Dear SWA Focal Points and WASH community,

The world is in the midst of a global pandemic, COVID-19, which is causing significant ill-health, and death, and has to-date no effective cure. This health crisis is laying bare the gaps and shortfalls in national health systems all around the world. There is no country in the world that is untouched.

Weak water and sanitation systems aggravate the COVID-19 crisis. Transmission from person-to-person most commonly occurs through our hands. This risk is high when we touch a person who is infected or touch a surface that an infected person has touched. The first action that we are therefore being told to practice to prevent ourselves from becoming infected, and to prevent us from infecting others, is to wash our hands, not just at the usual critical moments - when preparing food before eating and after using the toilet - but also when there is a risk of exposure to the virus.

Water, sanitation and hygiene are the first line of defence against COVID-19.

In this time of the COVID-19 emergency, especially while we still have neither cure nor vaccine, it is essential that we protect ourselves and others by washing our hands properly and maintaining good hygiene. This requires access to reliable and sufficient water and sanitation services, not only in the home, but critically, also in healthcare facilities. Where healthcare facilities do not have access to adequate water and sanitation services, they risk becoming hotspots for infection rather than a place for care and healing, putting patients and medical staff alike at risk.

SWA has developed this set of messages around COVID-19, to help partners:

- Make the case for the political prioritization of water, sanitation and hygiene systems as the first line of defence against this and other pandemics, preventing the health system from being overwhelmed and saving lives;
- Advocate for increased investments in water, sanitation and hygiene during and after this health crisis, especially among Heads of State and Government, as well as ministers of finance

COVID-19 is not the first and will not be the last pandemic that we will face in our life-times. For some countries, there is already an effective response. For all countries, resilience to future crises depends on the actions, policies, institutions and capacity put in place during normal times, as well as how we act now.

If you have any questions, please contact the SWA Secretariat.

We wish you all the best in these turbulent times. Let’s try to use this threat as an opportunity to promote and achieve our vision of universal access to water, sanitation and hygiene.

Each of us must take responsibility for the actions we can take to prevent the virus spreading, thereby saving lives.

With my very best wishes for your health and that of your communities,

Catarina de Albuquerque

Chief Executive Officer, SWA
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COVID-19 and water, sanitation and hygiene: the facts

Regularly and thoroughly washing your hands with soap and water reduces the chances of being infected by or spreading COVID-19.

Soap and water kill viruses that may be on your hands. If you have clean hands, there is less chance you can transfer the virus to your eyes, nose or mouth when you touch your face. Also, if the virus gets into your hands and you do not wash them, it can be transferred to other people and objects, like handrails, table tops, or toys, and then transferred to another person’s hands.

More information about why soap and water are so effective against COVID-19 and other diseases [here](#).

Water, sanitation and hygiene in the world

- In 2016, nearly [900 million children](#) did not have basic hygiene facilities at their school.
- 40% of the world’s population, or 3 billion people, do not have a handwashing facility with water and soap at home. Nearly three quarters of the people in least developed countries lack basic handwashing facilities at home.
- 47% of schools lacked a handwashing facility with water and soap affecting 900 million school-age children.
- Over 1/3 of schools worldwide and half of schools in the least developed countries have no place for children to wash their hands at all.
- 16% of healthcare facilities, or around 1 in 6, have no hygiene service, meaning they lack hand hygiene facilities where patients receive care, as well as soap and water at toilets.

More data [here](#) and [here](#).
Elimination of inequalities, leaving no one behind

Key messages

• “History will judge us on how we reacted for the most vulnerable groups in the world community in a very dark hour.” – United Nations Secretary General

• As the UN Secretary General also stated, ‘The world is only as strong as our weakest health system.’ As public health is heavily reliant on the availability of water and sanitation services to stop the spread of COVID19 – in healthcare facilities, but also in the home, at work and elsewhere – the world is only as strong as our weakest water and sanitation systems. Without water, sanitation and hygiene for all and everywhere we will not be able to stop the virus and we will not be able to prevent our health systems from being overloaded with patients

• People who are most marginalised tend to be those who do not have access to water and sanitation services and hygiene facilities and hence most at risk, due to where they live, their gender, health and age, disabilities or social attitudes.

• People who are living in poverty, in informal settlements, part of marginalised ethnic, indigenous or other groups are more likely to have underlying (undiagnosed) health conditions that make them more vulnerable

During the emergency

• Identify and target those most at risk. Governments must identify which specific groups in their country that are most at risk due to a lack of water and sanitation services and ensure that they gain access immediately through removing barriers and extending services. Civil society organizations have a critical role to play in assisting governments in their identification of marginalised and vulnerable individuals and groups, and how best to provide the appropriate support for these people.

These include: homeless people, people living in informal settlements, women-headed households, people living in detention and refugee camps, people with disabilities, the elderly.

Approaches must be inclusive and consider culture, social dynamics and religious beliefs, and which support individual’s own agency are needed

Approaches must also support the realisation of human rights, including disability rights, women’s rights and indigenous rights to shape the response in a way that is empowering and does not harm these groups

• Implement pro-gender equality policies and actions. The specific needs of women must be included in actions to address the COVID-19 crisis. Governments must take particular care that female-headed households have access to adequate and affordable water and sanitation services, and where they do not, provide extra support.

Carers, nurses and other social care workers and cleaners, often predominantly women, may be vulnerable due to socio-economic status, ethnicity, caste or other and have heightened risks to COVID-19.

Entrenched patterns of stigmatisation and discrimination against women exacerbate women’s vulnerability at times of socio-economic stress.

• Adapt communication and messaging to all audiences. Review existing hygiene promotional materials and include comprehensive COVID-19-sensitive behaviours, according to global guidance. Consider population with impairments, people of different ethnic or religious identifies to improve uptake. Also, demonstrate solutions that are relevant in low income settlements, in rural and water scarce areas.
Strong and sustainable systems

Key messages

- Countries require strong, sustainable, resilient water, sanitation and hygiene systems to protect the health of all and to save lives.

- Systems must be well managed, by the right people, with the right knowledge, with the right resources in place. To be resilient to emergencies such as COVID-19, the must have risk management plans and all stakeholders must be able to contribute in a coordinated way.

- Systems require adequately funded institutions, and a strong regulatory framework, even in times of emergency.

During the emergency

- **Water and sanitation systems must be organized to deliver services to all population groups**, including those that are in hard-to-serve areas, such as informal settlements. This may require a range of different service providers, including formal and informal, public and private, collaborating to ensure access to services for all.

- **Water and sanitation services must be available in healthcare facilities** in order to operate hygienically at all times, but particularly at this time of emergency. This is critical for creating a strong, resilient health system.

- **Emergency interventions must be paired with longer-term investments for preparedness and resilience**. Where water and sanitation service providers are being asked to extend services beyond their usual remit, and where service providers are required to provide services at a lower rate or for free, this must be supported by financial packages to make up the shortfall to protect the provider from failing.
Financing

Key messages

- Current levels of financing for water and sanitation services are insufficient to meet the SDGs, which demand improvements in both water and sanitation and health services, but if realised would provide some protection from similar future health crises.

- The COVID-19 emergency is an opportunity to fast-track financing for WASH services critical for addressing health and other crises, particularly in health-care facilities and in low-income settlements that are currently un- or under-served.

During the emergency

- Ministers responsible for water and sanitation must convince their finance ministers of the importance of water and sanitation services in the efforts to prevent the spread of COVID-19.

- Ensure emergency support to water and sanitation utilities and providers (public and private) to ensure continuity of water supplies, enhanced monitoring, staffing levels, equipment and spare parts and worker safety. Also important to financially support utilities to guarantee sustainability of services even when governments decided to waive tariff payments as part of their COVID-19 response.

- Donors can provide rapid, flexible funding and technical assistance. These investments should focus on government-led efforts to extend water and sanitation services to those who do not have them, including to healthcare facilities and promote good hygiene and behaviour change programmes.

- National governments and private sector should use different financial tools to provide much needed emergency financing. This could be do through:
  
  o Tariffs. Reduced or waived tariff for households who have no income due to lost jobs so that they can continue to pay for basic services (consider universal basic income)
  
  o Subsidies. If there is not already a subsidy system in place to ensure that low-income households can access services, then this could be put in place
  
  o Financial packages for service providers. Private, public, formal, informal – to allow them to scale up delivery to unserved areas, potentially also relaxing regulations to enable service delivery, and – to enable them to reconnect households disconnected for non-payment, and to supply services to households that are unable to pay due to loss of income.

- Financing mechanisms must include strong anti-corruption measures to prevent precious resources from being syphoned off for private gain.
Coordination and participation

Key messages

- SWA is a multi-stakeholder partnership, and the COVID-19 emergency is a stark reminder that this approach is key, also in times of emergency, as this crisis is most effectively managed through a range of different actions by many different actors.

- While policies and processes are government-led, the SWA partnership requires that external support agencies, research and learning institutions, civil society and private sector actors engage in relevant discussions and support in finding innovative solutions to address the many challenges this pandemic presents.

During the emergency

- **Water, sanitation and hygiene, health and finance ministries and departments** must work together to ensure access to water and sanitation services to every home and to every healthcare facility to enable hygienic practices.

- **Government-led coordination between key actors, such as WASH Clusters and including all SWA constituencies at national and regional levels should be activated or established.** These working groups can contribute to the overall preparedness plan, and lead on the promotional aspects of its preventive and protective measures.

- **Civil society must be able to participate in planning for the emergency action.** Developing plans alongside the affected communities rather than ‘for them’ ensures that plans are appropriate and that services will be used and useful. Many civil society organizations are already working closely with vulnerable and marginalised populations and can support the roll-out and communication of plans.
Transparency and access to information

Key messages

- The global emergency created by COVID-19 requires clear and consistent messaging to inform and reassure the public of decisions that have been made to protect people’s health.
- Handwashing messages, as the first level of protection against COVID-19 must be communicated clearly and effectively and be accessible to all through a range of different media.
- All messages relating to COVID-19 must be developed in cooperation with civil society organizations working with communities to ensure that they are contextually relevant and appropriate.

During the emergency

- Government must launch large-scale nationwide hygiene promotion campaigns that focus on the importance of handwashing as the first line of defence against COVID-19. Campaigns should focus on key behaviours and be carefully targeted to reach everyone, including different language and cultural groups, people living in underserved or disadvantaged areas, and be relevant to different ages and gender.
- Governments must work to prevent false information from being shared. One of the difficult developments accompanying the COVID-19 virus is the spread of false or poor information, which leads to confusion within the population. Always use respected sources!
- People can be stigmatised for being ill, or for being suspected of being ill. Governments must work to protect all population groups from discrimination and stigma related to COVID-19.