



WASH in HCF Global Learning Event

Kathmandu, Nepal
28-30 March 2017

WASH in HCF- Systems Analysis

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World Health
Organization

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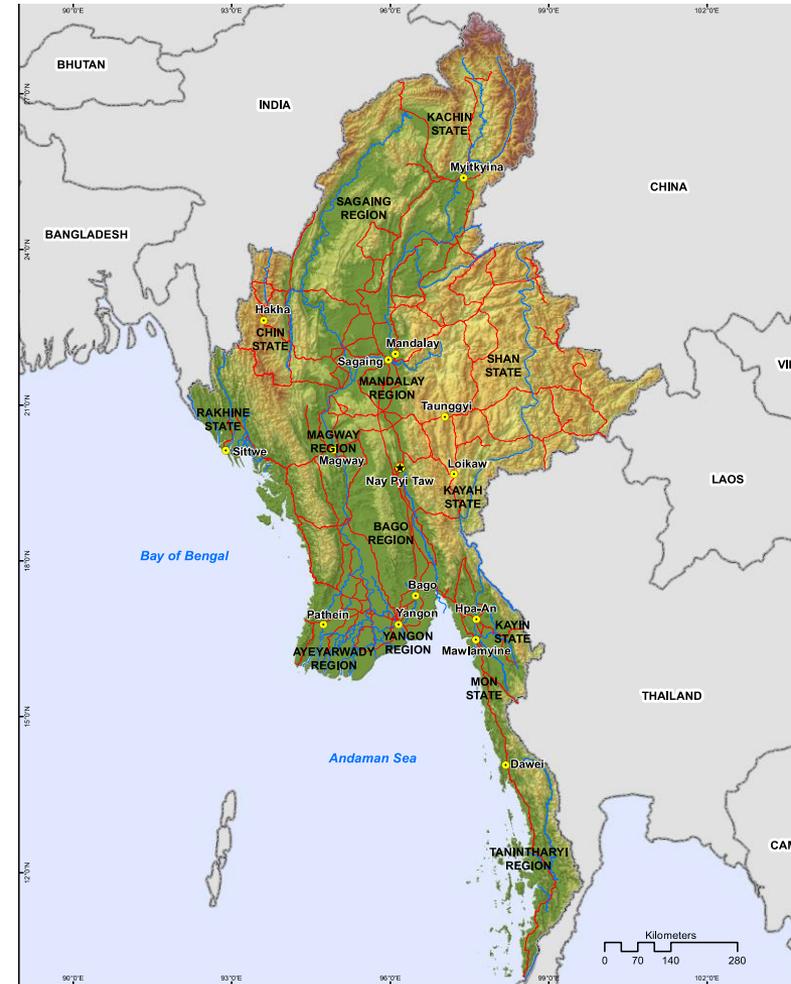


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Myanmar Context and Background

- Neo-natal mortality rate one of the highest among ASEAN countries.
- In 2015 neo-natal deaths 65% of all infant deaths and 52% of under-5 deaths. Sepsis is one of the main killers of neonates.
- Nearly 1,000 hospitals and 10,500 health centres. Standard of WASH facilities varies.
- Some previous assessments of WASH in HCF were done before. (quantitatively or as a part of other programs, eg. MNCH.)





A latrine without water in a sub rural health center



Open fire practice for waste disposal



Difficult to access handwashing facility in RHC delivery room



Bulk water source and overhead tank in the hospital

System Analysis aims and objectives

- to understand the bottlenecks in the health system to improving WASH in health care facilities
- to understand the gaps and needs for policies, guidelines, standards, protocols
- to clarify roles and responsibilities for WASH and infection prevention and control
- to prioritize action to strengthen the enabling environment

Approach and tools

Review of national policies, plans, strategies, standards, health care assessment tools, organisational roles and responsibilities, and monitoring frameworks.

Methods: Desk review of documents, semi- structured interviews with key informants, focus group discussions, field visit

Establishment of a Working Group

Collaboration with WaterAid Cambodia



Key Findings

- No overarching policy to support improved WASH in HCF
- No coordinated national monitoring and evaluation mechanism for WASH in health care facilities
- Wide range of actors involved in WASH in HCF, and improved coordination is a priority.
- Information gaps on environmental cleanliness of facilities, reasons for poor waste management practice, and IPC practice/behaviour.

Outcomes

- Better knowledge of stakeholders on current situation
- Spotlight on WASH in HCF at the national level
- Informed Needs Assessment design eg. IPC/cleaning, behaviour
- Identification of priorities: strengthening policies, national minimum standards, standardised assessment tools and monitoring indicators



Challenges and lessons learned

- Difficulty getting data
- Two separate departments in the Ministry of Health and Sports have responsibility for health facilities at different levels of the system.
- Coordination

Next steps

- Advocacy paper on Systems Analysis
- Needs assessment of WASH in health facilities
- Multi Stakeholder workshop/training on WASH in HCF



Recommendations

- Forming the working group/taskforce for WASH in HCF improves the coordination and collaboration among the different actors, responsible for improved WASH in HCF.

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Thank You



Myanmar

