COVID-19 Response and WASH Lessons Learned in Bhutan

SUMMARY

• As of 25 January 2021, there were 855 positive cases, with 725 recoveries, and one death across the country.

• By December 2020, a total of 21,650 people (44% of the target) in four municipalities and six districts had access to handwashing and safe drinking water facilities through the installation of 25 handwashing stations (77 tap points) in public places through a tripartite partnership response by the Ministry of Health, SNV, and UNICEF. The installation of an additional 28 handwashing stations is planned in 14 districts by July 2021.

• Reaching hard to reach places with COVID-19 preventive and containment messages: The Ministry of Education identified around 32,135 children in remote areas without any devices and connectivity. These groups could only be reached face-to-face by a network of community volunteers and influential leaders.

Context

The first case of COVID-19 was detected in Bhutan on 6 March 2020. The country’s land borders were sealed off. Large-scale lockdowns were implemented and schools were closed countrywide. Until 19 December 2020, the country succeeded to contain the disease in some cluster areas with zero deaths. As of 25 January 2021, there were 855 positive cases, with 725 recoveries, and one death across the country. UNICEF’s WASH response included promoting handwashing in public places as well as WASH in schools, health facilities, and religious institutions. UNICEF delivered WASH supplies to the most vulnerable children and families through the Government and a wide range of partners, including religious leaders.

Response

**Strategy/Approach taken by Country Office:**

**Handwashing in public places:** The installation of mass handwashing stations with the provision of safe drinking water was initiated in public places (bus terminals, Centenary Farmers’ Market, vegetable markets, and taxi stations) in March 2020. A partnership between the Ministry of Health, UNICEF, SNV Bhutan, and Mawaongpa Water Solutions installed inclusive handwashing stations across the country.

**Health care facilities:** Handwashing communication materials have been developed that include posters highlighting critical times for handwashing with soap and a sticker developed to...
encourage people to keep soap and hand sanitizers at designated places. The materials have been sent to all 20 districts for distribution to 49 hospitals and 186 primary health centers across the country. The package is expected to reach and benefit about 5,000 health workers around the country. The installation of handwashing stations for visitors and providing access to safe drinking water in 47 primary healthcare centers was initiated.

Schools began a phased reopening from 1 July 2020 after the closure of school for four months. Schools followed global guidelines for safe school operations, with measures in place to keep children safe. The Ministry of Education, Local Government, UNICEF, and teachers supported the construction of handwashing facilities and upgraded WASH facilities and services. UNICEF supported the Ministry of Health and Ministry of Education to reprint and develop IEC materials to promote preventive health and hygiene practices in schools, monastic institutions, nunneries, Early Childhood Care and Development (ECCD) centers, youth centers, and communities. Messages were also included for children in nomadic communities and children who were never enrolled in ECCD centers.

Youth centers: To ensure a safe and healthy environment, trainings on WASH facilities management were conducted in 13 centers in partnership with the Youth Centre Division of the Ministry of Education and Bhutan Toilet Organisation (BTO).

Monastic institutions: 57 health coordinators from 49 monastic institutions were trained on WASH (including COVID protocols to follow in institutions). Among others, the health coordinators will manage water supply schemes, maintain the upkeep of toilets and handwashing facilities, campaign on non-communicable diseases, and link with nearby health centers.

Influencers: Influencers have been mobilized with COVID-19 prevention messages including: districts administrators, district health officers, health assistants, local leaders, community representatives, religious persons, transport associations (taxi drivers, bus drivers, truckers, etc.), migrant workers, armed forces, financial institutions, schoolteachers, Desuung (national volunteers), young people, scouts, media, and CSOs.

Handwashing promotion: UNICEF continues to disseminate and amplify messages on handwashing practices for infection prevention. So far, a total of 200,000 people were reached through social media channels. Portable megaphones for community workers and volunteers have been used to disseminate messages in rural communities.

Human interest stories: UNICEF Bhutan’s Country Office activated a #safehands challenge in partnership with the Ministry of Education as well as featured human interest stories on schools and teachers installing handwashing facilities in preparation for the reopening.

Religious institutions: In coordination with the Religion and Health Project of the Central Monastic Body and the Ministry of Education, UNICEF promoted good hygiene practices and supported the distribution of soap. Bhutanese religious leaders participated in the South Asian Religious Leaders’ Meeting (virtually) to update and recommit religious leaders’ support in the fight against COVID-19.


Results achieved:

- By December 2020, a total of 21,650 people (44% of the target) in four municipalities and six districts had access to handwashing and safe drinking water facilities through the installation of 25 handwashing stations (77 tap
points) in public places through a tripartite partnership of the Ministry of Health, SNV, and UNICEF. The installation of an additional 28 handwashing stations is planned in 14 districts by July 2021.

- Since the COVID-19 pandemic, 213 schools with 51,352 schoolchildren (27,398 girls and 24,121 boys) and 250 monastic institutions with 13,458 (12,168 monks and 1,290 nuns) across all 20 districts have received critical WASH supplies (including 50,000 bars of soap and 5,000 handwashing posters).

- WASH interventions are included in the Safe Schools Guidelines for school reopening during the COVID-19 pandemic. Through these interventions, the total number of handwashing tap points has increased to 17,071 tap points (an increase of 77%) from 9,654 tap points before the on-set of the pandemic in early 2020. Staff from 13 youth centers and youth-friendly integrated service centers have been trained to maintain the WASH services in their respective facilities.

- 57 health coordinators covering 49 monastic institutions in four districts were provided with a four-day comprehensive health and WASH training (including COVID-19 protocols to follow).

- A total of 480 pedal-operated, color-coded waste bins were distributed to 22 hospitals benefiting about 2,463 outpatients/inpatients to help prevent and control infections. An additional 1,500 critical junctures handwashing posters were disseminated, benefiting 6,222 health workers in partnership with SNV.

Learning

Challenges and constraints:

Logistical challenges: Procurement of paddle waste bins (for waste management in health facilities), buckets with tap, and bars of soap for schools/monastic institutions were significantly delayed due to border closures and the suspension of commercial flights as a result of COVID-19.

A lack of skilled masons during the lockdown and travel restriction phases has affected the timely and quality construction of WASH facilities.

Limited transactions of goods at the land border during the COVID-19 pandemic and lockdown phase affected the timely delivery of supplies and incurred an additional storage cost for the supplies at port.

Monsoon rain caused landslides, damage to school water sources, the main highway, and inter-district roads, affecting the transport and distribution of supplies.

Reaching hard to reach places with COVID-19 preventive and containment messages: The Ministry of Education identified around 32,135
children in remote areas without any mobile devices and network connectivity. These groups could only be reached face-to-face by a network of community volunteers and influential leaders.

Additional resources:

• Human interest stories are available ([https://www.unicef.org/bhutan/stories](https://www.unicef.org/bhutan/stories)).
• UNICEF, in partnership with the Ministries of Health and Education, the Central Monk Body, and SNV launched a Hand Hygiene Bhutan Facebook page ([https://bit.ly/2Ibko1b](https://bit.ly/2Ibko1b)).

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About the Series

UNICEF’s water, sanitation and hygiene (WASH) country teams work inclusively with governments, civil society partners and donors, to improve WASH services for children and adolescents, and the families and caregivers who support them. UNICEF works in over 100 countries worldwide to improve water and sanitation services, as well as basic hygiene practices. This publication is part of the UNICEF WASH Learning Series, designed to contribute to knowledge of good practice across UNICEF’s WASH programming. In this series:

*Discussion Papers* explore the significance of new and emerging topics with limited evidence or understanding, and the options for action and further exploration.

*Fact Sheets* summarize the most important knowledge on a topic in few pages in the form of graphics, tables and bullet points, serving as a briefing for staff on a topical issue.

*Field Notes* share innovations in UNICEF’s WASH programming, detailing its experiences implementing these innovations in the field.

*Guidelines* describe a specific methodology for WASH programming, research or evaluation, drawing on substantive evidence, and based on UNICEF’s and partners’ experiences in the field.

*Reference Guides* present systematic reviews on topics with a developed evidence base or they compile different case studies to indicate the range of experience associated with a specific topic.

*Technical Papers* present the result of more in-depth research and evaluations, advancing WASH knowledge and theory of change on a key topic.

*WASH Diaries* explore the personal dimensions of users of WASH services, and remind us why a good standard of water, sanitation and hygiene is important for all to enjoy. Through personal reflections, this series also offers an opportunity for tapping into the rich reservoir of tacit knowledge of UNICEF’s WASH staff in bringing results for children.

*WASH Results* show with solid evidence how UNICEF is achieving the goals outlined in Country Programme Documents, Regional Organizational Management Plans, and the Global Strategic Plan or WASH Strategy, and contributes to our understanding of the WASH theory of change or theory of action.

*COVID-19 WASH Responses* compile lessons learned on UNICEF’s COVID-19 response and how to ensure continuity of WASH services and supplies during and after the pandemic.

Readers are encouraged to quote from this publication but UNICEF requests due acknowledgement. You can learn more about UNICEF’s work on WASH here: [https://www.unicef.org/wash/](https://www.unicef.org/wash/)