

**Stakeholder Directory**  
**WASH in Healthcare Facilities – Uganda**  
**August 2019**

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**With significant interest building in Uganda, Global Water 2020 visited in August 2019 to better understand the neglected crisis of water, sanitation and hygiene (WASH) in healthcare facilities (HCF). The objective of this directory is to recognize the in-country expertise and activities of different stakeholders to help facilitate cross-sectoral coordination and encourage partnerships and collaboration.**

Around the world, healthcare workers are compromised in their ability to provide safe, quality care because they lack the fundamental essentials of water, sanitation, hygiene, and healthcare waste management. It's one of the most serious issues facing health systems in low- and middle-income countries, and it is one of the most solvable.

WHO and UNICEF issued the [first global baseline report](#) in 2019, which analyzed data from over 560,000 HCFs in 125 countries and found:

- 2 billion people visit HCFs that lack basic water services
- 1.5 billion people visit HCFs without sanitation facilities
- 45% of HCFs in Least Developed Countries (LDCs) lacked basic water services
- 21% of HCFs in LDCs have no sanitation services
- 49% of HCFs in sub-Saharan Africa lacked basic water services
- 64% of HCFs in Eastern and Southeastern Asia lacked basic hygiene services
- Every year in LDCs, 17 million women give birth in facilities with inadequate WASH.

In response, WHO, UNICEF, the UN Secretary General, alongside private sector partners, have greatly raised awareness, and now momentum toward solving this global health issue is rapidly building:

- **March 2018:** UN Secretary General issued a global Call to Action to ensure sustainable WASH in all HCFs.
- **April 2019:** JMP released the first baseline report on WASH in HCFs. WHO and UNICEF published a complementary document outlining the practical steps countries should take, in response to the UNSG Call to Action.
- **May 2019:** Member States at the 72<sup>nd</sup> World Health Assembly unanimously passed a [resolution](#) calling for action on WASH in HCF.
- **June 2019:** The Global Health Council and Global Water 2020 hosted a WASH in HCF [Stakeholder Commitments Gathering](#) in Washington DC, where more than [80 commitments](#) were announced to address advocacy, implementation, technical guidance, research, and funding. Offering a new platform for global collaboration, these commitments target 50 countries, with **Uganda** garnering the largest number of commitments (14 and growing).
- **September 2019:** WHO and UNICEF organized a meeting of national governments, UN officials, and external partners to generate pathways to 100% WASH coverage in HCFs, hosted by the government of Zambia.

This document was compiled from interviews with stakeholders. Below are summaries of the work stakeholders in Uganda are undertaking, along with contact information, geographic focus, and current partnerships as of October 2019.

For more information on WASH in HCF, please reference WHO and UNICEF's site [WASHinHCF.org](http://WASHinHCF.org), a growing repository of data, stories, tools, and other resources. We encourage stakeholders to share their experiences through reports and case studies -- there is currently only a handful of resources from Uganda.

### ACRONYM LIST

ABHR	Alcohol-Based Hand Rub
CDC	Centers for Disease Control and Prevention
CLTS	Community Led Total Sanitation
CSO	Civil Society Organization
CVA	Citizens Voice Action
eMi	Engineering Ministries International
EWB	Engineers Without Borders
FBO	Faith Based Organization
GE	General Electric
HCIII	Health Center III
HCIV	Health Center IV
HCF	Healthcare Facility
HMIS	Health Management Information System
IDI	Infectious Diseases Institute
IPC	Infection Prevention and Control
JMP	Joint Monitoring Programme
KCCA	Kampala Capital City Authority
MOES	Ministry of Education and Sports
MOWE	Ministry of Water and Environment
MOH	Ministry of Health
NGO	Non-Governmental Organization
O&M	Operation & Maintenance
RHITES	Regional Health Intervention to Enhance Services
RMNCH	Reproductive, Maternal, Newborn and Child Health
SHRH	Sexual and Reproductive Health Rights
UCMB	Uganda Catholic Medical Bureau
UPMB	Uganda Protestant Medical Bureau
UEC	Uganda Episcopal Conference
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development
UWASNET	Uganda Water and Sanitation NGO Network
V4A	Voices for Accountability
WASH	Water, Sanitation and Hygiene
WAU	WaterAid Uganda
WFP	Water for People
WHO	World Health Organization
WRA	White Ribbon Alliance
WV	World Vision

## Uganda WASH in HCF Stakeholder Contacts

Stakeholder	Focal Point	Contact Information	Scope of Work	Geographic Focus
4africa	Michael Hornshaw	michael@4africa.com	Implementation, Technical Support	Yumbe
Amref Health Africa	Hajra Mukasa	hajra.mukasa@amref.org	Advocacy, Implementation	Amuru
Centers for Disease Control and Prevention (CDC)*	Margaret Person Matt Lozier	lsf6@cdc.gov wfu2@cdc.gov	Technical Support, Research & Learning	Kamwenge, Kabarole
Center for Global Safe WASH at Emory University*	Habib Yakubu	habib.yakubu@emory.edu	Technical Support, Research & Learning	Southwestern Uganda, Kampala
Conrad N. Hilton Foundation*			Investment & Funding	Kamwenge, Kabarole, Mbarara
Engineering Ministries International (eMi)*	Matt Lammers	matt.lammers@emiworld.org	Implementation, Technical Support	Country-wide
Engineers Without Borders (EWB)*	Zoe Pacciani	zoe.pacciani@ewb-usa.org	Implementation, Technical Support,	Country-wide
Infectious Diseases Institute (IDI), Makerere University	Dr. Mohammed LaMorde	mlamorde@idi.co.ug	Implementation, Technical Support, Research & Learning	Country-wide, including Kampala and Kabarole
IRC*	Martin Watsisi	watsisi@ircwash.org	Advocacy, Implementation, Technical Support	Kabarole
Kampala Capital City Authority (KCCA)	Dr. Allan Nkurunziza	ankurunziza@kcca.go.ug	Advocacy, Implementation, Technical Support, Research & Learning	Kampala
Makerere University, School of Public Health	Dr. Richard Mugambe	rmugambe@musph.ac.ug	Advocacy, Technical Support, Research & Learning	Country-wide, including Southwest Uganda and Kampala
Ministry of Health	Julian Kyomuhangi	julianakyomuha@yahoo.com	Implementation, Technical Support	Country-wide
OneWorld Health	Barak Bruerd	barak@oneworldhealth.com	Implementation, Technical Support	Masindi
Stanford University	Ashley Styczynski Lily Horng	astyczyn@stanford.edu lhorng@stanford.edu	Technical Support, Research & Learning	Kamwenge, Mbarara

## Uganda WASH in HCF Stakeholder Contacts

Uganda Catholic Medical Bureau (UCMB)*	Dr. Sam Orach	samorach@ucmb.co.ug	Implementation, Technical Support	Tororo
Uganda Protestant Medical Bureau (UPMB)	James Mwesigwa	jmwesigwa@upmb.co.ug	Implementation, Technical Support	Southwest Uganda
Uganda Water and Sanitation NGO Network (UWASNET)	Yunia Yuiga Musaazi	ymusaazi@uwasnet.org	Advocacy, Partnerships	Uganda
UNICEF	Shivanarain Singh	ssingh@unicef.org	Technical Support, Implementation	Northern Uganda
USAID*	Dr. Alfred Boyo	aboyo@usaid.gov	Advocacy, Technical Support	Country-wide
WaterAid Uganda (WAU)*	Jane Mselle. Sembuche	janesembuche@wateraid.org	Advocacy, Research & Learning	Country-wide, including Kampala
Water for People*	Cate Nimanya	cnimanya@waterforpeople.org	Advocacy, Implementation, Technical Support	Kamwenge
White Ribbon Alliance (WRA) Uganda*	Faridah Luyiga	fluyiga@whiteribbonalliance.org	Advocacy	Country-wide
World Health Organization (WHO)	Collins Mwesigye	mwesigyec@who.int	Advocacy, Technical Support	Country-wide
World Vision*	Fiona Aber	fiona_aber@wvi.org	Implementation, Technical Support	Hoima

\*made commitment to WASH in Healthcare Facilities at the June 2019 Commitments Gathering

## 4AFRICA

**CONTACT:** Michael Hornshaw, International Programs Director  
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**FOCUS:** Implementation, Technical Support

4africa is a faith-based NGO focused on sustainable WASH delivery in Northern Uganda. Yumbe, which has some of the lowest water coverage and worst health indicators throughout Uganda, is their current focus. The majority of 4africa's health, hygiene and sanitation efforts are at the community level, but they partner with and support HCFs wherever possible. 4africa recently drilled five boreholes at HCF in Moli, Lokpe, Swinga, Kochi, and Mazanga. They also frequently refer community members to HCF for antenatal, delivery, and postnatal care as well as counseling and other services.

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## AMREF HEALTH AFRICA

**CONTACT:** Hajra Mukasa, Country Officer  
hajra.mukasa@amref.org



**FOCUS:** Advocacy, Implementation

Amref uses a district-wide approach to WASH in Amuru, including WASH in HCF. Their WASH strategy involves capacity building through workforce training, improved access to RMNCH services at both the facility and community levels, and application of community led total sanitation (CLTS) to increase latrine coverage across the district. Their advocacy efforts involve health promotion campaigns and improved governance strategies for combined WASH and RMNCH services through district and sub-county health meetings. Amref has noted challenges with water access and capacity at the healthcare facilities where they work. To address these challenges, they are working with district officials to implement solar-powered pumps, as well as to identify additional space for post-delivery WASH rooms and placenta pits. Amref completed an assessment of the WASH conditions in district HCF in December 2018 and will continue to track progress until 2021. Following the assessment, they have made various improvements, including the renovation of six maternity wards in accordance with MOH standards and the construction of post-maternity WASH rooms at various health centers. They have provided running water using solar-powered water system to the six HCF, constructed drainable latrines in these facilities, provided showers with running water in the post-delivery wash rooms, constructed functional waste water drainage systems in the six HCF and turned the 20 villages near these HCF open defecation free. For continued advocacy and grassroots services provision, they are working with a network of 405 VHT members who receive quarterly refresher training from Amref on RMNCH and WASH.

## CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

**CONTACT:** Maggie Person, Epidemiologist CDC/NCEZID  
lsf6@cdc.gov  
Matt Lozier, Epidemiologist CDC/NCEZID  
wfu2@cdc.gov



**FOCUS:** Technical Support, Research & Learning

CDC is involved in several WASH in healthcare-related projects in Uganda and partners closely with the Infectious Diseases Institute (IDI), Makerere University, Stanford University, IRC, and Water for People. As the monitoring partner on the WASH in HCF component of the Hilton Foundation's district-wide approach program in Kabarole and Kamwenge, CDC has assessed all HCF within the districts and continues to provide recommendations to implementation partners. In addition, CDC is working with IDI to evaluate local production of ABHR as a potentially lower cost hand hygiene option to increase compliance with hand hygiene. The initial findings of this project were presented at the National Task Force last year and ideally it will be adopted by the MOH in future health systems planning. CDC is involved in other work in Uganda as well, including projects to strengthen both the national IPC and global health security programs.

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## CONRAD N. HILTON FOUNDATION



**FOCUS:** Implementation, Investment & Funding, Research & Learning, Technical Support

The Foundation makes investments in three inter-related focus areas: 1) advancing proven and promising solutions and models, 2) strengthening water governance and in-country systems, and 3) building and disseminating credible and actionable evidence. These three approaches will be applied in an integrated way, as they seek to accelerate the coverage of reliable access to safe and affordable water for households, health facilities, and schools in Uganda.

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## CENTER FOR GLOBAL SAFE WASH AT EMORY UNIVERSITY



**CONTACT:** Habib Yakubu, Senior Public Health Program Associate  
habib.yakubu@emory.edu

**FOCUS:** Technical Support, Research

The Center for Global Safe WASH at Emory University, through funding from GE Foundation, has monitored water treatment systems in six hospitals in Southwestern Uganda. In addition, to date Emory has assessed more than 350 HCF across the country with a variety of partners, including World Vision, WaterAid, and UNICEF. With Uganda Protestant Medical Bureau (UPMB), Emory developed a WASH and IPC curriculum for healthcare workers, including cleaners, which was employed for training in the six GE Foundation hospitals. With Makerere University, Emory is conducting research in hospitals in Kampala on the association between poor WASH conditions, environmental microbiology, and health outcomes -- specifically neonatal sepsis and infections following normal and Cesarean section births.

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## ENGINEERING MINISTRIES INTERNATIONAL (eMi)



**CONTACT:** Matt Lammers, Engineering Manager  
matt.lammers@emiworld.org

**FOCUS:** Implementation, Technical Support

eMi is a Christian network of engineers, architects, surveyors, and construction managers who offer support to FBOs. Their WASH portfolio primarily focuses on offering technical support through partnerships with FBOs including schools, community centers, agriculture, churches, children's homes, hospitals, and clinics. They have completed a handful of WASH in HCF-related projects in recent years. eMi has a partnership with [Cherish Uganda](#) in Garuga, a faith-based nonprofit which originally offered educational and healthcare services for HIV-infected children near Entebbe, but now serves the greater community (including those with HIV). Specifically, eMi is renovating the clinic, including WASH services, which serves roughly 80 patients per day. eMi is keen to continue this work, and as technical experts in this space, they seek creative solutions to influence behavior change through smart infrastructure.

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## ENGINEERS WITHOUT BORDERS (EWB)

**CONTACT:** Zoe Pacciani, Country Director  
zoe.pacciani@ewb-usa.org



**FOCUS:** Implementation, Technical Support

EWB is currently developing a new approach to programming which focuses on building local capacity and partnering with organizations that need engineering expertise. EWB is especially interested in improved methods to train these partner organizations, facilitate O&M planning, and increase the sustainability of their work (with a specific bent towards WASH). Their proposed approach to O&M within healthcare facilities is two-fold. The first step is to identify a scheme operator who is based in the community and intimately understands problems on the ground. The second is to identify a technician based at the regional level who addresses diagnostics from the scheme operator. EWB also works as a technical advisor to the MOWE on solar water systems, including their design, installation and O&M. Solar energy solutions are common practice within Uganda; however, regulatory guidelines and design standards have proved difficult to implement, and EWB is working to harmonize this process. EWB seeks to improve all technical aspects of WASH in rural healthcare facilities, including the overlooked issues of sanitation and hygiene.

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## INFECTIOUS DISEASES INSTITUTE (IDI), MAKERERE UNIVERSITY

**CONTACT:** Dr. Mohammed LaMorde, Head of Department, Global Health Security  
mlamorde@idi.co.ug



**FOCUS:** Implementation, Technical Support, Research & Learning

IDI is an organization established within Makerere University which focuses primarily on research and health systems strengthening in Uganda. Current projects include strengthening health security including support for national IPC programs. With the US CDC, IDI's Global Health Security program is upgrading the national reference lab for microbiology, performing AMR surveys on the consumption of antibiotics, and conducting national IPC surveys at 14 referral hospitals (of which include hand hygiene compliance). Also, IDI is running a project to locally produce ABHR in Kabarole District and will be scaling up to include facilities on the border with DRC, to bolster Ebola preparedness efforts.

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## IRC

**CONTACT:** Martin Watsisi, Regional WASH Advisor  
watsisi@ircwash.org



**FOCUS:** Advocacy, Implementation, Technical Support

IRC is the lead on a Hilton-funded district-wide WASH project in Kabarole, which includes WASH in HCF. In 2016, they developed a district-level WASH task team comprised of district health inspectors. In 2017 a WASH status assessment in Kabarole District was conducted, after which a comprehensive WASH in HCF assessment was completed in public and private HCF in 2018. Validation and dissemination of the results were done in November 2018 to key stakeholders including in-charges of HCFs, who are now working on identifying improvements to address the issues they identified. IRC works with CDC, IDI, and Kabarole District Health Office on assessing the effectiveness of the locally produced AHBR in 30 HCFs.

In 2019, IRC with support from CDC provided support to the District Health Office in training of healthcare workers and cleaners, using USAID's [Clean Clinics Approach](#) as a guiding framework. IRC works closely with Water for People, another Hilton-funded district-wide implementer in Kamwenge and WaterAid under the Agenda for Change initiative. Collectively, they are working to develop and support implementation of District WASH Master Plans.

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## KAMPALA CAPITAL CITY AUTHORITY (KCCA)



**CONTACT:** Dr. Okello A. Daniel, Director Public Health and Environment  
dokello@kcca.go.ug

**FOCUS:** Advocacy, Regulation, Implementation, Technical Support, Research & Learning

KCCA is a government entity mandated by the Government of Uganda to address municipal issues within Kampala, including the provision of healthcare services and the maintenance of WASH infrastructure. KCCA operates eight public HCF, which are free of charge for local use. Additionally, all public and private HCF within the city limits fall under purview (regulation) of KCCA. KCCA faces unique challenges with space, budgeting, and capacity, and as a result they have developed innovative solutions for improving WASH in HCF services. For example, they have started to implement a performance-based cleaning system after HCF managers reported cleaning to be a consistent challenge. KCCA has found great success contracting out cleaning to individuals whose work is proven to be of high quality. KCCA also carries out monitoring and research assessments and is actively exploring sustainable finance mechanisms, including opportunities to partner with the private sector. In addition to assessing the eight HCF they run, they also supported a WASH assessment by WaterAid, Makerere University, and Emory University of 60 HCF in the Kampala area.

## MAKERERE UNIVERSITY SCHOOL OF PUBLIC HEALTH

**CONTACT:** Dr. Richard Mugambe, Lecturer  
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**FOCUS:** Advocacy, Technical Support, Research & Learning

The Makerere University School of Public Health (MaKSPH) is one of the leading institutions involved in WASH research in Uganda. Dr. Richard Mugambe, along with others in his department, has led six projects related to WASH in HCF. These are in collaboration with WaterAid, Emory University, Stanford University and varied government agencies, and include (1) a collaborative study to monitor and assess WASH conditions of 63 HCF within the Kampala metropolitan area, (2) a care-seeking behavior study with mothers in Rukungiri and Kanungu districts to identify whether WASH is a driving factor, (3) monitoring of GE reverse osmosis treatment systems within six HCF in Southwestern Uganda, (4) a study to identify WASH-related factors associated with neonatal sepsis in HCF in Kampala, (5) an assessment of maternal infections post-caesarean section in two hospitals with differing WASH conditions in Kampala district, and (6) an assessment of sustainability of water and hygiene in rural healthcare facilities in Mbarara and Kamwenge districts. Along with research, MaKSPH also addresses WASH in both their training curriculum and community engagement. Dr. Mugambe and his team have identified sustainability as one of the greatest challenges to WASH in HCF, and they are working closely with the MOH and other stakeholders to address this gap.

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## MINISTRY OF HEALTH (MOH), DEPARTMENT OF ENVIRONMENTAL HEALTH

**CONTACT:** Julian Kyomuhangi, Commissioner, Environmental Health Department  
julianakyomuha@yahoo.com



**FOCUS:** Investment & Funding, Implementation, Technical Support

The MOH is keen to address WASH in HCF in order to enhance RMNCH services and improve quality of care and IPC. The MOH recently elevated Environmental Health to the level of Department and has several ongoing initiatives related to WASH in HCF. These include developing WASH in HCF indicators for the new HMIS, providing water subsidies for HCIIIs granted by the National Water Supply, and furthering collaboration within different government working groups, like the National Sanitation Working Group. Additionally, the MOH would like to harmonize current standards and strengthen coordination and collaboration mechanisms, such as district water and sanitation committees, as to encourage NGO partners to attend meetings more regularly and prioritize WASH in HCF. They also recognize the need for integrated planning and maximizing resources. Looking forward, the MOH would like to elevate this issue with environmental health officers at all levels and have more direct conversations around WASH in healthcare settings.

## ONEWORLD HEALTH



**CONTACT:** Barak Bruerd, Regional Director, East Africa  
barak@oneworldhealth.com

**FOCUS:** Implementation, Technical Support

OneWorld Health is a CSO addressing healthcare needs across Uganda. They operate using a social enterprise model which pairs larger HCF with smaller satellite clinics, so they are self-sustaining within 18-24 months. OneWorld Health manages a private HCIV in Masindi, in addition to smaller satellite clinics in Bulima, Kijunjubwa, and Bweyale. WASH is a component of a self-sustaining facility and an element they have been working to improve. OneWorld Health partnered with [Water Mission](#) to install a reverse osmosis system at their HCIV in Masindi. They strive to have WASH O&M costs covered by the facility and are working on sustainable methods to optimize O&M.

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## STANFORD UNIVERSITY



**CONTACTS:** Ashley Styczynski, Postdoctoral Medical Fellow, Infectious Disease  
astyczyn@stanford.edu  
Lily Horng, Instructor, Infectious Disease  
lhorng@stanford.edu

**FOCUS:** Technical Support, Research & Learning

Stanford, in partnership with the Hilton Foundation and other Hilton-funded groups, is working on a qualitative analysis of factors that lead to WASH sustainability in rural health centers. The first phase of this three-year project involves a scoping review of documented issues related to sustainability of WASH programs, behaviors, and infrastructure by drawing on experiences of parallel institutions and service delivery mechanisms. The second phase, which is occurring concurrently with the first phase, includes conducting stakeholder interviews in Kamwenge and Mbarara districts to identify issues related to water access and hand hygiene. This study will culminate with a pilot intervention and identification of strategies for improving WASH sustainability based on the analyses of barriers and solutions. They plan to have preliminary deliverables from the first two phases of the project by early 2020.

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## UGANDA CATHOLIC MEDICAL BUREAU (UCMB)

**CONTACT:** Dr. Sam Orach, Executive Secretary  
samorach@ucmb.co.ug



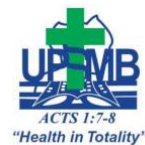
**FOCUS:** Implementation, Technical Support

UCMB is the health office of the Roman Catholic Church in Uganda and the technical arm of the Health Commission of the Uganda Episcopal Conference (UEC). UCMB operates 296 not-for-profit HCF across the country and are active leaders in the WASH space. They drive innovation related to quality healthcare improvements, working closely with the MOH to perform health center accreditation (both public and private) and develop financing mechanisms for HCF across the country. UCMB has recently conducted assessments and staff and patient satisfaction surveys in Tororo and are looking to continue their efforts to make incremental improvements in their facilities with the most need. Looking forward, they plan to perform more WASH in HCF assessments (prioritizing HCIIIs) and increase the visibility of their work through storytelling and other communication mediums.

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## UGANDA PROTESTANT MEDICAL BUREAU (UPMB)

**CONTACT:** James Mwesigwa, Advocacy and Quality Advisor  
jmwesigwa@upmb.co.ug



**FOCUS:** Implementation, Technical Support

UPMB has worked with Emory University to conduct a knowledge, attitudes, and practice assessment on WASH and IPC for hospitals in Southwest Uganda. Following the assessment, a WASH/IPC curriculum was developed and training was conducted for both clinicians and cleaners at the hospitals.

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## UGANDA WATER AND SANITATION NGO NETWORK (UWASNET)

**CONTACT:** Yunia Yiga Musaaazi, Executive Director  
ymusaaazi@uwasnet.org



**FOCUS:** Advocacy, Partnerships

UWASNET is an umbrella organization of 187 CSOs working on water and sanitation in Uganda. The group was founded in 2000 in coordination with government and development partners to oversee the many groups working on WASH-related activities in Uganda. Their portfolio includes overseeing operations of member NGOs/CSOs, facilitating learning and sharing of experiences between members, and identifying gaps and challenges to influence national policy. UWASNET's goal is to coordinate advocacy messages from different groups and elevate concerns to the national level. UWASNET does not specifically focus on WASH in HCF, but plans to use their existing platform to facilitate a dialogue among their WASH partners around this specific issue. They are currently providing input into the five-year National Development Plan, including recommendations pertaining to WASH in HCF.

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## USAID

**CONTACT:** Dr. Alfred Boyo, Nutrition and Child Health Specialist  
abojo@usaid.gov



**FOCUS:** Advocacy, Technical Support

USAID has recently developed a [Water and Development Country Plan for Uganda](#), which includes WASH in HCF. This plan prioritizes WASH improvements through behavior change, as well as by increasing access to financial products with private sector support. USAID has identified WASH in HCF as both an opportunity and a challenge within the WASH sector, noting the lack of proper handwashing in HCF is evidenced by the high number of neonatal deaths in Uganda. This plan also details the [Regional Health Intervention to Enhance Services \(RHITES\)](#) program -- a five-year project designed to assist HCF in 11 districts in East and Central Uganda with WASH planning, implementation, and coordinated messaging.

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## WATERAID UGANDA

**CONTACT:** Jane Mselle, Sembuche, Country Director  
janesembuche@wateraid.org



**FOCUS:** Advocacy, Research & Learning

WaterAid Uganda (WAU) addresses the critical issue of WASH in HCF by working within the existing health system to build the capacity of the government to deliver accessible and sustainable WASH and promote IPC measures. They combine service delivery models to support, influence, and build capacity of national, district and local governments. WAU has implemented various WASH in HCF projects, such as mapping of HCF and addressing key systemic challenges affecting WASH service provision and sustainability in Kampala City. WAU has provided technical support to the MOH to strengthen the inclusion of WASH indicators within the HMIS, in line with our support to the JMP for SDG 6 led by the UNICEF/WHO globally. In August 2019, WAU supported MOH jointly with Makerere and Emory Universities to conduct a study of assessing the status of WASH in HCF within the Greater Kampala Metropolitan area. Following the study WAU together with UNICEF and other partners are in the process of supporting the MOH to develop the WASH in HCF national guidelines. In addition, WAU is engaging the Uganda WASH Parliamentary Forum composed of over 130 members of parliament to prioritize financing of WASH in HCF in the national budget for 2020/21.

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## WATER FOR PEOPLE (WFP)

**CONTACT:** Cate Nimanya, Country Director  
cnimanya@waterforpeople.org



**FOCUS:** Advocacy, Implementation, Technical Support

WFP is the lead on a Hilton-funded district-wide project in Kamwenge. WFP performs WASH assessments for both public and private facilities in the district, however, they focus primarily on hardware implementation and community engagement. In 2017, a preliminary assessment was conducted in district HCF. In 2018, they implemented WASH and waste management services in 27 HCF (in partnership with CDC), as well as delivered trainings in WASH management and behavioral change communication. In response to assessments, they identified common challenges and organized a learning gathering in October 2018 to identify best practices and solutions that can be scaled up. Additionally, they are working to develop innovative solutions for planning and management of their facilities. Several approaches developed include community incinerators to help incentivize better sanitation practices at a reduced cost, and sustainability models which allow communities to perform assessments of local HCF. WFP has had success incorporating a WASH line item in healthcare budgets and believes this is a critical step to improving O&M at HCF.

## WHITE RIBBON ALLIANCE (WRA) UGANDA



**CONTACT:** Faridah Luyiga Mwanje, Communications Manager  
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**FOCUS:** Advocacy

White Ribbon Alliance Uganda is an advocacy and accountability organization addressing RMNCH through its vast membership. They primarily work through mobilizing communities by giving them information about their rights and obligations, amplifying citizens' voices demanding accountability through media, champions and utilizing opportunities at global health forums such as World Health Assembly and United National General Assembly, supporting policy makers to respond to community demands for accountability, and working with partners and across sectors to harness and take advantage of the linkages in various ministries and agencies. Their efforts aim at influencing policies, programs and practices, harnessing resources, and enhancing accountability.

WRA recently released the results of their '[What Women Want Campaign](#)', a survey of 1.2 million women worldwide, asking them what they want for quality maternal and reproductive health services. WASH was identified as the second most 'want' for quality RMNCH services, following dignified and respectful care. Because of this, WASH in HCF has become a recent priority for WRA.

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## WORLD VISION (WV)

**CONTACT:** Fiona Mary Aber, Hygiene and Sanitation Officer  
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**FOCUS:** Implementation, Technical Support

WV is an implementing CSO for WASH in HCF, focusing on WASH improvements within public HCF in Hoima and Kikuube. In 2017, WV in collaboration with Emory University, conducted WASH assessments in 52 HCF. Through this assessment WV identified key infrastructural needs, which are being incrementally addressed in target HCF. WV also delivers training on IPC, working closely with quality improvement committees within health centers. Other WASH in HCF programming is carried out through [BabyWASH](#), a campaign to increase access to WASH services within the first 1,000 days of life. WV also empowers communities and encourages ownership of local projects through the [Citizen Voice and Action \(CVA\)](#) model, a social accountability mechanism to discuss civil issues and strengthen relationships.

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\*\*For more information on this issue, please reference [WASHinHCF.org](#), a growing source of shared information, stories, and resources. This portal also has access to commitments made at the June 2019 Commitments Gathering along with other information on global action around this issue.