration and disinfection should inactivate the COVID-19 virus
- Source: Water, sanitation, hygiene, and waste management for the COVID-19 virus Interim Guidance 19 March 2020, WHO and UNICEF







Access to basic hygiene services at household level for countries in Eastern and Southern Africa, 2017

Access to basic water and hygiene services in Eastern and Southern Africa, 2017 (households), 2016 (Schools and Health Care Facilities)

SDG standards for basic WASH services at households, schools and health care facilities

| 00 | 3DG Sta | | ces at nousenoids, schools a | |
|----------------------|---|--|--|--|
| , So | Water | Sanitation | Hygiene | Waste Management Environmental Cleaning |
| Home | Drinking water from an improved source ¹ , provided collection time is not more than 30 minutes for a roundtrip including queuing | Use of improved facilities ² which are not shared with other households | Availability of a handwashing facility on premises with soap and water | <i>"SDG 6.1 and 6.2 on water, sanitation and hygiene call for the provision of WASH</i> |
| Schools | Drinking water from an improved source is available at the school | Improved facilities, which are single-sex and usable at the school | Handwashing facilities at school, which have water and soap available | Services to Schools and Health Care Facilities" |
| Health Facilities | Water is available from an improved source on the premises. | Improved sanitation facilities are usable with at least one toilet dedicated for staff, at least one sex-separated toilet with menstrual hygiene facilities, and at least one toilet accessible for people with limited mobility | Functional hand hygiene facilities (with water and soap and/or alcohol-based hand rub) are available at points of care, and within 5 metres of toilets. | Waste is safely segregated into at least three bins, and sharps and infectious waste are treated and disposed of safelyBasic protocols for cleaning are available, and staff with cleaning responsibilities have all received training |

¹ Improved water sources are those which by nature of their design and construction have the potential to deliver safe water. These include piped water, boreholes or tube wells, protected dug wells, protected springs, rainwater and, packaged or delivered water, ² Improved sanitation facilities are those designed to hygienically separate human excreta from human contact. These include wet sanitation technologies – such as flush and pour flush toilets connecting to sewers, septic tanks or pit latrines – and dry sanitation technologies – such as dry pit latrines with slabs, and composting toilets.



Source: WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP)





(millions)

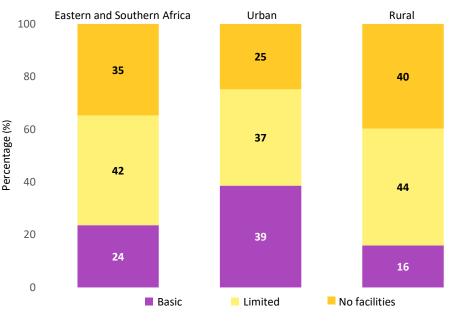
Ethiopia, 97

Kenya, 37

Only a quarter of the people in Eastern and Southern Africa have a handwashing facility with soap and water on premises

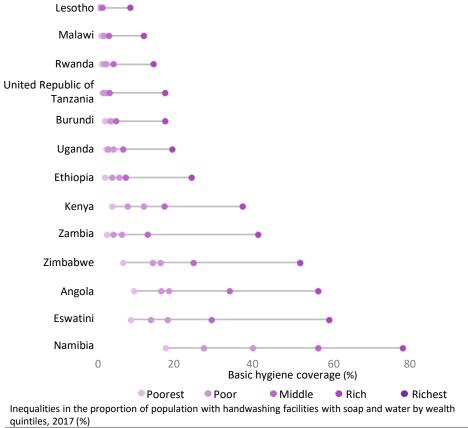
MP

UNICEF



Eastern and Southern Africa, regional, urban and rural hygiene ladders, 2017

There are large disparities in the availability of handwashing facilities at home between the poorest and richest in Eastern and Southern Africa



Regional

Global

100



Ethiopia

393 million people in Eastern and Southern Africa do not have basic

handwashing facilities with soap and water at home



Zambia, 15

Rest of the region, 109

Distribution of population without basic hygiene, Eastern and Southern African countries, 2017

Rural

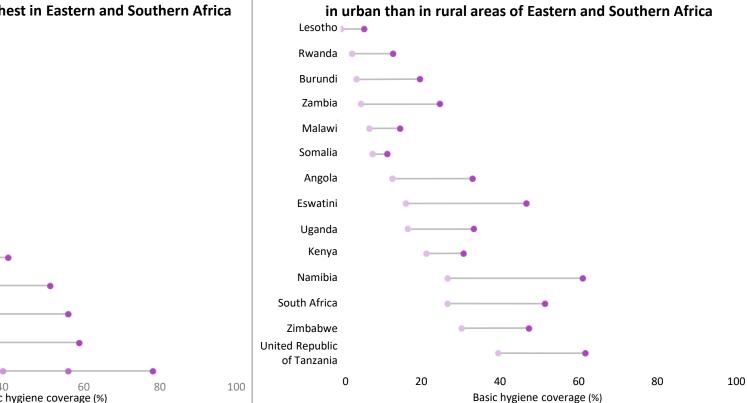
Inequalities in the proportion of population with handwashing facilities with soap and water by urban and rural

Urban

Handwashing with soap and water is more prevalent

South

Africa



Wealth

Rest of the

Malawi

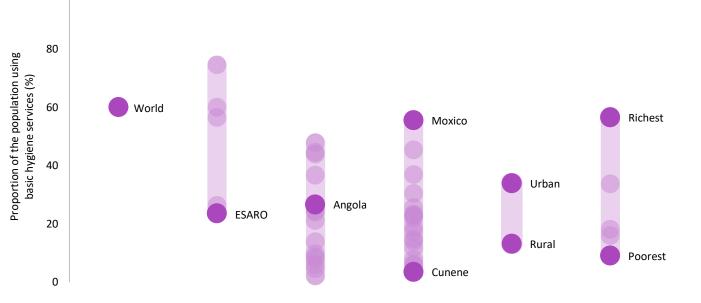
Angola

Untd. Rep

of Tanzania

quintiles, 2017 (%) areas, 2017 (%) Large disparities in basic hand washing facilities with soap and water in Angola and Eastern and Southern Africa

Countries Provinces Urban/Rural



"We must work to prevent the spread of disease. Improved water, sanitation and hygiene in health facilities is critical to this effort"

Remarks by the United National Secretary-General upon issuing a Global Call to Action for WASH in Health Facilities, March 2018

Population with basic hygiene facilities disaggregated by UNICEF regions, countries and Angola provinces, urban-rural & wealth quintiles (%) Sources: JMP 2019 and Angola MICS 2018

Hygiene Baselines pre-COVID-19 Schools and Health Care Facilities

www.washdata.org

United Rep.

Zambia

Zimbabwe

of Tanzania

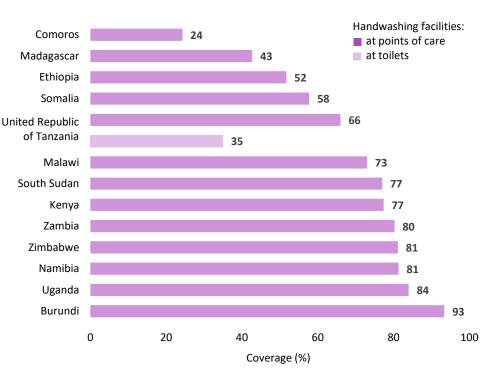
Few countries in Eastern and Southern Africa have comprehensive data about hygiene facilities in schools

JMP

WHO UNICEF

Ethiopia Burundi Malawi Zimbabwe 100 80 Percentage (%) 62 63 66 68 60 40 63 63 59 39 15 20 38 37 32 18 16 6 0 National average Secondary Secondary secondar \$° Nationalave Wationalaver Limited service No facilities Basic service

Many countries in Eastern and Southern Africa have data about handwashing facilities with soap and water at points of care



Coverage with hand hygiene facilities at points of care (and toilets - United Republic of Tanzania) in health care

Madagascar

Uganda South Sudan Somalia Rwanda Rwanda Namibia Mozambique Malawi

Lesotho

facilities of countries in Eastern and Southern Africa with nationally representative data

Kenya Ethiopia

Coverage with hand hygiene facilities at schools, national, primary- and secondary schools in countries of Eastern and Southern Africa with nationally representative hygiene data for primary and secondary schools

Questions and scores for *Planning, Monitoring and Review* taken from the Regional WASH in Health Care Facilities

Source: https://www.unicef.org/esa/media/4826/file/UNICEF-WASH-in-Health-Care-Facilities-2019.pdf

Is WASH in Health Care Facilities (WinHCFs) monitored at national level?

Are there dedicated institutional arrangements in place for monitoring WinHCFs at the national and sub-national Are core SDG questions/indicators integrated into the national Health Management and Information Systems (HMIS)?

oes the HMIS include indicators addressing the usage and functionality if WASH infrastructure in health care facilities?

Does your country conduct periodic Service Availability and Readiness Assessments (SARA

Does your country conduct periodic Service Provision Assessments (SPA)?

| I | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------|------|-------|------------------------------------|-------------|-------|------------------------------------|-------------|-------|------------------------------------|-------------|------|------------------------|-----------------------------|---------------------|------------------------|-----------------------------|---------------------|------------------------|-----------------------------|---------------------|------|------------------------|-----------------------------|---------------------|---|--------------------------------------|------------------------|-----------------------------|---------------------|------------------------|-----------------------------|---------------------|
| | | | | ł | House | eholds | 5 | | | | | | | | Sch | nools | | | | | | | | | Healt | h Car | re Faci | lities | | | | |
| | | N | lationa | al | | Rural | | | Urban | 1 | | N | lationa | al | Ρ | Primary | у | Se | econda | ary | | | N | lationa | al | | He | ospita | ls | | Non- lospita | |
| Country | Year | Basic | Limited (without water or soap) | No facility | Basic | Limited (without water or soap) | No facility | Basic | Limited (without water or soap) | No facility | Year | Basic hygiene services | Limited hygiene services | No hygiene services | Basic hygiene services | Limited hygiene services | No hygiene services | Basic hygiene services | Limited hygiene services | No hygiene services | Year | Basic hygiene services | Limited hygiene services | No hygiene services | Handwashing facilities at points of care | Handwashing facilities at toilets | Basic hygiene services | Limited hygiene services | No hygiene services | Basic hygiene services | Limited hygiene services | No hygiene services |
| Angola | 2017 | 27 | 15 | 58 | 13 | 14 | 73 | 34 | 16 | 50 | 2014 | - | - | - | - | 1 - I | - | - | - | - | 2016 | - | - | - | - | - | -) | , - | - | - | - | - |
| Botswana | - | - | - ' | [- " | - | - | - | - | - | - | 2016 | - | - | - | - | - | i - " | - | - | - | 2016 | - | - | - | - | - " | - | - | , - I | -) | - | - |
| Burundi | 2017 | 6 | 93 | 1 | 4 | 95 | 1 | 20 | 79 | 1 | 2016 | 19 | 15 | 66 | 20 | 1 | 79 | 16 | - | - | 2016 | - | - | - | 93 | - | - | | - | -) | - | - |
| Comoros | - | - | - | - ' | - | - | - | - | - | - | 2016 | - | <u> </u> - | - | - | - | , - ¹ | - | - | - | 2016 | - | - | - | 24 | - | - | - | - 1 | -) | - | - |
| Eritrea | | - | - | - ' | - | - | - | - | - | - | 2016 | - | - | - | - | - | , - ¹ | - | - ' | - | 2016 | | - | - | - | - | - | - | - 1 | -) | - | - |
| Eswatini | 2017 | 24 | 31 | 44 | 17 | 33 | 50 | 48 | 27 | 26 | 2016 | - | - | - | - | - | - | - | - | - | 2016 | - | - | - | - | - | - | , - I | - | | - | - |
| Ethiopia | 2017 | 8 | 51 | 41 | 4 | 50 | 46 | 23 | 57 | 19 | 2016 | 6 | 18 | 77 | 5 | 16 | 79 | 7 | 39 | 54 | 2016 | - | - | 2 | 52 | - | - | - | 1 | - | - | 2 |
| Kenya | 2017 | 25 | 35 | 40 | 22 | 34 | 44 | 32 | 40 | 29 | 2016 | - | - | - | - | - | - | - | - | - | 2016 | - | - | 0 | 77 | - | - | i - | 0 | - | - | 1 |
| Lesotho | 2017 | 2 | 3 | 95 | 1 | 2 | 98 | 6 | 5 | 89 | 2016 | - | - | - | - | - | - | - | - | - | 2016 | - | - | - | - | - | - | - | 1 | | - | - |
| Madagascar | 2017 | - | - ¹ | - | - | - | - | - | - | - | 2016 | - | - | - | - | - | - | - | - | - | 2016 | - | - | - | 43 | - | - | - | 1 | - | - | - |
| Malawi | 2017 | 9 | 76 | 16 | 7 | 75 | 17 | 15 | 77 | 7 | 2016 | - | 37 | 63 | - | 38 | 62 | | 32 | 68 | 2016 | - | - | - | 73 | - | - | i - 1 | - 1 | - | - | - |
| Mauritius | _ ! | - | - 1 | - | - | - | - | - | - | - | 2016 | - | - | - | - | - | - | - | - | - | 2016 | - | - | - | - | - | - | - | / | - | (- ¹ | (- I |
| Mozambique | - | - | - ' | - | - | - | - | - | - | - | 2016 | 15 | - | - | 15 | - | - | - | - | - | 2016 | - | - | - | - | - | - | | , - I | -) | ? | 1 - 1 |
| Namibia | 2017 | 45 | 43 | 12 | 27 | 58 | 15 | 62 | 28 | 9 | 2016 | 20 | 16 | 64 | - | - | - | - | - | - | 2016 | - | - | - | 81 | - | - | | No | DATA | | 1 - 1 |
| Rwanda | 2017 | 5 | 10 | 86 | 3 | 10 | 87 | 13 | 8 | 79 | 2016 | 48 | - | - | 45 | - | - | 51 | - | - | 2016 | - | - | - | - | - | - | - | , – t | | - I | - |
| Seychelles | - | - | - ' | - ' | - | - | - | - | - | - | 2016 | 100 | 0 | 0 | 100 | 0 | 0 | 100 | 0 | 0 | 2016 | - | - | - | - | - | - | , - | , - 1 | - | ∕∏ - ' | - |
| Somalia | 2017 | 10 | 34 | 56 | 8 | 35 | 57 | 12 | 34 | 54 | 2016 | - | - | - | - | - | - | - | - 1 | - | 2016 | - | - | - | 58 | - | | , - | , - I | (-) | 1 - 1 | - |
| South Africa | 2017 | 44 | 44 | 12 | 27 | 55 | 18 | 53 | 38 | 10 | 2016 | - | - | - | - | - | - | - | - ! | - | 2016 | - | - | - | - | - | - | | 1 | -) | - | - |
| South Sudan | - | - | - ' | - ' | - | - | - | - | - | - | 2016 | - | - | - | - | - | - | - | - | - | 2016 | - | - | - | 77 | - | | | 1 | - | - | - |
| Uganda | 2017 | 21 | 32 | 47 | 17 | 33 | 50 | 34 | 27 | 39 | 2016 | 37 | 25 | 39 | - | - | - | - | - 1 | - | 2016 | - | - | 1 | 84 | - | - | , - | 0 | - | - | 1 |
| United Rep. of Tanzania | 2017 | 48 | 35 | 17 | 40 | 40 | 19 | 63 | 25 | 12 | 2016 | 23 | - | - | 23 | - | - | - | - | - | 2016 | 35 | - | - | 66 | 35 | 58 | - | - | 33 | - | - |
| Zambia | 2017 | 14 | 28 | 58 | 5 | 24 | 71 | 26 | 33 | 41 | 2016 | 54 | - | - | 52 | - | - | 63 | - 1 | - | 2016 | - | - | - | 80 | - | - | | - | - | - | - |
| Zimbabwe | 2017 | 37 | 61 | 2 | 31 | 67 | 2 | 49 | 49 | 3 | 2016 | - | 63 | 37 | | 63 | 37 | | 59 | 41 | 2016 | 58 | 32 | 10 | 81 | - | 56 | 35 | 9 | 59 | 32 | 10 |
| Eastern and Southern Africa | 2017 | 24 | 42 | 35 | 16 | 44 | 40 | 39 | 37 | 25 | 2016 | 21 | 15 | 64 | 18 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |

Sources: Population data on Hygiene: Progress on household drinking water, sanitation and Hygiene 2000-2017: Special focus on inequalities, JMP, 2019; WASH in Schools data: Drinking Water, Sanitation and Hygiene in Schools -Global baseline report 2018, JMP, 2018; WASH in Health Care Facilities data: WASH in Health Care Facilities; global baseline report, JMP, 2019

Hygiene Baselines pre-COVID-19

Resources

WHO/UNICEF Technical Brief: Water, Sanitation, Hygiene and Waste Management for COVID-19

| (A) World Heath Organization | unicef | | | | | | |
|--|--|--|--|--|--|--|--|
| Water, sanitation, hygiene, for the COVID-19 virus Interim guidance 19 March 2020 | and waste management | | | | | | |
| Background | 1. COMB-Pressalisies | | | | | | |
| This interact guidance experiments for influence percention and perceiver (FEC) documents for solution percentioning WEO positions on using material and hards are trans- related to the solution of the solution of the solution of the solution of the solution of the solution of bodies are perceived or distance processions of bodies and perceived on the solution of the solution and perceived on the solution of the | These are two assessments of the COVID- tions requestion with the covid-transmission of the COVID- tions requested where an advanced presses ranging as merces. An approxes which is in dome meters with sampoor which integrations suppresses consenting, engling is not do e l'hoir coposal or approxed prime of the sampoor of the line request or approxed prime of the sampoor of the integration of the sample of the sampoor of the restored values. One of the sample of the sampoor behand individual case were as a menus of transmission (and memory). 2 (49) will cause of constituted (2017b)- Approximately 2 (49) will cause of constituted (2017b)- | | | | | | |
| valuations: distance exploring the very distance distance of the second product constantials, and with the second distance distan | Approximate 2 (10) in the last statement constant detects dresses provide with distribution. ¹⁴ and two reades distribu- COVID-19 and 2005. Supposed in the last of outlier of COVID-19 and and the last statement of the COVID-19 and the last statement of the last statement of the COVID-19 and COVID-19 and | | | | | | |
| CHD 3** car manufacture: Anyma roma transmission of the CHD 3 with the | 1 Engineering the CPU Fill of the CPU Fill | | | | | | |

This Technical Brief is This Technical Brief supplements existing written in particular for water and sanitation Infection, Prevention and practitioners and pro-Control (IPC) documents by referring to and sumviders and is regularly marizing WHO guidance updated. on water, sanitation and health care waste which is relevant for viruses (including coronaviruses).

Check for new updates from: <u>https://www.who.int/publications-</u> detail/water-sanitation-hygiene-and-waste-management-for-covid-19

UNICEF Hygiene Programming Guidance Note COVID-19 Emergency Response

| 10 March 2020 | the wave privat |
|--|---|
| COVID-19 Emergency Response | |
| UNICET Hygierss Programity Guidance | Nola |
| Union Mandeig Wygene primetter in the same | et of the COMD 15-3 downed |
| promotion campaign as part of a broadler risk not means to provide a comprehensive public prompts and questions to theirk about when or behavior change interventions in the context of | Is consider when planning and implementing a hypiem communication 5 community empagement stralegy. It is designing as behavior change companying, but with regigning with local governments and GAD onleagues in if this new virus. The collect is based on issues learn schubble heath immegneties and general programming. |
| 10 submit preparedness and response. The trustead in hyperic promotion activities varies UNDEF G4D and WASH coloogane. (2) off enterior of material charmets, camp headforhaftleninelication promotion.) In any to | officers all country officers working together on the Count ender to whose UNICEF Within and CR3 officers are by country and depends on (1) preserve and capacity explision of country and approximation of the targets and premotion activities to a matter present. UNICEF WIRAD officers provide increased input prior mode. |
| Please relier to separate documents for guiden | ce on Covid-19 IPC programming in activate and HCF |
| Essertial to know: | |
| Briefly, what is essential for hypiene promotion of transmission of COVID-19: respiratory on | practitionans to innov to that there are bee main restau d contact. |
| tand on surfaces where the situs could remain | holed person poughts or sciences. Disperts may also statility and thus the investigate environment of an investigation (contact investigation). This task of calcular appears to be task. |
| Important resources to read | |
| Just WHO-UNICEF INNErtworkial best | Mps (www.ets.ct/jubilities.chtaileater sanddow hypere and wate nor operation paid 19 |
| WHO websical guidance pages on PC | Mpc of wear and of the marger calls demonstrated concentration 2011 Mind on an guilder out inflation- presentation and control of Mino. Name what a KM Regions- amore the backhadder of the data- ance of the backhadder of the data- |
| INHO mutual union PC taining | Https://commitie.org/tourses/COV/D-1H-IPC-EH |
| second and and a second | |
| | ier an ige al action. The educate proximitiy evolves |
| Tax log for easy require skiller depends to longers | tere and type of terface. The extension processed by notice as |

This Note is intended for WASH and C4D officers working together on the COVID-19 outbreak preparedness and response. It provides guidance on which aspects to consider when planning and implementing a hygiene promotion campaign as part of a broader risk communication & community engagement strategy. The content is based on lessons learnt regarding gaps in hygiene promotion during past public health emergencies and general programming.

Check for new updates from: https://washdata.org/monitoring/hygiene

JMP Core Questions to Strengthen National Monitoring of SDG 6.1 and 6.2 on Water, Sanitation and Hygiene through Household Surveys and Censuses, Education Monitoring Information Systems (EMIS) and Health Management Information Systems (HMIS)

JMP Core questions on water, sanitation and hygiene for household surveys



During the MDG period the JMP partnered with major international survey programmes to develop and standardize core questions and indicators for use in national household surveys and censuses which were the prime data sources for the JMP.

Since publication of the JMP core questions in 2006, international survey programmes have aligned their questionnaires and the core questions have been used extensively in national surveys and censuses around the world, leading to increased harmonization of national WASH data.

The indicators selected for monitoring the SDG WASH targets build on the established improved/unimproved facility type classification and introduce additional criteria, derived from the human rights to safe drinking water and sanitation, relating to the level of service provided. Since 2012, the JMP has been collaborating with the UNICEF Multiple Indicator Cluster Survey programme and other inter-national survey programmes to develop and test new questions that address the SDG criteria for service levels, including an innovative new module for water quality testing in household surveys.

Harmonizing approaches to monitoring WASH in Schools

International consultations between 2011 and 2013 identified schools as a priority setting for global WASH monitoring post-2015. A preliminary UNICEF review identified 149 countries with existing national data on WASH in primary schools but, found indicator definitions were often missing and varied widely between national data sources, limiting the potential for cross-country comparison.

The WHO/UNICEF JMP subsequently convened a global task team of WASH and education experts to review global norms and standards and develop a

harmonized set of core indicators and questions for monitoring basic drinking water, sanitation and hygiene services in schools. The official global indicator for SDG target 4.a refers to these harmonized definitions for WASH in schools ('as per WASH definitions') and the core questions and indicators are increasingly being incorporated into national Education Information Management Systems (EMIS) and major school surveys around the world. Continued collaboration between WASH and education stakeholders will be important to



support the progressive standardization of data collection and analysis for national and global reporting of WASH in schools.



Harmonizing approaches to monitoring WASH in Health Care Facilities

The **core indicators and questions in this guide** were developed by the Global Task Team for Monitoring WASH in Health Care Facilities (HCF), convened by the WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP), and working under the auspices of the Global Action Plan on WASH in HCF. They are derived from current global normative documents, national standards and regulations, questions that have been used in facility assessment surveys and censuses, and the normative criteria of the human rights to water and sanitation: accessibility, availability, quality and acceptability.

National estimates can be derived from **facility-based surveys** that collect data via interviews and observations by trained enumerators, as well as routine administrative reporting systems filled out by health care workers and managers (e.g. Health Management Information Systems [HMIS]). The core questions are intended to be:

- 1. applicable for use in different types of data collection mechanisms
- 2. relevant in all countries and settings,
- 3. focused on the minimum criteria for provision of basic WASH services in HCF.

For countries where the minimum criteria for basic WASH services are not aspirational and monitoring systems have the capacity for additional questions, the core questions can be supplemented with additional questions from a list of possible topics provided in Annex A of the guide. This document:

- describes why it is important to adopt a harmonized set of core questions for monitoring WASH in HCF;
- presents core indicator definitions for "basic" WASH services in HCF and associated service ladders;
- introduces core questions to support harmonized data collection to monitor WASH in HCF;
- provides an example of incorporating the core questions in national questionnaires (e.g. HMIS);
- presents examples of data analysis and tabulation to calculate coverage of "basic" WASH services in HCF; and
- suggests topics that could be used in detailed assessments that go beyond the minimum set of basic service indicators.