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Ms Fleur Anderson, MP
Member of Parliament for Putney
Chair of the All-Party Parliamentary Group
on WASH
House of Commons
GB- London SW1A 0AA

18 August 2022

Dear Ms Anderson,

I would like to thank you for your letter of 9 August 2022 inviting the World Health Organization (WHO) to contribute to the WASH in Health Care Facility (HCF) and Antimicrobial Resistance (AMR) inquiry led by the All-Party Parliamentary Group on WASH and the All-Party Parliamentary Group on Antibiotics. I strongly support such an inquiry and welcome the opportunity for WHO to contribute.

Due to its status as an intergovernmental organization and specialized agency of the United Nations system WHO's participation is strictly voluntary and without prejudice to the privileges and immunities enjoyed by WHO under national and international law, and/or without submitting WHO to any national court jurisdiction.

The fundamental importance of WASH in HCF along with basic infection prevention and control (IPC) practices for preventing the spread of AMR is articulated in a number of global strategies and resolutions, in particular the Global Action Plan on Antimicrobial Resistance¹ and World Health Assembly resolutions on WASH in Health Care Facilities (WHA72.7)², the Global Patient Safety Action Plan 2021-2030 (WHA74.13)³, and the on IPC (WHA75.13)⁴. Furthermore, evidence-based recommendations providing countries with WASH requirements to ensure delivery of safe, and high-quality care in HCFs are included in the WHO guidelines on the core components for IPC programmes⁵ and on Antimicrobial Resistance (WHA72.5)⁶ with additional relevant resources and summaries also available^{7,8}.

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¹ <https://www.who.int/publications/i/item/9789241509763>

² <https://apps.who.int/iris/handle/10665/329290>

³ <https://www.who.int/publications/i/item/9789240032705>

⁴ https://apps.who.int/gb/e/e_wha75.html#resolutions

⁵ Guidelines on core components of infection prevention and control programmes at the national and acute health care facility level. Geneva: World Health Organization; 2016 (<https://apps.who.int/iris/handle/10665/251730>).

⁶ https://apps.who.int/gb/ebwha/pdf_files/WHA72/A72_R5-en.pdf

⁷ [https://www.who.int/teams/environment-climate-change-and-health/water-sanitation-and-health-\(wash\)/health-care-facilities](https://www.who.int/teams/environment-climate-change-and-health/water-sanitation-and-health-(wash)/health-care-facilities)

⁸ WHO/UNICEF. Fundamentals first: global progress report on WASH in health care facilities. <https://www.who.int/publications/i/item/9789240017542>

Also critically important is the need to strengthen interventions targeting WASH in HCF, IPC and AMR in pandemic preparedness, planning and response.

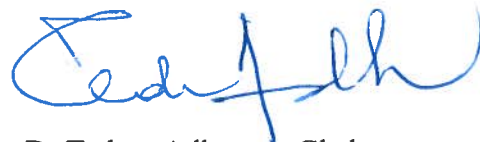
Despite increased awareness and concern, much more effort is required.

Globally, 1.8 billion people use health care facilities that lack basic water services and 800 million use facilities with no toilets.

Only 28% (46 of 163 countries responding to a 2021 Tripartite AMR Country Self-Assessment Survey (TrACSS)), noted that their AMR national action plans were linked to the WASH plans in their countries.

In view of the tight deadline for written comments, I am pleased to refer to a preliminary response, prepared by the technical teams, enclosed as an Annex. If you have further questions you can direct them to Dr Maria Neira (neiram@who.int), Director of Climate Change, Environment and Health which includes WHO's team on WASH.

Yours sincerely,



Dr Tedros Adhanom Ghebreyesus
Director-General

With much gratitude

Annex

What do you see as the major opportunities for investment in WASH in healthcare settings to help combat AMR?

Investments ought to be dual-pronged, meaning that budgets should account for a) the establishment, maintenance and operation of basic infrastructure that is climate-smart and sustainable and b) the training, mentoring and support behavioural change towards optimal IPC practices, such as hand hygiene and environmental cleaning, among all health workers, including those who clean health care facilities and custodial staff.

The recent price tag analysis of WASH in health care facilities in the 46 least developed countries found that the needed investments to ensure all facilities have basic WASH are modest; US\$ 6.5-9.6 billion over ten years, with recurrent costs accounting for only 3% of current government spending in LDCs on health⁹. Furthermore, strong data are available from the Organisation for Economic Co-operation and Development (OECD), on the cost-effectiveness of IPC practices to reduce AMR in health care settings.¹⁰ For example, every 1 USD invested in hand hygiene in health care facilities provides a 15 USD return on infections averted, including hard to treat AMR infections¹¹.

What should the role of donor governments such as the UK be in addressing WASH in healthcare facilities? And how should this link to global efforts to curb antibiotic resistance?

I believe if the UK and other donor countries could make a significant difference if there were focus on the following three areas:

First, the UK should consider offering leadership and greater investments and monitoring through multi-lateral instruments including those associated with the G-7, the G-20, the World Bank, the Global Fund, and AMR, and greater advocacy through the World Bank's Development Committee.

Second, the UK ought to critically review the sufficiency of funding allocated to AMR, WASH and IPC, against other UK health and development priorities, through existing UK research entities and through developmental assistance (FCDO). The latter should be coupled with strategic recommendations on how to effectively target such funds, including in areas like assessments and facility improvement action plans, development of costed country roadmaps, and alignment with health policy planning, monitoring and financing reform efforts. In particular, more research is needed to identify evidence on the cost-effectiveness of WASH and IPC interventions, particularly in low- and middle-income countries.

Third, the UK should analyze internal learnings, challenges and progress on addressing WASH and IPC in health care facilities to prevent the emergence and spread of AMR, as well as progress in the implementation of the AMR National Action Plan. The UK could also consider

⁹ Chaitkin, et al., 2022. Estimating the cost of achieving basic water, sanitation, hygiene and waste management services in public health care facilities in the 46 UN designated least-developed countries: a modelling study. *Lancet Global Health*. [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(22\)00099-7/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(22)00099-7/fulltext)

¹⁰ Global report on infection prevention and control. Geneva: World Health Organization; 2022 (<https://www.who.int/publications/i/item/9789240051164>).

¹¹ Stemming the Superbug Tide: Just A Few Dollars More. Paris: Organisation for Economic Co-operation and Development; 2018 (https://www.oecd-ilibrary.org/social-issues-migration-health/stemming-the-superbug-tide_9789264307599-en)

how strengthening interventions to address WASH in HCF, IPC, and AMR have an impact on pandemic preparedness measures and national health security plans.

Major opportunities include 1) the “Financial Intermediary Fund for Pandemic Prevention, Preparedness and Response” being established by the World Bank; 2) the Global Fund’s “Resilient Health Systems (RSSH)” as well as “Pandemic Preparedness and Response (PPR)” framework, and 3) other bilateral and multilateral financing for health systems strengthening efforts, and implementation of national action plans on AMR and national action plans on health security.

How could WASH in healthcare facilities be (better) integrated into bilateral and multilateral global health investments by countries such as the UK?

WASH and waste services can be integrated by including explicit indicators and targets on services alongside funds and technical assistance for improving services. Rather than WASH, waste and basic IPC being seen as “competing” or “someone else’s responsibility” embedding these elements within specific program objectives (for example, the AMR national action plan and ensuring WASH and IPC workstreams are fully engaged in the AMR Coordination Committee), regularly requiring reporting back on progress, and then measuring ultimate success through the seven elements of quality care (effective, safe, people-centered, timely, equitable, integrated and efficient) is essential. Indeed, WASH is required as a core components of effective IPC programmes in health care facilities.⁵ In fact, modelling on interventions to reduce maternal and newborn deaths found that improving quality of care would have the greatest impact. WASH and IPC are fundamental to this.

How effective are the UK’s strategy, policies and programmes in addressing the lack of access to WASH in healthcare facilities?

The UK has demonstrated an important leadership role in global WASH in health care facility efforts, including serving as a founding member of the Global Taskforce on WASH in Health Care Facilities¹². Yet, recent, funding cuts to WASH development programme have undermined actions, especially in countries such as Bangladesh, Ethiopia, Liberia, Mali, and Sierra Leone, where government’s have taken initial actions, but much remains to be done.

How can donor governments, such as the UK, play a more effective role in addressing WASH in healthcare facilities to curb AMR in least developed countries?

As stated above the UK could strengthen leadership, increase investments, and encourage greater integration of WASH in HCF with AMR and other health activities within ongoing pandemic preparedness, health financing and child and maternal health efforts.

¹² The WASH in Health Care Facilities Global Taskforce was established in 2021 with the aim to encourage and hold accountable governments, reinforce calls for strong health leadership and support greater collaboration between WASH and health initiatives. More information can be found here: <https://washinhcf.org/governance/>