

Healthy Start overview: water, sanitation and hygiene are essential to better child health

Healthy Start is WaterAid's four-year advocacy priority (2015-2019) focused on improving the health and nutrition of newborn babies and children. We will do this by advocating for access to water, sanitation, and hygiene promotion to be integrated into health policy and delivery locally, nationally and internationally.

Why Healthy Start?

WaterAid's goal is to lift people out of poverty through access to clean water, decent sanitation and good hygiene. Where clean water, sanitation and good hygiene are lacking, improvements in health and nutrition are slow to start and hard to sustain. The costs in terms of ill-health and deaths are intolerably high — especially for babies and children.

The problem: lack of WASH for child health

Currently, water, sanitation and hygiene (WASH) are too often seen as outside the remit of health sectors nationally and globally, and this is holding back progress on reducing preventable child illness and death. Throughout Healthy Start, we will work with allies in the water and sanitation and health sectors to change this by making the provision of WASH for better child health and survival a shared priority.

- Almost 90% of cases of diarrhoea the third biggest cause of death among children under the age of five – are caused by lack of water, sanitation and good hygiene; 500,000 children under the age of five die from diarrhoea every year.¹
- Sepsis (inflammation caused mainly by bacteria) is the leading cause of infection in newborns, long-associated with poor hygiene at birth.²
- The World Health Organization estimates that 50% of malnutrition is associated with repeated diarrhoea or intestinal worm infections as a direct result of inadequate WASH.³



Healthy Start: WASH and child health – key recommendations

- National governments ensure that water, sanitation and hygiene services (WASH) are embedded in all plans for reducing undernutrition, acute malnutrition, preventable childhood disease and newborn deaths, and/or in broader health systems plans that encompass any or all of these objectives. National governments ensure finances are made available and used accordingly.
- International and national health and nutrition initiatives include WASH in their policies and ensure they are financed, monitored and delivered.
- 3. Every healthcare facility has clean running water, safe toilets for patients (separate for men and women, with locks and lights, child-friendly and accessible to people with disabilities), functional sinks and soap for health workers and patients in all treatment and birthing rooms.
- 4. No new healthcare facilities are built without adequate, sustainable water and sanitation services.
- 5. Healthcare systems are committed to including good hygiene practice and promotion in professional training, plans and actions. Staff and patients are informed and empowered to practice adequate hygiene measures.

- 6. Every birthing centre⁴ ensures basic hygiene and sterile conditions, particularly in delivery rooms and operating theatres such as handwashing with soap, repeated cleaning and disinfection of facilities, and safe separation of human and medical waste from human contact.
- 7. Monitoring and assessment of progress towards universal health coverage⁵ include data on the availability of water, sanitation and hygiene services at healthcare facility and household levels to inform strategies and planning.
- 8. The Sustainable Development Goals should include a dedicated goal for Water and Sanitation with ambitious targets for universal WASH access by 2030. The framework should ensure integration between WASH targets and health targets such as universal health coverage and prevention of under-five and maternal mortality.



How lack of WASH affects newborns



Sepsis

Whole-body inflammation caused mainly by bacterial infection

Diarrhoea

Pneumonia

Tetanus

How lack of WASH affects health and nutrition for children



Stunting

A condition that leads to short height for age

Undernutrition

Pneumonia

Diarrhoea

Schistosomiasis

A disease caused by a small, flat parasitic worm hosted by aquatic snails

Soil-transmitted helminths (worms)

Environmental enteropathy

A condition caused by repeated faecal-oral contamination that damages the intestine



WASH in health: rights for all

WaterAid believes access to safe water, improved hygiene and sanitation is a human right. These essential services underpin human development and transform lives, enabling people to overcome poverty. Better health outcomes are part of this.

Equality and non-discrimination are core principles of human rights. WaterAid will continue to highlight at every opportunity inequalities in WASH service provision and to contribute to the significant reduction of these inequalities. Healthy Start will show the consequences of unequal access to WASH for people's health, and advocate for the inclusion of WASH in healthcare for the benefit of all – especially the most marginalised. Hallmarks of such provision are:

Availability: The human right to water entitles everyone to sufficient and continuous water for personal and domestic uses. Likewise, a sufficient number of sanitation facilities have to be available.

Quality: Water has to be safe for consumption and other personal uses, so that it presents no threat to human health. Sanitation facilities must be hygienically and technically safe to use. To ensure hygiene, access to water for cleansing and handwashing at critical times is essential.

Acceptability: Sanitation facilities in particular have to be culturally acceptable. This will often require gender-specific facilities, constructed in a way that ensures privacy and dignity.

Accessibility: Water and sanitation services must be accessible to everyone within, or in the immediate vicinity of, households, health and educational institutions, public institutions and places of work. Physical security must not be threatened when accessing facilities.

Affordability: The price of sanitation and water services must be affordable for all without compromising the ability to pay for other essential necessities guaranteed by human rights such as food, housing and healthcare.

- UNICEF (2014) Committing to Child Survival: A Promise Renewed Progress Report 2014. Available at:http://files.unicef.org/publications/files/APR_2014_web_15Sept14.pdf.
- 2. Gordon A (1795) A treatise on the epidemic of puerperal fever of Aberdeen. GG8| Robinson, London; and Semmelweis I (1861) Die aetiologie, debegriff, und die prophylaxi des kindbettfiebers. Pest, Editor: Wien u Liepzig.
- 3. World Health Organization (2008c). *Safer water, better health: Costs, benefits and sustainability of interventions to protect and promote health.* Available at: http://whqlibdoc.who.int/publications/2008/9789241596435_eng.pdf.
- 4. Defined as any healthcare facility where women give birth.
- 5. Universal healthcare is where everyone has access to the health services they need without suffering financial hardship when paying for them and where prevention and treatment of disease, and care and support are all prioritised.