Deliver Life project: Improving access to, and use of, sustainable WASH services in communities and health facilities for increased Maternal and Neonatal Health in Malawi

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Outline of Presentation

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Background

- Malawi attained MDG number 4 on reducing child mortality. This notwithstanding, Malawi’s Maternal and Neonatal Health (MNH) indicators remain worrisome.
- Sepsis (preventable infections) accounts for 17% of maternal deaths and 20% of neonatal deaths.
- WaterAid Malawi through its partners is implementing a 3yrs project on WASH and MNH.
- It’s targeting 16HCFs & surrounding villages/communities in 3 Districts.

| MMR: 460/100 000 |
| PMR: 40, |
| NMR: 23/1000 |
677 HFCs in Malawi

WASH Coverage:

- 79% sanitation, 87% safe water supply (with 30% non-functionality rate).
- 43% have running water in the facilities (with only 25% having running water in maternity ward).
- 72% have some waste disposal facilities (though inadequate or of substandard....placenta pits and incinerators).
Theory of Change
DFID UKAM - Malawi Deliver Life Project

Project Delivery Approach/ Interventions

- Modelling service provision at community and health care facility level
- Establishing a community of practice on WASH and MNH
- Strengthening district level coordination, planning and performance monitoring on WASH and MNH
- Policy context and decision making on resource allocation
- Citizens mobilisation and empowerment on WASH and health rights and engagement implementation, performance monitoring and in decision making process
Interventions
Impact
Contribute towards sustainable water and sanitation and improved health for marginalised communities in Malawi.

Outcomes
- Equitable access to sustainable WASH services for the marginalized (mothers & newborns)
- Increased Citizens engagement with & in decision making coordination and investment for WASH in HCF

Outputs
- Communities members including mothers & newborns have access to sustainable WASH services at community & HCF
- Citizens are mobilized & empowered to inform decision making on their WASH needs
- WASH sector has capacity & coordinated systems to plan, monitor & sustain services
- Stakeholders prioritize and improve WASH service provision
Outcomes

Key outcomes

• improved & equitable access to sustainable WASH for 121,694 marginalised people including mothers and new-borns (Service provision)

• Safe & clean environments for mothers & new-borns in HCFs & community (Service Provision)

• Citizens engagement in decision making (Empowerment)

• Coordinated sector that prioritizes & adequately invests in WASH for HCFs (Strengthened capacity)
Strengths/ Successes

• Profiled WASH issues in the health sector beyond the preventive health department (SRHD, Quality Management, Nursing)

• Engagement with politicians for increased investments in WASH at HCFs (MPs & Councillors).

• Modelling WASH service provision in Health Care settings for other implementers

• Motivation of health care workers in hard to reach areas/HCFs
Challenges

- Silo working arrangement among different departments in health sector
- Conflicting decision making within the local government due to partial devolution.
- Low staffing levels in HCFs
- Inconsistent and conflicting data for WASH in HCFs

Lessons

- It’s critical to involve key stakeholders at all levels & stages of the project cycle
- Integration as a way of working needs continuous enforcement and follow up
- Need to strategies and agree with stakeholders for sustainability of interventions at project designing stage (O & M for WASH infrastructure)
Opportunities

• Governments commitment to improving quality of care
• Growing interest among WASH actors to focus on WASH in HCFs.
• Commitment of Malawi Government to the SDGs a basis for advocacy & influencing work.
• Evidence and experiences from this project to inform WASH programming for HCFs

Threats

• Low & unsustainable financing for preventive health
• Inadequate understanding of WASH impacts on MNH and health in general
• Unavailability and misrepresentation of WASH data for HCFs
Next steps & Recommendations

• WaterAid intends to use the model being delivered at the HCF level to influence service delivery practices among key players in the WASH and MNH sectors
• Generation and sharing of compelling evidence on what works and what does not, to influencing scale-up of WASH in HCFs
• Working and forming new partnerships for delivery of WASH services for all
• Use research findings from a study it has conducted on MNH Integration to advocate for
  – a dedicated action plan for improving WASH in HCFs that takes into accounts integration between the WASH and health sectors units on MNH
  – clarity on workable institutional leadership for sanitation and hygiene (policy commitments)
  – an inbuilt comprehensive strategy for ensuring sustainability of interventions by government
References / contact


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