

# National Framework Guiding WaSH and NTDs Program Coordination & Integration, Ethiopia

16<sup>th</sup> oct, 2019

Addis Ababa, Skylight Hotel

ጤና ሚኒስቴር - ኢትዮጵያ  
MINISTRY OF HEALTH-ETHIOPIA

የዜጎች ጤና ለሃገር ብልጽግና!  
HEALTH FOR ALL FOR PROSPEROUS ETHIOPIA



## COMMON GOALS

Health

Shared prosperity and equity

Sustainability

### WASH

Coverage

Access

Use

Safety

Sustainability

Functionality

### NTDs

Eradication

Elimination

Disease control

Morbidity management  
and disability

Stigma prevention

Inclusion

By 2030

**SDG 3** *“Sustained control & elimination of NTDs”* &

**SDG 6** *“Available and sustainable management of water & Sanitation for all”*

- Safe water and sanitation services play a fundamental role in population health and wellbeing, lack adequate water and sanitation services. As such, the ***presence of NTDs in a given community serves as a powerful indicator of the need for WaSH investment.***
- Collaboration between Ethiopia's WaSH and NTDs program can help **ensure that WaSH investment is targeted to unserved populations**, and that this investment contributes to improved **equity** and wellbeing of all Ethiopians.
- This framework has been developed by the **FMOH**, the **WHO** and the National **WaSH and NTDs TWG**, based on a review of program and policy documents and stakeholder consultation.

- It serves to implement the vision set out in
  - ✓ the Growth and Transformation Plan,
  - ✓ the HSTP,
  - ✓ the NTD Master Plan,
  - ✓ the National Hygiene and Environmental Health Strategy, and the targets of the One WaSH National Program.
- The framework sits alongside practical tools and guidelines including the WaSH and NTDs coordination Toolkit for Regions, Zones and Woredas. Given the nature of the NTDs prioritized by the national NTD Master Plan II, the framework focuses predominantly on WaSH aspects in the rural context. However, its principles apply also to urban and peri-urban settings.

# 1. Purpose of framework

1. Articulate the vision of the FMOH in terms of program quality standards to be adhered to by all partners implementing ***WASH interventions within NTD program***, to achieve global and national targets
2. Facilitate coordination and integration across agencies and sectors by ***setting out key integrated actions*** and ***coordination structures***
3. Enhance the **targeting of WASH interventions** for improvement of health outcomes in Ethiopia, with a specific emphasis on NTDs as prioritization criteria in selection of beneficiary districts or communities.
4. Help ensure that interventions result in sustained impact on disease distribution and severity, and contribute to broader health, wellbeing, equity and poverty-reduction objectives.

## 2. Program location and targeting

- 👉 Program location should be thorough and robust assessment of the **distribution of disease** and the WASH conditions relevant to disease control and care, in order to maximize resources, prevent program resource duplication and achieve the equity goals of the National NTD program and the One WASH National Program.
- 👉 Proposals for new program or for the expansion of existing program into new geographic areas should be approved by the FMOH in negotiation with other sectors prior to implementation in order to prioritise woredas with high NTD prevalence, in accordance with the following two decision matrices:

**NTD matrix-** Endemicity of trachoma, STH, SCH & Podo (high, Medium & low)

**WASH matrix-** WASH coverage by HHs, Institution & Kebele (high, Medium & low)

# 3. Coordination and planning

- Close collaboration with government agencies at all levels, and use and strengthening of government systems, are crucial for smooth implementation, sustainability and impact at scale; it is therefore expected of all NTD and WASH partners operating in Ethiopia.
- Under the One WASH National Program, any new WASH programs or new phases of existing WASH programs, including WASH components of NTD programs, are expected to be aligned with the Program principles, approaches and plans.
- To achieve this, NTD programs should work with regional, zone, woreda and kebele WASH Committees to consult on program design, integration of WASH components, and to ensure targeting of WASH services to endemic communities by embedding requirements for WASH interventions in annual One WASH plans and budgets

# WaSH & NTDs Structure

- From Federal, Regional, Zonal and Woreda structure of both program (WaSH & NTD)

Governance, Technical, Implementation, Coordination and Review

- Multi-sector level, from federal up to kebele level

- WaSH-NTD coordination
- ONE WASH program coordination
- Mechanisms of linkage

: existing platform, meeting schedule & involved sector and partner



For example,

Level	WASH-NTD coordination			ONE WASH program coordination			Mechanisms of linkage
	Platforms	Meeting schedule	Involved sectors/ partners	Platforms	Meeting schedule	Involved sectors/ partners	
Woreda	TF & TWG	Monthly for TWG and quarterly for TF	Key sectors (health education, water, Finance) WASH and NTD experts and Key WASH and NTD partners	Woreda WASH Team (WWT)	Quarterly	CSO/NGOs/ Emergency WASH, office of water, education, health, WOFED	The TF meeting will be merged with the WWT. A delegated person from WWT will participate in the WASH-NTD TWG meeting
Kebele/ Community	Using existing platforms	Based on the other platform schedules	Using existing platforms Based on the other platform schedules HEWs, HEW supervisor, school principals, WASHCO representatives, HDA, Kebele Admin, women and children's affairs	Kebele WASH Team	Team Quarterly	HEWs, HEW supervisor, school principals, WASHCO representatives, HDA, Kebele Admin, women and children's affairs	Kebele level WASHNTD coordination meeting schedule should be aligned with kebele WASH team meeting

## 4. Integration

- 👍 The degree of integration of WASH components into NTD programs and of NTD aspects into WASH programs depends on the context and nature of the diseases being addressed.
- 👍 Only the relevant components should be considered for integration and delivered through the most appropriate channels.
- 👍 An integration, should be based on seeking **to improve effectiveness and efficiency, maximize human and financial resources utilization, and strengthen systems and capacities**

## **In integration all programs should,**

1. Align with existing national plans to integrate mass drug administration (MDA) for all chemotherapy treated NTDs, using MDA campaigns as an entry point for social mobilization and behaviour change activities.
2. Specify key WASH activities to be delivered by the program, and at the very least include basic promotion of preventive behaviours such as latrine construction and use, good hygiene practices, proper solid & liquid waste handling & disposal and avoidance of contact with unsafe surface water.

If the NTD program does not include WASH infrastructure components, the program should stipulate any advocacy or coordination activities to ensure planned WASH services will be targeted to program areas.

# 5. Technical program quality

- WASH components delivered through NTD programs should adhere to quality standards as set by the One WASH National Program, The National Hygiene and Environmental Health Strategy, the National NTD Taskforce and the WASH-NTDs Technical Working Group.
  - A. Behaviour change; Interventions promoting behaviour change (such as handwashing, face washing, shoe wearing, Safe water management, and construction and use of latrines) should be:
    - I. Based on formative research undertaken prior to the design of program materials to identify existing practices and their context,
    - II. Messages defined by the FMoH Health Promotion team, “Health Message Guide (Hygiene & Environmental Health and Neglected Tropical Diseases)”. Prepared through a robust process of design and consultation, including review and sign-off on BCC materials by the relevant technical working groups.

- III. Posters and leaflets should be used in conjunction with other communications strategies such as school and community-based interpersonal communication. All materials should be accessible and socially appropriate, using images rather than words to the extent possible, and using local languages.
- IV. Using multiple channels of communication with action-oriented messages, encouraging long lasting sustainable behavioural change

**B. Infrastructure: Water, Sanitation...** based on guideline and standards.

# 6. Monitoring, evaluation and reporting

- Joint monitoring in its various forms, from integrated monitoring systems to simple information sharing, can ensure the achievement of the shared objectives of WASH and NTD programs, as well as their respective objectives of achieving universal access to water and sanitation services and disease control and elimination.

## **Programs should:**

1. Ensure relevant data on WASH access, use and functionality is included in NTD program baseline, routine monitoring and evaluation surveys.
2. Engage with and utilize information from WASH and NTDs mapping initiatives, and other available endemicity data, to identify and address areas with poor WASH coverage and high disease endemicity.
3. Collect and share information on relevant indicators: on NTDs using EDHIS and disease-specific surveys and impact assessments; on WASH using EDHIS and other program surveys, and on WASHNTD coordination using woreda level toolkit data collection tools. (woreda WASH-NTD toolkit)

- Track and report financial investment on WASH and NTDs services to endemic populations through established ministerial databases.
- Produce high quality program documentation detailing challenges, lessons and successful practices as tools for improving program quality across the country, enhancing accountability, and mobilizing resources.

### **Funding:**

- Budget for integrated WASH and NTD programs should be obtained during the annual planning period, in which WASH and NTD integration is its own programmatic component (tagged with its own activity code) within the ministry plan.

### **Data sources and reporting process:**

- WASH and NTD related data can be obtained from the following sources: EMIS, DHIS2, EDHIS and ONE WASH Inventory; 4Ws matrix (who, what, where, when) developed by the WASH Cluster; ONE WASH monitoring information system (MIS); disease-specific surveys and impact assessments.

# 7. WASH and NTD Joint indicators

## 1. **Process indicators: (2)**

- # of woreda master plans that include WASH-NTD integrated activities, targets and indicators and are materialized in the woreda NTD program strategies and plans (targets, activities and monitoring).
- # of district-level WASH-NTD taskforces meeting per month/quarter/ biannually/ annually, where there is mutual representation of WASH and NTD sectors.

## 2. **Community-level indicators: (7)**

## 3. **School-level indicators: (5)**





"Talent wins games, but **teamwork** and intelligence win championships." –  
*Michael Jordan*



ጤና ሚኒስቴር - ኢትዮጵያ  
MINISTRY OF HEALTH-ETHIOPIA

የዜጎች ጤና ለሃገር ብልጽግና!  
HEALTHIER CITEZENS FOR PROSPEROUS NATION!