

LIBERIA WASH STRATEGY



This document presents the WASH Cluster strategy for the Ebola response, which is aligned with the WHO Ebola Response Roadmap, the EVD Overview and Requirement, the UN plan, the National Strategy and operational plan, and finally the WASH Ebola AWAY Strategy of the National WASH Committee. WASH interventions constitute a key pillar in Ebola virus disease (EVD) prevention and control. Accordingly, the WASH humanitarian actors will adopt different strategies to respond to the current outbreak, and will support the 5 objectives of the regional EVD overview and requirement strategy.

WASH and Health cluster partners will work together to ensure installation of appropriate WASH facilities in accordance with the established guidance and protocols within Ebola Treatment Units (ETU), Community Care Centers (CCC) and other care approaches if validated by the health partners. WASH partners will work closely with Infection Prevention and Control experts to provide the essential WASH services and facilities required to ensure that medical and non-medical staff “keep safe and keep serving”. Similarly, WASH Cluster partners will ensure the functionality of WASH services in non-Ebola health facilities, especially those used for referral purposes.

The Solid and Liquid Infectious Waste Management is a critical step to block the spread of the diseases from the point of use to disposal. Different approaches and initiatives will be implemented by the WASH sector depending on the current systems, practices and waste generated. Urban and rural context will be targeted, and special attention will be given to the health hazard that can occurred if not handle properly and carefully including environmental impact that could come about.

Basic Hygiene practices such as, but not limited, to hand washing with soap and/or disinfection with chlorinated solution at crucial times will be promoted and access to basic hygiene items for the vulnerable household, groups and communities will be ensured by the WASH sector actors. The approaches will depend on the targeted groups, and will be context specific. Menstrual hygiene in coordination with relevant partners will be addressed by the WASH cluster partners.

Specific attention will be placed to ensure the functionality of most critical WASH services among the disadvantaged members of the society. In this regard, emphasis will be made to address issues related to lack of and or non – functionality of critical WASH services/systems within urban slums (high density population areas) and, separately, hard to reach geographical locations.

Given the severity and scale of the current EVD outbreak, skills development and knowledge transfer will form a central pillar of the WASH cluster response. In this regard, the WASH cluster will support trainings at all levels with a view to equipping key players with skills thus improving the efficiency and effectiveness of the WASH response. Similar emphasis will be placed on documentation and dissemination of lessons learnt and best practices.

The WASH cluster will work in close coordination and partnership with National Task Force on Ebola, the Ministry of Public Works and the Ministry of Health and Social Welfare at the central level, and county task force on Ebola with the county health teams and administration at the county level in the implementation of planned interventions and will ensure community engagement and accountability to affected population.

| PARTNERS | |
|----------------------------|---|
| Government | Ministry of Public Works, Ministry of Health and Social Welfare, Environmental Protection Agency, Liberia Water and Sewage Cooperation, Ministry of Land and Mines, Ministry of Internal Affairs; Monrovia City Cooperation |
| UN agencies | IOM, UNICEF, UNHCR, UNOPS, WHO |
| International NGO's | ACF, CARE International, Concern Worldwide, IRC, IMC, International Federation of the Red Cross, FACE Africa Global Communities, Living Water International, Map International, OXFAM, PSI, Plan International, Samaritan Purse, Save the Children, |
| National NGO's | ADB, ACT Liberia, African Rain, AKVO, A.V.P.L, AZN-L, BRICS Legal Cons.,CET, CHF/IWASH CIPORD, CIS, CODES, Concern Aid Int, DAFH, ECREP, END, EQUIP Liberia, ERS, ESE, FAAL, Higher Ground, Kriterion Monrovia, LACE, LAPHT, LDA, Liberia CSO Council, Liberia WASH Consortium, Liberia Youth WASH Coalition; LICH; LINNK; IYAN;LMWP;LNRCS;LURA;MPW;NACFCEO; NaWMA; ORWOCH; PCI-LAUNCH; PCC; Pump Aid ;RIDA; SEND;SLPP; SUP-UL; SURIDO; United Youth for Peace ;Universal Outreach Foundation; VIRDEMA;VIRGINIA; WASH CSO Network; WASH R & E; WASIDCO; Water of Life; WSA; WSP; Yahweh Adult; Youth Care |

SUMMARY

| | Specific objectives | Indicators | Budget |
|--------------|--|--|------------|
| STOP | To ensure that infectious waste (liquid and solid) and dead bodies are handle safely, and disposed without risks of EBOLA transmission | # of trained and professional safe burial and disinfection teams in the country | 18,550,000 |
| TREAT | To ensure that the essential WASH package has been provided to the Ebola Care Treatment facilities established by the Health partners | % of ETUs, CCC and other medical structures involved in Ebola response managed according to the WASH standards | 22,850,000 |
| ENSURE | To ensure that the essential WASH package has been provided to the public facilities (school and health) established by the other sectors partners for the population living in Ebola affected areas To provide water, sanitation and hygiene access for the population of high risks of EBOLA affected population and / or other WASH related diseases | % of Health of facilities (Non Ebola response) equipped with WASH facilities according to the standards % of schools of facilities (Non Ebola response)equipped with handwashing stations with soap and/or chlorine # of households who have access to basic hygiene kits # of individuals who have access to safe excreta disposal in critical areas (urban slums) # of individuals who have access to safe solid waste management system in critical areas (urban slums) | 33,860,000 |
| PRESENT | To ensure at-risk populations in affected districts are reached with Ebola preventive messages through structured social mobilization strategies | # of a women, men and children of all age affected counties, districts and communities reached with hygiene promotion activities | 10,200,000 |
| COORDINATION | To ensure that direct as many resources as possible to meet humanitarian needs in a timely and predictable manner, to strengthen partnerships, and the predictability and accountability of international humanitarian action, by improving prioritization and clearly defining the roles and responsibilities of humanitarian organizations. | Strategic Operation Framework in place (national and sub-national), implemented and monitored | 1,500,000 |

STOP EBOLA:

Objectives: To ensure that infectious waste (liquid and solid) and dead bodies are handle safely, and disposed without risks of EBOLA transmission

| Outputs | Activities |
|---|---|
| Dead Body Management | <p>Support training on safer handling of infected dead bodies</p> <p>Put in place secure burial practices with safe protocols and dead body management teams in all counties</p> <p>Support community volunteer burial teams whenever it is feasible and following</p> <p>Provide logistic, financial and operational support for safe burials – e.g. Personal Protective Equipment (PPE), transport, body bags, etc.</p> |
| Disinfection of infected waste (solid and liquid) at household level | <p>Support training of disinfection team</p> <p>Provide logistic, financial and operational support for disinfection – e.g. Personal Protective Equipment (PPE), transport, sprayers, chlorinated solutions, etc.</p> <p>Promote safe handling practices and burning of solid infected waste</p> <p>Distribution of “solidarity kits” to compensate losses of the household</p> <p>Promote good and basic hygiene practices to implement at household level</p> |
| Treatment and Management of solid infected waste (Target = 50,000 HHId) | <p>Support communities to handle solid infectious waste management properly in urban and rural context</p> <p>Establish a parallel system of solid infectious waste management in urban context, which includes safe transport, storage and incineration.</p> |
| <p>Indicators:</p> <p># of burial teams in the country team; % of safe burial</p> <p>% of household disinfected who have suspected cases</p> <p># of m³ of solid infectious waste disposed safely</p> | |
| <p>Budget (USD) = 18,550,000 USD</p> | |

TREAT the infected: Care for Persons with Ebola and Infection Control

Objective: To ensure that the essential WASH package has been provided to the Ebola Care Treatment facilities established by the Health partners

| Outputs | Activities |
|--|---|
| Construction, operation & Maintenance of WASH facilities for Ebola Treatment Unit (Target= 27 units in the country) | <ul style="list-style-type: none"> • Adequate and safe quantity and quality of water. This includes water supply, storage, treatment, quality and user friendly water points. • Safe excreta Disposal from point of use to disposal site. This includes construction of user friendly latrines/toilets, onsite sewage treatment and desludging systems. • Construction of laundry and bathing areas including grey water treatment. This includes grease traps, soak away pits, evapotranspiration system. • Solid Infectious Waste Management: incineration on site is prioritized. Support the supplies of incinerators, training of operations • Operation & Maintenance of WASH facilities to support Infection Protection and Control measures • Operation & Maintenance of Handwashing and disinfection facilities. This includes user friendly handwashing stations, consumables as soap and chlorinated solutions, sprayers, • Training of workers on the operation and management of WASH facilities in ETU • Monitoring of WASH facilities including water quality analysis, water consumption, environmental assessment... • Decommissioning of the WASH facilities |
| Construction, operation & Maintenance of WASH facilities for Ebola Treatment Unit Community Care Centers (Target= 65 units in the country) | <ul style="list-style-type: none"> • Adequate and safe quantity of water - This includes water supply, storage, treatment, quality and user friendly water points. • Excreta Disposal from point of use to disposal site: This includes construction of user friendly latrines/toilets, onsite sewage treatment and desludging systems • Solid Infectious Waste Management: incineration on site is prioritized. • Grey water treatment - This includes grease traps, soak away pits, evapotranspiration system • Operation and Maintenance of Handwashing and disinfection facilities. This includes user friendly handwashing station, consumables as soap and chlorinated sprayers, chlorination. • Supporting financially the non-medical staffs working in CCC • Training of workers on the operation and management of WASH facilities in CCC |

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| | <ul style="list-style-type: none"> • Operation & Maintenance of WASH facilities to support Infection Protection and Control measures • Monitoring of WASH facilities including water quality analysis, • Decommissioning of the WASH facilities |
| Household Treatment Care (Target =50,000 households) | <ul style="list-style-type: none"> • Solid Infectious Waste Management (SIWM) • Social Mobilization and community engagement on SIWM • Training of Trainers on handling solid infectious waste. |
| Indicators # of individuals who have access to safe and adequate WASH facilities in the ETU # of individuals who have access to safe and adequate WASH facilities in the CCC # of individuals who have access to safe solid infectious waste management system % of ETUs, CCC and other medical structures involved in Ebola response equipped with adequate incinerators % of ETUs, CCC and other medical structures involved in Ebola response managed according to the WASH standards | |
| Budget (USD) = 22,850,000 USD | |

ENSURE essential services: Access to Basic (including non-Ebola Health) services

Objectives:

To ensure that the essential WASH package has been provided to the Non Ebola Health facilities established by the Health partners for the population living in Ebola affected areas

To provide water, sanitation and hygiene access for the population of high risks of EBOLA affected population

To ensure that gender sensitive hygiene kits to households with vulnerable targeted women, girls and young people.

| Outputs | Activities |
|---|--|
| Construction, operation and management of WASH facilities Health facilities (Target=400) | <ul style="list-style-type: none"> • Adequate and safe quantity of water. This includes water supply, storage quality and user friendly water points. • Safe excreta Disposal. This includes rehabilitation of user friendly latrines. • Solid Waste Management. This includes waste pits • Grey water treatment. This includes soak away pits • Operation and Maintenance of Handwashing and disinfection facilities. This includes user friendly handwashing station, sprayers, chlorination. • Training of workers on the operation and management of WASH facilities |
| School (Target = 400) | <ul style="list-style-type: none"> • Operation and management of WASH facilities • Support the training on operation and maintenance • Operation and Maintenance of Handwashing and disinfection facilities. This includes user friendly handwashing station, sprayers, chlorination. |
| Access to Hygiene kits to targeted and vulnerable households (Target = 300,000 kits) | <ul style="list-style-type: none"> • Provision of basic hygiene kits to households in affected/at risk communities • Surveillance and analysis of the markets of key hygiene items (bucket, soap, chlorox) • Monitoring of the chlorine quality, and chlorine solutions • Provision of female hygiene kits (menstrual hygiene) • Provision of handwashing facilities in public areas such as markets, churches and mosques • Sensitization of traditional practitioners and village chiefs on ebola, early recognition and referral |
| Urban WASH (Target = 250 000 people) | <ul style="list-style-type: none"> • Quick repairs and rehabilitation of existing water supply system • Quick repairs and rehabilitation of sewage networks, and other safe excreta disposal system • Solid Waste Management in critical areas |
| Access to basic WASH services during quarantine | <ul style="list-style-type: none"> • Development of contingency plan • Provision of adequate quantity and Quality of water to quarantined/ movement restriction and Hotspots communities • Provision of temporary Water Storage and Water trucking for quarantined and restriction of movement situation. • Rehabilitation of Water Points in Hotspots areas |
| Access to basic WASH services to refugees camps | <ul style="list-style-type: none"> • Procure and make sanitation materials (disinfectants, gloves, shovels and cleaning materials) available to WASH committees for the maintenance of communal latrines and bathhouses. |
| Cholera Preparedness and contingency stock | <ul style="list-style-type: none"> • Support training on cholera preparedness • Support community volunteer • Scale up social mobilization if required • Provide logistic, financial and operational support to cholera preparedness |
| Indicators # of individuals who have access to basic, safe and adequate WASH facilities in health facilities % of Health of facilities (Non Ebola response) equipped with adequate solid waste management system | |

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| # of boys and girls who have access to safe and adequate WASH facilities in the schools |
| % of schools of facilities (Non Ebola response) equipped with handwashing stations with soap and/or chlorine |
| # of households who have access to basic hygiene kits |
| # of individuals who have access to safe excreta disposal in critical areas (urban slums) |
| # of individuals who have access to safe solid waste management system in critical areas (urban slums) |
| Budget (USD) = 33,860,000 USD |

PRESERVE stability: Social Mobilization and Community Engagement

Ensure at-risk populations in affected districts are reached with Ebola preventive messages through structured social mobilization strategies

| Outputs | Activities |
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| Community sensitization and mobilization to improve general hygiene (Target = 2,000,000) | <p>Support scale-up of social mobilization interventions.</p> <p>Support behavioral change towards hygiene best practices particularly handwashing, safe excreta disposal</p> <p>Promotion of hand washing with soap through inter personal communication, household visits</p> <p>Reinforce training of community mobilizers, including teachers, community and religious leaders, in outreach techniques and messaging around the care and prevention of Ebola</p> <p>Increase public awareness and social mobilization initiatives through local radio/ television broadcasts; door-to-door campaigns; and cellphone messaging, promoting responsible behaviors, dispel rumors ...</p> <p>Support the design, printing and distribution of Ebola prevention IEC materials targeting specific groups translated into local languages through mobile public announcement systems, including use of taxi, and traditional communication channels.</p> <p>Support intensified information, education and communication of women, girls and young people, through regular broadcasting of Ebola prevention messages via national and local radio and TV.</p> |
| Indicators: | |
| % of individuals who can describe the EBOLA symptoms | |
| % of individuals who can describe responsible behaviors to prevent EBOLA transmission | |
| # of individuals who knows ETU's / CCC's locations | |
| Budget (USD) = 10,200,00 USD | |

Effective and Efficient Coordination:

There is a functioning national WASH coordination platform chaired by the government. In line with UNICEF Strengthening Humanitarian Action (SHA) and UNICEF WASH global strategic priority of strengthening National Humanitarian WASH Coordination (NHWC), the WASH Cluster Coordination system activated for the response as part of the Inter-Agency standing Committee (IASC) level 3 declaration will work to support the with the existing WASH coordination platform and not establish a parallel structure. The objective will be to direct as many resources as possible to meet humanitarian needs in a timely and predictable manner, to strengthen partnerships, and the predictability and accountability of international humanitarian action, by improving prioritization and clearly defining the roles and responsibilities of humanitarian organizations.

| Areas of scope | Activities |
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| Information Management | An information management system to support the coordination will be establishing processes to collect, analyze and share information about the situation among the various organizations involved, and to ensure the coordination system runs efficiently. The network will include people affected by the EVD outbreak, as well as relief organizations, governments and media. Information will be presented in easy-to-use formats to support swift decision-making at all levels. |
| Subnational coordination | Sub-national coordination structures should facilitate decentralized decision-making and shorten response time. They are also in a better position to <ul style="list-style-type: none"> • Adapt standards to local circumstances. • Work closely with local authorities and international, national and local NGOs. • Implement the strategic plan, and cross-cutting and multidimensional issues. • Strengthen accountability to affected people. Assessment and strategic planning start at sub-national level. Different regions may have different needs and therefore different strategic objectives and prioritization. |
| Knowledge Management | WASH response to Ebola is new to many WASH actors, so priority will be given to documentation of experiences, lesson learned, best practices, challenges throughout the response. Support to the WASH cluster partners will be provided to prepare and share sessions organized on WASH response to the Ebola crisis. |
| Monitoring and Reporting | The Monitoring and Reporting function will consist to track, review, and regulate the progress and performance of the response; identify any areas in which changes to the response are required; and initiate the corresponding changes. |
| Quality Control | Given the severity and novelty of the crisis, quality control is a key component of the WASH response to ensure the right intervention is delivered to the affected population. Guidelines and Standard Operating Framework will be developed by experts and agreed upon by the relevant national authorities, as well as quality control mechanisms. Based on field and real experiences, such documents could be reviewed. Real time evaluations from the WASH Cluster partners will be required. |
| Research and Development | There is lots of incertitude on Ebola Virus Disease and its activation in sludge, solid infectious waste, and infectious liquid. Those parameters are essential to design proper WASH facilities and strengthen the EVD WASH response. Research and pilot are important to develop new technologies and methodologies towards a more cost-effective, impact oriented plan. Academic research as operational research will be enhanced in this context. |
| Coordination with other Technical Working Groups | The WASH cluster will particularly coordinate with: <ul style="list-style-type: none"> • Infectious Prevention and Control Task Force to ensure the WASH response is appropriate and sufficient to implement safe measures • Health cluster, to ensure that strategies and planning are coherent and efficient • Social Mobilization Technical Working group to ensure synergy, and coherent approaches to community engagement • The Dead Body Management Technical Working Group |

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| <p>Indicators: Strategic Operation Framework in place (national and sub-national), implemented and monitored Performance of the WASH cluster by functions (OCHA tools) # of functional sub-national platforms</p> |
| <p>Budget (USD) = 1,500,000</p> |