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événement :

canwach20



CanWaCH

Canadian Partnership for Women and Children's Health

CanSFE

Partenariat canadien pour la santé des femmes et des enfant

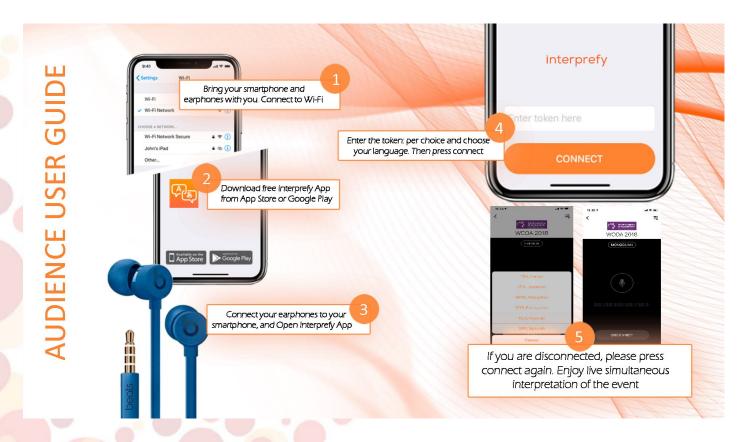




Critical Role of WASH in Response to the COVID-19 Pandemic



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Simultaneous Translation | Traduction simultanée

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Zoom Features | Caractéristiques Zoom

- Chat: under the 'more' section there is a chat function, please use this if you have any technical difficulties and we will be happy to assist you. Tina LaRochelle (Technical Support) is available to help.
- Q&A: you can also submit anonymous questions during the presentation using the Q&A button in the bottom middle bar on Zoom.
- Clavardage: dans la barre du bas, il y a une fonction de clavardage (chat).
 Veuillez l'utiliser si vous éprouvez des difficultés techniques et nous nous ferons un plaisir de vous aider. Tina LaRochelle (assistance technique) est là pour vous aider.
- Période de questions : vous pouvez envoyer une question de façon anonyme pendant la présentation en utilisant l'icône Q&A dans la barre du bas sur Zoom.





Poll | Sondage

Question 1

How would you assess your own knowledge of WASH and health?

Comment évaluez-vous votre niveau actuel de connaissances en matière de l'EAH/WASH et de santé?

Question 2

Does your organization have WASH related programs?

Votre organisation a-t-elle des programmes liées à l'EAH/WASH?





Agenda | Programme

- Helen Hamilton WASH Evidence, Integration and Policy for COVID-19 and Beyond
- Janet Hatcher Roberts Health
 Systems Effectiveness and Equity
- 3. **Al-hassan Adam** WASH Rights and Advocacy
- 4. Q&A

- Helen Hamilton Preuves obtenues de WASH, intégration (d'information) et politique (dans le cadre) de la COVID-19 et au-delà
- 2. **Janet Hatcher Roberts -** L'efficacité des systèmes de santé et d'équité
- 3. **Al-hassan Adam** Droits et défenseur de l'EAH/WASH
- 4. Période de questions





CanWaCH

Helen Hamilton

Senior Policy Analyst Health & Hygiene, WaterAid







Evidence and action to embed WASH in the COVID-19 response

Helen Hamilton Senior Policy Analyst Health and Hygiene, WaterAid UK

29/04/2020

WaterAid/ Photographer name









Key messages (from WHO on SWA webinar)

- Frequent and proper hand hygiene is one of the most important prevention measures
- Existing WHO guidance on safe management of drinking water and sanitation services applies to COVID-19 outbreak
- WASH COVID responses- emphasize need and urgency
- Co-benefits will be realised through good WASH
 -preventing millions of deaths each year caused by other infections
- Influence and share lessons during the response



Global data and evidence Homes

785 million people without clean water close to home.

- 2 billion people don't have a decent toilet of their own.
- 3 billion people don't have handwashing facilities at home.

Healthcare facilities

1 in 4 lack basic water services

1 in 5 have no sanitation services

4 in 10 do not have hand hygiene facilities at points of care

COVID (WASH) evidence from WHO

No reports of faecal oral transmission of COVID-19 virus

No evidence that other surrogate human coronaviruses are present in surface or groundwater Relatively fragile in the environment and will become inactivated much faster than other viruses



Equity and inclusion

Gender inequality is exacerbated in health emergencies and economic crises, so must be tackled in all response efforts.

Marginalised people and groups become even more vulnerable during a crisis for example; Slum dwellers and people with disabilities.

Our response efforts can mitigate both existing and new vulnerabilities









Policy Agenda

Global focus on handwashing - transitioning to sustainable WASH access

Phased approach and influencing; short, medium and long term to build resilient systems

Support and influence governments at the same time

Utilise existing and new opportunities for WASH commitments and accountability



A systems lens

Weak systems = disparities in access
Longer term vision: Systems strengthening to
accelerate equitable access to sustainable services

Systems barriers (using HCF example)

- Policies, standards and budgets, and monitoring systems often absent or did not align with globally recognised basic WASH service levels for health facilities.
- Staff shortages and training gaps on WASH and infection prevention control (IPC)
- Lack of coordination and leadership within and across ministries responsible for WASH in healthcare facilities,











Takeaway messages

- Share lessons on what works and what doesn't
- Continue to influence policy during the response, recovery and build resilience to future outbreaks
- Highlight inequalities impact of this crisis and what can be done to strengthen the response on gender and with marginalised groups
- Champion actions and investments to embed WASH in the COVID-19 response
- WASH is a 'no regrets' intervention





Janet Hatcher Roberts

Co-Director of the WHO Collaborating Centre on Technology Assessment, University of Ottawa





Learning Objectives

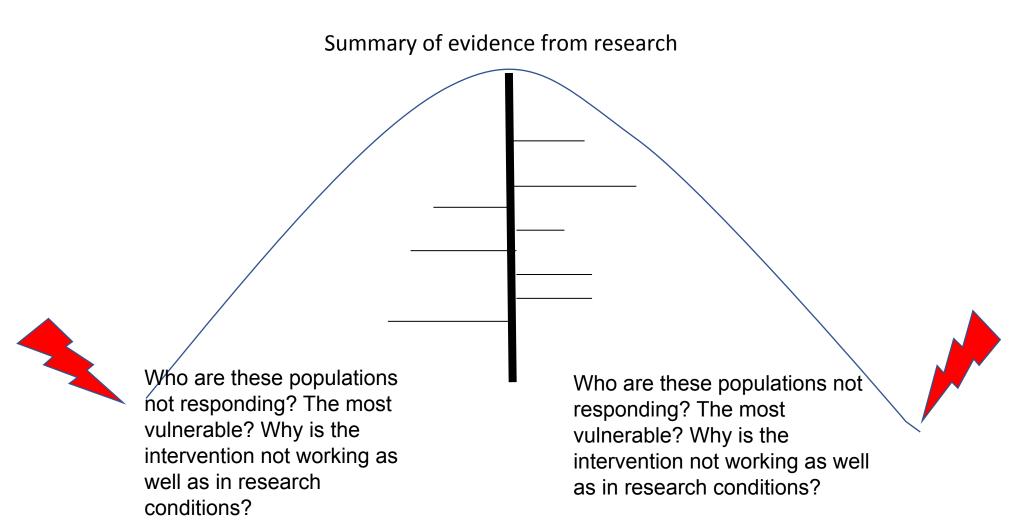
By the end of this presentation participants will have achieved an:

- 1. Improved understanding of the role and context of health systems, equity and evidence in relation to WASH
- 2.Improved understanding as to why systems thinking is important for effective Health and WASH strategies
- 3.Improved understanding of the opportunities and complexity of inter-sectoral collaboration to promote Health and WASH programs and policies

How Do We Understand How We Are Doing?

- How are outcomes measured and recorded?
- Are they based on just "results" or true effectiveness of the intervention?
- What about equity effectiveness?
- How do governments and implementing agencies measure and record success?
- Outcomes/results/effectiveness?

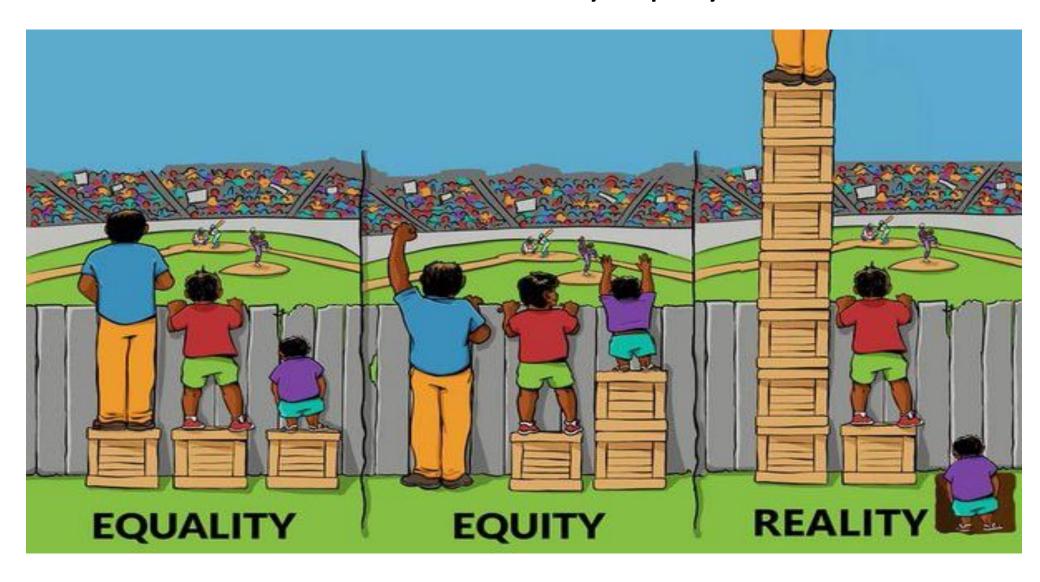
The Evidence: Should we just be concerned about the mean? ... or the tails of the curve?



Why do we need to think beyond the intervention?

- Social determinants of health are crucial for the understanding of health inequities, and they hold the key to finding lasting solutions to mitigate these acute social problems and allow the actual WASH interventions to be more effective.
- Increasingly, complex health systems and WASH challenges demand multi-sectoral collaborations, going beyond even the health system to address inequities.

What do we mean by equity?



Why do we need to understand the complex context of health systems?

BECAUSE:

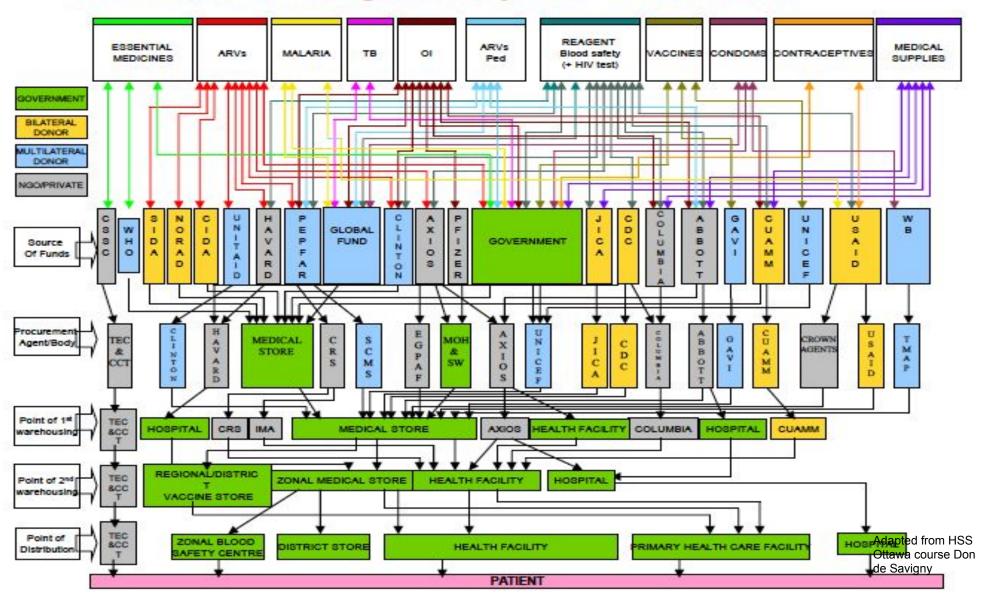
Systems thinking involves shifting attention...

- from the parts to the whole,
- from objects to relationships,
- from structures to processes,
- from hierarchies to networks,
- from the rational to the intuitive,
- from analysis to synthesis,
- from linear to non-linear thinking.



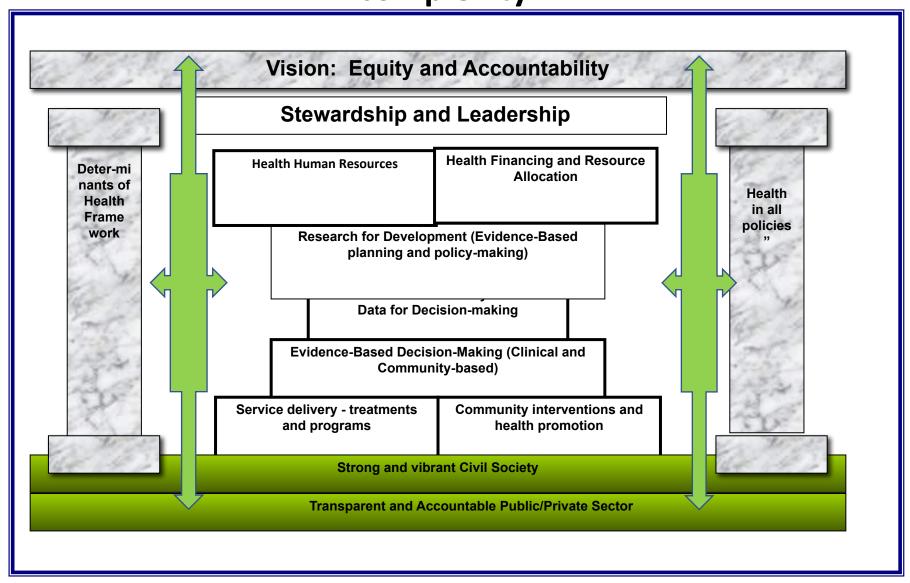
Health systems are complex adaptive systems

Medicines & Technologies sub-system – Tanzania 2007



And all building blocks are increasingly fragmented!

A Health Systems Model that responds to this complexity



Building Blocks for WASH systems



Institutional
Arrangements &
Coordination



Service Delivery Infrastructure



Monitoring



Planning



Finance



Regulation & Accountability



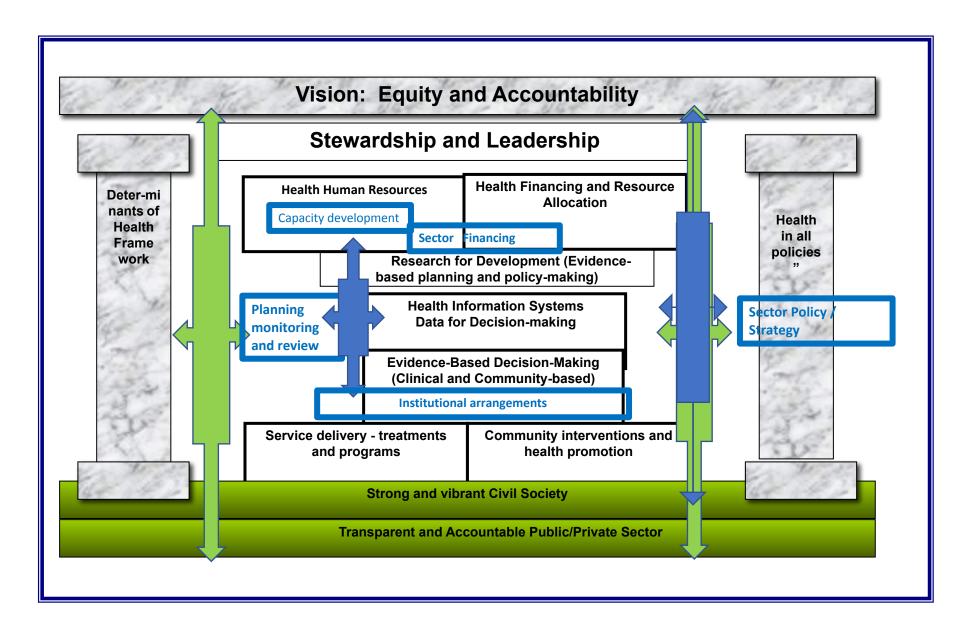
Water Resource Management



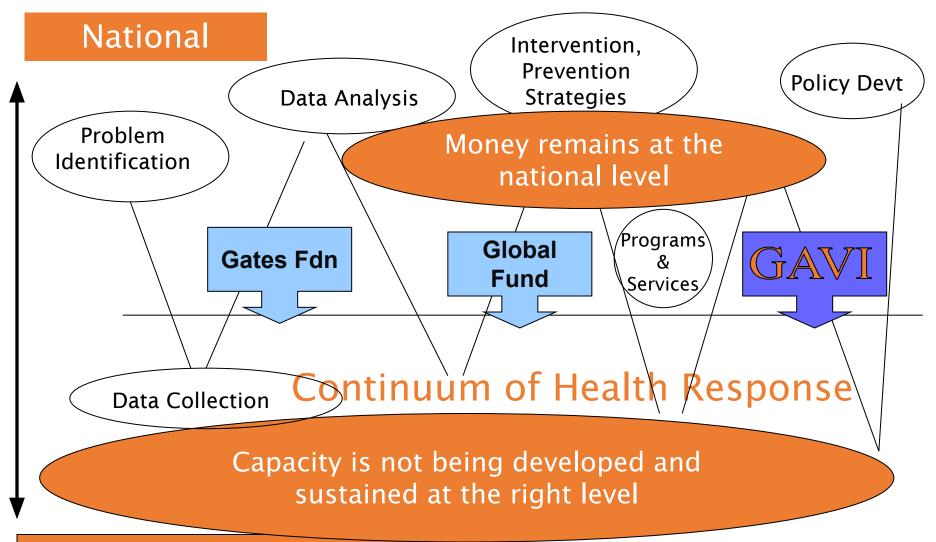
Learning & Adaptation



A Systems Model that responds to this complexity



The Impact of Decentralization on Planning



Local Community

Health In All Policies INTERSECTORAL COLLABORATION FOR HEALTH- and WASH EQUITY IS KEY

Need for coherence and collaboration Security Developme nt Health Trade Sustainable Migration **WASH & Agriculture** Health WASH **Systems ENVIRONMENT** Labour **Foreign Affairs Human Rights**

Adaapted from Source IOM 2007

And the fragmentation is increasing in Global Health



Coronavirus is like a blackout that has caught half the world off guard in the elevator of inequality and the myth of a globalization that is supposed to benefit us all.--



CanWaCH

Al-hassan Adam

International Co-ordinator, End Water Poverty





Intro to End Water Poverty

 Our main focus is to use the human rights to water and sanitation as policy framing for our campaigns and advocacy.

• We are coalition of over 160 organisations who have presence in at least 92 countries.



Why human rights?

- Human rights are the best legal protection people have.
- As duty-bearers, governments and any third party contracted to provide water and sanitation services are legally obliged to realise people's human rights. As rights-holders, people have the power to challenge the denial of these rights.
- The human rights principles of accountability, equity, non-discrimination and participation are persuasive morally as well as legally.



Human rights principles

- Human rights are guided by five principles:
 - 1. Sustainability
 - 2. Freedom of information
 - 3. Accountability
 - 4. Equity and non-discrimination
 - 5. Participation



Nominative values of human rights

- To guide governments and service providers, the human rights can be measured and monitored by the following values:
 - 1. Affordability
 - 2. Accessibility
 - 3. Acceptability
 - 4. Availability
 - 5. Safety and Quality



UN Conventions that promote WASH

- Elimination of All Forms of Discrimination Against Women (1979): "adequate sanitation and water supply"
- Rights of the Child (1989): "adequate clean drinking-water"
- Rights of Persons with Disabilities (2008): "equal access to clean water services, appropriate and affordable services, devices and other assistance for disability-related needs"



Our current campaigns



CLAIMYGURWATERRIGHTS



What has the campaign achieved?

- Launched on 10 December (International Human Rights Day)
- Social media reach: 443,400 77% up from previous three months.
- 16 members joined the campaign from 12 different countries: Benin, France, Ghana, India, Madagascar, Nigeria, Pakistan, South Africa, Spain, Tanzania, Zambia, Zimbabwe.
- Members organised a range of activities: interactive radio shows; press conferences; Twitter and Facebook Live sessions and community meetings to collect complaints.
- Some produced rapid results.



Youth Tweetbate on The Plight of Access to Water in Zimbabwe Theme: "The role of Youth in advancing the Right to Water in Zimbabwe." Date: 14 January 2020 Panelists: Lovejoy Mtongwiza | Abel Sibanda | Tsitsi Mashiri Twitter Platform: @NAYOZimbabwe #ClaimYourWaterRights

Africa mobilisation









Signature Campaign "SAFE DRINKING WATER AND BETTER SANITITION IS OUR RIGHTS" WATER SANITITION IS OUR RIGHTS" Jointly Organized by: END WATER POVERTY, UK & FANCA - INDIA, ODISHA CHAPTER / SADBHABANA, KEONJHAR



Asia mobilisation

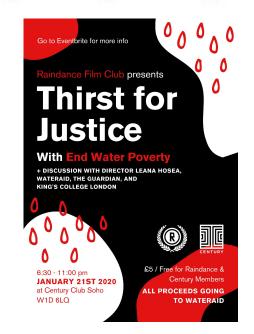




Allies

- Leo Heller, UN special rapporteur on the human rights to WASH
- Leana Hosea (BBC journalist + documentary maker)
- WaterAid country programmes
- Greenpeace







A campaign by the UN Special Rapporteur on the human rights to water and sanitation

Zambia: over 1000 people's safe water access restored after community demand their rights







https://www.youtube.com/watch?v=Tr20mw5wrYw&t=1s



Nigeria: Enugu State declares water emergency and fixes slaughterhouse supply
Enugu's public health. #ClaimYourWaterRights



#LeaveNoOneBehind @Temple_Oraeki · 22 Feb

Update: #Ogbete Main Market, Abbatoir:

#Enugu State Water Corporation has commenced reconnection of the Abbatoir facility to pipe-borne water, after 4 years.

More updates soon!

#ClaimYourWaterRights.

cc: @Coal_City @The042Network @julietkego @EndWaterPoverty @channelstv twitter.com/Temple_Oraeki/...



Global call for governments to realise sanitation workers' rights

- Over 300 signatures so far
- Calling on governments to guarantee workers' rights to:
 - 1. Personal protection equipment
 - 2. Sick pay
 - 3. Permanent contracts + universal income



Global call for governments to protect people from COVID-19 by realising their human rights to safe water

- May Day call for governments to:
 - 1. Ban disconnections
 - 2. Restoring water to households who have been disconnected
 - 3. Absorb outstanding water bills for those who cannot afford it
 - 4. Subsidise water utilities and settle unpaid government bills
 - 5. Truck water to rural communities who are not connected to central water supply systems.
 - 6. Deliver safe water services to public spaces, health centres and homes, prioritising those in informal settlements, low-income households, care homes, prisons and refugee camps.
 - 7. Consult civil society, disability rights, women's rights and slum dwellers rights groups (as examples) to develop crisis responses with affected communities.



What have we learnt so far?

- Our members are capable and willing to campaign on human rights.
- 1:1 trainings are more effective than webinars.
- Our members are proactive and take opportunities to expand activities beyond funding limitations.
- Some National Human Rights Commissions are willing to work with civil society; others do not have the experience or capacity and need support.
- Members should have autonomy to design campaign materials and tactics.
- We should broaden the campaign to incorporate other accountability mechanisms other than lodging complaints through NHRIs.



Clarissa Brocklehurst

WASH Specialist, WaterAid
Canada Advisor, Adjunct Prof. at
the Water Institute, University of
North Carolina





Questions? / Des questions?



CanWaCH



Connect with us!

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Stay tuned

Next Webinar Wednesday:

Mobilizing for Menstrual Hygiene Day

Wednesday, May 6, 2020 1:00 - 2:00 PM EDT

Restez à l'affut

Le prochain webinaire du mercredi :

Mobilisation pour la Journée de l'hygiène menstruelle

Mercredi 06 mai 2020 13 h – 14 h, HAE





Thank you for joining us! Merci de vous etre joint(e) à nous!

CanWaCH

Canadian Partnership for Women and Children's Health



CanSFE

Partenariat canadien pour la santé des femmes et de<u>s</u> enfants

Canadä^{*}