

# Equitable WASH services in the pan-European region: insights on conditions in households, schools and health-care facilities

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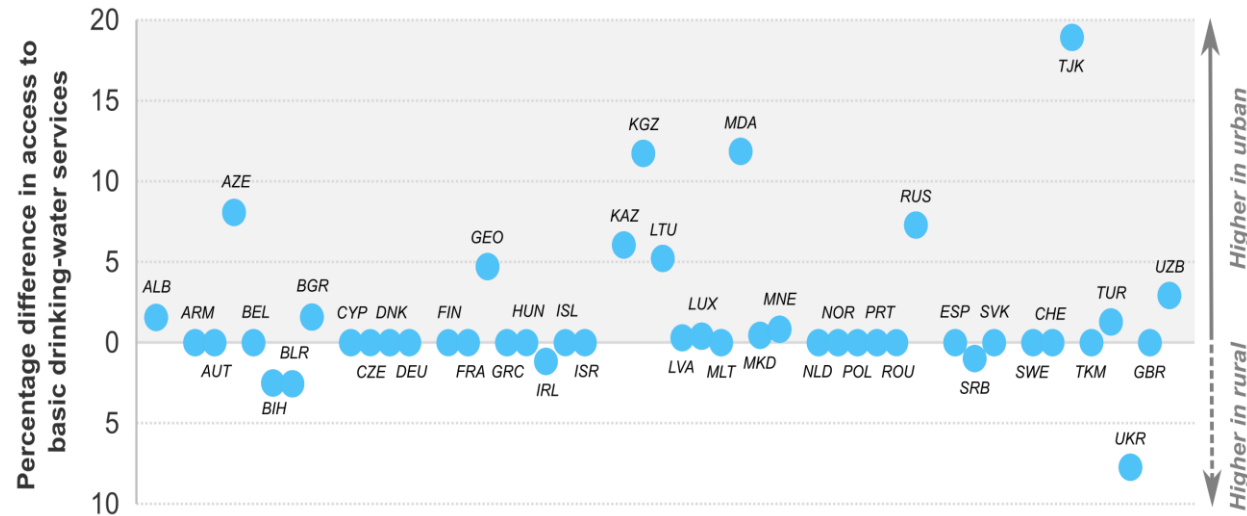


European Region

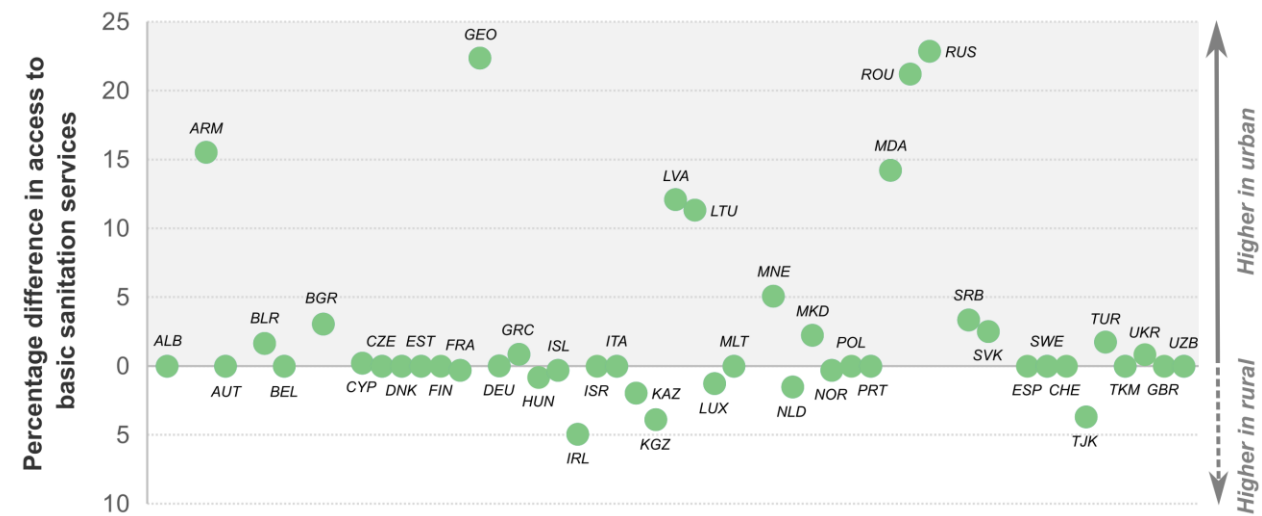


# Inequality gaps for WASH services in the WHO European Region

Inequalities in access to WASH services in countries exist in three key dimensions: geographical, economic and social



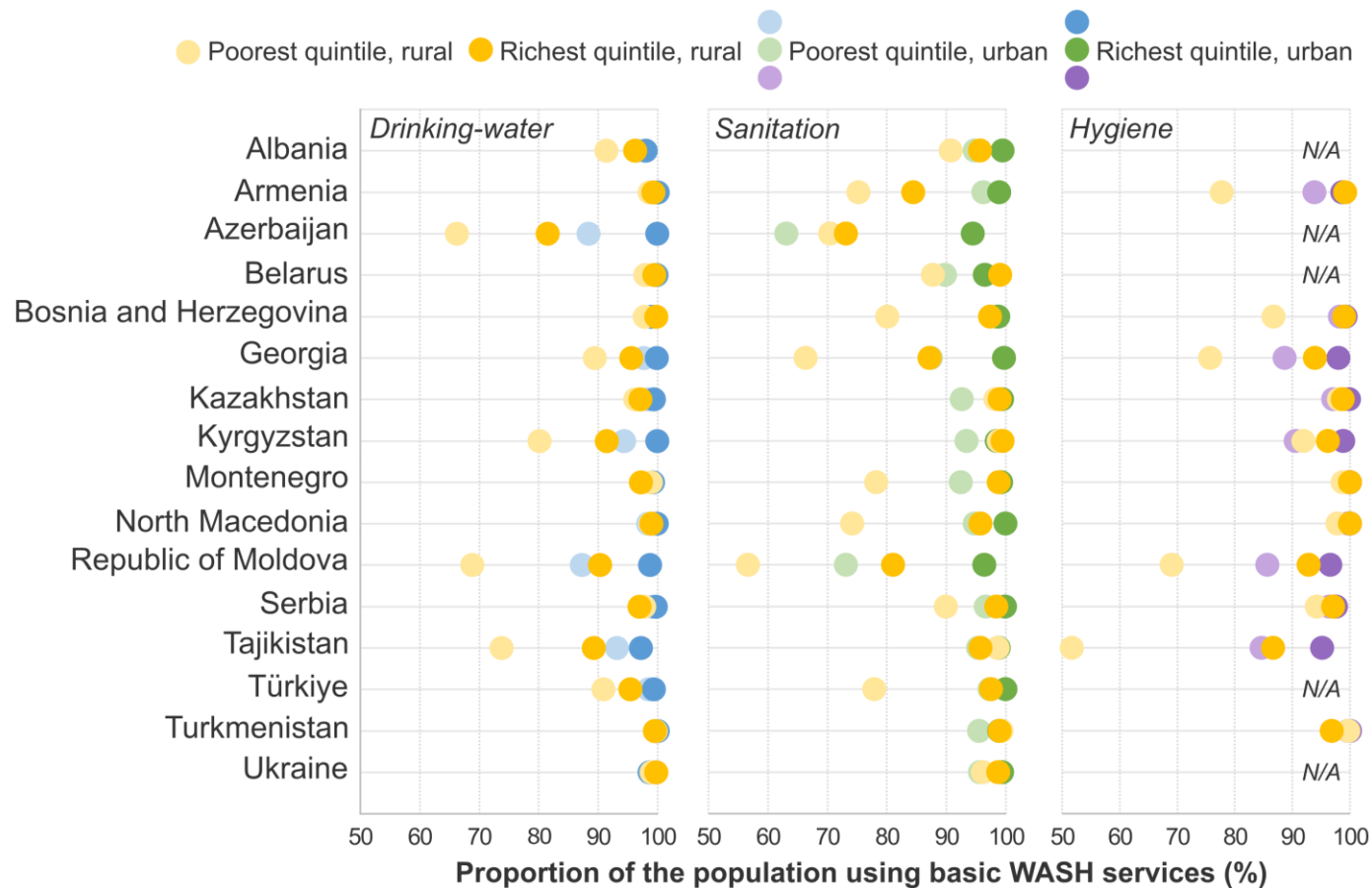
Basic drinking-water services



Basic sanitation services

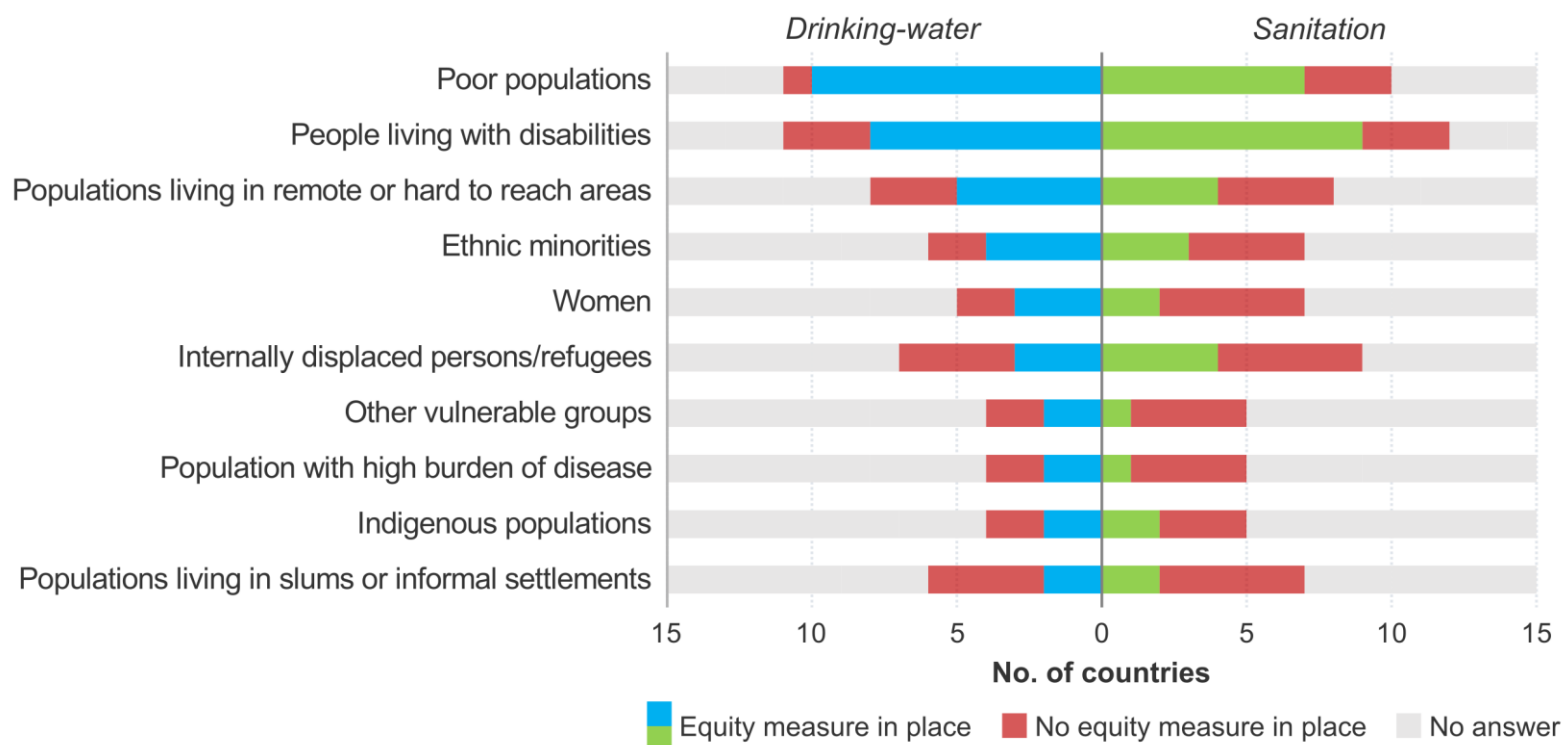
# Integrated analysis of geographical and economic disparities

Poorest people – in the majority of cases in rural areas – are always the most disadvantaged



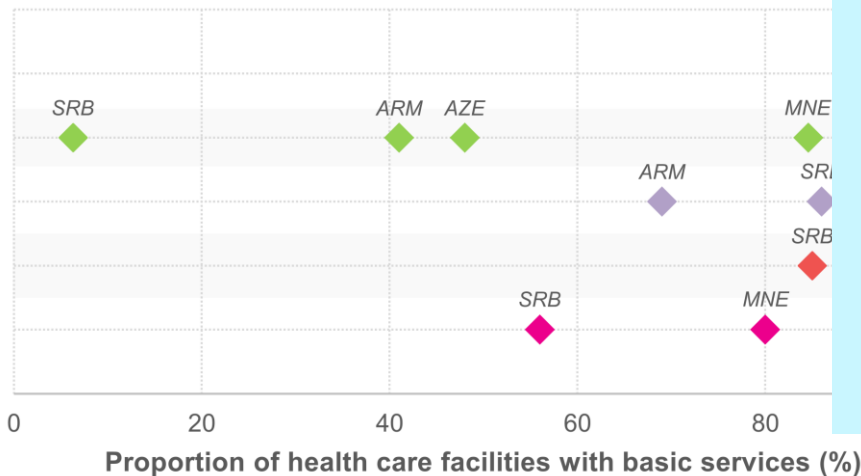
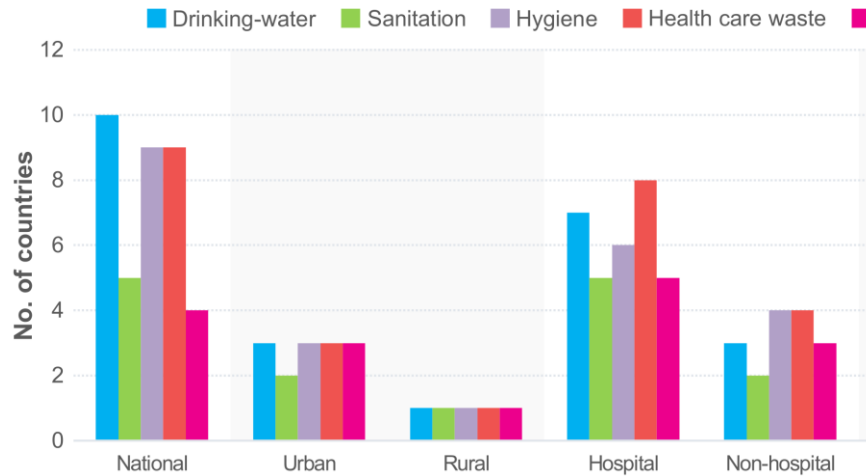
# Global Analysis and Assessment of Sanitation and Drinking-Water

Systematic national WASH sector analysis helps to reveal weaknesses and gaps that require attention and improvement

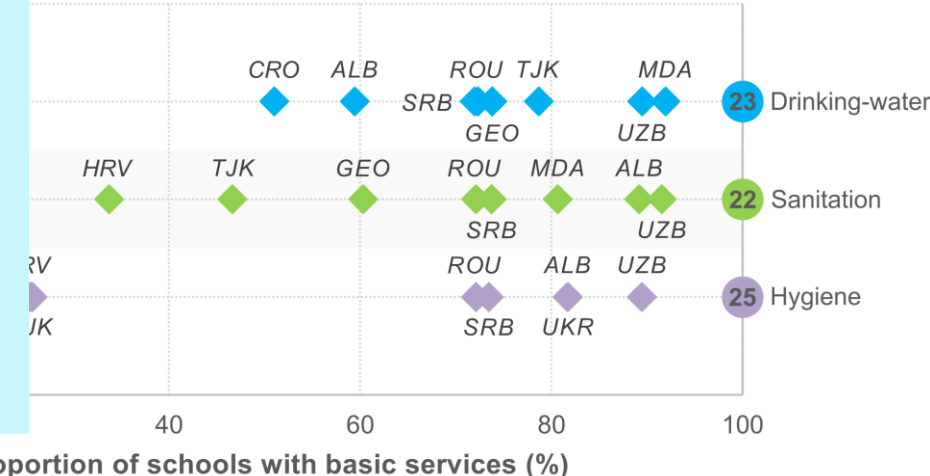
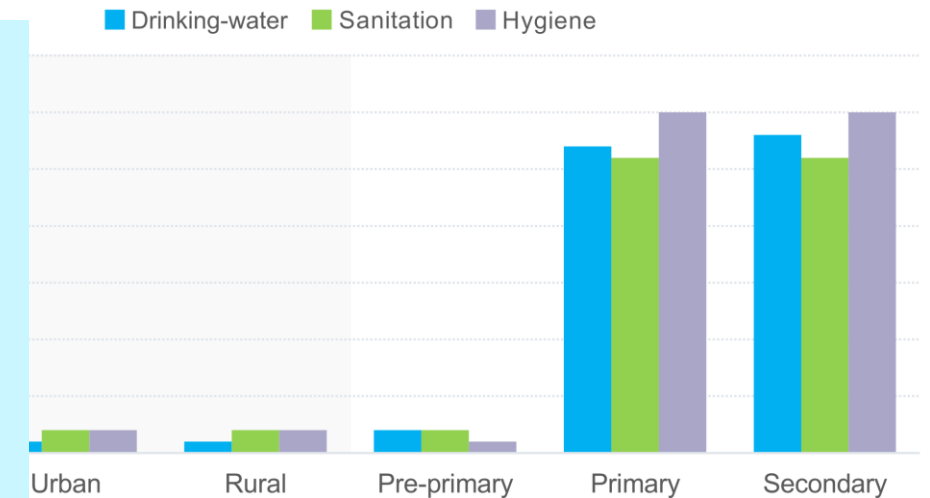


# WHO/UNICEF JMP figures for WASH in institutional settings (2020)

## Health care settings



## Educational settings



Want to know more?  
Watch out for our upcoming publication.

World Health Organization  
European Region

**DRINKING-WATER, SANITATION AND HYGIENE IN THE WHO EUROPEAN REGION: HIGHLIGHTS AND PROGRESS TOWARDS ACHIEVING SUSTAINABLE DEVELOPMENT GOAL 6**

# Closer look at health care settings – Basic WASH provisions

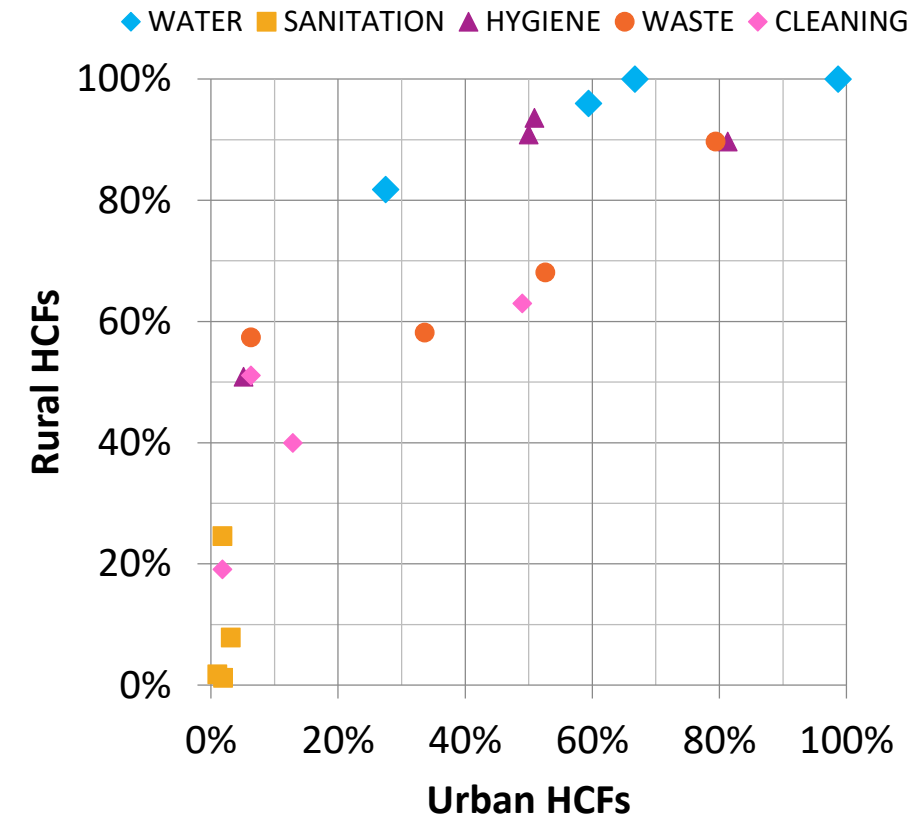
*Insights from the upcoming regional report (to be launched in November 2020)*

- Though rarely available, segregated data are key to identify disparities and plan informed budgeted action
- Disparities in WASH provisions are observed across rural-urban settings, administrative regions and health care levels
- Primary and rural facilities in all countries face the most challenges
- Sanitation, health care waste management and environmental cleaning are WASH dimensions where higher disparities are observed
- Individual provisions for basic sanitation with lower coverage are: means for menstrual hygiene and accessibility for patients with impaired mobility



European Region

## Basic provisions for WASH services in health care facilities (HCFs)



Source: Unpublished data from WHO-supported assessments in Georgia, Montenegro, Serbia, Tajikistan

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# Legal provisions for enabling equitable WASH in health care facilities

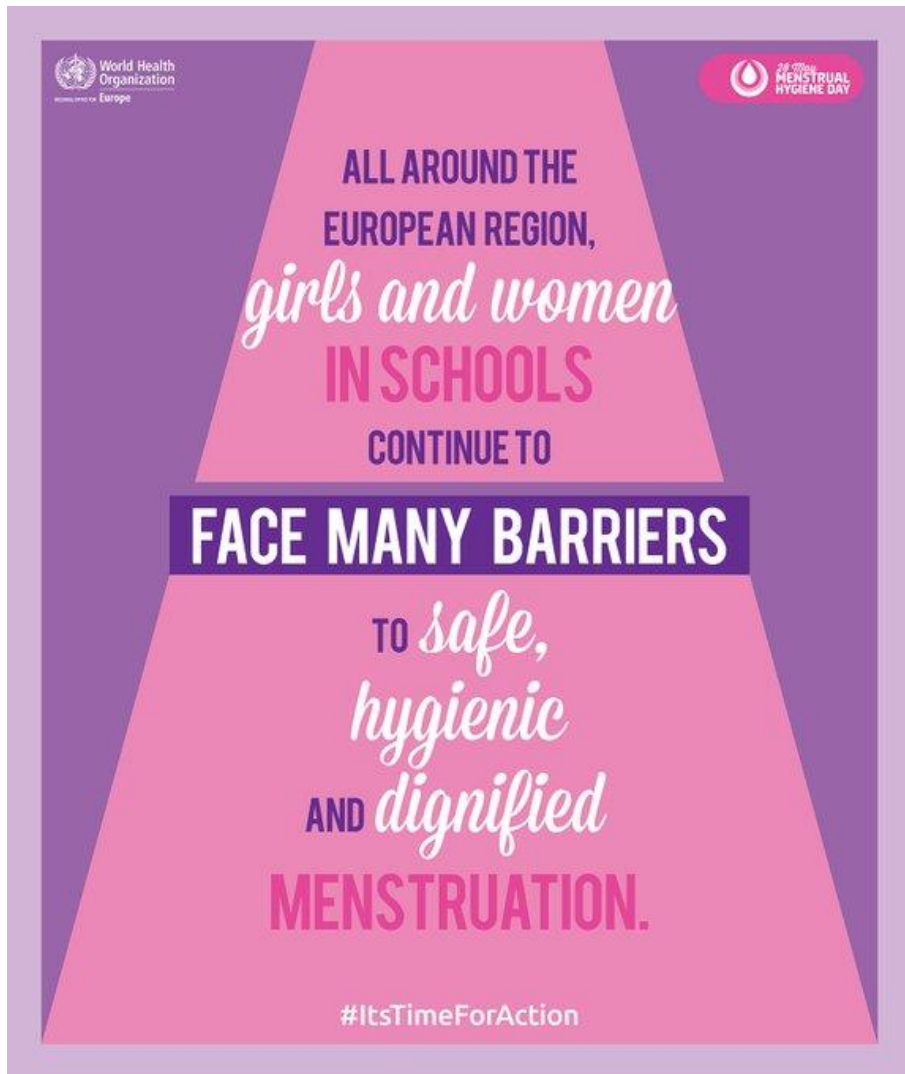
*Insights from the upcoming regional report (to be launched in November 2020)*

- WHO-supported policy analyses in 5 countries of the Region revealed that:
  - Essential provisions for menstrual hygiene management in health care facilities are not addressed in the legal framework at the national level
  - The human rights to water and sanitation are not yet explicitly embedded in the policy framework of all countries
  - In the considered countries, national policies and regulations include provisions for inclusiveness of WASH services but main gaps were found for ensuring accessibility for people with limited mobility, addressed only in two countries.



# Equitable WASH provisions in schools

*Menstrual hygiene – an emerging challenge affecting equitable access for girls to quality care and education*



## Germany



(from 16 to 24 years old)  
experienced difficulty with  
affording menstrual  
hygiene products

## North Macedonia



Girls & women absent from school  
& work for 4 to 5 days/month when  
they have a their period

## UK



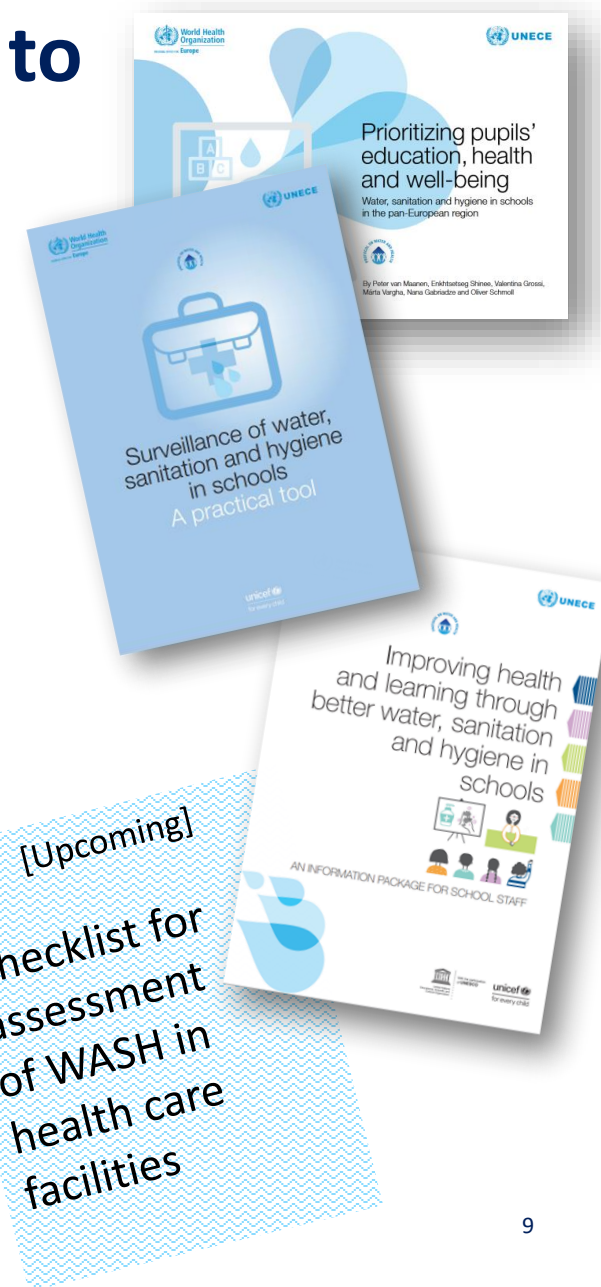
experienced difficulty with  
affording menstrual  
hygiene products

**Insufficient data on  
other countries and  
on toilet accessibility!**



# Closing inequality gaps and making universal access to WASH services a reality for all

- **We need to accelerate efforts in the Region through:**
  - Assessing the situation at the national, local and facility level
  - Building enabling governance mechanisms:
    - Strengthen the legal framework through policies and regulations that recognise the human rights to water and sanitation and consider provisions for equitable WASH services
    - Ensure human resources, capacity building and financial resources
    - Strengthen surveillance
  - Implementing informed and context specific action at the national, local and facility level



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# Thank you

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