WASH in Healthcare Facilities Initiative

FAITH-BASED ORGANIZATION COMMITMENTS

April 2026

Maintained by:

The Water Institute at UNC
Secretariat, WASH in Healthcare Facilities Community of Practice

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April 2026


AFRICA CHA PLATFORM


amazi
WATER


ANGLICAN
COMMUNION
IN OVER 165 COUNTRIES


BON SECOURS
MERCY HEALTH


Build Health
International


CHAI
Catholic Health
Association of India


CHA
Catholic Health Association
of the United States


CRS


CHAG
CHRISTIAN HEALTH ASSOCIATION OF GHANA


charity: water


Christian
Medical
Association of
India


Releasing children from poverty
Compassion
in Jesus' name


CONRAD N. HILTON
FUND FOR SISTERS


CORUS


Cross Catholic
OUTREACH
Delivering Food, Shelter and Hope to the Poorest of the Poor


DAUGHTERS OF CHARITY
OF ST. VINCENT DE PAUL
INTERNATIONAL
PROJECT SERVICES


DRI
Desert Research Institute


eMi
Engineering Ministries International
designing a world of hope


ENGINEERS
WITHOUT
BORDERS
USA


FAITHS
for safe
WATER


ICM


INTERNATIONAL UNION
SUPERIORS GENERAL


YOU SHALL BE MY WITNESSES
K.C.C.B


misereor
ALLY FOR A JUST WORLD


Hospitaller Order of Saint John of God


Rotary


THE
SALVATION
ARMY


SECAM
SCEAM


SOCIAL JUSTICE AND ECOLOGY SECRETARIAT
SJES
ROME


Sisters
Rising
Worldwide


HEKS
EPER
Bread for all.


tearfund


TRANSFORM
INTERNATIONAL


Global Ministries
The United Methodist Church


water
mission


WATER ENGINEERS FOR THE AMERICAS & AFRICA
WEFTA


winetowater


world relief


World Vision

Overview

On April 22-23, 2026 (in Rome, Italy), an important gathering will take place: Committed to WASH in Healthcare Facilities – A Gathering in Rome of Faith-based Organizations and Allies to Accelerate Progress. The abbreviated agenda and FBO commitments will be available at www.washinhcf.org/cop-fbo

Background

This meeting is the latest event in a years-long process of accelerating progress in faith-based healthcare facilities, inspired by the UN Secretary-General's Call to Action in 2018. Those stakeholders (both faith-based and secular) who are interested in providing a brief report on their progress are encouraged to complete this brief four question form.

Table of contents

Africa Christian Health Associations Platform (ACHAP)

Past and Current Engagement

Global Water 2020 – WASH in HCFs

- Period: 2018
- Geographic Coverage: Kenya, Uganda, Zimbabwe, Ghana, Cameroon, Lesotho
- WASH Focus Areas:
    - WASH assessments
    - Water access
    - Hand hygiene
    - IPC supplies
- Results:
    - 74 healthcare facilities supported
    - Water tanks and handwashing facilities installed
    - IPC items distributed (soap, sanitizers, cleaning equipment)

USAID ACHAP AFYA Project

- Period: 2020–2023
- Geographic Coverage: Kenya, Uganda
- WASH Focus Areas:
    - Integrated WASH in MNCH and primary healthcare
- Results:
    - 112 health facilities assessed and improved
    - Autoclaves, hygiene stations, water treatment kits provided
    - Waste segregation tools and menstrual hygiene facilities installed

COVID-19 Emergency Response & Vaccine Programs

- Period: 2020–2024
- Geographic Coverage: 10+ African countries
- WASH Focus Areas:
    - IPC
    - Hygiene
    - Emergency preparedness
- Results:
    - 64 treatment/isolation centers supported
    - 13,500 masks and hygiene/IPC supplies distributed

USAID MOMENTUM Country & Global Leadership (WASH Capacity Strengthening)

- Period: 2023–2024
- Geographic Coverage: 32 ACHAP member countries

- WASH Focus Areas:
    - WASH systems strengthening
    - Data & advocacy
- Results:
    - 50+ CHA staff & HCWs

ACHAP/LIXIL Partnership

- Period: 2025–2026
- Geographic Coverage: Nigeria, Tanzania
- WASH Focus Areas:
    - Hand hygiene
- Results:
    - 649 healthcare facilities, 142 churches, and 482 schools, benefiting an estimated 3.5 million individuals
    - WASH Call to Action
- Period: 2026–2028
- Geographic Coverage: Sub-Saharan Africa
- WASH Focus Areas:
    - Governance
    - Financing
    - Service delivery
    - Data
- Results: N/A

Future Plans

ACHAP's future WASH work is guided by the "Call to Action: Strengthening WASH in Health Care Facilities," endorsed at the 12th ACHAP Biennial Conference in Antananarivo, Madagascar. Building on this collective commitment, ACHAP will accelerate progress by scaling WASH and IPC technical capacity across faith-based health systems through proven models such as circuit riding, peer learning, and harmonized training approaches. The organization will strengthen data, monitoring, and accountability by implementing results-based measurement of priority WASH/IPC indicators and ensuring routine progress reporting from member Christian Health Associations to the ACHAP Secretariat. ACHAP will also intensify resource mobilization through the development and submission of targeted concept notes and proposals to secure sustainable financing for WASH. At the same time, the organization will deepen partnerships by formalizing collaborations and maintaining active engagement with global WASH actors, governments, and donors to support scale-up. Through advocacy and policy influence, ACHAP will elevate the role of faith-based health providers in national and global WASH in healthcare facilities strategies and financing frameworks, positioning them as essential partners in delivering safe, dignified, and resilient health services.

Website and Point of Contact

Website: https://africa-chap.org/

WASH Resource Page: https://africa-chap.org/wash-ipc/

Primary focal person: Ruth Gemi, Program Management Advisor rgemi@africa-chap.org

The Importance of WASH in Healthcare Facilities

“Quality healthcare cannot exist without dignity, and dignity is upheld when clean water, safe sanitation, and reliable hygiene are present in every health facility, every day. As people of faith, we believe caring for the sick is a sacred responsibility, one that calls us to create environments where patients and health workers alike are protected, respected, and able to thrive.

Strengthening WASH in healthcare facilities is compassion put into action. It safeguards lives, strengthens infection prevention, builds trust in health services, and reinforces resilient health systems. WASH is not optional; it is a measurable determinant of quality care.

What we choose to measure reflects what we truly value. By measuring, prioritizing, and investing in WASH, we commit to improving quality of care and honoring the inherent dignity of every person who walks through our doors.”

— Nkatha Njeru, CEO, ACHAP

Amazi Water

Past and Current Engagement

Amazi Water has a very specific focus: “to solve the greatest problem faced by the poorest country in the world.” Working exclusively in Burundi for the last decade, we have invested $43M USD into installing more than 1,200 water systems throughout the country, with the goal of reaching every community in Burundi with safe, reliable water by 2030. We have also established a hotline (#412) throughout the country where any citizen may call for maintenance requests. In 2025, we accomplished more than 700 maintenance calls, leading to a 95% uptime for all of our systems. Amazi Water has specifically transformed healthcare delivery across 10 health facilities in Burundi by installing reliable water systems in both health centers and hospitals. In partnership with organizations such as Médecins Sans Frontières (MSF), ZOA, CDS/Buntu Foundation, and Kibuye Hospital, these interventions have directly addressed the critical lack of safe water that previously limited service delivery. Facilities that once struggled to maintain basic hygiene standards now have consistent access to clean water at the point of care, enabling safer, more efficient, and more dignified healthcare services. As of March of 2026, we have provided solar-powered water systems for five hospitals throughout the country (Cibitoke Hospital, Kibuye Hospital, Musongati Hospital, Centre Urbain Hospital, and Gasenyi Hospital). At one of these hospitals, we are piloting a solar battery backup system which is providing water 24/7 for this critical facility. Additionally, we have provided one solar-powered water system to the Kagunuzi Health Centre, and have provided handpump systems to four other health centres throughout the country.

As a result of Amazi Water’s investment:

- Health facilities now implement effective infection prevention and control measures, contributing to reduced infection risks and improved patient outcomes
- Maternal and child health services have significantly improved, with cleaner delivery environments, better newborn care, and increased trust from communities
- Overall facility functionality has been strengthened through improved sanitation, waste management, and working conditions for healthcare staff
- Patients benefit from restored dignity, no longer needing to source their own water during treatment

Future Plans

- Amazi Water is in the process of submitting a concept note to the U.S. Department of State with a plan to implement a comprehensive WASH program in partnership with Food for the Hungry (FH) in 100 health facilities across five provinces of Burundi.
- Amazi Water is currently working to complete a major project set to provide safe water to 7 health facilities and the surrounding 9,000 households (60,000 people).

- Amazi Water will continue to provide need-based water infrastructure throughout the Country of Burundi.

Website and Point of Contact

Website: https://amaziwater.org/

Focal Person: Jake Kidane, PE, at jake@amaziwater.org Tel: +25768305617, or Jason E. Peters, CEO, at jason@amaziwater.org Tel: +17197760071

The Importance of WASH in Healthcare Facilities

“Amazi Water is dedicated to improving health outcomes through implementation of comprehensive WASH programs targeting healthcare facilities and surrounding communities. In a country where women are often asked to bring two jerrycans with them for the delivery of their child, we are providing life-saving access to safe water, sanitation, and hygiene in healthcare facilities. This critical intervention is fundamental to saving lives, protecting mothers and newborns, preventing infections, and enabling health workers to provide care in safe, clean, and dignified environments.”

— Jason E. Peters, CEO

Anglican Communion

Past and Current Engagement

The churches of the Anglican Communion have long delivered quality healthcare to the most remote areas and the poorest patients within the 165 countries where they have a presence. As such, the Church offers a model of caring and service to others - care based on need, not on religion or culture.

Anglican leadership in all regions recognize the critical necessity to ensure adequate, sustainable water. The commitment to providing healthcare has been a core part of the Anglican Church's worldwide mission for three centuries and in many areas it has pioneered developments. That commitment has resulted within the last year in a process of comprehensive assessments of conditions and needs to date in the central African region, led by Zambia, as well as in Bangladesh and in the Philippines. With private philanthropic support, Anglican representatives have undertaken surveys, budgeted needs assessments, training and design of behavioral models for effective WASH management, as well as infrastructural improvements as needed.

Key examples of progress include:

Zambia

- Assessments completed in 8 HCFs, in consultation with Zambia Anglican Bishops Council and HCF administrators.
- Initial interventions have been undertaken by HCFs directly to address "low hanging fruit" including providing handwashing basins and soap in wards and toilets and making toilets gender-separated.
- Field visits to HCFs now planned to survey more complex WASH issues and develop cost estimates.
- A technical expert will visit Zambia to help with 1) field visits and costing estimates for future infrastructure needs, and 2) planning for or facilitating IPC training for HCF staff, including cleaners.

Bangladesh:

- Assessments completed in 15 HCFs.
- Costing estimates have been developed in two phases - first, materials and training and second, infrastructure improvements.
- A technical expert will visit Bangladesh to support IPC training for HCF staff, including cleaners.

Philippines:

- Assessments completed for two leading HCFs and associated clinics/birthing facilities.
- A technical expert will visit the Philippines for further infrastructure reviews, plans for immediate improvements, IPC training for staff and special focus on meeting the WASH needs of the birthing centers.

Future Plans

Progress in the current regions provides a basis for expanding assessments, training, and improvements in areas of need where there is strong local Anglican support, across many countries within the Global South across Africa and Asia potentially including Ghana, Tanzania, Malawi, Kenya, Myanmar, Madagascar and similar settings, where capabilities and resources can be identified for comprehensive and sustainable programs. The Anglican Communion will continue to advocate for this important issue of WASH in HCF as a key element of its mission to care for the sick, working primarily through its mission agency, the United Society Partners in the Gospel (USPG,) wherever services are required.

Website and Point of Contact

Website: https://uspg.org.uk/

Contact: The Revd Canon Dr Duncan Dormor

General Secretary

USPG

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duncand@uspg.org.uk

Bon Secours Mercy Health (BSMH)

Past and Current Engagement

For more than 10 years, Bon Secours Mercy Health (BSMH) has been committed to water, sanitation, and hygiene (WASH) through our office of Global Ministries at the community level and at the healthcare facilities (HCFs) level. At the community level, Global Ministries has addressed access to clean drinking water, safe hand-washing practices, waterborne diseases disaster response, and sanitation in Peru and Haiti to reduce preventable deaths of newborns and children under 5. These WASH community efforts are done in partnership with CMMB, Americares, the Sisters of Bon Secours, the Incarnate Word, and Water by Women.

At the healthcare facilities level, Global Ministries partnership with Midwives for Haiti has provided prenatal, delivery, and postpartum care to reduce maternal and infant mortality, with a strong focus on hygiene and WASH principles. Midwives for Haiti equips traditional birth attendants with Clean Delivery Kits, which include supplies for clean hands, surfaces, and cord care, vital in a country with limited access to clean water.

Additionally, in 2025, Global Ministries supported a WASH in healthcare facilities initiative at the Saint Camillus Health Care Center in the Philippines through the work of Catholic Relief Services (CRS). Global Ministries contributed funds to CRS in support of the broader global WASH in HCFs effort led by the Vatican's Dicastery for Promoting Integral Human Development.

Future Plans

Global Ministries is committed to WASH in HCFs in support of the BSMH Global Ministries Strategic Plan (2025-2027). Global Ministries sets priorities every three-years in alignment with Bon Secours Mercy Ministries, Bon Secours Mercy Health, the Vatican's Dicastery for Promoting Integral Human Development, the World Health Organization, and the United Nations Sustainable Development Goals.

At the healthcare facility level, we will continue to support CRS in the Philippines and Midwives for Haiti in Haiti while sustaining our community level WASH efforts.

Website and Point of Contact

Website: BSMH Global Ministries

Contact: Camille Grippon, System Director Global Ministries

The Importance of WASH in Healthcare Facilities

"Bon Secours Mercy Health supports WASH in healthcare facilities around the globe as part of our mission of extending the compassionate ministry of Jesus. Global Ministries is

meeting the needs of those who are poor and vulnerable around the globe through WASH community activities and WASH in healthcare initiatives. We know these initiatives save lives by allowing mothers to have safe deliveries, and children to live free of preventable diseases."

– Sister Pat Eck, BSMM Chair

Build Health International

Past and Current Engagement

Build Health International (BHI) is a design and build nonprofit focused on delivering high quality, dignified, sustainable healthcare facilities. The team works alongside local partners, nonprofits, and government ministries of health. Our expert architects, engineers, and construction managers—along with BHI's solar and medical oxygen engineers and training teams—work to ensure that patients in low- and middle-income countries have access to affordable and dignified care. Water, sanitation, and hygiene (WASH) is central to BHI's work, as reflected through one of BHI's recent projects supporting Rwanda's Ministry of Health. In BHI's development of the Rwanda National Healthcare Facility Guidelines, practical planning and design recommendations—including performance metrics, infection prevention and control standards, and building services requirements—are strongly guided by WASH principles to ensure that water and sustainability are incorporated into all facilities and in planning for future infrastructure planning. At the BHI-designed-and-built Maternal Center of Excellence (MCOE) at Koidu Government Hospital (KGH) in Kono, Sierra Leone, BHI engineered and installed a campus-wide plumbing system to deliver filtered potable water, manage storm water, and process sanitary waste. BHI constructed a water filtration building and pump station where well water is filtered, treated, and pumped throughout the campus. All pump and filtration components have built-in redundancy, and the water is piped through a series of isolation valve boxes to allow for simple maintenance in all buildings. For waste water, BHI has designed and constructed grease traps, septic tanks, and leach fields based on localized soil conditions and percolation rates.

Beyond the MCOE, BHI is assessing the Koidu Government Hospital's existing sanitary infrastructure (which currently consist of individual building septic systems) to develop a centralized sanitary sewer system for the campus. These upgrades will support hospital expansion and sustainability of the system through ease of maintenance.

Also in Sierra Leone, in Kono's Dorma district, BHI designed and is constructing a clinical training center, dormitory, and distribution center to support KGH and other healthcare facilities in the region. BHI's scope of work includes: designing and implementing a complete water distribution network and filtration system; developing campus cut fill plans; designing a water tower, grease traps, and soak away pits; designing and constructing septic tanks and leach fields; installing wastewater and water supply pipelines; and installing low-flow shower fixtures.

In collaboration with Zanmi Lasante (Partners In Health), BHI designed and built the Hôpital Universitaire de Mirebalais (HUM), Haiti's national teaching hospital. BHI also designed, installed, and maintained HUM's water supply and distribution system, including filtration and chlorination. BHI designed a state-of-the art Blivet sewage system, as well as sewage and drain piping and manholes. BHI upgraded HUM's pumping system and installed low-flow, high-efficiency toilets to conserve water. Further, BHI designed and constructed

HUM's Maternal Waiting Home and Sanitation Block to address a shortage of hygiene and toilet facilities for patients and families.

When Haiti's St. Boniface Hospital in Fond-des-Blancs was experiencing water supply challenges, BHI developed a solution to bring water from the relatively nearby Dugue Spring to the hospital, including: building a pipeline extension; repairing damaged piping; constructing a 12,000-gallon aboveground reservoir; and drilling wells. BHI designed and installed a multistage pump and generator to pump the water to the hospital. Further, BHI redesigned the hospital's septic system, rerouting sewage to a working leaching field.

Several other projects include: In Thiotte, Haiti, BHI repaired the Centre de Santé Sacré-Cœur de Thiotte Clinic's (CSST) existing water, sanitation, and hygiene system and related infrastructure. In Addis Ababa, to accommodate future hospital expansion, BHI designed and prepared construction plans to serve CURE Ethiopia Children's Hospital, which included upgrading current water distribution and wastewater systems. In Kijabe, Kenya, BHI designed and prepared construction plans to expand and upgrade sewer and septic systems for AIC CURE International Hospital's campus and housing zones.

Future Plans

Looking ahead, BHI will continue to promote and integrate WASH best practices into the planning and design of healthcare facilities, including use of solar-powered pumping systems; eco-friendly materials and construction practices; and water conservation technologies, e.g., low-flow fixtures and rain water harvesting, as locally and contextually appropriate.

Website and Point of Contact

Website: www.buildhealthinternational.org

Point of Contact: Arch. Alberto Cumerlato, Senior Lead Architect, acumerlato@buildhealthinternational.org

The Importance of WASH in Healthcare Facilities

"Healthcare facilities cannot provide dignified care without comprehensive WASH planning, from design and construction to ongoing maintenance. Equally important, WASH advocacy and reliable, quality infrastructure are critical for preventing illness, keeping patients and communities healthy, and reducing the need for medical care. BHI's experience in low-resourced areas has given our staff experience problem solving to balance quality and efficiency with cost. We work to adhere to the highest standards of infection control, but also bring mindfulness of the patient/family/staff experience as a part of dignified care."

— Omar Hernandez, COO

“I would argue that correctly handling wastewater and clean drinking water is step one of any existing or proposed health facility. It is critical for delivering equitable care.”

— Andy Leonard, Construction Management Volunteer and Donor

Catholic Health Association of India (CHAI)

The Catholic Health Association of India (CHAI) is a Network of Catholic Healthcare and Social Service Institutions across India. Started with a small group of religious sisters in 1943, currently CHAI has over 3,600 Catholic Healthcare Facilities (CHFs) as its members. The members comprise of health centres, small, medium, and large hospitals, medical colleges and nursing schools and social service societies. Over 70% of CHAI's Member Institutes are health centres offering services in rural and tribal areas.

Past and Current Engagement

The Catholic Health Association of India (CHAI), through its Community Health Programme (CHP), supports Catholic healthcare facilities in reaching out to communities with health education on the importance of Water, Sanitation, and Hygiene (WASH), especially in rural and tribal villages.

As part of this initiative, healthcare facilities organize various activities aimed at educating people—particularly those living in rural and tribal areas—about the importance of maintaining hygiene and sanitation, ensuring the safe use of water, and protecting water sources in their villages. Some of the key methods used to educate communities on WASH include the following:

Wall Paintings:
Wall paintings are a cost and effort effective way of reaching people with specific information. The paintings are created in local or vernacular languages at centrally located and frequently visited places within villages. These paintings, developed by teams from healthcare facilities, use simple drawings and visuals to convey messages about hygiene and sanitation, making the information easy to understand and recall.

School Education Programmes:
Healthcare teams regularly conduct education sessions for children in schools. These sessions focus on demonstrating proper hand-washing techniques, emphasizing the importance of keeping homes and surroundings clean, and promoting the safe use and maintenance of water sources. Children are encouraged to practice and spread these messages within their families.

Community Education Sessions:
Healthcare facility teams organize community-level education sessions to raise awareness among adults about the importance of WASH practices. These sessions address common hygiene and sanitation issues and promote collective responsibility for maintaining a clean and healthy living environment.

Home Visits and Use of Flip Books:
Teams comprising religious sisters and Community Health Volunteers (CHVs) frequently conduct home visits in villages. During these visits, they educate families on the importance of proper water management, sanitation, and hygiene using flip books as visual aids to enhance understanding.

Meetings with Community Leaders:
Healthcare facilities organize meetings with community leaders to discuss village-specific WASH challenges. Through these meetings, participatory planning is encouraged to improve water supply systems and waste disposal facilities. Community members collectively identify problems and develop practical action plans for sustainable solutions.

IEC material/photos:
Please refer the flip book on WASH used by the Community Health Volunteers (CHVs) from the health facilities to educate the households and communities. These flip books are available in English, Hindi and other Indian languages (Tamil, Telugu, Kannada and Odiya). Also, please check short video made by a health facility while the children are demonstrating hand washing method. Further, please check the photos from the field capturing the WASH efforts made by the health facilities in the communities.

Future Plans

Since behavior change requires sustained and long-term engagement, the activities described above will continue to be supported and implemented across the healthcare facilities. These interventions have proven effective in helping communities gradually adopt healthier practices by promoting awareness and encouraging practical steps to ensure the proper maintenance of water, sanitation, and hygiene. Continued education and community involvement are essential to reinforcing these positive behaviors and achieving lasting improvements in health and well-being.

In addition to this, there is a plan to promote positive behaviour change in selected communities, focusing on two critical issues: supporting villages to become Open Defecation Free (ODF) and creating WASH-friendly schools.

Despite several efforts, many schools continue to face challenges related to access to quality, child-friendly infrastructure and limited capacity to influence sustained behaviour change. A significant number of schools in rural areas still lack safe drinking water and adequate toilet facilities. Furthermore, in many villages, people continue to practice open defecation due to limited access to toilets and low awareness of hygiene practices.

Concerted efforts will be undertaken in the identified villages to ensure the availability of child-friendly WASH facilities alongside hygiene education. When boys and girls have access to separate, clean toilets, regularly wash their hands with soap, and have safe drinking water throughout the school day, their overall health improves and they are better able to

learn and perform in school. Beyond the classroom, children also act as agents of change by positively influencing hygiene practices within their homes and communities.

A range of activities will be implemented in both communities and schools to address these critical issues. These efforts will actively engage multiple stakeholders, including government institutions. The villages selected for these interventions will be developed as Model Villages, showcasing WASH-friendly schools and sustainable Open Defecation Free practices.

Website and Point of Contact

Website: www.chai-india.org

Contact: Sr. Dr. Helen Mary, Associate Director-General, CHAI; email: srhelen@chai-india.org

The Importance of WASH in Healthcare Facilities

"By promoting water, sanitation, and hygiene, health facilities help communities prevent diseases and create a cleaner and healthier place for everyone to live."

Catholic Health Association of the United States (CHA)

Past and Current Engagement

The Catholic Health Association of the United States (CHA) is committed to advancing water, sanitation, and hygiene (WASH) in healthcare facilities as an essential foundation for quality, safe, and dignified health care. Building on a formal commitment made in 2019, CHA has advocated for clean, safe water, sanitation, and hygiene in health facilities worldwide.

CHA has supported this work by sharing practical tools, educational resources, and opportunities with members and partners engaged in global health activities. In addition, CHA has served as a convener, connecting Catholic health ministries, NGOs, private-sector partners, and academic institutions working in global health to exchange updates and learning through regular networking calls and global health events. This has led several of our members to contribute to the campaign and to incorporate this important foundational aspect of health care into their ongoing and future global health outreach.

Future Plans

Looking ahead, CHA plans to continue to include water and sanitation as a portion of its priority area on infrastructure and supply chain within its global health engagement. This includes networking for WASH in HCFs, continuing to foster collaboration among Catholic health ministries and global partners, and sharing emerging best practices and lessons learned.

Website and Point of Contact

Website: https://www.chausa.org

Primary WASH / Global Health Focal Person:

Bruce Compton, Senior Director, Global Health, Catholic Health Association of the United States

Email: bcompton@chausa.org

The Importance of WASH in Healthcare Facilities

“Access to clean water, sanitation, and hygiene in healthcare facilities is fundamental to human dignity, patient safety, and quality care. As a ministry rooted in Catholic social teaching, the Catholic Health Association supports WASH in healthcare facilities as an essential element of health equity and global solidarity. We are committed to collaborating with and supporting the Dicastery for Promoting Integral Human Development in

advancing its global health priorities, particularly those that uphold integral human development and the dignity of every person."

— Sr. Mary Haddad

Catholic Relief Services (CRS)

Past and Current Engagement

Catholic Relief Services (CRS) has long worked to strengthen WASH services in healthcare facilities, supporting both faith-based and government-led facilities supporting collaboration and health systems strengthening.

Between 2020 and 2025, CRS has enhanced WASH services in over 470 healthcare facilities across 16 countries in Africa, Asia, and Central America.

CRS supports WASH in HCFs through integrated programming that combines infrastructure improvements, infection prevention and control (IPC), capacity strengthening of facility staff and managers, and systems level engagement with ministries of health, faith based health networks, and service providers. This work spans humanitarian, recovery, and development contexts and is closely aligned with national health and WASH strategies.

CRS is also actively engaged in multi faith and global initiatives to advance WASH in HCFs, including the 'Vatican Initiative to accelerate WASH in Healthcare Facilities' and the 'Circuit Rider Community of Practice'. Since 2019, CRS has supported the **Vatican WASH Initiative in Catholic health care facilities**, working with Vatican stakeholders, dioceses, and religious congregations to improve WASH conditions and protect the health and dignity of patients and health workers. CRS contributed to country selection and the identification of priority Catholic health facilities requiring WASH improvements.

As a technical partner to the Dicastery Initiative, **CRS has provided technical assistance to 75 health facilities in 11 of the 23 pilot countries,** focusing on upgrading WASH and infection prevention and control infrastructure and strengthening local capacity through training and coaching to institutionalize sustainable WASH systems in health facilities.

A video testimonial illustrating the critical role of WASH in healthcare facilities is available here: https://crs.widen.net/s/sjrp8nkjnx/faith-in-action-wash-for-quality-health-care

Future Plans

Looking ahead, CRS is committed to **expanding and accelerating its work on WASH in health care facilities** by strengthening partnerships with faith-based and government health networks, donors, and global actors, and by deepening systems-strengthening approaches that enable efficient and sustainable service delivery.

CRS places strong emphasis on localization and on **building the autonomy of local health actors** to plan, manage, monitor, and continuously improve WASH services. To this end, CRS supports circuit rider mechanisms that leverage local expertise to provide essential technical services, including routine supervision, preventive maintenance,

planning and budgeting support, and data management, thereby reinforcing long-term system sustainability.

CRS also promotes the adoption of robust data and monitoring systems—such as WASH FIT and the mWater platform—within a shared learning agenda that supports evidence-based decision-making, adaptive programming, and scale. These tools strengthen data use, coordination, and accountability, helping ensure that WASH services are effectively monitored, sustained, and contribute to improved health outcomes and the prevention of disease outbreaks.

Our priorities are:

Priority 1 – Consolidate sustainability: Strengthen post-construction follow-up, expand circuit rider and mentorship models, formalize facility-level management systems, and support domestic resource mobilization in supported dioceses.

Priority 2 – Strengthen monitoring and learning: Standardize WASH system performance measurement using WASH FIT–aligned tools and expand digital monitoring.

Priority 3 – Strengthen church systems for ownership: Institutionalize WASH leadership, governance, and supervision within diocesan and episcopal conference structures through standardized frameworks and a diocesan WASH governance toolkit.

Priority 4 – Close remaining gaps: Address high-risk gaps across the 23-country portfolio by targeting priority facilities and mobilizing complementary funding.

Forward-looking result:

By 2029, CRS aims to have contributed to an institutionalized, replicable WASH systems model in health care facilities that improves quality of care and remains effective, including in fragile settings.

Website and Point of Contact

https://www.crs.org

- Jean-Philippe Debus, Senior Technical Advisor, Water Security
- François Kangela, Technical Advisor, WASH in Institutions

The Importance of WASH in Healthcare Facilities

“Catholic Relief Services is committed to upholding the dignity of vulnerable individuals. One of the key ways we work to fulfill this commitment is by ensuring safe water, sanitation and hygiene, or WASH, at health care facilities. Access to WASH not only prevents infections and protects health – it also upholds the dignity of vulnerable patients.”

— Sean Callahan, President and CEO, Catholic Relief Services.

Christian Health Association of Ghana (CHAG)

Past and Current Engagement

Baseline WASH Assessment in CHAG Facilities

- Period: 2018
- Geographic Coverage: 11 CHAG facilities across 3 regions of Ghana; Ashanti, Central, and Brong Ahafo regions
- WASH Focus:
    - WASH Assessments
    - Water supply (access, quantity, quality)
    - Sanitation (accessibility, quantity, infrastructure)
    - Hand hygiene facilities
    - Environmental cleanliness
    - Waste management
- Results:
    - Only 2 facilities met basic indicators for water access; less than half achieved adequate water quantity.
    - No facility met basic sanitation indicators, toilets often unhygienic, inadequate, or inaccessible.
    - Only 4 facilities had functional hand hygiene facilities near toilets and points of care.
    - 5 facilities achieved basic environmental cleanliness standards.
    - Only 3 facilities met waste management standards (segregation, treatment, disposal).
    - Overall: only 1 facility achieved basic WASH requirements; significant gaps identified across domains.
    - Hand hygiene facilities and water reservoirs (poly tanks) were installed in 11 facilities and supplied with other logistics

Jhpiego–CHAG MOMENTUM Country and Global Leadership Program (IPC/WASH)

- Period: 2021
- Geographic Coverage: 25 CHAG-affiliated hospitals (high-volume delivery facilities nationwide)
- WASH Focus:
    - Improved hand hygiene infrastructure (handwashing stations, reliable water supply)
    - Enhanced waste management systems
    - Training healthcare workers on IPC protocols (maternal & newborn care)
    - Community engagement for hygiene practices
- Results:

- Better compliance with hygiene standards, reducing infection risks for mothers, newborns, and staff.
- Strengthened resilience during COVID-19, ensuring continuity of safe care.
- mproved quality of care and patient trust in faith-based facilities, which serve as critical healthcare providers in Ghana's health system.

Future Plans

CHAG continues to integrate WASH improvements into broader healthcare infrastructure projects, aligning with Ghana's national health strategies.

Ongoing work emphasizes:

- Sustainability of WASH systems (maintenance, supply chain for hygiene materials).
- Capacity strenghtening/building for facility managers and frontline staff.
- Policy advocacy to institutionalize WASH standards in faith-based and public facilities

Website and Point of Contact

Website: www.chag.org.gh

Contact: Dr James Duah, Deputy Executive Director

james.duah@chag.org.gh, Tel +233 (0) 206301032

The Importance of WASH in Healthcare Facilities

"CHAG's nationwide network of faith-based healthcare facilities, serving as the first point of care for many under-served/poorly served rural communities and peri-urban areas where WASH gaps are most acute, positions CHAG as an indispensable partner in national/global WASH programs. With decades of commitment and experience in infection prevention and control as well as a proven track record of strengthening water, sanitation, and hygiene systems, CHAG ensures safe, dignified, sustainable and equitable quality healthcare especially for the neglected segments of the population. Over 8 million Ghanaians benefit from CHAG's services every year, making WASH interventions through CHAG facilities a direct investment in national health outcomes."

— Peter Yeboah, Executive Director, CHAG

charity: water

Past and Current Engagement

charity: water is a nonprofit organization that funds drinking water infrastructure around the world. Since 2006, charity: water has mobilized a community of generous donors to reach more than 21.6 million people with reliable water access across 29 countries. We work through a network of local implementing partners who build sustainable, community-owned water infrastructure including wells with hand pumps, piped systems, and water filtration. Although our partners use unique strategies that are designed to meet the needs of their target communities, charity: water's partners work to bring safe water access to key locations in each area – including schools and healthcare facilities (HCFs).

As of 2026, charity: water's implementing partners have constructed safe water infrastructure at nearly 900 healthcare facilities across 23 countries in Sub-Saharan Africa and Southern Asia. Since 2020, our funding has reached an average of 102 HCFs each year, with our largest investments in HCFs taking place in Nepal, Rwanda, and Madagascar.

Future Plans

charity: water is committed to rural water security. Although we defer to our expert local partners on designing strategies that best meet the needs of their target communities, our funding is designed to account for, and invest in, critical community locations like healthcare facilities. As we approach 1,000 HCFs supported with reliable water access, we remain committed to accelerating our investments in clean water at healthcare facilities around the world.

We currently fund water infrastructure at more than 100 HCFs each year, and (contingent on available funding) hope to expand this investment by 10% in the coming years to ensure that our local partners can reach more HCFs with this vital resource.

Website and Point of Contact

Website: charitywater.org

Contact: Brian Hoyer, Chief Programs Officer (brian.hoyer@charitywater.org)

The Importance of WASH in Healthcare Facilities

Clean water is essential for proper care in HCFs where people are most vulnerable to infection and disease, particularly during pregnancy and childbirth. charity: water supports WASH in healthcare facilities because we believe in a world where every community is water secure – at home, in school, and while receiving medical care.

Christian Medical Association of India (CMAI)

Past and Current Engagement

The Christian Medical Association of India (CMAI) have not implemented WASH assessment or strengthening WASH in healthcare facilities. Kayakalp initiative of the Government of India is only for the public health facilities and not for faith-based facilities. The Clinical Establishment Act (CEA) and the National Accreditation Board of Hospitals (NABH) ensures as part of the assessment through the infection prevention and control.

Future Plans

Since the 271 member hospitals are across the country and not all are eligible for NABH and other assessment, it will an great opportunity to facilitate WASH initiatives including assessment and strengthening particularly in the rural and hard to reach hospitals across the country.

Website and Point of Contact

Website: www.cmai.org

Contact: Dr Ronald Lalthanmawia, General Secretary/CEO, Christian Medical Association of India (CMAI)

A – 3, Janakpuri, New Delhi – 110058, India

Email: ronald@cmai.org

Phone: +918132813746

The Importance of WASH in Healthcare Facilities

Many of the faith-based healthcare facilities in India often lack the necessary resources and management system for WASH. CMAI is willing to journey and strengthen the work in the member institutions across the country for better health outcomes.

Compassion International

Past and Current Engagement

Compassion International exists to release children from poverty in Jesus' name. Our core means of programming is in partnership with nearly 9,000 local churches in contexts of poverty across 29 countries. In these partnerships we implement long-term holistic development programs for children and youth in poverty by assessing and addressing their spiritual growth, well-being and agency, physical and mental health, and ability to sustain themselves and others in adulthood in order that become thriving individuals. Compassion's WASH programming in this context is implemented as one of many complementary intervention types that can remove barriers for program participants as we consider their holistic set of needs.

One of Compassion's strengths is being a convener of actors on behalf of children and youth in the communities where we partner with local churches. Compassion is focusing on five key areas as a means of contributing to long-term thriving:

1. Implementing WASH in the communities where targeted participants live.
2. Implementing WASH in schools where targeted participants attend.
3. Making WASH inclusive for demographics such as girls, disabled children, those with chronic illnesses like HIV, and marginalized children.
4. Integrating **cross-cutting sectors**, especially livelihoods, food security and nutrition, watershed management, and disaster resilience to maximize impact.
5. WASH in emergency response planning and implementation.

While we do not target HCFs specifically, we are operating in these communities long-term and implement WASH interventions as key enablers of broader development and individual thriving.

Future Plans

Compassion's core development emphasis is toward its registered program participants, meeting their most critical needs in partnership with local churches. When children live in contexts where insufficient systems exist, Compassion seeks to address the issues at hand. If the need can't be addressed by our long-term church partners, we also collaborate with other agencies to address the issues, including a strong history of WASH interventions. Therefore, there is always potential where program participant needs can overlap with insufficient WASH systems in HCFs, and Compassion would be seeking collaboration where those needs intersect.

Website and Point of Contact

Website: www.Compassion.com

Contacts: James Tebyasa – jtebyasa@ug.ci.org | Dr. Yona Kapere – ykapere@ug.ci.org

Conrad N. Hilton Fund for Sisters (HFS)

Past and Current Engagement

Conrad N. Hilton Fund for Sisters (HFS), founded in 1986, responds to the belief expressed by Mr. Conrad Hilton that Catholic sisters provide greatly needed services for the good of humanity. The Fund offers grants to Catholic sisters who minister to underserved populations worldwide. Over the years, many grants have been provided for safe water in healthcare facilities, which has become one of the areas of interest and a focus of the Fund. Since 1986, 154 grants were made for $1,948,005 to global water projects in healthcare centers, and 104 of the projects were made to African countries.

The Fund for Sisters has participated in the Vatican WASH collaboration by funding WASH in HFCs for 14 congregations of sisters in the Philippines, Malawi and Kenya.

Future Plans

The Fund for Sisters is currently working with Catholic Relief Services to fund additional sister owned and run HFCs in the Philippines.

Website and Point of Contact

www.hiltonfundforsisters.org

Sister Gina Blunck: gina@hiltonfundforsisters.org

Corus

Past and Current Engagement

Under the Momentum Integrated Health Resilience (MIHR) (Department of State 2020-present|$295M) IMA has WASH interventions bundled within broader nutrition interventions in Ethiopia and Sudan. In these contexts, activities focus on improving access to safe water, including replacement of water pipes, maintenance of community wells through trained circuit riders, and installation of rainwater harvesting systems in health facilities. Sanitation efforts include upgrading and maintaining toilets and incinerators, alongside medical waste separation and disposal. Hygiene promotion emphasizes handwashing, safe food handling, and use of clean water, while all countries receive infection prevention and control (IPC) supplies and training. Capacity building includes training health workers and facility managers on the WASH FIT approach to strengthen long-term WASH infrastructure planning and management.

Under the Afya Jijini (USAID|2015-2020|$48M) program in Kenya, IMA improved WASH behaviors and infrastructure that reduced diarrhea-related morbidity and mortality. A first-year WASH assessment of health facilities showed most facilities lacked Oral Rehydration Therapy (ORT) corners (a government-endorsed intervention for diarrhea treatment for children under five), and those which had ORT corners lacked documentation of outcomes. As a result, in collaboration with Nairobi County, the project trained and deployed 28 WASH Champions to support mothers, document child outcomes at ORT corners, and conducted follow-ups of admitted children. In addition, the project improved health care workers (HCWs) knowledge of handwashing during critical handwashing times and proper hygiene procedures. As a result, these facilities achieved significant improvements in diarrhea management. Working with sub-counties, Afya Jijni rolled out Urban Community-Led Total Sanitation (UCLTS) in 33 villages, engaging communities to address WASH challenges. Through the program, 93,054 households gained access to treated water through the provision of point of use water treatment products (Aquatabs). The program trained HCWs as facilitators and trainers of the UCLTS methodology and Public Health Officers (PHOs), Health Promotion Officers (HPOs) and Community Health Assistants (CHAs) on the WASH program to enable mentorship of other officers and community members.

Additionally, at the community level, Afya Jijni implemented WASH-friendly Early Childhood Development (ECD) Model, identifying ECDs as focal points for child health screening and WASH interventions. The program identified and supported 690 ECDs and primary schools in Year 3, targeting 80,080 children and their caregivers with WASH messaging. The project distributed 2,389,120 Aquatabs for point-of-use water treatment for 47,782,400 liters of water at sub-county and facility level. IMA developed and distributed information, education and communication (IEC) materials to improve knowledge of proper handwashing techniques and infection prevention and control (IPC) in health facilities.

Continuing medical education (CME) sessions were provided on healthcare waste management, personal protection, and handwashing. The project also provided health facilities with bin liners to promote waste segregation.

Under the Access to Primary Health Care (ASSP) (FCDO|2012-2022|$283M) in the DRC, IMA increased safe access to water by constructing 1,500 12,000-liter cisterns at securer locations, including health facilities, schools and village centers.

Under the Animal-Inclusive Community Led Total Sanitation in Mali (A-CLTS) (Osprey Foundation|2020-2022|$600,000) IMA World Health piloted an innovative wash model that led an effort to reduce children's exposure to fecal pathogens that can lead to child diarrhea and other poor health outcomes. The model builds upon the Community-Led Total Sanitation (CLTS) approach through the addition of animal waste management strategies. The goal of this project is to document the A-CLTS behavior change strategies that have the greatest potential to improve household and child health outcomes. (Note: this is not a WASH in HCF example but sharing as an innovative example that contributes to disease outbreak prevention. Can be integrated in HCF model)

Future Plans

Advancing good health and wellbeing – especially of mothers and children – and programs that enable timely and effective responses to infectious disease outbreaks are high priorities for Corus International. To achieve this, among other key interventions, WASH in HCF to improve infection prevention control measures is prioritized as a key intervention. We are also exploring programs to improve WASH in faith-based networks of health care facilities.

Website and Point of Contact

Website: www.corusinternational.org

Contact: Dr. Dennis Cherian, Managing Director, Health & Nutrition (dcherian@corusinternational.org)

Cross Catholic Outreach (CRO)

Past and Current Engagement

Cross Catholic Outreach (CCO) has supported multiple WASH initiatives in healthcare facilities, including the installation of boreholes in Zambia in the following locations:

- St. Joseph Health Center, significantly improving access to safe water for patients, caregivers, and surrounding communities while strengthening infection prevention and control.
- Through the Sisters of Mercy of St. Charles Borromeo WASH program in Zambia, 20 boreholes were constructed—nine at healthcare facilities and others within nearby communities—collectively expanding reliable water access to tens of thousands of people and reducing dependence on unsafe water sources. The boreholes installed at Mpanshya Hospital and six rural health posts (Kapindu, Unyanya, Lameck, Kasansmula, Saulo, and Chamilala) have enhanced service delivery by ensuring continuous water supply for sanitation, maternal care, and hygiene practices critical to patient safety.
- The borehole at Chinyunyu Mission – City of Mercy Rehabilitation Center has improved both clinical care and rehabilitation outcomes by ensuring consistent access to clean water for drinking, sanitation, and daily operations.
- In partnership with the Diocese of Chipata, the FY25 WASH II project led by the Franciscan Missionary Sisters of Assisi delivered a borehole at St. Theresa Mission Hospital, reinforcing water availability for infection prevention, maternal health services, and overall facility hygiene.

In Malawi, the Diocese of Karonga completed a borehole at St. Cynthia Health Centre in 2024, addressing critical shortages and supplying safe water to staff, patients, and the wider catchment population. Across these combined efforts over the past several years, these WASH interventions have expanded access to clean and reliable water for more than 50,000 people, including vulnerable rural populations who previously relied on distant or contaminated sources. Integral to all projects has been ensuring that improved water access is paired with proper handwashing, sanitation infrastructure, and health education to reduce healthcare-associated infections and improve overall community health outcomes.

By implementing WASH projects in healthcare facilities across Zambia and Malawi in partnership with groups such as the Sisters of Mercy of St. Charles Borromeo and the Diocese of Karonga, these efforts address both immediate health needs and long-term social and economic well-being.

Future Plans

MALAWI

Diocese of Karonga Health II (1 borehole)

Diocese of Karonga St. Theresa Clinic (1 borehole)

Website and Point of Contact

St. Joseph Health Center | Cross Catholic Outreach

https://crosscatholic.org/impact/health-impact/

The Importance of WASH in Healthcare Facilities

Cross Catholic Outreach supports WASH in healthcare facilities because access to safe water, sanitation, and hygiene is foundational to delivering quality healthcare, protecting human dignity, and preventing avoidable disease. CCO is committed to these efforts as a vital investment in healthier communities, recognizing that strong WASH systems not only save lives within facilities but also create lasting public health benefits for entire regions.

Daughters of Charity International Project Services (DC IPS)

Past and Current Engagement

Daughters of Charity International Project Services (DC IPS) was established in 2004 as a nonprofit organization to assist Daughters of Charity in low-resourced countries carry out their mission of service to the poor. There are 11,000 Daughters in 97 countries involved in diverse works that meet basic needs including healthcare. Priorities are identified by the communities and the Sisters living and working at the local level. Sisters working in developing countries submit proposals to DC IPS, which serves as a fiscal agent. Potential funding sources are then pursued. Once projects are completed, grant evaluation reports provide evidence on the outcomes and impacts. Approximately 1,500 Daughters of Charity projects have been funded in the past 20 years. 100% of each gift goes directly to a Sister's global project to help those who are most vulnerable.

In 2019, DC IPS made a significant commitment to improving Water, Sanitation, and Hygiene (WASH) infrastructure in healthcare facilities (HCFs) worldwide by pledging four projects to the "Vatican 150" initiative. We are proud to report that DC IPS successfully completed all four of these WASH projects.

Recognizing the critical importance of WASH facilities in healthcare settings, DC IPS expanded its efforts beyond the initial commitment. We initiated an open application process for WASH improvements, inviting Sisters managing healthcare facilities to submit their needs. The response was overwhelming, with 16 applications received since 2020. The high number of applications demonstrates the widespread enthusiasm and commitment of the Sisters as well as the overwhelming need for WASH in healthcare facilities. Of those 16 projects received, DC IPS has fully funded 15. Through our valuable collaboration with Water Engineers for the Americas and Africa (WEFTA), we have been able to bring clean, reliable water to communities across the world.

To ensure the long-term success and sustainability of these WASH improvements, DC IPS worked with WEFTA to establish an innovative Circuit Rider program. Thus far, 11 of our WASH projects have been funded and 7 implemented the Circuit Rider Program. This program features dedicated WASH technicians who conduct annual visits to each facility, providing crucial operations support, maintenance services, and ongoing education about WASH infrastructure management.

Future Plans

As we look to the future, DC IPS will continue to encourage Sisters to submit WASH and WASH HCF projects. We commit to participating in a strong circuit rider program for the WASH clinics that will ensure that the sites are maintained and continue to evolve to

provide high quality WASH in the future. We will work with the sisters, donors and partners to develop and fund at least one more WASH healthcare project for the next 5 years.

We will work with other religious communities and organizations that support WASH for Sisters to encourage WASH improvements at Sisters' Health Ministries, share best practices and collaborate in providing WASH educational opportunities for Sisters serving in healthcare.

Website and Point of Contact

Website: www.daughtersips.org

Contact: Sr. Theresa Sullivan, DC - Executive Director, Theresa.sullivan@doc.org

+1 478-954-8096

The Importance of WASH in Healthcare Facilities

"Without water, there is no life! For this reason, the Daughters of Charity are committed, wherever possible, to participating in initiatives aimed at providing access to drinking water for families, villages, and more. Thanks to the WASH program, projects can be implemented. The Company wishes to continue this collaboration."

— Sr. Françoise Petit, Superioress General of the Daughters of Charity of St. Vincent de Paul

"In my 38 years as a nurse, I have witnessed the miracles of modern medicine. But no treatment can be fully effective without the power of clean water, sanitation, and hygiene. Joy fills my heart with each WASH installment that changes the trajectory of the life, care, and services Catholic sisters are able to provide at their medical facilities. In more ways than one these clinics become "rivers of living water."' (John 7:38)

— Sr. Theresa Sullivan, Executive Director Daughters of Charity International Project Services

Desert Research Institute (DRI)

Past and Current Engagement

The Desert Research Institute (DRI), through its Center for International Water and Sustainability (CIWAS), has strengthened WASH services in developing countries since 2013 through its **International Circuit Rider (CR) Program**. In partnership with governments, universities, and local NGOs, the program deploys trained technicians, **"Circuit Riders,"** to monitor, maintain, and support communities in strengthening WASH systems in **Ghana, Chile, and Honduras**. This work is supported by water quality testing, monitoring and evaluation (M&E), women's entrepreneurship initiatives that support water tariff collection, and community engagement to promote local ownership. Building on this foundation, DRI and its partners have adapted the CR Methodology for HCFs to address both WASH and infection prevention and control (IPC). In Malawi's Rumphi District, pilot projects deploy **Technical CRs** to support infrastructure repair, water quality testing and capacity building for WASH and waste systems, alongside **Quality-of-Care CRs** focus on stronger hygiene and IPC practices, training HCF staff and ensuring guidelines and protocols are followed.

https://www.dri.edu/ciwas/international-circuit-rider-program/#malawi

Future Plans

Building on the International Circuit Rider (CR) Program's success, DRI commit to:

- Expand technical training networks and increase the number of skilled Circuit Riders supporting faith-based healthcare facilities.
- Strengthen the capacity of healthcare staff, Sisters, and local leaders to manage and sustain WASH systems.
- Enhance assessment, monitoring, and follow-up to ensure consistent service functionality.
- Develop transparent data management systems and shared learning to improve quality and accountability.

Website and Point of Contact

Website: https://www.dri.edu/ciwas/

Contact: Braimah Apambire, Ph.D., Director, CIWAS, DRI, Braimah.Apambire@dri.edu

The Importance of WASH in Healthcare Facilities

"Access to safe water, sanitation, and hygiene in healthcare facilities is foundational to quality care, infection prevention, and human dignity. At the Desert Research Institute, we believe that combining scientific rigor with strong local and faith-based partnerships are

essential to ensuring that WASH systems in healthcare facilities are not only built but also sustained over the long term."

— Braimah Apambire, Ph.D., Director, CIWAS, Desert Research Institute

Engineering Ministries International (EMI)

Past and Current Engagement

For over 40 years, EMI has partnered directly with healthcare facilities around the world to design and implement facility and infrastructure improvements that are required to provide quality and affordable healthcare services in their communities. EMI works with the HCF to understand their vision for healthcare services and a holistic view of their needs, which can often be complex and interconnected. Sufficient and sustainably managed WASH systems are often a challenge HCFs are facing but are often not the highest priority for facilities that are struggling to provide clinical care for their patients. In many HCFs there are unaddressed WASH needs, underdeveloped systems that have not kept up with the growth of the facility, complex distribution and treatment needs, and aging or poorly maintained infrastructure that is failing. Construction of infrastructure is only effective if it can be sustainably managed, which is why EMI works with HCFs to strengthen systems that enable long-term sustainability. This includes equipping staff with the training and support services they need to operate and maintain facilities and infrastructure as well as guiding HCF leadership towards improved operational resourcing and efficiency. EMI has also begun efforts to support local governments in strategizing regional HCF needs beyond specific facility partnerships where appropriate.

Future Plans

EMI is currently providing regional strategic support to the Ministry of Health in the eastern province of Zambia alongside a facility and infrastructure improvement project at Minga Mission Hospital. This healthcare strategy, focused on the district level hospital, will identify the needs, priorities, and plans of action to maximize healthcare outcomes and impact, which will be used to pursue additional funding for the region. This includes WASH specific infrastructure and system strengthening as well as other infrastructure and facility needs. EMI is planning to continue our investment in the HCFs in this region for strategic impact. It is anticipated that similar regional strategies can be developed in other areas of Zambia and expanded to other countries where EMI is partnering with HCFs to improve healthcare outcomes on a broader scale. EMI is currently expanding HCF support in Ghana and is looking for other strategic opportunities to partner in this space. The clinical needs of an HCF are often the most urgent concerns of facility leadership. By working with HCFs to address their critical clinical needs, EMI can also support them through approachable and phased solutions to their WASH challenges and other support services. As clinical needs and operational efficiencies improve, it is also our desire to enable HCF leadership to consider their role in support of preventative health services like WASH in their immediate community where practical.

Website and Point of Contact

Website: https://emiworld.org/

Contact: Jason Chandler, Deputy Director of Global Programmes

The Importance of WASH in Healthcare Facilities

"EMI's passion is to use our professional skills in engineering, architecture, planning and construction management to bring about transformed communities around the world, both physically and spiritually. Serving healthcare facilities (HCF's) is one of our primary foci, because community and public health opens up possibilities for communities to learn, work, grow and flourish in ways they never thought possible. And in that focus on HCF's, helping to improve drinking water quality and availability, proper sanitation and informed hygiene practices (WASH) has a pronounced impact on health and ultimately on community flourishing"

— John Dallmann, CEO and President of EMI

Engineers Without Borders USA (EWB-USA)

Past and Current Engagement

Engineers Without Borders USA (EWB-USA) has been working to strengthen healthcare systems through integrated water, sanitation, and hygiene (WASH), energy, and biomedical equipment solutions since 2017. We have implemented healthcare facility retrofits and system improvements mainly across Uganda, Malawi, Kenya, Guatemala, Ecuador, Bolivia, and Peru.

Our work combines partnership development, system diagnostics, infrastructure delivery and long-term capacity building. This includes:

- Conducting WASHFIT-based assessments of healthcare facilities
- Reporting on national state of health care facilities, convening partners for sector wide strategies
- Funding and delivering water, sanitation, energy, and waste management retrofits and new clinic construction
- Training health workers and community stakeholders on WASHFIT and operations & maintenance
- Training biomedical equipment technicians (digital and in person) and restoring critical medical equipment
- Partnering with Ministries of Health, Water, and Energy to inform engineering standards and national strategies

We focus particularly on rural and underserved clinics, where gaps in WASH services directly impact maternal and child health outcomes.

One of the strengths of EWB-USA is our network of dedicated, talented and curious engineers, about 10,000 of them, volunteering their expertise each year. We are able to mobilize professional engineering expertise at the service of community centered efforts, in partnership with local organizations. Our track record in Health Care Facility improvements: 1.820M beneficiaries; 500+ WASHFIT diagnostics; 50+ HCF WASH and energy retrofits; ~$1,500,000 raised and deployed specifically to HCF upgrades ; currently 14 active HCF specific projects (out of 350 annual projects globally)

Future Plans

Over the next three years, EWB-USA is prioritizing work in Uganda, Guatemala, Ecuador, and Bolivia to scale an integrated health systems strengthening model.

Our commitments include:

- Expanding healthcare facility retrofits with climate-resilient WASH and energy systems

- Scaling digital, open-access training for biomedical equipment technicians
- Strengthening operations and maintenance systems to ensure long-term functionality
- Supporting national-level planning and investment through costed engineering "master plans"
- Deepening partnerships with governments and local health networks to enable sustainable scale

We anticipate bringing roughly $600,000 per year for HCF infrastructure capital in our focus countries, matched 3-1 with direct in-kind engineering services. The goals of our contribution will be two-fold:

1. Mobilize. We will seek to leverage our contribution for greater impact, by joining the efforts of national governments and faith based networks who share the same belief that resilient health systems require not just infrastructure, but systems that communities can sustain.
2. Innovate. We will learn with partners to find viable and sustainable models of cost recovery at health care facilities for long term maintenance and scale.

Website and Point of Contact

Website: https://www.ewb-usa.org

Primary contact: Boris Martin, boris.martin@ewb-usa.org, CEO EWB-USA

The Importance of WASH in Healthcare Facilities

"Engineers Without Borders USA has spent more than 25 years working alongside communities to co-create sustainable engineering solutions. In healthcare facilities, that means going beyond infrastructure alone: integrating water, sanitation, hygiene, energy, and biomedical systems with local capacity, training, and long-term partnerships. Our experience shows that this holistic, community-driven approach builds resilient health systems, and we are proud to help lead and advance this work globally"

— Boris Martin, CEO EWB-USA

Faiths for Safe Water (FSW)

Past and Current Engagement

Faiths for Safe Water (FSW) is the only multifaith advocacy and content creation hub focused on strengthening global WASH efforts. We equip others to increase awareness, influence, and action. Working with many secular and faith-based partners and leaders, FSW has spearheaded (literally) 100s of articles and opinion pieces, published in a wide range of media.

In addition, the FSW website contains a lot of background material on WASH (general, healthcare, schools, peace) and offers evergreen ideas to engage houses of worship, faith communities, and youth.

FSW brings WASH-specific advocacy to numerous foreign aid and policy coalitions, and is part of the core organizing team focused on WASH in HCF.

Future Plans

FSW is pleased to offer free consulting to anyone interested in telling stories about WASH for use in advocacy. Let us know if you have a compelling theme or story and we'll see if we can work with you to help get it ready for publication or distribution.

Website and Point of Contact

Website: www.faithsforsafewater.org

Contact: susankbarnett@gmail.com

The Importance of WASH in Healthcare Facilities

“Expecting anyone to provide or receive healthcare without safe and reliable water and sanitation should be unconscionable. It should enrage us, and then engage us. We must make water—the symbol every world religion shares—the source of health and life, not for just some of us, but for all of us.”

— Susan K Barnett

Co-Founder, Faiths for Safe Water

International Care Ministries (ICM)

Past and Current Engagement

International Care Ministries (ICM) has recently launched two healthcare clinics as a pilot for a large-scale national roll out of 40 mobile and fixed clinics across the Visayas and Mindanao in the Philippines. In 2019, the Government of the Philippines passed the Universal Healthcare Act (UHC) with the goal of providing health insurance and essential health services to all Filipino citizens. Despite strong bipartisan support and an annual budget approaching US$5 billion, PhilHealth continues to face significant barriers in achieving universal access to primary care, particularly for the ultra-poor and remote communities where health needs are most acute. As a result, many of the families who stand to benefit the most from UHC remain the least likely to access its services.

For poor, rural families, the total cost of receiving care at a medical facility is often prohibitive—not primarily because of the medical fees themselves, but because of the high cost of transportation and the opportunity cost of lost wages. When multiple trips are required for consultation, laboratory tests, diagnosis, and medicine refills, these indirect costs quickly become unbearable, making routine primary care effectively inaccessible.

For this reason, we believe in a decentralized model of care that delivers as many services as possible directly within the community. As well as fixed-location clinics, ICM will operate one-stop-shop mobile clinics, supported by partner laboratory services and a pre-positioned stock of essential medicines, to eliminate the transport and time barriers inherent in the traditional facility-based model.

ICM is already providing WASH facilities in our fixed clinics and will continue to provide these as we scale.

Future Plans

ICM is already providing WASH facilities in our fixed clinics and will continue to provide these as we scale. For mobile clinics, which have no running water source, ICM will endeavour to provide appropriate WASH facilities within the context of the mobile-clinic limitation.

Website and Point of Contact

Website: www.caremin.com

Contact: Dr. Mindy Mijares, Chief Health Officer – Global Health Strategy

The Importance of WASH in Healthcare Facilities

“Serving the poorest in last-mile communities takes innovation, commitment and determination. ICM is committed to providing the ultra-poor we serve with the best possible care for the minimum cost, and that includes both providing WASH facilities in our clinics, and teaching hygiene and sanitation to hundreds of thousands of families who live in ultra-poverty.” — Louise Joachimowski, Executive Director, International Care Ministries

International Union of Superiors General (UISG)

Past and Current Engagement

Over the past two years, UISG has been instrumental in supporting congregations mostly in the global south, in healthcare (boring wells, building toilets, basic health facilities) by distributing the funds it received for the same purpose.

Future Plans

UISG being at the service of Superiors General of women religious, can support WASH by using some of its platforms to give WASH more visibility and to generate interest in its activities.

Website and Point of Contact

www.uisg.org

Sr. Mary John SSpS

Kenya Conference of Catholic Bishops (KCCB)

Past and Current Engagement

Current Implementation in Kenya

In Kenya, KCCB's health network comprises 497 Catholic health facilities, over 50 community health Programmes and 22 medical training colleges, representing significant proportion of the country's health system. In Kenya, the WASH in HCFs initiative is currently supporting 28 Catholic health facilities in 7 dioceses.

Progress Achieved

- KCCB has implemented WASH improvement initiatives in 28 Catholic health facilities, benefiting approximately 3 million people through enhanced water, sanitation, and hygiene services. Key achievements include the drilling of 8 boreholes, installation of water piping systems in 12 facilities, construction of sanitation facilities in 6 facilities, and provision of water storage tanks, among other WASH improvements.
- KCCB has conducted regular facility assessments and monitoring visits, identifying and working with facility teams to address critical WASH gaps and strengthening service delivery, including maternity and outpatient care.
- KCCB has Developed a national WASH Monitoring and Evaluation (M&E) tool to standardize facility assessments and track progress across supported facilities.
- Through strong collaboration and commitment, Kenya has emerged as a model country in implementing the Vatican inspired WASH Initiative in Catholic health facilities.
    - Links: https://kccb.or.ke/health-program
    - https://www.humandevelopment.va/content/dam/sviluppoumano/general/progetti/wash-2021/2025/Ngong-WASH-Progress-Visit---March-2025..pdf

Future Plans

KCCB remains committed to strengthening WASH systems in Catholic health facilities through:

- Continuous monitoring and evaluation of the 28 supported facilities.
- Strengthening financial and technical reporting systems for WASH projects.
- Developing a national WASH database in collaboration with partners.
- Scaling up WASH interventions to additional facilities.
- Collaborating with other partners in Kenya to be part of the national WASH coordination structure.
- Integrating WASH considerations into the planning, design, and construction of all future Catholic health facilities to ensure sustainable, safe, and resilient service delivery from the outset.

- Inclusion of WASH indicators in facility supportive supervision tools to be used across the country in KCCB health care facilities.

The long-term commitment is to expand WASH improvements to all the 497 Catholic health facilities in Kenya, ensuring safe water, sanitation, and hygiene services for patients, healthcare workers, and surrounding communities.

Website and Point of Contact

Website: kccb.or.ke

Contact:

Jacinta Mutegi,

Head of Department,

Catholic Health Department of Kenya, Commission for Promoting Integral Human Development.

Kenya Conference of Catholic Bishops

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The Importance of WASH in HCFs

“Lack of WASH in healthcare facilities and community negates integral human development”

— Jacinta Mutegi, Head of Department, KCCB – Catholic Health Department of Kenya

“We view access to safe water, adequate sanitation, and hygiene as a reflection of our Christian calling to uphold human dignity and protect life. By strengthening WASH in healthcare facilities, we are living out our mission to serve with compassion, promote healing, and safeguard the most vulnerable. WASH is critical in infection prevention and control and in our case, especially so in preventing hospital and community infections and subsequently protecting human life and upholding the dignity of the human person”

— Rt. Rev. Cleophas Oseso Tuka, Chairman, KCCB - Catholic Health Department of Kenya and Chairman, Commission for Promoting Integral Human Development

Misereor

Past and Current Engagement

Misereor has long been engaged in strengthening water, sanitation and hygiene (WASH) services in low-income countries, including in healthcare facilities—often in cooperation with Catholic networks and international WASH actors. As a development organization rooted in Christian social ethics, Misereor supports partners in Africa, Asia and Latin America to ensure that health facilities have safe water supply, adequate sanitation, and essential hygiene services, recognizing their crucial role for public health and infection prevention.

Misereor provides support through various means, including financial assistance, opportunities for professional development and exchange, as well as consultancies. Through these approaches, the organization strengthens the capacity of local partners and contributes to the sustainability and effectiveness of WASH services in healthcare facilities.

In addition to its work in healthcare facilities, Misereor places significant emphasis on improving water, sanitation, and hygiene (WASH) within grassroots communities, such as villages, settlements, and urban neighborhoods. The central aim is to enhance public health conditions through better WASH services. By reducing waterborne diseases and improving the overall health situation of the population, local healthcare facilities are ultimately relieved and better able to serve their communities.

Concrete Support Activities in the projects

- WASH in Grassroots Communities: Misereor supports household hygiene initiatives, improves access to clean water and sanitation facilities, and promotes hygiene education and awareness.
- Inclusion of Educational and Health Institutions: Efforts extend to schools and health facilities within these rural contexts, focusing on sanitation, water supply, waste management and disposal, and hygiene practices in institutional kitchens. Student awareness is raised through creative activities such as theater and songs.
- Household Water Treatment: Misereor encourages the dissemination of water treatment options at the household level by sensitizing and training local multipliers, including teachers and healthcare workers.
- Infrastructure Development: The organization is also involved in constructing water infrastructure and water treatment facilities at the community level.

Future Plans

Principles of Project Selection and Support

Misereor operates on the conviction that the needs of the population are best addressed by local communities themselves, following an application-based approach. This principle emphasizes the importance of allowing organizations from the Global South to present

their project ideas. The proposed projects should focus on poverty reduction and strengthening participatory independent social life through self-supply approaches, through community led methods and community-owned management strategies for the facilities.

Application Review and Approval Process

All applications are thoroughly analyzed with a strong focus on the interests of grassroots groups. If the proposals align with Misereor's funding guidelines and financial resources permit, they are approved for support. Within this framework, for water supply and hygiene projects, the needs of grassroots groups are prioritized above institutional requirements and private economic interests.

Limitations on Support

Misereor is unable to provide support to governmental structures. Misereor can only accept applications from organizations registered in the Global South.

Website and Point of Contact

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Desk officer for Water, Sanitation and Hygiene

The Importance of WASH in Healthcare Facilities

"The commitment to water supply and sanitation is a crucial factor in ensuring sustainable human development. Not only in the spirit of Christian solidarity, but also in accordance with the 2010 United Nations General Assembly resolution, which recognised access to clean water, sanitation and hygiene (WASH) as a fundamental human right, we are all obliged to act accordingly. A reliable WASH infrastructure in grassroots communities forms the foundation for a dignified, safe and effective life and good healthcare, thereby significantly reducing preventable infections and, on the other hand, empowering members of local communities, particularly women, to take responsibility for the dynamic development and social cohesion of their community."

— Peter Meiwald, Head of Africa Department, misereor

Hospitaller Order of St John of God (Fatebenefratelli)

Past and Current Engagement

The Hospitaller Order of St John of God (Fatebenefratelli) currently operates in 50 countries across five continents, with 562 facilities, including centres for people with disabilities, community centres, hospitals, vocational training institutes and research centres, as well as services for the elderly. Globally, the Order provides around 40,000 beds and manages more than 11 million outpatient visits and over 700,000 admissions each year, assisting more than 7 million people annually.

Our presence in Africa and the Indian Ocean spans 12 countries, divided into four canonical provinces.

In 2021, an initial WASH assessment was carried out for 10 facilities located in 5 countries. The main focus of the assessment was water, sanitation and hygiene.

Specifically, the data examines access to water, continuity and safety; the availability and adequacy of sanitation facilities, including latrines and gender-separated or accessible toilets; and hygiene practices such as handwashing, the availability of soap and adherence to protocols.

Overall, the results show that, although water is generally available, it is not always continuous or safe. Sanitation facilities exist but are sometimes insufficient or inadequately designed, for example with limited accessibility or a lack of gender separation. Hygiene practices are mostly in place, but there is variability between facilities. The dataset also includes questions on clinical management and healthcare practices, such as delivery procedures using sterile instruments and the disposal of medical waste, including placenta management. Some responses reveal gaps or incomplete practices, indicating potential operational weaknesses.

Responses across different facilities are highly varied: some are well-equipped and well-managed, whilst others show limitations, reflecting differences in terms of resources, training and management.

In conclusion, although healthcare facilities generally have a basic level of WASH services, there is considerable room for improvement, particularly regarding the continuity of water supply, the quality of sanitation infrastructure and the standardisation of hygiene practices.

Future Plans

In order to guarantee the right to hygiene and sanitation services for people with special needs, with a particular focus on those suffering from mental health conditions, older

people and people with disabilities, St John of God will carry out (and in some countries has already begun to carry out) the following activities: -

- Conducting a baseline assessment to analyse the WASH situation
- Activities aimed at integrating WASH services into psychiatric care clinics, services for the elderly and, in general, services for people with disabilities
- Facilitating the installation/construction of adequate sanitation facilities - Facilitating training on menstrual hygiene management
- Conduct health education activities on hygiene and sanitation practices among typically neglected beneficiaries, such as people with mental health conditions, people with disabilities, older people
- Facilitate community mobilisation campaigns in care clinics
- Activities aimed at improving community education on water, sanitation and hygiene
- Raise awareness among key health and development policy-makers and WASH partners regarding the management of basic mental health and disability to facilitate the integration and inclusion of WASH programmes within health and disability support programmes

Website and Point of Contact

Website: https://www.ohsjd.org/Objects/Home1.asp

Contact persons:

Ms. Katia Morello – k.morello@ohsjd.org

Mr. John Fleming – john@sjogfoundation.ie

The Importance of WASH in Healthcare Facilities

https://www.youtube.com/watch?v=19cGNlMmyFY

Rotary

Past and Current Engagement

Rotary members have been working to improve healthcare services and facilities for the past 15 years: ensuring training for public health and healthcare workers, providing life-saving equipment, and improving access to basic and safely managed water and sanitation services. WASH is perceived as an important component of health system strengthening.

Future Plans

Rotary's WASH Pathways to Impact outlines our commitment for the next 10 years to focus our resources, regional expertise and service activity on universal coverage in specific geographic regions and WASH in schools and healthcare facilities. Our members, as civil society leaders and local advocates, aim to address these WASH challenges with local partners, using system strengthening approaches. The Rotary Foundation financially supports locally-led sustainable WASH service activity proposed by rotary clubs and districts in over 100 countries. Rotary will be launching a global campaign for WASH in Institutions to mobilize our global membership to take bold action within their local communities. A global target and commitment will be announced at the 2026 UN Water Conference.

Website and Point of Contact

rotary.org

Erica Gwynn, Global WASH Manager, erica.gwynn@rotary.org

The Salvation Army

Current Work

The Salvation Army currently operates 119 healthcare facilities across 18 countries and partners with many more through national health systems and local organisations. Over the past decade, there has been a growing focus on improving WASH standards within our own healthcare facilities. This work has largely taken place through bilateral partnerships, responding to needs identified by individual facilities and supported by available funding.

A notable example is in Zambia, where The Salvation Army operates a major hospital, nursing school and biomedical school. Over the last three years, a comprehensive upgrade of the site's water system has been completed, ensuring reliable access to safe, clean water across the entire facility. This has significantly strengthened infection prevention and control measures and improved the safety and dignity of care for patients, staff and students.

Across our wider health network, WASH improvements in the last few years have included upgrades to water supply, sanitation infrastructure and hygiene facilities, alongside growing attention to assessment and monitoring of WASH conditions in healthcare settings. We have also published a set of guidelines for the construction of boreholes in order to improve the quality of our infrastructure work. In Papua New Guinea our 23 health facilities now have rainwater access and in Ghana, boreholes have been constructed at 2 healthcare facilities. Sanitation facilities have been built at a clinic in Kenya.

While not currently a priority, some of our community development WASH projects across various countries have supported health facilities operated by local governments and other external organisations.

Future Work

In 2025, the General of The Salvation Army approved the Guiding Principles for Salvation Army Health Services. These principles require healthcare facilities to meet or exceed national standards, implement effective infection prevention and control measures, undertake regular assessments, ensure appropriate governance, and promote sustainable operations.

In line with this commitment, International Headquarters is launching a three year organisational focus on WASH in Salvation Army healthcare facilities. This initiative aims to build a clear evidence base and collective momentum to strengthen WASH systems across all Salvation Army healthcare facilities, with the goal of achieving at least a basic WASH standard by 2029.

As a first step, The Salvation Army has begun rolling out the WHO/UNICEF WASH FIT tool across its healthcare facilities. The results will be analysed by the end of 2026 to help prioritise needs, mobilise resources and guide targeted improvements from 2027 onwards. Through this work, The Salvation Army commits to ensuring that every healthcare facility in its care provides a safe, dignified and resilient service, supported by strengthened water, sanitation and hygiene systems.

Website and Points of Contact

www.salvationarmy.org

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Lt Marco Herrera - International Health Services Co-ordinator

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The Importance of WASH in Healthcare Facilities

“The Salvation Army believes that faith in Christ is relevant to the whole of one's life - in all of its many and diverse aspects. As part of this holistic understanding, we seek to be a significant participant in faith based, integrated and quality primary healthcare, delivered as close to the family as possible and giving priority to poor and marginalised communities. Improvements to water, sanitation and hygiene are fundamental to this vision, forming a core part of infection prevention and control, and ensuring dignity, safety and quality of care for all those we serve.”

— Commissioner Debbie Horwood, International Secretary for Programme Resources, International Headquarters

The Symposium of Episcopal Conferences of Africa and Madagascar (SECAM)

Past and Current Engagement

The Symposium of Episcopal Conferences of Africa and Madagascar (SECAM), through its Justice, Peace and Development Commission (JPDC) and the AU Liaison Office, has been actively engaged in promoting equitable access to water, sanitation, and hygiene (WASH) as a fundamental human right and a critical component of public health systems across Africa.

SECAM's work integrates faith-based advocacy, policy engagement, and community-level interventions, particularly through Catholic health facilities, diocesan structures, and religious congregations that manage a significant proportion of healthcare services across the continent.

Recent key contributions include:

Convening a high-level faith-based policy dialogue during the African Union Summit in Addis Ababa (February 2026), culminating in the Addis Ababa 2026 Faith-Based Declaration on Water Sustainability and Sanitation, which explicitly recognizes WASH in healthcare facilities as a priority for achieving Agenda 2063 and the Africa Water Vision 2063.

Strengthening collaboration with the African Union Commission (AUC) under the SECAM–AU Memorandum of Understanding (2026), aligning WASH advocacy with continental priorities on health, human dignity, and sustainable development.

Supporting Catholic healthcare networks, including hospitals, clinics, and dispensaries, through awareness creation, ethical framing of WASH as a human right, and promotion of minimum WASH standards in healthcare delivery.

Partnering with development agencies and faith-based organizations to promote integrated WASH programming, especially in underserved and rural communities where Church-run health facilities are often the primary providers of care.

Future Plans

Looking ahead, SECAM is committed to scaling up its contribution to WASH in healthcare facilities through a combination of policy advocacy, pilot interventions, and strategic partnerships.

Key planned initiatives include:

Implementation of a Continental WASH Pilot Initiative, focusing on the development of boreholes and sanitation infrastructure (including ablution facilities) in selected countries, including Catholic healthcare institutions serving vulnerable communities.

Operationalization of the Addis Ababa 2026 Faith-Based Declaration, including engagement with AU institutions, Member States, and partners to integrate WASH in HCFs into national and continental policy frameworks.

Strengthening faith-based partnerships to mobilize resources, technical expertise, and innovation for sustainable WASH solutions in healthcare settings.

Website and Point of Contact

Website: https://secam.org

Contact: Fr. Dr. Louison Emerick Bissila Mbila

SECAM Liaison Officer to the African Union

Email: secamauliaisonoffice@gmail.com

Location: Addis Ababa, Ethiopia

The Importance of WASH in Healthcare Facilities

"SECAM is committed to advancing water, sanitation, and hygiene in healthcare facilities because access to safe WASH services is fundamental to human dignity, quality healthcare, and the protection of life, especially for the most vulnerable. As a faith-based institution, we see this work both as a development priority and as a moral and pastoral responsibility."

— Fr. Dr. Louison Emerick Bissila Mbila, SECAM Liaison Officer to the African Union

Secretariat for Social Justice and Ecology (SJES) of the Society of Jesus in Rome

Past and Current Engagement

The Secretariat for Social Justice and Ecology (SJES) of the Society of Jesus in Rome has the mission of encouraging and helping coordinate the commitment of all the Society of Jesus' works (across all apostolic sectors) with social justice and ecology.

The SJES by itself does not carry out specific WASH initiatives in HCFs, but it maintains contacts with many Jesuit works (universities, schools and colleges, parishes, social services, research centers, radio stations, and communication services, etc.) around the world that may be involved in WASH and HCFs-related activities. Especially if that final 'F' refers not so much to Facilities, but to FORMATION (popular education, collective efforts to provide water and sanitation).

Future Plans

We have already started putting WASH for HCFs initiative and Mr. Oldfield in contact with Fr. Isamel Matambura, president of AJAN network in Africa. This is a kind of service the SJES can provide little by little, identifying possible partners. Certainly, in India, Africa, Latin America (including Haiti, for example), there are projects to match.

Websites

We have two websites: the official one is www.sjesjesuits.global and the one that is center in the projects we accompany and the one that tells stories and experiences from the social works is www.ecojesuit.com

Sisters Rising Worldwide (SRW)

Past and Current Engagement

At Sisters Rising Worldwide (SRW), our work in water, sanitation, and hygiene (WASH) in healthcare facilities is driven by the needs identified by Catholic Sisters serving in underserved communities around the world.

Through our PeaceRoom platform, Sisters surface real-time needs for clean water, sanitation, hygiene, waste management, and electricity within clinics and community health centers, many of which are primary care facilities operating in rural and resource-constrained settings.

To prepare for this gathering, SRW surveyed Sisters serving in healthcare facilities across twelve countries. Their insights support what global data shows while illustrating the realities are on the ground. Sisters reported challenges including unreliable or unsafe water sources, inadequate sanitation facilities, lack of hygiene supplies, unsafe waste management, and inconsistent electricity – conditions that directly impact infection prevention, maternal care, and emergency response, including:

- 90% of Sisters report No regular access or unreliable access to clean water on-site at their community's healthcare facilities
- 80% of Sisters report there are insufficient or poor condition toilets for patients and staff
- 75% of Sisters report there are "rarely/never" or only "sometimes" water available at points of care
- 55% of Sisters report that medical waste is not safely managed or only partially managed
- 35% of Sisters report that their medical facilities do not have reliable electricity and 45% report that electricity is intermittent

Several Sisters noted that lack of water disrupts entire systems of care, forcing staff to source water from distant locations, while unreliable electricity affects critical services such as oxygen delivery and vaccine storage. Others highlighted increased risk of infection due to poor sanitation and waste management, as well as rising cases of waterborne and diarrheal diseases in their communities. Sisters' most urgent WASH-related challenges include:

- Lack of water
- Unreliable electricity
- Unsafe waste management
- Poor sanitation
- Lack of hygiene supplies

In response to Sisters' WASH needs, SRW supports Sister-led projects that improve reliable water access, upgrade sanitation infrastructure, and ensure handwashing facilities at points of care. We also support Sisters' efforts to strengthen infection prevention and control through staff training, hygiene education, and improved waste management practices.

Because this work is led by Sisters and grounded in local context, it promotes sustainability, protects healthcare workers, reduces infections, and ensures that patients are treated with dignity—especially in maternal and primary care settings.

Future Plans

In the future, SRW will strengthen our role in advancing WASH in healthcare facilities by amplifying frontline insight and accelerating locally led solutions from Sisters.

Building on input gathered from Sisters serving in healthcare facilities across multiple countries, SRW plans to expand its ability to systematically capture and elevate real-time information on WASH-related gaps through the PeaceRoom platform. This includes exploring enhanced "pulse check" approaches to better identify emerging risks, inform resource allocation, and support more responsive implementation. Pulse checks are short, regular check-ins with Sisters to gather real-time information about what is happening in their healthcare facilities and communities.

SRW will continue to support Sister-led projects that improve WASH practices, waste management, and energy reliability in healthcare facilities, particularly in primary care and underserved settings. With increased partnership and investment, SRW is well positioned to expand WASH solutions, strengthen more healthcare facilities, and improve health outcomes in communities that are too often left behind.

Website and Point of Contact

SRW website link: www.srw.org

Contact information: Kelly Mallon Young, Chief Operating Officer, kelly@srw.org

The Importance of WASH in Healthcare Facilities

All aspire to clinics that operate with clean water and sanitation. SRW will invite sisters to be specific in their requests when posting in the Sisters Rising Worldwide PeaceRoom. The SRW PeaceRoom is a map of the world, where donors can click on any county or program to see what requests Sisters posted, and make a contribution to the programs, including healthcare needs. SRW will strengthen our role in advancing WASH in healthcare facilities by amplifying this frontline survey insight. SRW will post Sister-led WASH projects that improve WASH practices, waste management, and energy reliability in healthcare facilities on our website to assist Sisters in securing funding for these projects.

“We support WASH in healthcare facilities because no one should receive care in conditions that put their health at risk.”

— Sister Irene O’Neill, CSJ, Founder & President, Sisters Rising Worldwide

Swiss Church Aid (HEKS/EPR)

Past and Current Engagement

Swiss Church Aid (HEKS/EPER) is strongly committed to strengthening Water, Sanitation, and Hygiene (WASH) services in health care facilities across Ethiopia as a critical foundation for quality healthcare, patient safety, and resilient health systems.

Integrating WASH and IPC to Improve Quality and Safety of Health Care:
Swiss Church Aid (HEKS/EPER) programmatic approach emphasizes the strong link between adequate WASH services and effective infection prevention and control (IPC), contributing to reduced healthcare-associated infections and improved health outcomes particularly for underserved communities. To this end, by integrating WASH improvements with broader health system priorities, Swiss Church Aid (HEKS/EPER) supports facilities to deliver safer, more dignified, and higher-quality care. Building on extensive field experience, we have implemented targeted interventions that improve access to safe water, adequate sanitation, and hygiene infrastructure, while ensuring functionality, inclusiveness, and sustainability of services in diverse and often resource-constrained settings.

Policy Advocacy and Systems Strengthening for Sustainable WASH:
Beyond service delivery, HEKS has been playing an active role in strengthening the enabling environment for WASH in health care facilities at both national and sub-national levels through targeted advocacy work. This includes advocating for increased and sustained domestic financing, supporting the implementation and operationalization of policies and standards, and fostering coordination among government institutions and sector partners (HEKS supported the establishment of technical working group in Amhara Region). Swiss Church Aid (HEKS/EPER) has been working in close collaboration with the Ministry of Health and other stakeholders to ensure alignment with national priorities and to promote government ownership. At the same time, Swiss Church Aid (HEKS/EPER) invests in generating and documenting evidence, lessons learned, and good practices to inform policies, strategic planning, and resource allocation.

Promoting Scalable and Innovative Approaches for Sustainable WASH Systems:
A key focus of Swiss Church Aid (HEKS/EPER) engagement is the promotion of scalable and innovative approaches that enhance capacity and system performance. These include the use of digital learning platforms for continuous professional development, the institutionalization of WASH FIT as a quality improvement tool within health systems, and the provision of long-term technical providing sustained support, guidance, and partnership to build local capacity and ensure sustained results. Through strategic partnerships, adaptive learning, and a systems-strengthening approach, Swiss we contributed to the development of sustainable, nationally owned solutions that accelerate

progress toward universal access to safe, reliable, and climate-resilient WASH services in health care facilities across Ethiopia.

Future Plans

Advancing Scalable and Sustainable WASH Solutions Across Ethiopia's Health System: Looking to the future, Swiss Church Aid (HEKS/EPER) remains committed to advancing WASH in health care facilities through scalable, sustainable, and systems strengthening approaches. Building on strong collaboration with the Ministry of Health and development partners, we will support the rollout and institutionalization of innovative solutions such as the WASH FIT eLearning platform, including its integration into national and sub national training systems to enable wider reach and long term capacity development. The organization will continue to advocate for integrated WASH approaches within health systems, strengthen partnerships at all levels, and mobilize technical and financial resources to improve quality of care and patient safety. These efforts aim to contribute to sustainable capacity building, expanded coverage of WASH FIT, and safer, higher quality health services across Ethiopia. Notably, development of the e learning platform is currently underway, with the National WASH in Health Care Facilities Technical Working Group in the process of finalizing the draft storyboard.

Advocacy: The Swiss Church Aid (HEKS/EPER) is committed to advocate for the acceleration of the implementation of WASH in health care facilities as a core component of quality and safe health services. We plan to support the institutionalization of WASH FIT through cost effective and scalable approaches, including the integration of e learning into national capacity building systems. We will continue to strengthen coordination through the National WASH in HCF Technical Working Group, mobilize resources with partners, and progressively expand WASH FIT coverage to regional, district, and facility levels to ensure sustainable

Innovation, knowledge sharing, and coordinated action: Looking to the future, the Swiss Church Aid (HEKS/EPER) is committed to advancing WASH in health care facilities by promoting innovation, knowledge sharing, and coordinated action among system partners. Swiss Church Aid (HEKS/EPER) will continue to support scalable solutions, provide technical ongoing support and partnership, and facilitate collaboration between sector actors. Through advocacy, convening, and evidence based learning, Swiss Church Aid (HEKS/EPER) will continue to promote the institutionalization of WASH in HCFs and contribute to sustainable health system strengthening.

Looking to the future, Swiss Church AID (HEKS/EPER), reaffirms its commitment to accelerating progress on WASH in health care facilities by strengthening national systems and scaling sustainable solutions. Building on existing collaboration, we will support the institutionalization and nationwide rollout of WASH FIT through cost effective approaches such as the e learning platform, enhancing reach and long term capacity development at all levels of the health system. Through continued coordinated technical support, resource mobilization, and knowledge sharing, we aim to expand coverage, strengthen quality and

safety of care, and ensure that WASH in HCFs remains an integral component of Ethiopia's health system strengthening agenda.

Website and Point of Contact

Website: www.heks-eper.org

Primary Focal Person: Tigist Gebremedhin, Swiss Church AID (HEKS/EPER), Email: tigist.gebremedhin@heks-eper.org

The Importance of WASH in Healthcare Facilities

"No health care facility can deliver safe and dignified care without reliable water, sanitation, and hygiene. Swiss Church AID (HEKS/EPER) is committed to advancing WASH in health care facilities to achieve quality health services, infection prevention, and long term system resilience."

— Jakob Braun, Country Director, Swiss Church Aid (HEKS/EPER)

Tearfund

Past and Current Engagement

The majority of Tearfund's directly implemented WASH in HCF work is in the DRC and South Sudan and has the following components:

Infrastructure Construction and Rehabilitation

Availability of infrastructure within rural primary health clinics, therapeutic feeding and supplementary feeding centres, and reference hospitals. These are sometimes run by Church groups; others are government run institutions. The infrastructure activities include :

- **Water Supply:** Constructing or repairing water systems (e.g.solar powered boreholes, capping springs, or installing/extending gravity-fed piped systems); Installation of rainwater harvesting systems to provide water for hygiene purposes
- **Safe Sanitation**: Installing safe, private, and dignified toilets/showers
- During **disease outbreaks (**such as cholera or ebola) establishing treatment centres following government protocols
- **Handwashing Stations:** Setting up handwashing facilities (often hands-free)
- **Waste Management** - construction of waste structures such as placenta pits, needle crushers, sharps waste, incinerator etc

Hygiene Behaviour Change

Tearfund emphasizes changing long-term habits among health workers and patients:

- **Training for Staff:** Educating healthcare workers on hygiene protocols, and medical waste management.
- **Patient Awareness:** Using the healthcare facility as a hub to teach patients and their caregivers about healthy hygiene habits they can take back to their communities.

Integrated Health and Resilience

Tearfund integrates health aspects into its broader WASH emergency responses:

- **Infection Prevention & Control (IPC)**: Ensuring WASH standards are met to combat AMR and prevent the spread of diseases such as COVID-19 or Ebola. In our broader community-based WASH activities, faith leaders are trusted communicators of these key messages.
- **Maternal and Child Health:** Providing "dignity kits" (MHM and incontinence) and ensuring clean water and sanitation are available during childbirth to reduce neonatal and maternal mortality.
- **Fragile Contexts:** In areas like the DRC or South Sudan, WASH in HCF can also be an "entry point" for peace-building and state-building by working with local

government bodies, increasing bringing diverse groups across a community to state legitimacy where appropriate

Advocacy and System Strengthening

Tearfund aims improve the systems that manage health facilities:

- **Local Government Collaboration**: we partner with local health departments and ministries of health to ensure that WASH services are included in national health policies and budgets.
- **Sustainability:** They support the formation of local management groups to oversee the long-term maintenance and repair of WASH infrastructure so that it doesn't fall into disrepair after the initial project ends.

Achieving WASH in HCF through Church & Community mobilisation

In addition to Tearfund's directly implemented WASH activities in HCF, through its Church and Community Mobilisation processes, we have seen a number of communities around the world who have prioritised the need to have a community health post, have advocated with the local government to appoint a health care professional, and then the community themselves have constructed the physical building and through the generosity of others have been able to equip it.

Future Plans

Tearfund will be expanding its work with WASH in HCFs in collaboration with Johns Hopkins University, by scaling their proven WASHMobile solution which delivers WASH voice and SMS messages to high-risk populations for diarrhea outbreaks

Website and Point of Contact

https://tearfund.org

Rachel Stevens, Global WASH Specialist - primary focal point concerning Tearfund's WASH in HCF

The Importance of WASH in Healthcare Facilities

"Tearfund supports WASH in healthcare facilities as these settings are meant to be places of healing, but without clean water, healthy hygiene practises, and hygienic sanitation facilities, they can become hubs for transmission of diseases"

— Silas Balraj, CEO, Tearfund

Transform International

Past and Current Engagement

Over the past 6 years, Transform International has been working in northern Malawi (Rumphi District) on a program to improve sustainability of WASH systems in healthcare facilities in partnership with DRI, DAMRA, and local government officials. Through research undertaken locally, and a literature review, we examined the barriers to sustainability, and approaches that had been tried. We found two approaches of interest: the circuit rider methodology and something called "supportive supervision" where district level health dept staff travelled to facilities to coach and mentor. We melded these together into something TI calls "STREAMS" - a two pronged circuit rider program where a Technical Circuit rider (responsible for infrastructure) and a Quality of Care circuit rider (responsible for behaviours) work together to support 4 or 5 facilities with monthly visits, training, monitoring etc.

This program has now been running for five years with excellent results. Here is a link to a short film about the program.

During this time we have also worked extensively with Rotary Clubs who provided funds to bring facilities up to basic standards - an important contribution for building sustainability.

Future Plans

We will continue with our work on the STREAMS program in Rumphi, are expanding into other districts in Malawi, and exploring a pilot program in Kenya.

We will also continue our partnership with Rotary Clubs to continue improvements to HCFs infrastructure, and capacity building.

We are happy to share our experiences and work with other partners to improve WASH in HCFs.

Website and Point of Contact

Websites: www.transforminternational.org/ | transforminternational.ca

Contact: Dr. Nancy Gilbert, nancy.gilbert@transforminternational.org, +1 250 415 7993

The Importance of WASH in Healthcare Facilities

"I have always been struck by the quote from the US Secretary General: A healthcare facility without WASH is NOT a healthcare facility. WASH is fundamental to a healthy environment, infection prevention and control, reduction of HAIs, and patient, family, and staff safety. HCFs also provide an opportunity to model practices that can be adopted by community members in their own day-to-day lives. Cleanliness, proper waste management,

appropriate use of soap and handwashing... a healthcare facility is the perfect place to teach these practices. But to do so, they must be present. We support WASH in HCF work as we believe in the importance and impact of this work."

— Nancy Gilbert, Executive Director, Transform International.

United Methodist Church Global Ministries

Past and Current Engagement

Global Ministries' Global Health Unit awards grants to support operational needs, water, sanitation, and hygiene (WASH) projects, and health systems strengthening (HSS) for the health boards of the United Methodist Church (UMC). These boards, appointed by bishops, oversee and supervise the network of UMC health facilities within each episcopal area.

Over the past decade, alongside community-based WASH grants, funding has been allocated to UMC health boards and other partners in countries such as Angola, Bolivia, Burundi, Cameroon, the Central African Republic, the Democratic Republic of the Congo (DRC), Ecuador, Haiti, Kenya, Liberia, Mozambique, Sierra Leone, Uganda, and Zimbabwe. These grants have been used to improve water quality and access, increase the availability of latrines for patients and staff, establish proper systems for biomedical waste disposal and incineration, provide capacity-building training for WASH and infection prevention and control (IPC), and procure medical supplies, vaccines, and technologies to bolster responses to outbreaks of waterborne and diarrhoeal diseases like cholera.

You can find showcases of our work here (WASH projects, both community- and facility-level) and here (all programmes).

Future Plans

In the autumn of 2025, Global Ministries/UMCOR partnered with colleagues from the United Methodist Episcopal Area health boards of Liberia and Sierra Leone to conduct assessments using the WASH Facility Improvement Tool (FIT) for their network of UMC health facilities. Following these assessments, both health boards were invited to apply for Health Systems Strengthening/WASH funding to address the identified gaps. As a result, the Sierra Leone UMC received a two-year, $500,000 grant to enhance WASH services across nine facilities, while the Liberia UMC received a $360,000, one-year grant to improve six facilities.

Global Ministries expresses gratitude to the Wallace Genetic Foundation (WGF) for its initial support through a grant for this assessment. Appreciation is also extended to the Africa Christian Health Associations Platform (ACHAP), Catholic Relief Services, UNICEF, and other members of the WASH Circuit Riders Community of Practice for their encouragement and support throughout the WASH FIT process. This partnership has allowed the United Methodist Church to further integrate its efforts into the newly formed Community of Practice, enhancing its impact on global initiatives.

Website and Point of Contact

Website: https://umcmission.org

Specific link to the WASH programme:
https://umcmission.org/work/global-health/water-sanitation-hygiene

Contact information for WASH specialist:

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The Importance of WASH in Healthcare Facilities

'Water, Sanitation, and Hygiene (WASH) is foundational to the global health work of GBGM* because safe water, dignified sanitation, and healthy hygiene practices prevent disease, protect vulnerable communities, and allow health systems to function effectively. By addressing these basic conditions of life, WASH strengthens community health, reduces preventable illness, and advances GBGM's commitment to holistic, sustainable healing worldwide.'

— Jim Cox, Executive Director, United Methodist Committee on Relief

* GBGM: General Board of Global Ministries of the United Methodist Church

Water Mission

Past and Current Engagement

As a WASH implementer, Water Mission's mission is to honor God by developing, implementing, and sharing best-in-class safe water solutions that transform as many lives as possible, as quickly as possible. Our core program areas include long-term development and emergency response through solar-powered, sustainable safe water projects in institutions (hospitals, clinics, schools), communities, and refugee camps.

While Water Mission does not operate programs exclusively focused on healthcare facilities, HCFs are consistently prioritized within our country program strategies and project selection processes due to their critical role in infection prevention, maternal and child health, and overall health system resilience. During project assessments, we evaluate water access, reliability, water quality, sanitation infrastructure, and hygiene practices in healthcare settings alongside surrounding communities.

Water Mission has supported healthcare facilities globally through:

- Installation of solar-powered safe water systems that provide reliable, treated water for clinical use, handwashing, sterilization, and patient care
- Rehabilitation and upgrading of existing water infrastructure to improve continuity and quality of supply
- Integration of hygiene promotion and behaviour change, including hand hygiene practices for healthcare workers and patients
- Emergency WASH interventions in health facilities during disease outbreaks and humanitarian crises, ensuring rapid access to safe water
- Long-term sustainability models, including local capacity building, maintenance support, and remote monitoring of system performance

These efforts have been implemented across multiple country programs in sub-Saharan Africa, Asia,Latin America, and in refugee camp settings, often in partnership with Ministries of Health, local governments, and implementing partners.

Future Plans

Looking ahead, Water Mission aims to deepen its engagement in WASH in healthcare facilities by further integrating HCF-focused outcomes into country program design and scaling partnerships with Ministries of Health and global WASH and health actors.

Key priorities include:

- Expanding solar-powered safe water solutions in healthcare facilities, particularly in underserved and climate-vulnerable regions

- Strengthening alignment with national healthcare and WASH standards, supporting governments in achieving universal access to safe water in HCFs
- Enhancing monitoring and data use, including remote system monitoring to ensure reliability and inform service delivery improvements
- Leveraging emergency response capacity to support HCFs during outbreaks and humanitarian crises
- Exploring integrated WASH and health programming, including stronger linkages with infection prevention and control (IPC) and maternal and child health outcomes

Water Mission is also committed to collaboration through platforms such as the WASH in HCF Community of Practice to share learning, contribute technical expertise, and align with global efforts toward universal access.

Website and Point of Contact

Website: https://watermission.org/

Contact: Lara Lambert, Sr. Director, WASH Program Development, llambert@watermission.org

The Importance of WASH in Healthcare Facilities

"Access to safe water, sanitation, and hygiene in healthcare facilities is foundational to delivering quality services and protecting the most vulnerable. Water Mission is committed to strengthening health systems globally by ensuring safe, reliable, and sustainable safe water solutions where they are needed most."

— Lara Lambert

WEFTA

Past and Current Engagement

Since 2001, Water Engineers for the Americas and Africa (WEFTA) has partnered with in-country organizations, healthcare providers, WASH networks and faith-based organizations to improve water, sanitation, and hygiene (WASH) services across Africa and Latin America. From 2015–2025, WEFTA significantly expanded its WASH in Healthcare Facilities (HCFs) portfolio in alignment with the global initiative led by WHO, UNICEF, and the Dicastery for Promoting Integral Human Development, with the overwhelming need to address the critical gap in safe water and sanitation in healthcare settings.

Partnership-Driven Impact (Faith-Based Organizations)
WEFTA's success is built on strong, mission-aligned partnerships that enable effective implementation and long-term sustainability with:

- Daughters of Charity International Project Services (DCIPS): A cornerstone partner in WEFTA's global WASH in HCF portfolio, supporting project identification, coordination, and implementation across Africa and Latin America. Through this collaboration, WEFTA has delivered comprehensive WASH improvements in hospitals and clinics in countries including Ethiopia, Tanzania, Ghana, Burkina Faso, Nigeria, Cameroon, DR Congo, Mexico, and beyond.
- Benedictine Sisters of St. Agnes: In partnership with the Sisters and Sanitation and Water Action (SAWA) and supported with resources by the Bishop of the Roman Catholic Diocese, John Nidimbo, of Mbinga, WEFTA has implemented and sustained WASH improvements across multiple rural healthcare facilities in Ruvuma and Njombe Regions of southern Tanzania. These projects emphasize not only infrastructure development, but also long-term system functionality through hands-on training and circuit rider support.

These partnerships ensure that WASH interventions are locally grounded, technically sound, and sustainably managed.

Vatican 150 Initiative – Flagship WASH in HCFs Projects
Through the Vatican 150 Initiative, WEFTA has implemented high-impact WASH projects in mission hospitals and clinics serving vulnerable populations.

Vatican 150 Initiative - Representative Projects:

- Ethiopia – Danka Catholic Hospital in Coordination with Daughters of Charity: Comprehensive water supply, distribution, and sanitation systems for patients and hospital staff • Ghana – Immaculate Conception Health Center in Coordination with Daughters of Charity: Borehole, storage, sanitation, medical waste management, and system optimization • Nigeria – St. Catherine's Hospital in Coordination with

Daughters of Charity: Reliable groundwater system supporting maternal and clinical care
- Tanzania – Mpapa Health Center in Coordination with Bishop John Ndimbo and the Benedictine Sisters: Water source and storage improvements for rural service delivery and upgraded sanitation systems for human waste disposal
- Burkina Faso – Notre Dame de Esperance Hospital in Coordination with the Daughters of Charity: Full WASH upgrade for rural and refugee-affected populations

Across these projects, WEFTA has delivered:

- Source water development (groundwater wells and springs), and solar-powered water systems
- Water storage, distribution, and facility-wide access
- Sanitation and healthcare waste management infrastructure
- Handwashing and infection prevention systems

These integrated improvements strengthen healthcare delivery, reduce infection risks, and improve patient dignity.

Sustaining Impact Through Circuit Riding

A defining feature of WEFTA's model is its Circuit Rider Program, which ensures long-term system functionality through:

- Routine monitoring and preventative maintenance
- Water quality testing and performance evaluation
- On-site O&M training for healthcare staff
- Strengthened operations and maintenance (O&M) systems

This approach minimizes system downtime and protects long-term investments.

Future Plans

Over the next five years, WEFTA will:

- Expand WASH improvements across additional healthcare facilities
- Scale the Circuit Rider model as a standard for sustainability
- Strengthen local technical capacity and workforce development
- Enhance monitoring systems to ensure long-term performance

Goal: Ensure healthcare facilities not only gain access to WASH services but sustain them, improving health outcomes for millions.

WEFTA remains committed to delivering sustainable, partnership-driven WASH solutions that strengthen healthcare systems and the communities they serve.

Wine To Water

Past and Current Engagement

Wine To Water has been implementing WASH solutions in healthcare facilities across multiple countries since its founding, supported over 60 countries with a cumulative total of 674 HCF implementations impacting 189,626 lives through healthcare settings. Our HCF work spans a range of interventions including the installation of membrane and ceramic water filtration systems, deployment of handwashing stations, distribution of hygiene kits, installation of high-capacity water treatment units, latrine construction, and WASH education and hygiene promotion for health workers and patients.

Our HCF WASH work has been particularly active during humanitarian responses — including COVID-19, where we prioritized hand hygiene infrastructure and hygiene kit distribution in health posts and clinics, as well as in disaster response contexts. In Nepal, Tanzania, the Dominican Republic, and the Amazon region, our teams have consistently integrated HCF components into broader community WASH programming, ensuring that health facilities serving vulnerable populations have access to safe water, sanitation, and hygiene. (See more: https://www.wtw.org/regional-programs)

Future Plans

Wine To Water is committed to making WASH in healthcare facilities a dedicated and scalable program pillar going forward. This includes HCF and community investments in water access, filtration - particularly through our DROP membrane filter, sanitation, and WASH education.

We are currently advancing a flagship HCF WASH model project in Nepal, with active plans for expansion across our other country programs.

Nepal — Punya Devi Health Post, Kailash Rural Municipality, Makwanpur:
Wine To Water Nepal has developed a comprehensive WASH improvement plan for Punya Devi Health Post in Kailash Rural Municipality, Makwanpur, a facility serving some of the most marginalized and indigenous communities in the region with limited access to alternative healthcare. The current WASH situation reflects critical provincial gaps: only 19.2% of facilities meet basic sanitation standards, 17.4% meet healthcare waste management standards, and just 4.9% have trained cleaning staff and formal protocols. Nearly two million people in Nepal access healthcare facilities without basic water and sanitation.

The project addresses all six WASH domains: water supply, sanitation, hand hygiene, healthcare waste management, environmental cleaning, and management; targeting approximately 5,400 patients annually and all facility staff. **A key feature is the co-funding and ownership commitment from the Local government, ensuring long-term**

sustainability. Upon completion, Wine To Water plans to replicate this model across all health posts in the municipality. The project is planned for FY 2026/27, pending funding.

Uganda — Holy Family Virika Hospital, Fort Portal:
Wine To Water recently completed a critical sanitation upgrade at Holy Family Virika Hospital in Fort Portal, Uganda, where staff, patients, visitors, and students shared severely inadequate open pit latrines that were full and out of use. The new design includes gender-separated, disability-accessible, and menstrual hygiene-friendly latrine blocks serving 1,250+ outpatients, with quarterly WASH training sessions reaching an additional 500 beneficiaries every three months. A Water and Sanitation User Committee (WSUC) led by hospital administration will oversee management, maintenance, and monitoring, ensuring long-term sustainability of the new WASH infrastructure.

Kenya & Tanzania — Kenya Conference of Catholic Bishops
Wine To Water is currently working with the Kenya Conference of Catholic Bishops (KCCB) to identify and develop a pilot program with the WTW DROP filter that can provide point of use clean water filtration at healthcare facilities and/or for HCF patients. In Tanzania, similar utilization of the DROP membrane filter is in development in Dodoma with the Anglican Diocese of Central Tanganyika who have documented that despite having clean water access through community boreholes, contamination of water at the household level is high causing continued water borne diseases requiring treatment at HCFs.

Website and Point of Contact

Website: www.wtw.org

Focal Persons:

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The Importance of WASH in Healthcare Facilities

“Water at home is not enough. We believe everyone deserves the right to clean water where they live, go to school, give birth, and seek medical care.“

“Wine To Water is committed to preserving life and dignity through the power of clean water -including water at home, in school, and in healthcare facilities.”

— Tina M. Owen, VP Global Partnerships, Africa Regional Director

World Relief

Past and Current Engagement

World Relief has been providing WASH assistance to HCFs over several years and is currently supporting HCFs in five countries in Africa and the Caribbean. This support is offered in response to assessed needs – mainly within emergency response scenarios – and according to availability of donor funding. Activities range from the provision of safe water supplies and latrine construction (or rehabilitation) accompanied by the provision of handwashing stations, and in some cases the provision of medical waste management facilities, and bathing shelters. World Relief's work in WASH hardware is also supported by WASH sensitization and behavior change communication for hygiene promotion.

Future Plans

World Relief remains committed to working in fragile contexts around the world, with populations affected by displacement caused by violence, persecution and conflict. In these contexts, World Relief supports WASH in healthcare facilities primarily in partnership with local Health Authorities, with a focus on capacity strengthening to improve infection prevention and control, patient safety, and overall quality of care. Recognizing that emergency responses are often time-bound, we prioritize training to support long-term operation and maintenance of WASH infrastructure and services. Looking ahead, World Relief plans to enhance the scope and consistency of training for health care facility staff to strengthen sustainability and improve longer-term WASH outcomes in health care facilities. We plan to continue our over 30-year history of community sensitization and behavior change communication to support accurate and consistent use of WASH facilities and use of clean water to support health outcomes.

Website and Point of Contact

www.worldrelief.org

WASH Focal point: Colin McCubbin, cmccubbin@wr.org

The Importance of WASH in Healthcare Facilities

"WASH is not an add-on in healthcare facilities; it is essential for infection prevention and control and for delivering safe, dignified care. That's why World Relief partners locally to strengthen sustainable, locally led WASH services that protect both health workers and their patients."

— Lanre Williams-Ayedun, SVP, International Programs

World Vision

Past and Current Engagement

WASH in healthcare facilities is a key priority in World Vision's global WASH programme, implemented across more than 40 countries worldwide, with many contexts using the WHO/UNICEF WASHFIT framework as a core methodology. Our WASH in HCFs work goes beyond infrastructure to include:

- Handwashing with soap at critical points of patient care
- Health worker training in infection prevention and control (IPC)
- Waste management training and segregated disposal systems
- Gender-separated latrine stalls accessible to staff, patients, and people with disabilities
- Environmental cleaning protocols and staff training
- Higher WASH standards in delivery rooms, including training on the WHO Six Cleans for safe childbirth

Between 2016 and 2025, World Vision reached:

- 5,648 healthcare facilities with basic water access
- 2,868 healthcare facilities with basic sanitation access
- 10,520 healthcare facilities with basic hygiene access

World Vision's WASH work supports our network of nearly 200,000 community health workers, who help extend healthcare access and hygiene promotion into communities. Our Citizen Voice and Action (CVA) model empowers communities to advocate with local governments for sustained WASH investment in HCFs.

Since 2022, starting in Ethiopia and Sierra Leone, World Vision has also invested in expanding electricity to healthcare facilities, establishing microgrids to support not only water supply needs, but institutional power needs, recognizing the essential link between energy and quality WASH services.

Future Plans

World Vision maintains its commitment to supporting healthcare facilities in our operational areas – which are largely rural – to have access to clean water at points of care; dignified, accessible sanitation; and handwashing facilities equipped with soap.

In World Vision's new WASH Business Plan (2026-2030), we plan to reach:

- 3,038 healthcare facilities with basic water access
- 2,727 healthcare facilities with basic sanitation access
- 3,398 healthcare facilities with basic hygiene access

We are also continuing to strengthen global and national alignment through technical guidance and evidence-building, including harmonized standards and practical tools to support teams and partners deliver quality, inclusive, and sustainable WASH in HCF programming.

We remain committed to integrated approaches, including strengthening the link between the HCF and community, through strengthening community health workers and community-based approaches such as Nurturing Care Groups. We are also continuing to expand our water and energy work to strengthen the healthcare system.

For more information

WASH in HCF Capacity Statement: WASH in Healthcare Facilities Capacity Statement

WV's Business Plan Innovation Hub: Click Water+Energy

Video about Water+Energy

Website and Point of Contact

Website: wvi.org

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The Importance of WASH in Healthcare Facilities

"WASH services in healthcare facilities play a critical role in preventing infections, improving the quality of care, promoting safe childbirth, and saving lives. World Vision is uniquely positioned to address this gap globally, combining strong partnerships with community organizations, faith leaders and governments; deep expertise in both health and WASH; an extensive global footprint, and a long-term commitment to the communities we serve."

— Parvin Ngala, Global Director, Water, Sanitation and Hygiene (WASH), World Vision International