

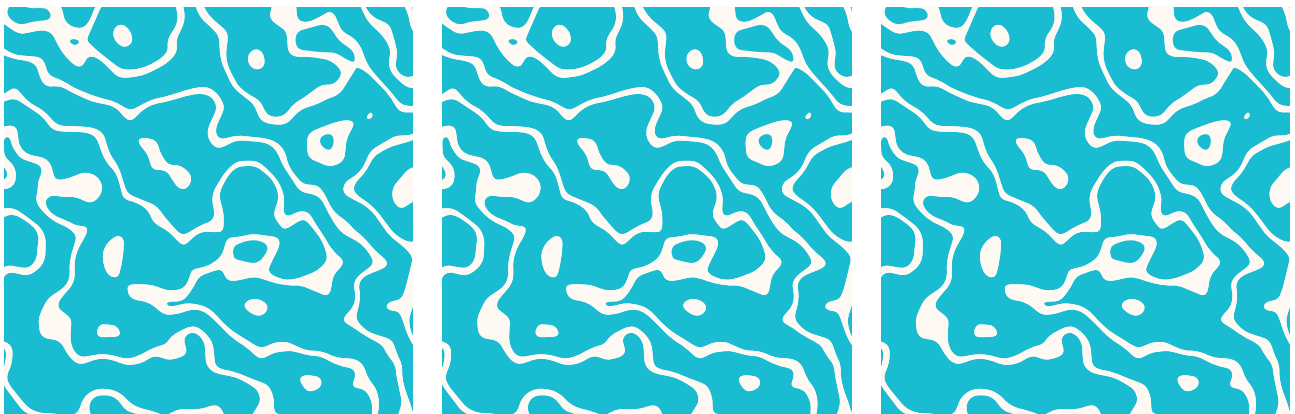
Achieving quality health
services for all, through better
water, sanitation and hygiene

Lessons from three African countries

Ethiopia

Ghana

Rwanda



**World Health
Organization**

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Abbreviations

CHMC	Community Health Management Committee
EHAQ	Ethiopian Hospitals Alliance for Quality
FMOH	Federal Ministry of Health
GHS	Ghana Health Services
HGS	Home-grown solutions
HSTP	Health Sector Transformation Plan
HSTQ	Health Sector Transformation in Quality
IPAR	Institute of Policy Analysis and Research
IPC	infection prevention and control
LMICs	low- and middle-income countries
MNCH	maternal, newborn and child health
NHQS	National Healthcare Quality Strategy
UHC	universal health coverage
WASH	water, sanitation and hygiene



Introduction

Achieving *Health for All*, and in particular universal health coverage (UHC), will not happen without fully functioning basic water, sanitation and hygiene (WASH) services in all health care facilities. Such services are needed to provide quality care, ensure adherence to infection prevention and control (IPC) norms and standards and guarantee that facilities are able to provide environments that respect the dignity and human rights of all care seekers, especially mothers, newborns and children. Ensuring basic WASH services also reduces overall health care costs, health service inequities and improves health system resilience, especially when improvements are environmentally-friendly and climate-resilient. The UN Sustainable Development Goals place quality as a central consideration for achieving universal health coverage. SDG target 3.8 calls on countries to achieve UHC, including financial risk protection alongside access to quality essential health care services (1).

WHO, in collaboration with the respective Ministries of Health, undertook series of national situational analyses in three countries (Ghana, Ethiopia and Rwanda) to understand current barriers to change, accountability structures and measures to strengthen WASH in health care facilities and more broadly, the quality of health service delivery. All three countries have ongoing activities on national strategic direction on quality, WASH in health care facilities and IPC. This brief summarizes some of the unique and common methods used across the three countries which resulted in improvements in the quality of care through improved WASH services.





The global need for quality health services

- Data published in 2019 by WHO/UNICEF show that globally, one in four health care facilities lacks basic water services and one in five has no sanitation services, impacting 2 and 1.5 billion people respectively. Furthermore, two out of five facilities do not have hand hygiene facilities at the point of care or safe health care waste management systems (2).
- Between 5.7 and 8.4 million deaths are attributed to poor quality care each year in low- and middle-income countries (LMICs), which accounts for up to 15% of overall deaths in these countries (3).
- 60% of deaths in LMICs from conditions amenable to health care are due to poor quality care; the remaining deaths result from non-utilization of the health system (4).
- High quality health systems could prevent 2.5 million deaths from cardiovascular disease, 900 000 deaths from tuberculosis, 1 million newborn deaths and half of all maternal deaths each year (3).

Table 1. Country data

	Ethiopia	Ghana	Rwanda
Population	108 million	29 million	12 million
Access to basic <ul style="list-style-type: none">• water• sanitation• health care waste management^b	30% 59% 64%	71% 83% ^a 51%	60% No data No data
Maternal mortality^c (per 100 000 births)	401	308	248
Quality strategies	Has a decentralized health	Has a history of quality	Highly decentralized and

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