

Maternal and Child Survival Program

WATER, SANITATION & HYGIENE

Handwashing is the single most cost-effective intervention to prevent pneumonia and diarrhea in children, and reduces infections in mothers and children during pregnancy and childbirth. Both A Promise Renewed and the Integrated Global Action Plan for the Prevention and Control for Pneumonia and Diarrhea (GAPPD) list handwashing and other hygiene behaviors as core interventions for protecting children from these leading causes of death.

Adequate WASH conditions and practices are a cornerstone to providing high-quality health care services. In low- and middle-income countries, 50% of health care facilities (HCFs) lack piped water, 33% lack improved sanitation, 39% lack handwashing soap, 39% lack adequate infectious waste disposal, and 73% lack sterilization equipment. In nationally representative data from six countries, only 2% of HCFs provide all water, sanitation, hygiene and waste management services. As a result, an estimated 16% of patients acquire a health care associated infection during their stay at a health facility. Sepsis and other infections account for a growing proportion of maternal (11%) and neonatal deaths (22%). With the growing number of deliveries taking place in HCFs, WASH conditions and practices within facilities must be improved in order to achieve national and global Sustainable Development Goal targets.

KEY FACTS

- Every year, there are nearly 1.7 billion cases of diarrheal disease, causing an estimated 525,000 child deaths (WHO)
- An estimated 10-15% of maternal deaths are due to infections linked to unhygienic conditions during labor and poor hygiene practices during the six week postpartum period (WHO/PMINCH)
- Use of clean cord care kits during umbilical cord cutting can result in a twofold reduction in the odds of cord site infections (WHO/PMINCH)

USAID's flagship Maternal and Child Survival Program (MCSP) WASH activities work across the continuum of care and at all levels of the health system through nontraditional messaging models that reflect country-specific behaviors and social norms. The Program also employs counseling, demonstration and practice at all stages of the maternal, newborn and child health continuum of care. Examples include: instructions on the construction of handwashing stations, such as tippy taps; development of handwashing corners; and household-level demonstrations of water treatment, safe water storage, and treatment methods.



Photo: Preceptor, Enefa Anani is washing her hands before a procedure at the HoHoe Midwifery Training School in Ghana (Karen Kasmauski/MCSP)

Through the Clean Clinic Approach, MCSP

is working to strengthen management systems to improve WASH conditions and practices in HCFs and provide high-quality care to patients.

ABOUT MCSP

The Maternal and Child Survival Program (MCSP) is a global, USAID Cooperative Agreement to introduce and support highimpact health interventions with a focus on 25 high-priority countries with the ultimate goal of ending preventable child and maternal deaths within a generation. The Program is focused on ensuring that all women, newborns and children most in need have equitable access to quality health care services to save lives.

MCSP supports programming in maternal, newborn and child health, immunization, family planning and reproductive health, nutrition, health systems strengthening, water/sanitation/hygiene, malaria, prevention of mother-to-child transmission of HIV, and pediatric HIV care and treatment.

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