

# Water, Sanitation and Hygiene (PMA2020 WASH)

## WHAT IS PMA2020 WASH?

Performance Monitoring and Accountability 2020 (PMA2020) uses mobile devices to gather nationally representative data on family planning and water, sanitation and hygiene (WASH) at 6 and 12 month intervals. PMA2020 WASH focuses on data collection of indicators on WASH access and availability, under 5 diarrhea prevalence (1 week recall), as well as on menstrual hygiene management. Data are collected at both households and health clinics via mobile phones through a network of female resident enumerators stationed throughout the country. Enumerators transfer data by phone to a central server via the mobile data network. In real time, data are validated, aggregated and prepared into tables and graphs, making results rapidly available to stakeholders as compared to a paper-and-pencil survey.

## PMA2020 WASH INDICATORS



### Water

- Main and regular\* use of improved and non-improved drinking water sources
- Number of regular drinking water sources
- Water source reliability
- Time to collect water



### Sanitation

- Main and regular\* use of improved and non-improved sanitation facilities
- Main and regular practice of open defecation
- Emptying and disposal practices of flush toilet and latrine owners
- Child feces disposal



### Hygiene

- Access to a dedicated handwashing station (direct observation)
- Availability of soap and/or water at handwashing station (direct observation)
- Presence of handwashing stations in health care facilities (direct observation)



### Menstrual Hygiene Management (MHM)

- Main places where women are managing MHM
- Conditions of main place (safe, private, clean, etc.)
- Type of menstrual absorbent used
- Reuse and drying of absorbents
- Absorbent disposal method
- Age of first menstruation
- Exclusion from work or school due to menstruation



### Other Modules

- National Schistosomiasis Monitoring in Uganda

\*A regular water or sanitation source includes the main household source as well as any additional sources that the household relies on to meet their daily water or sanitation needs.

## OUR PARTNERS

In each program country, we rely on local universities and research organizations to lead and implement the project; often this is in collaboration with national and sub-national ministries of health and national statistical agencies. In addition to recruiting and training field staff, our implementing partners also share survey results annually at national and subnational dissemination events. Present at these events are key stakeholders, including officials from various levels of the national and local government, representatives from the donor community, local media outlets, and those engaged in family planning and WASH policy, programming and advocacy.



**Ghana:** Kwame Nkrumah University of Science & Technology; **Ethiopia:** Addis Ababa University; **Uganda:** Makerere University; **DR Congo:** Tulane University in partnership with the School of Public Health at the University of Kinshasa; **Kenya:** International Center for Reproductive Health (ICRH-K); **Burkina Faso:** Institut Supérieur des Sciences de la Population; **Nigeria:** Centre for Research, Evaluation Resources, and Development (CRERD) and Bayero University Kano (BUK); **Niger:** Institut National de la Statistique (INS); **Indonesia:** National Population and Family Planning Board (BKKBN); **India:** Indian Institute of Health Management Research (IIHMR); **Côte d'Ivoire:** La Direction de Coordination du Programme National de Santé de la Mère et de L'Enfant (DC-PNSME) and L'Institut National de la Statistique de la Côte D'Ivoire

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