

Health prevention through water resilience: Why clean water should be at the heart of the fight against Antimicrobial Resistance (AMR)

We can't win the battle against antibiotic resistance without acting on the water, sanitation and hygiene crisis in healthcare facilities.

Resistance to antibiotics and other drugs designed to kill infections has already contributed to at least 5 million deaths a year, 1 more than HIV, malaria and breast cancer individually.

The spread of resistant infections is particularly prevalent in poorer countries and the lack of adequate water, sanitation and hygiene in many healthcare facilities in least developed countries is a major factor driving this. When clinics and hospitals lack water supply or handwashing facilities, midwives, for example, can't wash their hands between patients and don't have enough water for safe births – putting new mothers and their newborn babies at risk.

Investing in these basic services in healthcare facilities decreases the demand for antibiotics, breaks the chain of infection and the opportunity for a resistant infection to become dominant.

A 2016 World Bank report shows that a highcase scenario of AMR could push up to 28 million people, mostly in developing countries, into poverty by 2050. Global increases in healthcare costs may range from \$300 billion to more than \$1 trillion per year by 2050. And the wider economic costs could be as high as \$100 trillion by 2050.

A lack of water, sanitation and hygiene (WASH) services in healthcare facilities not only drives the spread of resistant infections by exposing patients and health workers but also by encouraging the overuse of antibiotics to prevent and treat infections.

The first step in reducing the need for antibiotics is to get the basics of prevention right. Yet, half of the world's healthcare facilities do not have basic hand hygiene services – rising to two thirds across the 46 least developed countries.

Through this panel discussion, we aim to demonstrate why getting right the basics of prevention through WASH should be a foundational component of the EU's fight against AMR.

Panellists

- A passionate health advocate on WASH in healthcare facilities from an LMIC and/or representative from a healthcare facility, with a background in maternal health, that has improved their access to WASH (virtual if in person not possible).
- An AMR actor from R&D or Access who believes in the importance of action on WASH too. This could be someone with One Health/AMR expertise like [Prof Lothar H. Wieler](#)
- WHO representative and/or World Bank representative
- DG Sante or DG INTPA
- Africa CDC/AU representative (joining virtually)

Draft agenda

00:10	Opening remarks
00:10 - 00:30	<p>WASH in HCF advocate sharing of experiences on the ground showcasing the lack of WASH in HCFs, and how this is leading to increased infection.</p> <p>Potential virtual (or in person) conversation with healthcare worker working in a healthcare facility that has improved their access to WASH who can talk about the positive impacts from a first-hand experience.</p>
00:30 – 01:20	Panel session emphasising action on prevention, including Q&A
01:20 - 01:30	Closing remarks from HLM on AMR co-facilitator

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