



2022 FACT SHEET

GLOBAL HANDWASHING DAY

UNITE FOR UNIVERSAL HAND HYGIENE

Global Handwashing Day (GHD) is a global advocacy day dedicated to increasing awareness about the importance of hand hygiene and triggering lasting change from the policy-level to community-driven action.

Unite for Universal Hand Hygiene

The 2022 GHD theme is **Unite for Universal Hand Hygiene**. Joint action and collaboration are essential for successful and sustainable hand hygiene strategies. This year's theme calls for governments, donors, businesses, institutions, researchers, and advocates to unite in action to achieve the goal of hand hygiene for all. This fact sheet summarizes the latest evidence to address hand hygiene at a systems-level – including national hand hygiene policies, the economic case for universal hand hygiene, and hand hygiene equity – translating the latest evidence into advocacy messages and programmatic actions to guide your future hand hygiene work.

What are the benefits of hand hygiene?

Hand hygiene can help reduce the transmission of a range of diseases:

- Handwashing with soap can reduce diarrheal diseases by **30%**.
- Handwashing with soap can reduce acute respiratory infections by up to **20%**.
- Handwashing with plays an important role in reducing the transmission of outbreak-related pathogens such as **cholera, Ebola, shigellosis, SARS, hepatitis E, and COVID-19**.
- Hand hygiene is protective against **healthcare-associated infections** and reduces the spread of **antimicrobial resistance**.
- Hand hygiene may contribute to the reduction of **Neglected Tropical Diseases**.

Handwashing has also been linked to benefits beyond disease reduction, such as reduced rates of **school absenteeism** and recently, programs aimed at encouraging older children to perform regular handwashing in school have been **central to safe school-reopening strategies and preventing school closures**.



The ability to regularly practice handwashing is also thought to contribute to improved wellbeing, dignity, educational fulfilment, and productivity.

Key Advocacy and Action Messages

- Handwashing is key to reducing the burden of many diseases which pose chronic challenges to health and development.
- Handwashing plays a key role in the control of infectious-disease outbreaks.
- Handwashing is also important to achieve benefits beyond disease reduction, such as increased school attendance and enhanced dignity.
- Advocates should raise awareness on the importance of hand hygiene as an essential part of health and wellbeing.

A Systems Approach to Hand Hygiene

Achieving universal hand hygiene in a country is a complex issue and requires collaboration and coordination between multiple and interconnected actors across all levels of the system (national, state, community, and institutions). The fundamental elements that allow the system to function and support handwashing are known as “building blocks.” According to [Sanitation and Water for All \(SWA\)](#) and further applied to handwashing in the [Handwashing Handbook](#), these building blocks include:



- **Coordination and institutional arrangements** – Formal relationships and mechanisms for communication, collaboration, and coordination among the key actors in the country, which include the private sector, civil society organizations, faith-based organizations, funders, and government entities across different ministries, from the community to the national level.



- **Policies and strategies** – Mechanisms by which a government sets out its vision (policy) and determines its plan of action (strategy) for hand hygiene. National policies should identify targets to improve handwashing infrastructure and provide guidance on strategies and institutional arrangements for achieving those targets.
- **Financing** – Realistic, transparent budgets with funding dedicated for hand hygiene. Countries with established national hygiene policies and plans should cost plans and ensure that financial and human resource needs will be met for implementation of the plans.
- **Planning, monitoring, and review** – Systems for monitoring, evaluation, and review of national hand hygiene plans and targets. These systems should enable assessment of progress toward the uptake of handwashing and support planning for adjustments in programs to optimize scale-up.
- **Capacity development** – Capacity building on formative research, behavior change, and quality delivery, as well as development plans to address the capabilities of institutions to fulfill roles and responsibilities at scale, including the availability of necessary structures, tools, training, and incentives.

Reliant, resilient, and sustainable systems must be built to create an enabling environment in which hand hygiene can be practiced across homes, schools, workplaces, healthcare facilities and other public places.

Key Advocacy and Action Messages

- Countries should adopt a systems approach to hand hygiene which addresses coordination and institutional arrangements, policies and strategies, financing, planning, monitoring, and review, and capacity development to create an enabling environment for these actors to operate and collaborate.
- Mapping the system should first be undertaken to provide a better understanding of the actors, entry points, resources, and coordination mechanisms that affect hand hygiene in country, and to ensure actors understand their role.
- Leadership teams should establish strong communications capabilities, as well as a good understanding of systems strengthening.
- Collaboration and coordination between multiple and interconnected actors is necessary to achieve universal hand hygiene.
- Advocacy must motivate and inspire actors in the system to achieve improvements in policy, investment, planning, and monitoring to support overall systems change.

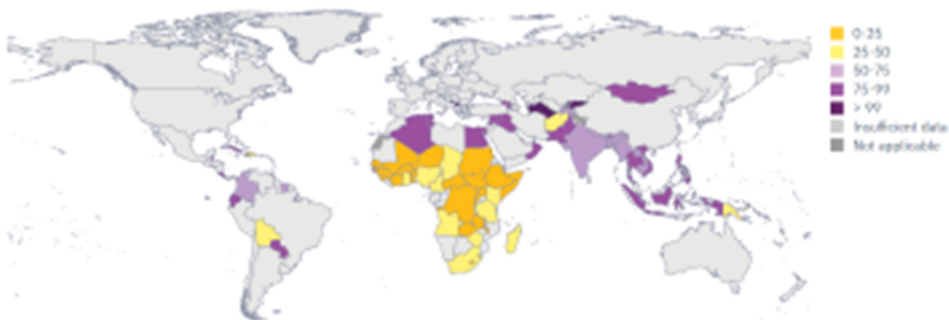


Equity in Hand Hygiene

Globally, access to handwashing facilities and products remains unequal. Progress for hand hygiene is monitored by WHO/ UNICEF Joint Monitoring Program for Water Supply, Sanitation and Hygiene (**JMP**). While the number of countries included grows each year, many countries only have a small number of data points around hand hygiene, making it difficult to assess trends.

For people to be able to practice hand hygiene, they **need access** to hand hygiene facilities that are **conveniently located and easy to use**. People are much more likely to wash their hands if they have soap and water present near the **handwashing facility**. However, in 2020, only 71% of people had access to a basic handwashing facility, globally. This leaves 2.3 billion people who lack basic services, including 670 million people with no handwashing facilities at all.

In 2020, 79 countries had estimates for basic hygiene services



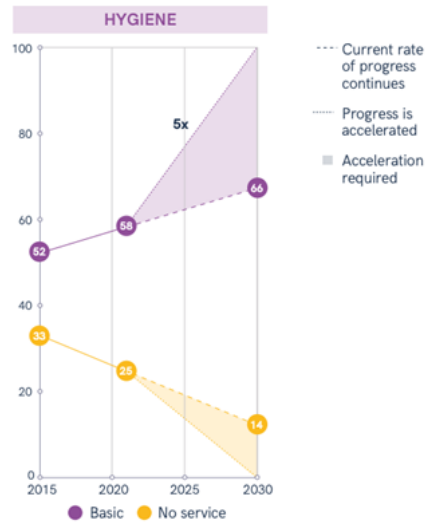
Map showing the availability of basic hygiene services globally, developed by the JMP.

Rates of change in access to handwashing facility has been slow, increasing by just 4% between 2015 and 2020. If current rates of progress continue, by 2030 the world will have reached only 78% coverage of basic hygiene services, leaving 1.9 billion people without the facilities to wash their hands at home. A **4-fold increase** in access to basic handwashing services is needed to meet the Sustainable Development Goal (SDG) targets.

Data about access to hygiene in health care facilities is also low, being available for just 71 countries. Of these, only 50% of health care facilities have basic water access and 74% have hand hygiene services at points of care. That leaves almost 2 billion people depending on health care facilities without basic hygiene services.



The world is also not on track to achieve universal access to basic handwashing facilities in schools by 2030. Of the 107 countries which have data available on handwashing services in schools, only 58% provided basic handwashing facilities and 25% had no service (no facilities or no water at all). This means that 818 million students currently have nowhere to wash their hands. Achieving universal coverage requires a 5x increase in progress on basic hygiene services. If current progress continues, one in three students will lack a basic hygiene service in 2030.



Global coverage of hygiene in schools 2015–2021 and acceleration required to meet targets by 2030 (%), JMP

Key Advocacy and Action Messages

- A large acceleration in progress is needed to meet the SDGs and achieve universal hand hygiene by 2030.
- Efforts must prioritize reaching the most vulnerable.
- Efforts to improve access to at least basic handwashing facilities must focus not only on the community but across institutions including schools, healthcare facilities, workplaces, and in other public settings.
- More data is needed about access to handwashing facilities globally.

National Policies and Strategies on Hand Hygiene

To foster a collaborative effort to achieve universal hand hygiene, it is important to understand what actions governments currently take to enable hygiene promotion, facilities, and handwashing with soap.

Most countries have national policies and national plans for hygiene in place. Of the 109 countries surveyed for the 2020 **GLASS** Report, 79% reported having national policies for hygiene and 73% reported having national plans for hygiene.

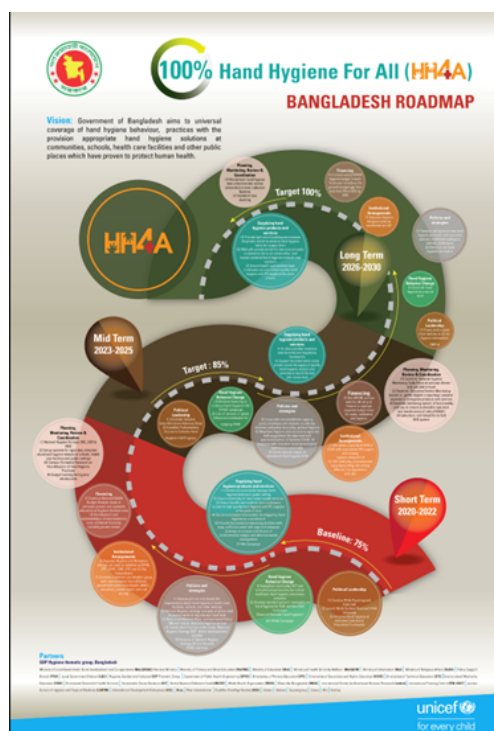


Most of these national policies and plans address promotion of handwashing with soap, including in schools and healthcare facilities. Despite most countries having national hygiene policies and plans, only 40% have national hygiene coverage targets that align with SDG indicator 6.2.1 (handwashing facility on premises with soap and water) and over 40% have yet to set a national coverage target for hygiene at all.

The first step for many countries to achieve hand hygiene for all by 2030 is to develop a **national hand hygiene roadmap**, which identifies strategic goals and opportunities for investments to improve hand hygiene and guide actions across three pillars: political leadership, enabling environment, and inclusive programming at scale to increase supply and demand. Roadmaps can align multi-sectoral stakeholders and investments around a common, co-developed vision and course of action.

The **five steps to creating a roadmap** include:

- 1) **Engage**– Set up or identify existing coordination mechanisms with all actors relevant for hand hygiene and define the process, roles, responsibilities, and timelines
- 2) **Assess** - Understand the current hand hygiene landscape (context / coverage / stakeholders / funding) and identify strengths and gaps to be addressed in the roadmap plan
- 3) **Plan** - Define actions to build upon existing activities and strengthen hand hygiene across settings
- 4) **Prioritize** - Prioritize actions based on set of criteria
- 5) **Cost** - Identify costs for each activity



Bangladesh's Hand Hygiene for All Roadmap



Beyond developing the national hygiene roadmap, next steps should include dissemination and socialization of the roadmap, implementation and budget planning, operationalization, and monitoring and evaluation.

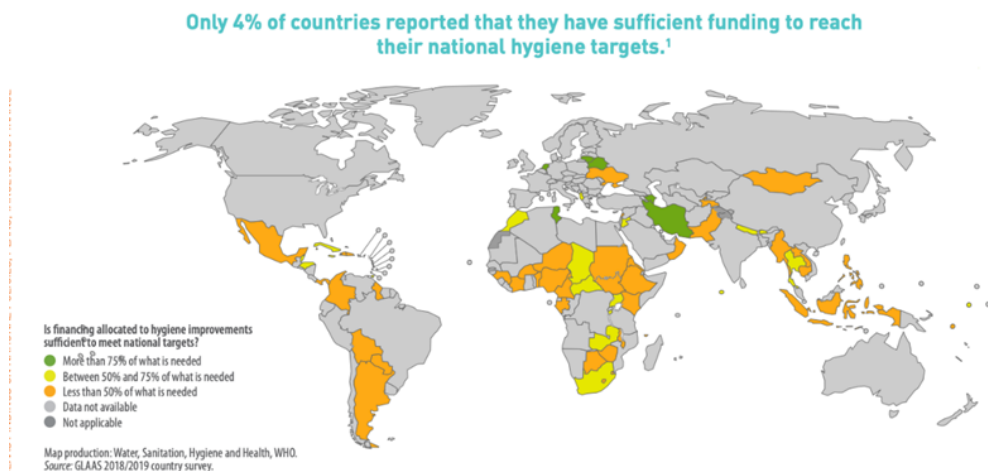
Key Advocacy and Action Messages

- Alongside policies and strategies, countries must set national coverage targets aligned with Sustainable Development Goal 6.
- Countries should work towards creating costed national hygiene roadmaps to provide guidance and focus for all actors involved in achieving universal hand hygiene.

Financial Costs of Hand Hygiene

Finally, understanding current resourcing of national hygiene plans and the necessary resource requirements to achieve universal hand hygiene is essential for planning successful hygiene strategies.

Within national policies on water, sanitation, and hygiene (WASH), hygiene is deprioritized compared to water and sanitation, comprising only 4% of government WASH budgets. Few countries have sufficient financial and human resources to implement their national hygiene policies and plans with only 9% of countries reporting sufficient funds to support their national plans.

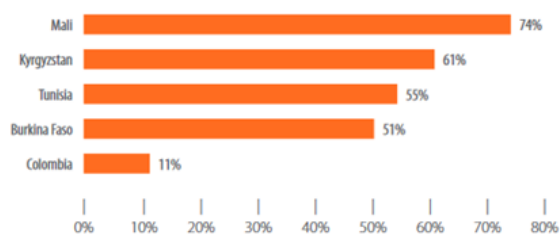


Map showing the level of sufficiency of financial resources allocated to hygiene to meet national targets (n=67), according to the **GLAAS report**



The costs of hygiene promotion activities are typically born by governments and funders; however, the responsibility for facilitating hand hygiene largely falls on households and communities. For example, results from five countries show that household expenditure on hygiene (handwashing facilities, soap and water) is likely a significant portion of all household WASH expenditure.

The percentage of household WASH expenditures on hygiene in five countries ranges from 11% to 74%.



Across 5 countries, household expenditure on soap, water and hygiene facilities comprises a substantial proportion of people's income, according to the [GLAAS Report](#).

It is **estimated** that between US\$12.2 and US\$15.3 billion is needed to achieve universal hand hygiene in household settings in the world's 46 least developed countries (LDCs) by 2030. Such expenditure may be justified on public health grounds since a substantial disease burden could be averted by hand hygiene. Approximately 42% of this should be allocated to behavior change promotion interventions and the remainder allocated to soap, handwashing facilities, and water. All households in these 46 LDCs could have handwashing facilities by 2030 with investment in hygiene totaling **less than US\$1 per person, per year**.

To meet these costs, resources across government and partners should be mobilized, and businesses should develop innovative solutions to meet hygiene needs and harness economies of scale to reduce costs.

Key Advocacy and Action Messages

- Hygiene should be made a greater priority within national WASH policies and the proportion of funds dedicated to hygiene should reflect this
- Communities and organisations must advocate to governments and other decision makers to fund and resource hygiene to a level that will allow achievement of the SDGs and ensure hand hygiene for all.