

Editorial

WASH STRATEGY TO IMPROVE PRACTICES OF WATER AND SANITATION IN HEALTH CARE SETTINGS.

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According to UNICEF, one out of every four health institutions worldwide does not have access to clean water.¹ The first comprehensive global assessment of water, sanitation, and hygiene (WASH) in health care institutions was conducted by the World Health Organization.² Access to safe drinking water and sanitation is a fundamental human right as well as a human requirement. Sustainable Development Goal 6 (Water and Sanitation) emphasizes the need for long-term access to safe drinking water and sanitation.³ The World Health Organization has developed a water sanitation and hygiene plan that is intended to assist countries in defining national standards, enacting laws, and developing effective surveillance systems to achieve Sustainable Development Goal 6.² The most important components of WASH are the reduction of open defecation and the improvement of water quality. The implementation of WASH in schools and health institutions is critical because diarrhea and other health problems lead to absenteeism from school and, in certain cases, dropouts from high school or college. In health care institutions, hand washing and disinfection can help reduce the spread of infectious diseases and hospital-acquired ailments.¹

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WASH strategy has the potential to inhibit the development of antibiotic resistance. WASH is critical in catastrophe situations because disasters increase the likelihood of diarrheal infections such as typhoid. Preventing them becomes a critical intervention in the preservation of human life.

WASH is more than a requirement for good health; it also contributes to the overall well-being of individuals, their families, and entire communities when it comes to clean water and sanitation. Along with contributing to health concerns such as diarrhea, contaminated water pollutes ground and surface waters that are utilized for drinking, irrigation, bathing, and other domestic duties as well as for agricultural and industrial purposes. The upshot of this is a great deal of stress on the communities involved. Arsenic, fluoride, and nitrate poisoning of water continue to be a health danger, as does the presence of other chemicals in the water. If emerging contaminants such as micropollutants, medications, and microplastics in drinking water are not as damaging to human health as germs such as Legionella, public attention and scarce resources could be diverted away from more significant dangers. Trachoma, soil-transmitted helminths, and schistosomiasis are all preventable diseases that can be avoided with proper handwashing.⁴ The mortality rate for newborns and mothers in Pakistan is relatively high. One of the most significant contributors is sepsis. Many healthcare facilities in Pakistan do not adhere to WASH

standards. According to a comprehensive review, water, sanitation, and hygiene (WASH) interventions reduce the risk of diarrhea in children aged 0–5 years by 27% to 53%.⁵ The implementation of WASH programs in Pakistan has the potential to lower maternal and child death rates. During the COVID-19 pandemic, WASH efforts have made a significant contribution to the prevention of disease spread. The use of appropriate handwashing practices, in addition to social isolation and the wearing of a mask, will assist in reducing the transmission of the virus. Implementing WASH methods to prevent communicable diseases is critical, and health care providers play a critical role in this effort.⁶ Through the development of a WASH strategic plan based on an overarching framework, it is possible to clarify the priorities of the WASH Programme, including new and developing functions. As a global framework, it has the flexibility to be customized to the individual needs and conditions of many different regions and nations. In health-care settings, the initial stage is to teach team members, who then travel to the health-care facility where WASH will be implemented. They then proceed to evaluate potential hazards associated with water and sanitation procedures in a healthcare context as a further step. Interviewing at a health center is another method of learning more about the practices of that particular health center. Risk mitigation recommendations are offered in the following phase. The next stage will be to put the plans into effect as soon as possible. Improved water and sanitation methods are the product of ongoing research and evaluation. Because of this, it is a risk-based strategy that focuses on high-risk areas while also assessing progress regularly to raise the overall standard of living.²

Maternal mortality, newborn mortality, and hospital-acquired infections are all higher in Pakistan than in the rest of the world. Water, sanitation, and hygiene (WASH) is an

approach that helps prevent the spread of illnesses in hospital settings. The problem of hospital-acquired illnesses that are resistant to antibiotics is a worldwide public health concern. To improve the health of communities, it is desirable to prevent and reduce high-risk activities in healthcare settings. A reduction in hospital acquired infections in tertiary care hospital of Pakistan was observed when health care workers followed WASH practices.⁷

REFERENCES

1. 1 In 4 Health Care Facilities Lacks Basic Water Services. [Internet]. UNICEF, WHO; [2019, June 18]. Available from: <https://www.unicef.org/pakistan/press-releases/1-4-health-care-facilities-lacks-basic-water-services-unicef-who>.
2. WHO WASH Strategy 2018-2025. [Internet]. WHO. [2019, March 14]. Available from: <https://www.who.int/publications/i/item/WHO-CED-PHE-WSH-18.03>.
3. Sadoff CW, Borgomeo E, Uhlenbrook S. Rethinking water for SDG 6. *Nature Sustainability*. 2020 May;3(5):346-7. doi: 10.1038/s41893-020-0530-9
4. Bazzano AN, Oberhelman RA, Potts KS, Gordon A, Var C. Environmental factors and WASH practices in the perinatal period in Cambodia: implications for newborn health. *IJERPH*. 2015 Mar;12(3):2392-410. doi: 10.3390/ijerph120302392.
5. Darvesh N, Das JK, Vaivada T, Gaffey MF, Rasanathan K, Bhutta ZA. Water, sanitation and hygiene interventions for acute childhood diarrhea: a systematic review to provide estimates for the Lives Saved Tool. *BMC Public Health*. 2017 Nov 7;17(4):776-781. doi: 10.1186/s12889-017-4746-1
6. Mankar D, ILAME T. Importance of WASH in COVID-19 Pandemic. *IJCP*. 2021 Jul 22;32(2):108-12.
7. Roshan R, Feroz AS, Rafique Z, Virani N. Rigorous hand hygiene practices among health care workers reduce hospital-associated infections during the COVID-19 pandemic. *Journal of primary care & community health*. 2020 Jul;11:2150132720943331.