Hygiene Baselines pre-COVID-19

UNICEF Regional Office for Latin America and Caribbean

www.washdata.org

We do not know how many people in Latin America and Caribbean do not have a handwashing facility with soap and water on premises

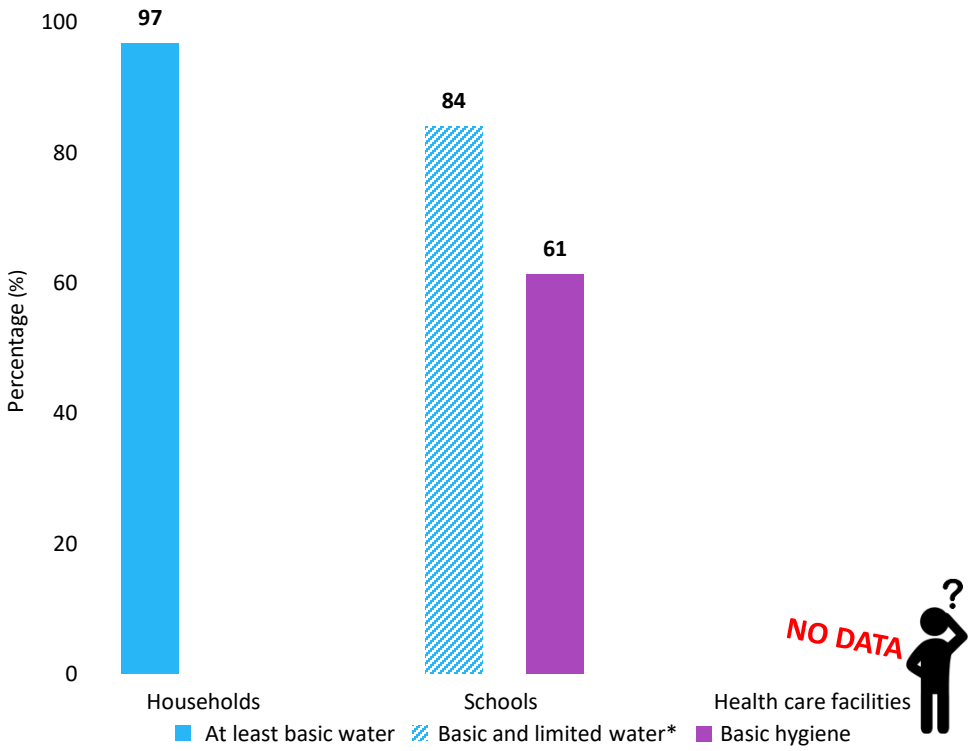
2 out of 5 schools in Latin America and Caribbean do not have handwashing facilities with soap and water available to students

We do not know the proportion of health care facilities in Latin America and Caribbean that have functional hand hygiene facilities with soap and water or hand sanitizer

- 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

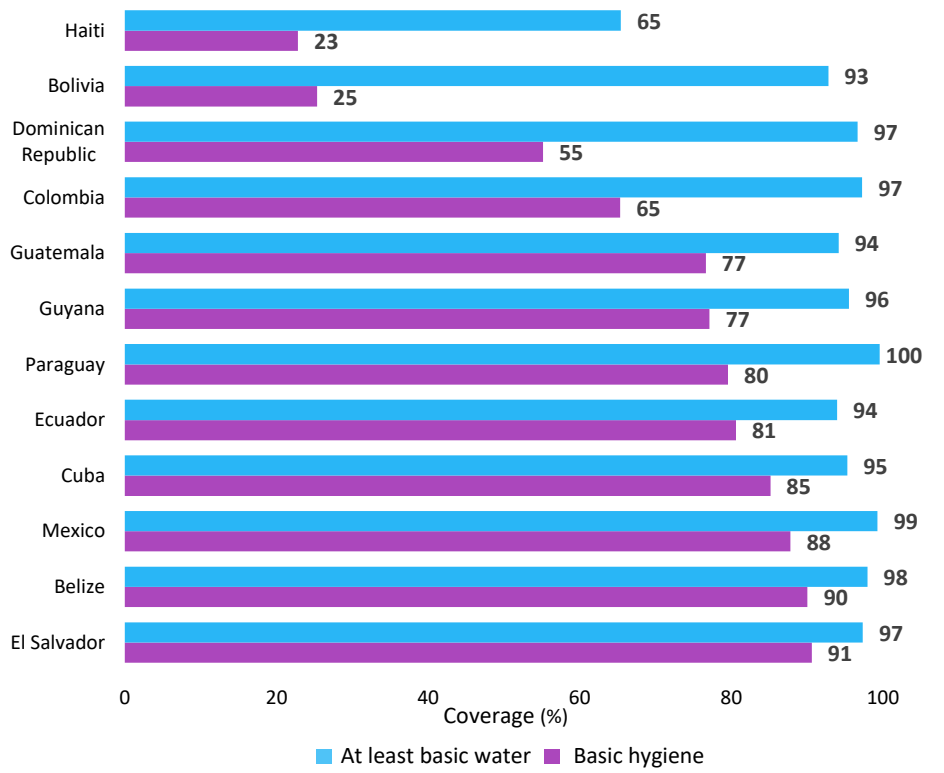
Source: Water, sanitation, hygiene, and waste management for the COVID-19 virus – Interim Guidance 23 March 2020, WHO and UNICEF

In Latin America and Caribbean, washing hands with soap and water receives too low a priority at schools despite the availability of basic water services



Access to basic WASH services in Latin America and Caribbean, 2017 (households), 2016 (Schools)
* Improved facilities only (no data on availability of drinking water)

Availability of basic water services does not seem to be the limiting factor for having a hand washing facility with soap and water at home



Access to at least basic water services and hygiene services at home for countries with available nationally representative data, Latin America and Caribbean, 2017.

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

	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	*"SDG 6.1 and 6.2 on water, sanitation and hygiene call for the provision of WASH Services to Schools and Health Care Facilities"*	
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		
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 safely	Basic 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.

World Health Organization

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

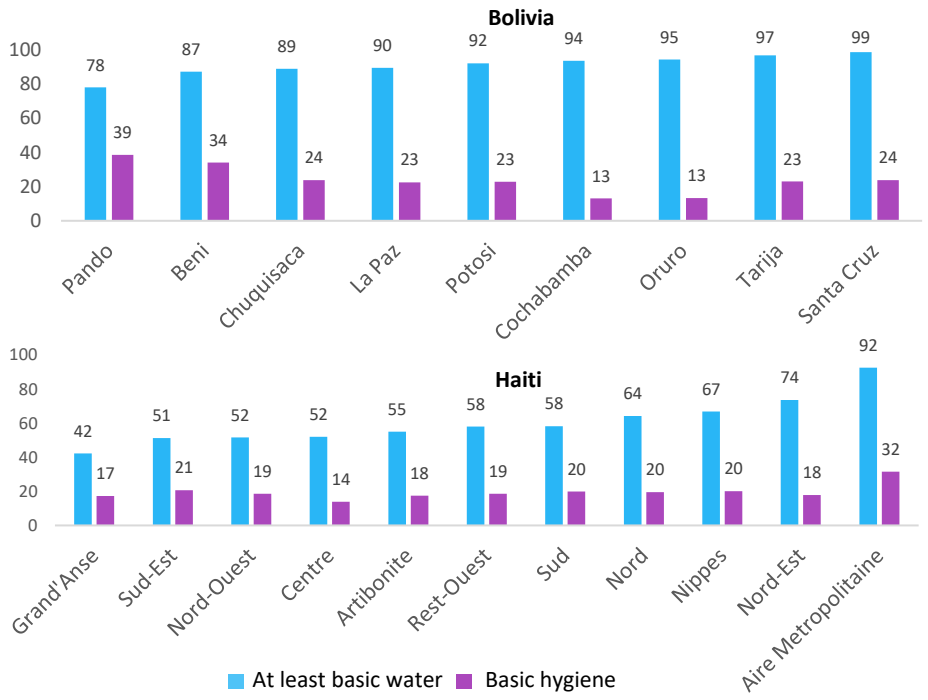
unicef

Hygiene Baselines pre-COVID-19

Household and population data

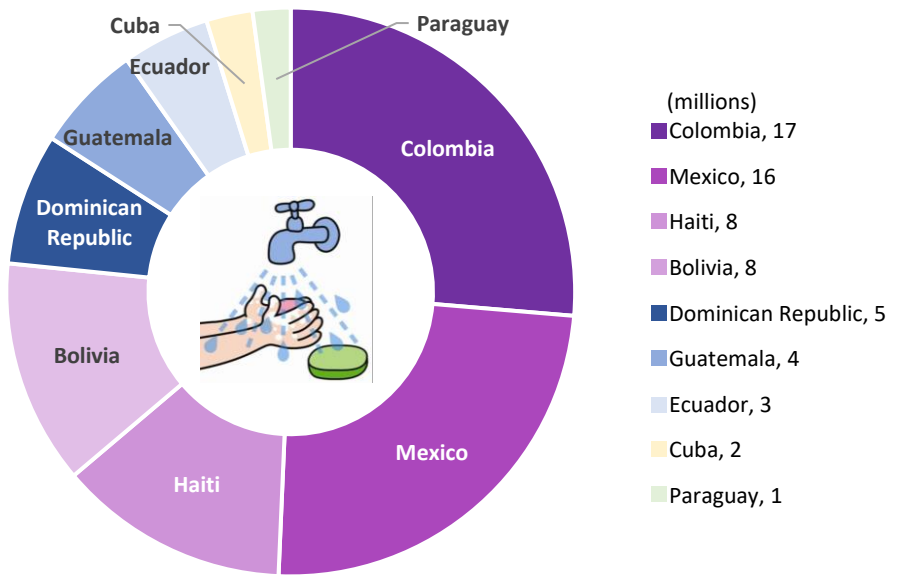
www.washdata.org

Use of handwashing facilities with soap and water at sub-national level doesn't seem dependent on availability of basic water services



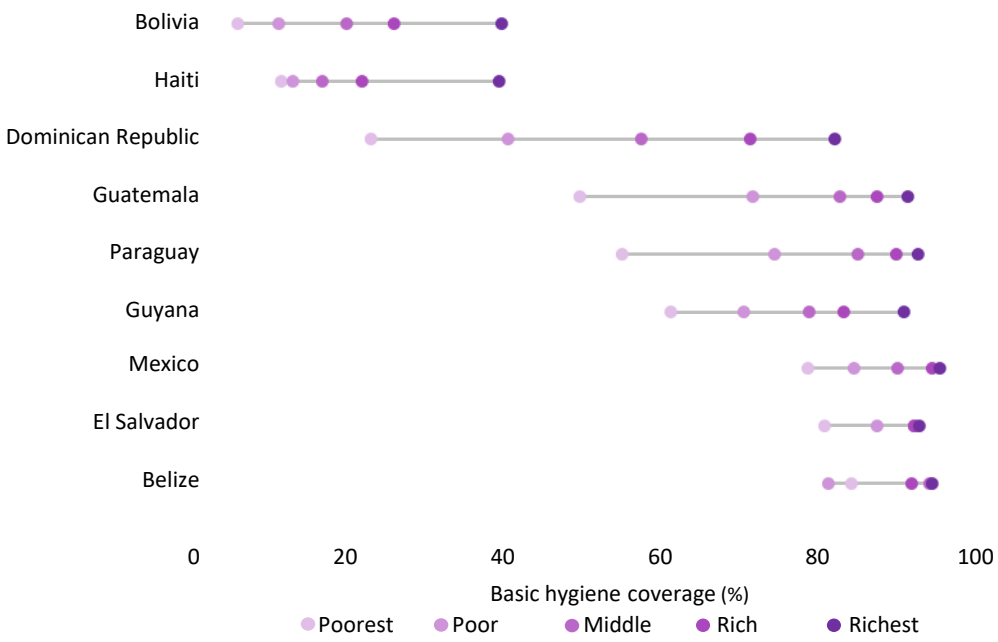
Basic water and basic sanitation at household level, sub-national regions of Bolivia and Haiti
Source: Bolivia EDS 2016 and Haiti DHS 2017

Millions of people in Latin America and Caribbean are still without basic handwashing facilities with soap and water at home



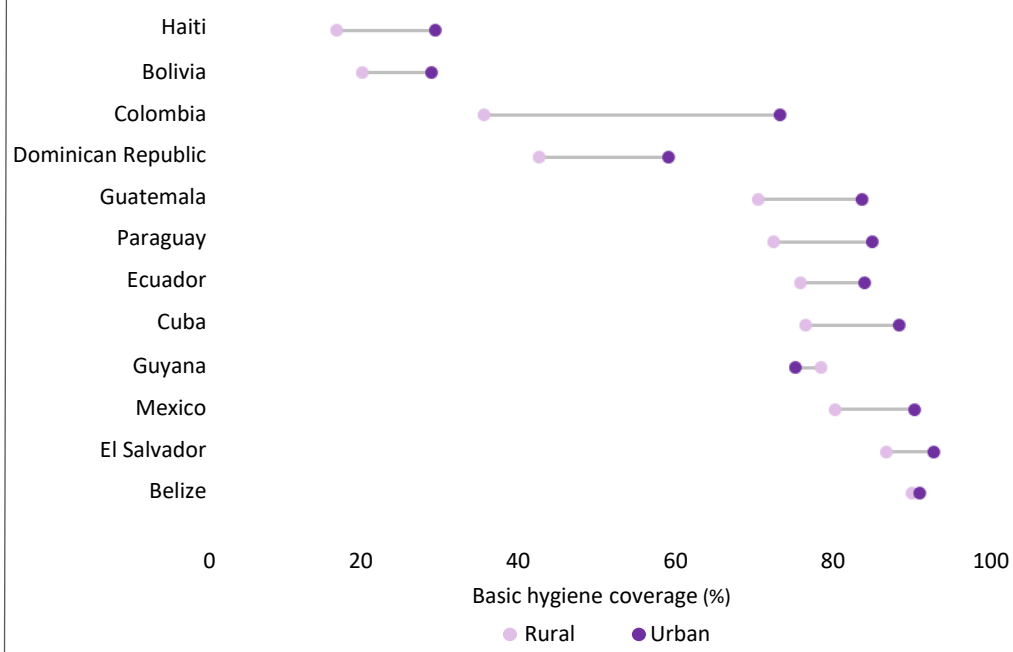
Distribution of population without basic hygiene at the household; Countries in Latin America and Caribbean with available estimates and more than 1 million people without basic hygiene, 2017

There are large disparities in the availability of handwashing facilities at home between the poorest and richest in Latin America and Caribbean



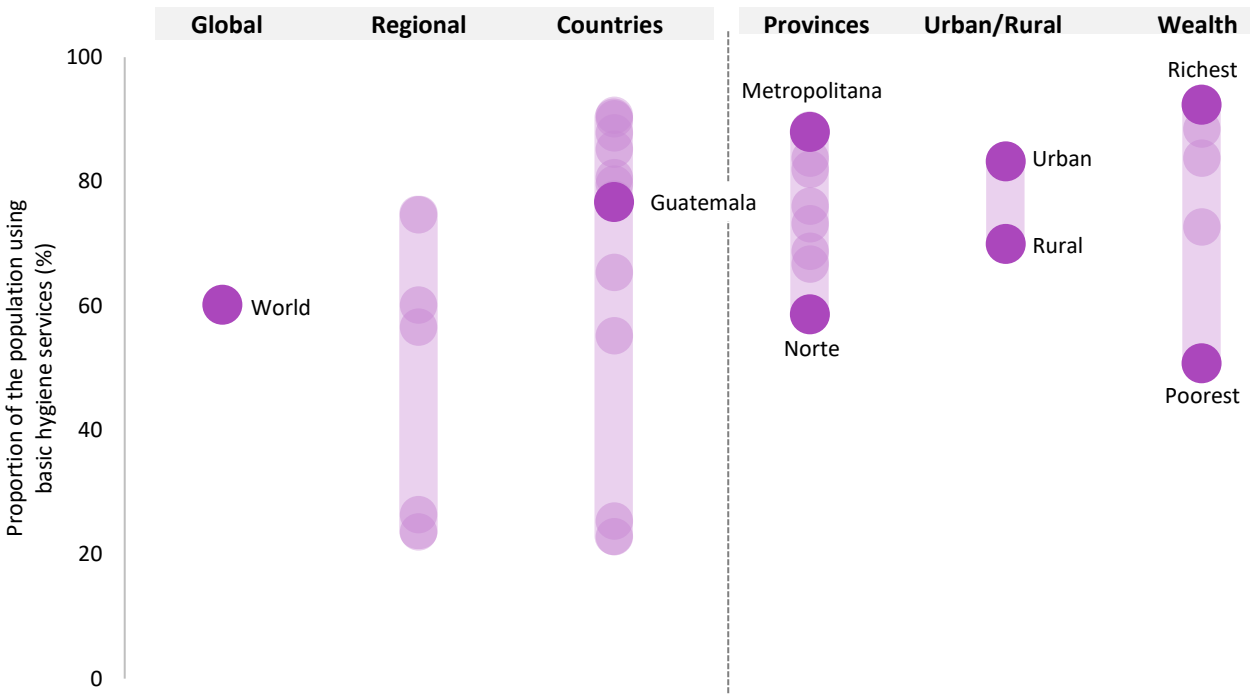
Inequalities in the proportion of population with handwashing facilities with soap and water by wealth quintiles, countries in Latin America and Caribbean, 2017 (%)

Handwashing facilities with soap and water are more prevalent in urban than in rural areas of Latin America and Caribbean



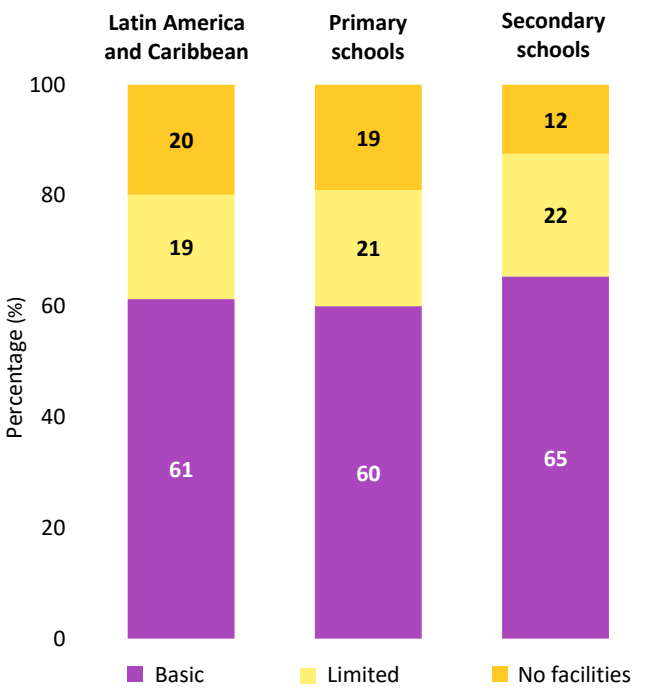
Inequalities in the proportion of population with handwashing facilities with soap and water by urban and rural areas, countries in Latin America and Caribbean, 2017 (%)

Large disparities in basic hand washing facilities with soap and water within Guatemala and Latin America and Caribbean



Population with basic hygiene facilities disaggregated by UNICEF regions, countries and Guatemala, provinces, urban-rural & wealth quintiles, (%); Sources: JMP 2019 and Guatemala DHS 2015

Four out of ten schools do not have handwashing facilities with soap and water



Latin America and Caribbean, hygiene ladders, national, primary- and secondary schools 2017

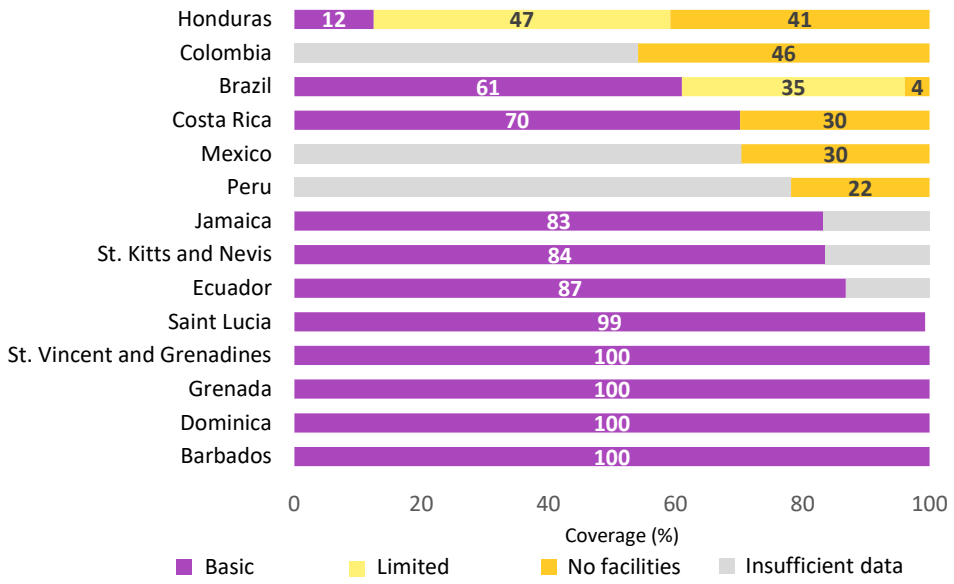
Hygiene Baselines pre-COVID-19

Schools and Health Care Facilities

WHO UNICEF JMP

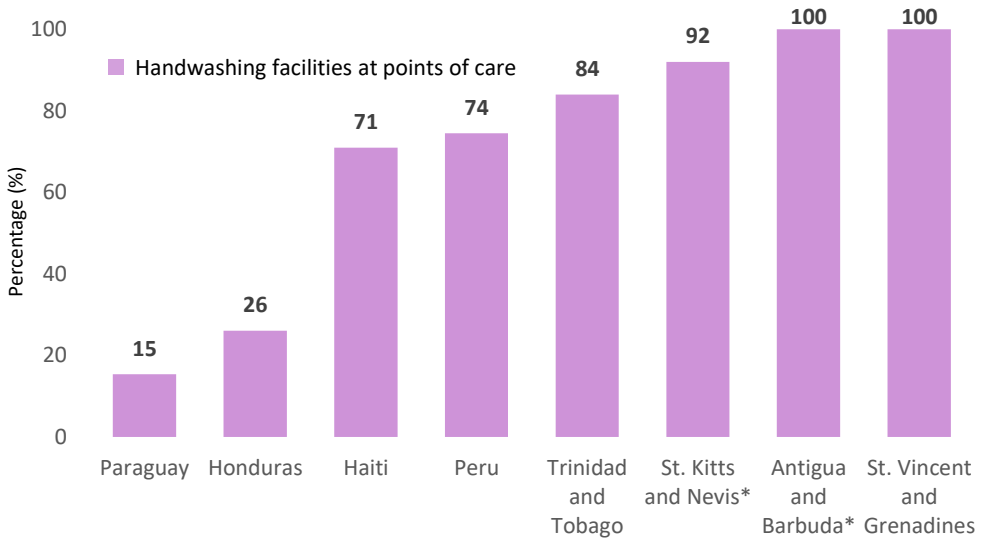
www.washdata.org

Estimates for hygiene facilities at schools available for 14 of the 33 countries in Latin America and Caribbean



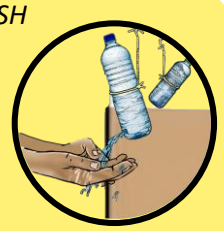
Latin America and Caribbean, hygiene ladders for schools, 2017

Estimates for hand hygiene facilities at points of care health care facilities available for 7 of the 33 countries in Latin America and Caribbean



National coverage with hand hygiene facilities with soap and water present at points of care in health care facilities, Latin America and Caribbean countries, 2016 and * 2010

Regularly washing hands with soap and water is a behaviour that is difficult to measure at the population level. Asking people if, or when, they WASH their hands usually does not result in reliable answers as most people will be over-reporting their own "good" behaviour. The presence in a household, school or health care facility of a dedicated place or facility for washing hands and the presence of soap and water at that facility, has shown to be a good predictor for people regularly washing their hands with soap and water. A global expert panel suggested that this indicator be used to estimate actual hand washing behavior among a population. This then became the indicator for the monitoring of the SDG hygiene targets.



For more information see: Practical Guide for Measuring Handwashing Behavior
https://www.wsp.org/sites/wsp/files/publications/WSP-Practical-Guidance-Measuring-Handwashing-Behavior-2013-Update.pdf

	Households										Schools										Health Care Facilities											
	National			Rural			Urban				National			Primary			Secondary				National					Hospitals			Non-Hospitals			
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
Anguilla	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Antigua and Barbuda	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	100	-	-	-	-	-	-	-
Argentina	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Barbados	-	-	-	-	-	-	-	-	-	-	2016	100	0	0	100	0	0	100	0	0	2016	-	-	-	-	-	-	-	-	-	-	-
Belize	2017	90	9	1	90	9	2	91	9	0	2013	66	25	9	66	25	9	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Bolivia (Plurinational State of)	2017	25	15	59	19	27	54	28	10	62	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Brazil	-	-	-	-	-	-	-	-	-	-	2016	61	35	4	61	35	4	65	33	2	2016	-	-	-	-	-	-	-	-	-	-	-
British Virgin Islands	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Chile	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Colombia	2017	65	4	30	35	6	60	73	4	23	2016	-	54	46	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Costa Rica	-	-	-	-	-	-	-	-	-	-	2016	70	0	30	68	0	32	76	2	23	2016	-	-	-	-	-	-	-	-	-	-	-
Cuba	2017	85	10	5	76	12	12	88	9	3	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Dominica	-	-	-	-	-	-	-	-	-	-	2016	100	0	0	100	0	0	100	0	0	2016	-	-	-	-	-	-	-	-	-	-	-
Dominican Republic	2017	55	16	29	42	16	42	58	16	26	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Ecuador	2017	81	10	10	75	16	8	84	6	10	2016	87	-	-	80	-	-	94	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
El Salvador	2017	91	7	3	86	10	4	92	5	2	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Grenada	-	-	-	-	-	-	-	-	-	-	2016	100	0	0	100	0	0	100	0	0	2016	-	-	-	-	-	-	-	-	-	-	-
Guatemala	2017	77	21	3	70	27	3	83	14	2	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Guyana	2017	77	11	12	78	12	10	75	9	16	2014	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Haiti	2017	23	61	16	16	63	21	29	60	12	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	71	-	-	-	-	-	-	-
Honduras	-	-	-	-	-	-	-	-	-	-	2016	12	47	41	5	-	-	21	-	-	2016	-	-	-	26	-	-	-	-	-	-	-
Jamaica	-	-	-	-	-	-	-	-	-	-	2016	83	-	-	94	-	-	69	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Mexico	2017	88	9	3	80	15	5	90	8	2	2016	-	70	30	-	67	33	-	72	28	2016	-	-	-	-	-	-	-	-	-	-	-
Montserrat	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Nicaragua	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Panama	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Paraguay	2017	80	18	2	72	25	3	84	13	2	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	15	-	-	-	-	-	-	-
Peru	2017	-	-	-	56	42	3	-	-	-	2016	-	78	22	-	78	22	-	78	22	2016	-	-	-	74	-	-	-	-	-	-	-
Saint Kitts and Nevis	-	-	-	-	-	-	-	-	-	-	2016	84	-	-	79	-	-	100	0	0	2010	-	-	-	92	-	-	-	-	-	-	-
Saint Lucia	-	-	-	-	-	-	-	-	-	-	2016	99	-	-	99	-	-	100	0	0	2016	-	-	-	-	-	-	-	-	-	-	-
Saint Vincent and the Grenadines	-	-	-	-	-	-	-	-	-	-	2016	100	0	0	100	0	0	100	0	0	2016	-	-	-	100	-	-	-	-	-	-	-
Suriname	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Trinidad and Tobago	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2010	-	-	-	84	-	-	-	-	-	-	-
Turks and Caicos Islands	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Uruguay	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Venezuela (Bolivarian Republic of)	-	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	2016	-	-	-	-	-	-	-	-	-	-	-
Latin America and Caribbean	**2017**	-	-	-	59	21	19	-	-	-	**2016**	61	19	20	60	21	19	65	22	12	**2016**	-	-	-	-	-	-	-	-	-	-	-

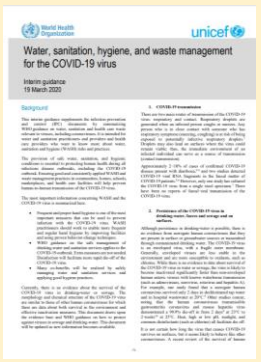
Sources: Population data on Hygiene: Progress on household drinking water, sanitation and hygiene 2000-2017: Special focus on inequalities, JMP, 2019; WASH in Schools data: Drinking Water, Sanitation and Hygiene in Schools - Global baseline report 2018, JMP, 2018; WASH in Health Care Facilities data: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

Hygiene Baselines pre-COVID-19

Resources

www.washdata.org

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



This Technical Brief supplements existing *Infection, Prevention and Control (IPC)* documents by referring to and summarizing WHO guidance on water, sanitation and health care waste which is relevant for viruses (including coronaviruses).

This Technical Brief is written in particular for water and sanitation practitioners and providers and is regularly updated.

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

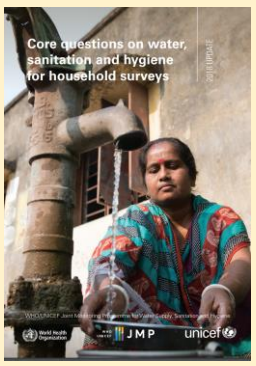
UNICEF Hygiene Programming Guidance Note COVID-19 Emergency Response

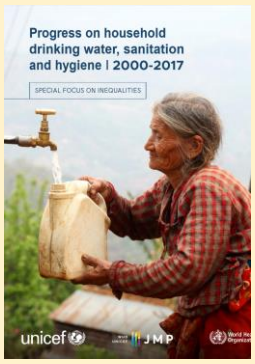
This Note is intended for WASH and C4D officers working together on the COVID-19 outbreak preparedness and response. It provides guidance on which aspects to consider when planning and implementing a hygiene promotion campaign as part of a broader risk communication & community engagement strategy. The 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





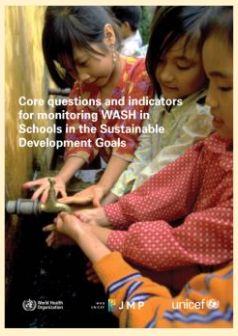
During the MDG period the JMP partnered with major international survey programmes to develop and standardize core questions and indicators for use in national household surveys and censuses which were the prime data sources for the JMP.

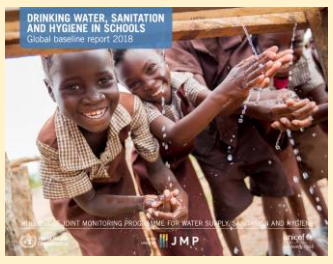
Since publication of the JMP core questions in 2006, international survey programmes have aligned their questionnaires and the core questions have been used extensively in national surveys and censuses around the world, leading to increased harmonization of national WASH data.

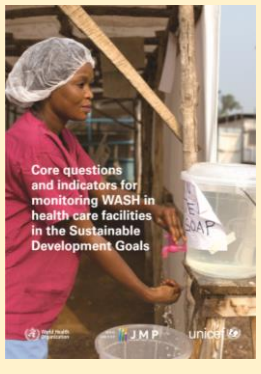
The indicators selected for monitoring the SDG WASH targets build on the established improved/unimproved facility type classification and introduce additional criteria, derived from the human rights to safe drinking water and sanitation, relating to the level of service provided.
Since 2012, the JMP 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.

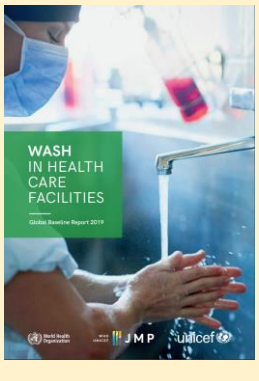
Harmonizing approaches to monitoring WASH in Schools

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.

Download these and other JMP reports from : www.washdata.org/reports