

Clean birth, safe birth

Water, sanitation and hygiene for maternal and newborn health



A clean birth requires water, sanitation and hygiene (WASH):

Convenient and consistent access to sufficient quantities of safe water for hygiene and consumption.

Safe disposal of wastes from delivery, and access to basic sanitation facilities for patients and staff.

Access to and use of disinfecting materials for washing hands, bodies, laundry, surfaces and instruments.

The current situation

In more than 66,000 health-care facilities across 54 low- and middle-income countries...^{1,2}



38% do not have an improved water source



19% do not have improved sanitation

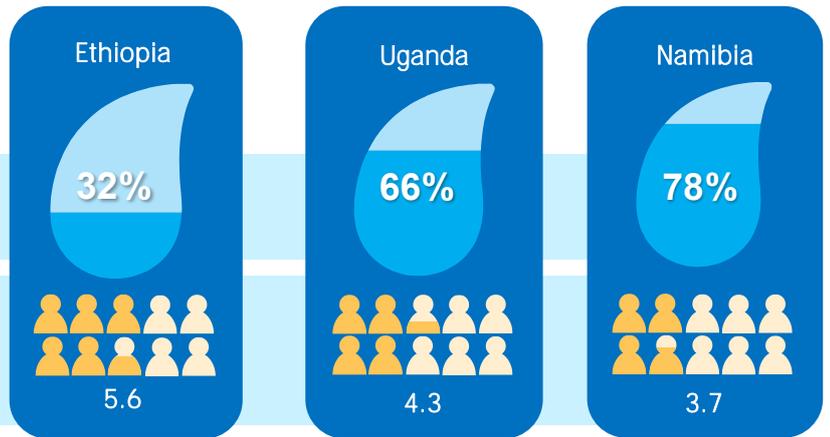


35% do not have water and soap for handwashing

Where there is poor WASH coverage, death rates from infection are high...

Water coverage of health-care facilities:¹

Newborn mortality rate from sepsis and tetanus per 1,000 livebirths:²



¹ WHO and UNICEF. (2015). Water, sanitation and hygiene in health care facilities: Status in low- and middle-income countries and ways forward.

² Liu L et al. (2014). Global, regional, and national causes of child mortality in 2000-13, with projections to inform post-2015 priorities: An updated systematic analysis.

To address this crisis, we need a bold and ambitious action plan

Joint implementation and monitoring to achieve Goal 3 (health) and Goal 6 (water & sanitation) in the new 2030 Agenda.



Joint action from national governments, health-care providers, WASH practitioners, academics and research institutions, donors and civil society.



Leadership from the health sector and strong political will and commitment to WASH.

Consistent methods for measuring WASH in health-care facilities on an international scale.



National plans and standards for WASH in health-care facilities.

Increased funding for WASH infrastructure in health-care facilities and building staff capacity.

