

Using The New WHO/UNICEF Joint Monitoring Program Water, Sanitation and Hygiene (WASH) Coverage Standards to Assess Progress in WASH Practices in Ethiopia: A NIPN analysis

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Access to safe drinking water, basic sanitation, and hygiene are crucial for optimal health and sustainable development. The importance of Water, Sanitation, and Hygiene (WASH) for health and development is highlighted in the Sustainable Development Goals (SDGs). SDG 6 “Clean Water and Sanitation” aims to ensure the availability and sustainable management of water and sanitation for all. This goal plans to achieve universal and equitable access to safe and affordable drinking water and access to adequate and equitable sanitation and hygiene for all (including ending open defecation) by 2030.



The benefits of access to high-quality WASH facilities are numerous; improved WASH is linked with a reduction in diarrhea, soil-transmitted helminthic infection, trachoma, and an improvement in child nutritional outcomes. Furthermore, the provision of improved WASH services in schools can improve school attendance and academic performance by reducing days lost due to illness or due to girls staying home during their menses. In the past two decades, the Ethiopian government has given special attention to ensuring the population has access to safe water and improved sanitation facilities. The national ONE WASH program which aims to achieve universal access to water, sanitation, and hygiene services to all people in Ethiopia, was launched in 2013 and renewed in 2016. Furthermore, WASH indicators are one of the widely assessed nutrition-sensitive intervention indicators in the health sector.

The WHO/UNICEF joint monitoring Program (JMP) has been monitoring progress in WASH and setting standards since 1990. In 2017, the JMP introduced new standards for assessing WASH services by expanding on previous standards, it set higher “service ladders” for WASH. These ladders go beyond the use of an improved water source and place additional emphasis on the time taken to collect water, availability of water when needed, and absence of fecal and priority chemical contamination. For sanitation facilities, the new standards recommend that in addition to using improved toilet facilities, excreta should be safely disposed of in situ or transported and treated off-site. The new JMP recommendations also emphasize the use of basic hygiene facilities; which are *hygiene facilities with soap and water on the premise*.



To meet its goal of supporting evidence-based decision making, the National Information Platform for Nutrition (NIPN) is continually formulating policy-relevant questions. The first round of questions NIPN is working on were identified through a process that included a review of existing evidence, consultation with stakeholders, and validation by the NIPN Advisory Committee. One of these questions is an analysis of progress in the coverage of WASH practices and the relationship of these changes with the decline in stunting and diarrhea among children aged 0-59 months. To answer this question, the NIPN team is analyzing data from the four rounds of the Ethiopian Demographic and Health Survey (EDHS) and using the new JMP WASH standards to evaluate progress in WASH. As these new standards are not used

widely, the analysis will produce new insights including regional differences in WASH coverage and identifying WASH components that need more attention in future national programs.

Sources

- United Nations Children’s Fund (UNICEF) and World Health Organization. Progress on household drinking water, sanitation and hygiene 2000-2017. Special focus on inequalities. New York United Nations Children’s Fund (UNICEF) and World Health Organization; 2019.
- Federal Democratic Republic of Ethiopia. One WASH National Program (OWNP): A Multi-Sectoral SWAP. Addis Ababa.2013.