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POLICY BRIEF — August 2020

The key role of Water, Sanitation and Hygiene Promotion in the response to Covid-19 in Brazil

In order to support well designed water, sanitation and hygiene (WASH) responses contributing to COVID-19 containment, this note provides an overview of measures taken at the federal and state levels in Brazil. It identifies both the strengths and the response gaps. Frequent and proper handwashing with soap is one of the key measures for COVID-19 infection prevention and control. This implies that continued access to and quality of WASH services must be ensured at household level, health care facilities, schools, and in other public spaces. This requires coordinated actions by key stakeholders, namely: policy makers, regulators, utilities, private sector, United Nations (UN) agencies, Non-Governmental Organizations (NGOs), and communities.



1. The WASH needs under COVID-19 in Brazil

COVID-19 is threatening all countries in the world, albeit to a different extent and in different ways. The pandemic has now spread to more than 200 countries and territories, and as of July 1, 2020, the World Health Organization (WHO) has reported more than 10 million confirmed cases of COVID-19, including over 503,000 deaths, among both adults and children. Brazil is unfortunately leading the number of cases in Latin America, with almost 2 million cases and more than 75,000 deaths as of July 15, placing the country second in number of cases and fatalities globally.¹

The contribution of water, sanitation and hygiene (WASH) services to the COVID-19 emergency response is primarily by promoting good hygiene, and particularly, by ensuring frequent and proper handwashing, which has been shown as one of the most important measures to prevent infection with the virus. “Wash your hands” is the top message to help reduce the spread of the disease. However, this requires continued access to and quality of WASH services at household level, health care facilities, workplaces and schools; and in public spaces, with special attention to densely populated areas with high poverty, indigenous communities and other vulnerable groups. These require coordinated actions by key stakeholders: policymakers, regulators, utilities, private sector, UN agencies, NGOs and communities.

The COVID-19 crisis is impacting Brazil on top of serious challenges faced by its WASH sector. The access gap of WASH services in Brazil is daunting. The WHO/UNICEF Joint Monitoring Program for Water Supply, Sanitation and Hygiene (JMP) informs that in terms of water supply, Brazil has around 15 million people without access to safely managed water in urban areas; in rural areas 25 million only have a basic level of service, and 2.3 million access unimproved sources of water for drinking and personal and house hygiene². In terms of sanitation, over 100 million people live without access to safely managed sanitation, of which 21.6 million people used an unimproved sanitation facility, and 2.3 million practice open defecation. The largest deficits are concentrated in the North and Northeast of the country. Lack of access is especially acute in the lower income segments, in indigenous villages and in the urban peripheries and informal settlements, or *favelas*, where approximately 13 million Brazilians live. Evidence from the Brazilian Institute for Applied Economic Research (IPEA)³ suggests that poor areas of large urban centers are more vulnerable and susceptible to the spread of communicable



and contagious diseases. In addition, these areas have lower access to health services. This is the reality in most Brazilian *favelas*, where families live in overcrowded conditions and often lack proper access to water and sanitation.

Furthermore, according to UN WOMEN and CARE, the pandemic impacts men and women differently. On the one hand, Latin America holds the world's largest proportion of female headed households (more than one out of four) and more than 70 percent of health workers are women in the region. On the other hand, indicative data have shown that men tend to have a higher risk of severe illness and death from COVID-19. Women are over-represented in informal settlements, which exacerbates their lack of access to WASH services and hygiene supplies (including menstrual hygiene ones). They need to rely more heavily on public spaces to meet those needs.⁴ Increases in domestic violence reports have been also remarkable in Brazil, aggravated by quarantine measures.^{5,6}

Indigenous communities in Brazil are also particularly vulnerable, as they are faced with challenges to access water and sanitation services, with only one out of every three villages in indigenous lands having access to treated water.⁷ Remote indigenous communities have limited access to hospitals and basic infrastructure. As a result, Brazil's indigenous people are dying at twice the national average from COVID-19.⁸ Another important dimension is ethnicity. Data collected in the city of São Paulo found that, among those infected by COVID-19, Afro-descendant Brazilians are 62 percent more likely to die from the disease than Brazilians of Caucasian origin.⁹ The pandemic has exacerbated the issues of exclusion and vulnerability.

¹ National Ministry of Health – Brazil (2020): <https://covid.saude.gov.br/>

² Estimations from UNICEF/WHO JMP portal, based on 2017 data. <https://Washdata.org>.

³ IPEA Technical Note: *Apontamentos sobre a dimensão territorial da pandemia da COVID-19 e os fatores que contribuem para aumentar a vulnerabilidade socioespacial nas unidades de desenvolvimento humano de áreas metropolitanas brasileiras*, April 2020. Available at: https://www.ipea.gov.br/portal/images/stories/PDFs/nota_tecnica/200423_nt_dirur%20n%2015_web.pdf

⁴ UN WOMEN and CARE (2020). Latin American and the Caribbean Rapid Gender Analysis for CoVID 19. Available: <https://lac.unwomen.org/en/noticias-y-eventos/articulos/2020/06/analisis-rapido-de-genero-care-onu-mujeres>.

⁵ Silvana Fumega. Tracking Latin America's Other Pandemic: Violence Against Women. 13 April 2020. Available: <https://www.americasquarterly.org/article/tracking-latin-americas-other-pandemic-violence-against-women/>

⁶ In the week from March 17 to 25, the government's hotline recorded an 18% rise in intimate Partner Violence (IPV) reports nationally, compared with the first two weeks of the month. In the case of Rio de Janeiro, mass media reported an increase of 50 percent in the same period. Available: https://www.clarin.com/internacional/coronavirus-brasil-aumentan-denuncias-violencia-genero-cuarentena-rio-janeiro_o_8ur_LTpKm.html. Accessed: 01/06/20.

⁷ <https://www.saneamentobasico.com.br/saneamento-areas-indigenas/>

⁸ <https://www.cnn.com/2020/05/23/world/coronavirus-indigenous-death-apib-intl/index.html>

⁹ O Globo, 28th April 2020: <https://g1.globo.com/sp/sao-paulo/noticia/2020/04/28/pretos-tem-62percent-mais-chance-de-morrer-por-covid-19-em-sao-paulo-do-que-brancos.ghtml>

According to JMP estimations, 39 percent of schools in Brazil do not have basic handwashing services.^{10,11} Disparities are important between public and private schools (which have more than double the coverage of public ones in these services), and between regions. For example, only 19 percent of the state of Amazon's public schools have access to water supplies, compared to 68 percent for the national average. In sanitation, the situation is even more dramatic, with some states in the North registering below 10 percent of schools with access to the public sewerage system.¹² The state of Acre has only 9 percent of the public education system with access to public sewerage system, the state of Amapá, only 5 percent, and the state of Rondônia, 6 percent¹³. In health care facilities, the available information is very limited, but according to the JMP, in 2017 as many as 74.5 percent of the facilities excluding hospitals had limited sanitation services, and 1.3 percent had no service at all.

The *Plano Nacional de Saneamento Básico* (PLANSAB), which covers the provision of water and sanitation services, urban drainage and solid waste,¹⁴ aims at expanding access to reach 99 percent water supply and 92 percent sewerage by the year 2033. However, the needs of the sector have not been matched with adequate funding. PLANSAB would need investments of around R\$26 billion per year (around 0.4 percent of Brazil's GDP) for the next 13 years. However, the country has only invested R\$12 billion per year, less than half of what is required, during the last two decades. In addition, investment is also unequal and focused mostly in the Southeast and South regions, while the access gap is greater in other regions. At the same time, it is widely recognized that tackling the WASH challenges provides several economic benefits and gains to society. The economic benefits from reducing water-related diseases and working days losses resulting from the improvement in water and sanitation have been estimated at R\$1.7 billion and R\$35.6 billion, respectively, for the period 2004-2016.¹⁵

According to the current regulatory framework, municipalities are responsible for the provision of water supply and sanitation services, ensuring compliance, formulating the municipal "Saneamento" plans, and increasing coverage towards universal access. The formulation of these *Saneamento plans* is a requisite to be eligible for accessing the federal resources under the

PLANSAB. However, many municipalities have not elaborated their plans and many of the existing ones are of poor quality.¹⁶ In the majority of cases, the provision of services has been delegated to the State water supply and sanitation utilities and the regulation to the State regulatory agencies. In a few cases, the service provision has been delegated to inter-municipal consortia. However, the recent approval of the new *Saneamento law*¹⁷ brings in important changes to the sector. The National Water Agency (ANA) will take on a new role as National Regulator for the sector, providing standards and guidelines of best practices for utilities and subnational regulators. In addition, new types of concession contracts that encourage the private sector participation in the service provision will be possible, which could potentially attract more investments to *Saneamento* projects. The quality of the implementation of the law will determine whether it brings the expected benefits in the long term, particularly for the underserved¹⁸.

2. The WASH response to COVID-19 in Brazil

In order to support well designed WASH responses contributing to COVID-19 containment, this note provides an overview of measures at the federal and state levels in Brazil. It identifies both the strengths and the response gaps. The information here provided is based on two complementary sets of information. UNICEF Regional Office for Latin America and the Caribbean (LACRO) and the Stockholm International Water Institute (SIWI) have been mapping the most relevant WASH policy response measures in countries' response plans from March 2020¹⁹, through a framework that consists of 45 measures grouped in 4 pillars, and which has been used to map 26 countries in the Latin America (16) and Caribbean (10) region. In turn, the World Bank (WB) has conducted a complementary mapping of policy measures across the region, focusing on six indicators²⁰ related to measures to assure continuity of the services for the consumer and staff protection. Specifically for Brazil, the WB has been monitoring responses at state level covering 18 utilities and governments²¹. The results include decisions made by federal and state entities, utilities and by few municipalities and river basin coordinating agencies when available. The mapping is based on publicly available information on the response, complemented by feedback from some utilities.

¹⁰ UNICEF Latin America and the Caribbean Regional Office. Handwashing data to inform the COVID-19 response *WHO/UNICEF Joint Programme for Water Supply, Sanitation and Hygiene Pre-COVID-19 Hygiene Baselines Regional Profiles*. Available at: <https://data.unicef.org/resources/handwashing-data-covid-19-response/>.

¹¹ The presence in a household, school or health care facility of a dedicated place or facility for washing hands and the presence of soap and water at that facility, has shown to be a good predictor for people regularly washing their hands with soap and water. A global expert panel suggested that this indicator be used to estimate actual handwashing behavior among a population. This then became the indicator for the monitoring of the Sustainable Development Goals (SDG) hygiene targets. For more information see: *Practical Guide for Measuring Handwashing Behavior* <https://www.wsp.org/sites/wsp/files/publications/WSP-Practical-Guidance-Measuring-Handwashing-Behavior-2013-Update.pdf>

¹² School census, 2018 (INEP).

¹³ While rural or isolated schools might not be able to connect to the sewerage system, this data show very low levels of connection on average for these States.¹⁴ As referred to in the 11.445/2007 Law, the word *Saneamento* in Portuguese covers the provision of water supply, sanitation, urban drainage and solid waste services.

¹⁵ *Instituto Trata Brasil. 2018. Benefícios Econômicos e Sociais da Expansão do Saneamento no Brasil.*

http://www.tratabrasil.org.br/images/estudos/itb/beneficios/sumario_executivo.pdf

¹⁶ National Agency for Water - Agência Nacional de Águas (2020). National Plan for *Saneamento Básico*. What is missing to progress? Available: <https://www.ana.gov.br/noticias-antigas/plano-nacional-de-saneamento-ba-sico-o-que-falta.2019-03-15.4665581007>. Accessed: 23/06/20

¹⁷ On July 15, 2020 the President sanctioned Bill No. 4,162/2019 and vetoed some of its provisions. The resulting approved text will now return to Congress for deliberation on the vetoes and final approval as Law No. 14,026/2020.

¹⁸ For different opinions about the law, see for example:

<https://www.cnnbrasil.com.br/business/2020/06/24/so-privatizar-nao-resolve-saneamento-avalia-economista-do-banco-mundial>
<https://cee.fiocruz.br/?q=Agua-e-saneamento-O-risco-da-privatizacao-ocorre-em-um-ambiente-de-regulacao-debil-diz-relator-da-ONU>

¹⁹ The basic note is published in English (EN), Spanish (ES) and French (FR) and covers the period March-April 15th, 2020. The update until May 15 can be found here. The information is backed by a database that is shared with the actors of the sector in every country so that they can learn in detail what similar countries in the region are doing in this regard.

²⁰ Monitored measures are: Deferral of water supply and sanitation bills; Forbidding suspension of services; Waving payments to special groups; Freezing tariff adjustments; Setting virtual platforms for payments; and Home-Based work to protect employees. Other measures were identified as additional.

²¹ Acre, Alagoas, Amazonas, Bahia, Ceará, Distrito Federal, Espírito Santo, Maranhão, Minas Gerais, Pará, Paraíba, Paraná, Pernambuco, Piauí, Rio de Janeiro, Rio Grande do Norte, São Paulo and Sergipe.

Measures adopted at the federal and state levels in Brazil are grouped into two broad categories, from the perspective of the users and from the perspective of the service providers; which are then subsequently divided in four pillars:

- **From the users' perspective:** Policy measures intended to: (i) preserve the health and well-being of all people, by meeting their basic WASH needs and (ii) Intensify awareness-raising campaigns for infection prevention and control (IPC) and the efficient use of water.
- **From the service providers' perspective:** Policy measures intended to: (iii) ensure the continuity and safety of water and sanitation services and (iv) provide technical and financial support to service providers.

(i) Preserve the health and well-being of all people, including the most vulnerable, by meeting their basic WASH needs

Key measures under this pillar aim at:

- Guaranteeing that all people have access to a minimum amount of drinking water and basic sanitation to ensure the necessary hygiene measures at home;
- Facilitating payment of services for households in financial difficulty;
- Adopting alternative supply approaches, including emergency solutions, for those households with no piped connection and those living in vulnerable conditions, such as migrant workers, displaced people and homeless; and
- Ensuring the availability of basic hygiene products (soap, menstrual hygiene products, etc.) and products for household water treatment (if relevant).

In Brazil, most state governments recognized the importance of water supply services to fight the virus and implemented two water policies with urgency: (a) forbidding water utilities to suspend services for defaulter clients, which in some cases is only applicable to vulnerable groups;²² and (b) compelling water utilities to waive payments by social tariff customers during the pandemic, which applies to low-income families with low water consumption (usually up to 10m³/month) and that are usually registered under the social tariff program. On top of these policies, a few regulatory agencies have also frozen tariff adjustments during the pandemic. The Federal Government has put in place a comprehensive plan to curb the economic consequences of the COVID-19 and confinement crisis, that includes, e.g., temporary cash transfers to informal and unemployed workers, advance payments of salary bonuses to low-income workers, lower taxes and import levies on essential medical supplies, and new transfers from the federal to state governments to support higher health spending and as cushion against the expected fall in revenues.²³ However, no measure has been

Wastewater-Based Epidemiology (WBE) in Brazil to trace the virus in wastewater.

It is possible to monitor the spread of the virus through monitoring its genetic material present in wastewater. Wastewater based epidemiology (WBE), or wastewater surveillance, has recently been used around the world to monitor the presence of the coronavirus in wastewater, and in Brazil, three states, in collaborations between the water and sanitation sector and research centers or universities have adopted WBE as a tool to complement the health surveillance system in place: (i) Minas Gerais, as part of a partnership between the National Water Agency (ANA) and the Minas Gerais Federal University (UFMG); (ii) Rio de Janeiro, with the Oswaldo Cruz Foundation (Fiocruz) in Niterói; and (iii) São Paulo, with the State's Environmental Company (CETESB). In addition, Pernambuco's water and sewerage utility, Compesa, will also be testing this approach shortly, in collaboration with ANA. WBE can serve as a low cost, early warning system to identify new outbreaks, trends in current outbreaks and prevalence of infections, and should be considered as part of the menu of options to improve the States' capacity to respond to and recover from the COVID-19 crisis, as well as future pandemics.

found at the federal level favoring consumer payments for water or sanitation services or providing financial support to consumers or utilities.

Following the lead of the state government policies, the water utilities have implemented other measures in response to COVID-19. These measures vary for each utility in terms of financial capacity. In many states, the water utility is open to negotiate payments and outstanding bills, such as the example of Compesa, in Pernambuco, which has made an agreement with *Banco do Brasil* for clients to negotiate overdue water bills. Water utilities are taking additional measures such as: reinforcing supply with water trucks and tanks in informal settlements or end of networks' areas with low water pressure; providing water tanks for households in vulnerable situations; and installing wash basins around the cities. Many companies, not only water and sanitation utilities, mobilized improvised – and not always secured – water distribution initiatives to vulnerable low-income communities, where formal services are not provided. Appropriate handling of wastewater is an important step to avoid contamination of drinking water, especially in low-income communities where leakages and open-air sewer is very common. It has been proven that the coronavirus can be found in fecal matter, however the transmissibility of the virus through wastewater is very low²⁴.

²² In most states, the measure applies to all users. In a few others, it was restricted to customers that qualified under the social tariff scheme.

²³ International Monetary Fund (2020). Policy Responses to COVID-19. Policy tracker. Available: <https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#D>. Accessed: 12/06/20

²⁴ World Health Organization (2020). Water, sanitation, hygiene, and waste management for the COVID-19 virus: interim guidance. Available: <https://www.who.int/publications/i/item/water-sanitation-hygiene-and-waste-management-for-covid-19>. Accessed on: 01/06/20

Besides monitoring wastewater, no specific measure has been found in terms of access to sanitation facilities during confinement in Brazil. The lack of active measures on sanitation, especially for those using shared and public sanitation facilities can increase the risk of disease transmission and insecurity especially for women and girls, who as previously explained are overrepresented in the informal settings. The World Bank has published some guidelines on the use of shared sanitation facilities during the COVID-19 pandemic which can be useful for the response plans.²⁵ Hygiene kits with soap and other products to low-income settings have been delivered in some states, many times thanks to private initiatives and NGOs²⁶, and in certain examples in partnership with the water utility. While these are commendable initiatives, the coverage has not been enough to serve a significant proportion of the population in need. Utilities are campaigning on adequate hygiene and safe measures for employees. There have been no specific measures detected to address the needs of and potential impact to women and girls.

(ii) Intensify awareness-raising campaigns for infection prevention and control (IPC) and the efficient use of water in the household and in public spaces.

Under this pillar, there are three key measures that governments and service providers should be undertaking:

- Installing or restoring immediately handwashing points in exposed collective sites and public spaces (e.g. schools, health care facilities, markets, etc.);
- Promoting appropriate infection prevention and control measures at the household and in institutions, through awareness campaigns; and
- Combating misinformation and fake news campaigns.

In Brazil, mainly in a few metropolitan areas, public washbasins have been constructed in exposed collective sites and public spaces to promote handwashing; in addition, some water utilities are combining efforts with municipalities to keep public spaces disinfected, on occasion in collaboration with the fire departments. Within the humanitarian response to the Venezuelan migration crises in the North of Brazil, utilities are collaborating with humanitarian actors (e.g., UN and NGOs) in ensuring access to handwashing facilities in shelters for migrants and refugees, spontaneous occupations, and public spaces. Water trucking is supplying a number of these handwashing stations to ensure enough quantity of drinking water.

²⁵ World Bank (2020). WASH and COVID-19. Available : <https://www.worldbank.org/en/topic/water/brief/wash-water-sanitation-hygiene-and-covid-19> Accessed : 07/08/20.

²⁶ As of 20th May, over 5 billion BRL had been recorded in donations from private sector, philanthropies and individuals, Available: <https://www1.folha.uol.com.br/empreendedorsocial/2020/05/doacoes-em-resposta-a-COVID-19-chegam-a-r-5-bilhoes-em-dois-meses.shtml>. The Global Compact also reports on initiatives by the private sector <https://www.pactoglobal.org.br/pg/pacto-contra-COVID-19>. Accessed on: 01/06/20

UNICEF Brazil WASH and hygiene promotion response

The distribution of hygiene kits and the dissemination of messages on the prevention of COVID-19 and other related information have been key components of the UNICEF Brazil response plan right from the beginning of the crisis. Building on its existing partnerships with private sector companies and engaging with new corporate partners, UNICEF has been facilitating the distribution of hygiene kits (consisting of soap and other cleaning and disinfection products) in poor neighborhoods of 9 urban centers (São Paulo, Rio de Janeiro, Salvador, Recife, Fortaleza, São Luís, Belém, Manaus and Boa Vista) and their surroundings. A total of around 50 companies together with musicians who organized online fundraising events have been contributing both products in-kind as well as financial resources which allowed UNICEF to procure the material. Local civil society organizations have been playing a key role in the distribution of the material. They took the hygiene kits to the most vulnerable people and families living in *favelas*, on the streets or in institutions. Starting from the first delivery on March 25, UNICEF plans to ultimately reach a total of around 2 million people (480,000 families).

The delivery provided UNICEF also with the opportunity to reach out to the beneficiaries with messages on COVID-19 prevention, important hygiene practices and the prevention of violence and abuse during the times of containment. Partnering with the Mauricio de Sousa Production house, the creator of the highly popular cartoon figure Mônica, UNICEF added printed leaflets conveying these key messages. Mônica is one of UNICEF's Ambassadors. The organization also used its digital platforms to promote handwashing and physical distancing, and to provide tips to parents and other caregivers on how to speak to children about the pandemic, and to engage with adolescents around mental health issues. Besides reaching out to the general public, UNICEF also specifically aimed at engaging with children and adolescents in poor urban neighborhoods and in municipalities in the North and Northeast of the country. Partnering with platforms that are particularly popular among youth living in *favelas* (such as Kondzilla.com) and with digital influencers, UNICEF has been organizing LIVE sessions on social media to discuss prevention and the social and psychological impact of the crisis. To reach the population in poor and remote municipalities in the Amazon and Semi-Arid regions, UNICEF in collaboration with a radio agency produced spots which were broadcast by local radio stations. Between March and end May 2020, UNICEF reached around 63 million people through social media and online news platforms with information on risk prevention and hygiene.

Further to this, UNICEF mobilized local authorities with whom the organization has been collaborating for decades through its programs Municipal Seal and Platforms of Urban Centers. UNICEF also launched a volunteer program (digital firefighters) and mobilized adolescents participating in other UNICEF programs to respond to fake news on social media related to the COVID-19 pandemic.



In *favelas*, many community organizations have set up their own hygiene promotion campaigns.²⁷ States, utilities and municipalities are increasing their respective awareness and hygiene campaigns using multiple media platforms such as television, radio, billboards, websites and social media (for example, Instagram, Facebook, WhatsApp, etc.) to reach out to all with qualified information. As an example, in collaboration with the governmentally led migration response coordination, humanitarian actors in Roraima, Amazonas and Pará are implementing handwashing campaigns specifically targeting the over 2,500 migrant indigenous people living in shelters and in informal settlements. In addition, rational use of water campaigns are being carried out in some states due to low raining levels and increase of household consumption due to COVID-19. Whereas traditional hygiene promotion campaigns normally target women and children, outreach initiatives in the COVID-19 context should be tailored to reach the elderly and other risk groups in particular.

Misinformation and confusing messages sent out from various sources, created confusion on the understanding of the population about the seriousness of the problem and ways to prevent the virus dissemination. The Ministry of Health has created a specific webpage that identifies fake news related to COVID-19²⁸ and UNICEF has created a chatbot to respond to questions and avoid spreading of fake news.

(iii) Ensure the continuity and safety of water and sanitation services

Under this pillar, the key measures that governments and service providers should be undertaking are:

- Guaranteeing the supply of drinking water at all stages at household level and considering the proper operation of sanitation services where relevant;

- Ensuring wastewater and solid waste management operation, at all stages: collection, separation, transportation, processing and treatment, and final disposal;
- Securing the quality and continuity of water and sanitation services in key institutions such as health care facilities, and isolation centers; planning for the reopening of schools to provide these basic services in all schools and early child development centers; ensuring availability and access to appropriate personal protective equipment (PPE) for water and sanitation workers, including informal ones; and
- Preparing utilities emergency plans.

In Brazil, water utilities quickly set up plans for securing continuity of services. They identified their essential staff for continuation of service provision and enabled all other staff to work from home (in addition to those with more vulnerable health conditions). Utilities are putting in place special procedures for the use of equipment, and access to the corporate systems of the company; purchase of Information Technology (IT) equipment such as notebooks, cell phones and others have been made available to facilitate remote work, including special support for staff to adapt to home-based work. Operation and maintenance staff continue to work with protective measures and in a rotative schedule. In a few cases, utilities are providing COVID-19 tests for front-line workers. No significant problems with supply of chemicals for water treatment have been detected. Almost every utility surveyed had also put in place or promoted their virtual platforms for payments and suspended face-to-face service with customers.

As a result of the sanitary crisis and the associated movement restriction and confinement policies adopted across the country, many utilities initiated or accelerated their transition towards the use of digital platforms and tools to engage differently with their customers, as well as to remotely collect data on their assets and services. The COVID-19 crisis has demonstrated the importance of digitalization to

²⁷ This platform is publicizing a map of community-led initiatives in favelas across Brazil <https://www.institutomariellefranco.org/mapacoronanasperiferias>

²⁸ Ministry of Health, Brazil. (2020). Page to identify fake news by typing the title of the news. Available at: <https://www.saude.gov.br/component/tags/tag/novo-coronavirus-fake-news>. Accessed: 12/06/20.

help utilities and water infrastructure managers maintain and monitor services while preserving the safety of their infrastructure and of their operators, as well as of the citizens. Digital solutions will also continue to play a critical role in the post-COVID-19 recovery phase, as utilities will seek to create opportunities for efficiency gains on the path to regaining their pre-crisis financial and commercial health. These digital solutions are not only important to tackle the current pandemic. They can help water and sanitation service utilities and infrastructure managers address the challenges of shortages in water resources, non-revenue water, address the needs of underserved customers such as in slums with innovative solutions, as well as climate change, and embark on the transformation towards a more circular economy, to deliver services more efficiently. However, it is important to note that these measures have been noted in bigger utilities, while smaller service providers might need additional support to be able to ensure service quality and initiate their digital transition.

No specific activities were detected linked to increased access to water, sanitation and hygiene products in schools. This is worrying as good WASH services in schools will be essential for the safe return of children. The Back to Safe Schools framework, launched by UNESCO, UNICEF, the World Food Program and the World Bank, as a global footprint for how schools need to be adapted to the new normality with COVID-19, also emphasizes the importance of WASH services in the return to schools²⁹. The framework has recently been complemented by the guidelines “10 immediate WASH in Schools actions,” which focus on the most urgent measures to assure WASH availability for a safe school and by the WHO *Considerations for school-related public health measures in the context of COVID-19*.^{30,31} The same is valid in relation to Health Care Facilities, where no specific measures have been detected, despite the worrying data on access to services mentioned. It is not possible to properly treat COVID-19 cases - or any other disease - without basic WASH services in health care facilities.

(iv) Provide technical and financial support to utilities

Under this pillar, the key measures that governments should be undertaking according to the global framework are:

- Ensuring that utilities receive the necessary support and technical assistance for administration, planning, and operation and maintenance under the crisis;
- Ensuring utilities receive the necessary funding and financial support to guarantee the adequate operation of services, to avoid non-payment or delays in the

The Response in the State of São Paulo

The State of São Paulo has introduced two key measures in responding to the emergency (Decree 64.879/2020): (i) suspended water disconnections due to non-payment and (ii) waived water and sanitation bills of social tariff customers, representing around 2 million low-income families below the consumption threshold of 10 m³/month. The state decree was initially valid for three months – April, May and June – and has been extended to August 15. The city of São Paulo is supporting 12 indigenous communities in the municipality by promoting handwashing campaigns and distributing prevention material translated into the Guarani language. It has also donated face masks and hygiene kits to benefit 900 indigenous families in the municipality. The Department of Health Surveillance of São Paulo has defined a series of regulations on criteria for: disinfection in public spaces³²; health of rural workers³³; solid waste management³⁴; and drinking water supply in the prevention of risks associated with COVID-19³⁵. SABESP, the state's water and sanitation utility, responsible for serving around 28 million inhabitants and 60 percent of the state's municipalities, has put in place a number of actions to address the pandemic: expansion of digital services available to customers; distribution of 5,200 water tanks to vulnerable households; installation of over 411 public washbasins in the capital and in cities across the state; disinfection of roads, hospitals and other health care facilities using solution of sodium hypochlorite in 290 cities; donation of food, hygiene kits and cleaning products to low-income families and nursing homes; promotion of home-based work and mental health assistance for its workforce. SABESP has also implemented a contingency plan for the protection of employees and monitoring of treatment facilities, defining different stages of risk and the correspondent measures to be taken.

payment of bills causing a liquidity problem and damaging the operation and maintenance of services;

- Launching special funds for the improvement, restoration and expansion of water and sanitation infrastructure to meet any needs arising from the pandemic; and
- Establishing multi-actor emergency coordination mechanisms that combine expertise from the health, WASH, education and other concerned sectors, on managing the WASH response to the crisis.

²⁹ UNESCO, UNICEF, the World Bank, the World Food Program and UNHCR (2020), Framework for reopening Schools: <https://www.unicef.org/documents/framework-reopening-schools>

³⁰ Unicef, German cooperation, GIZ, Save the Children, Water Aid (2020). 10 immediate Wash in Schools (WIS) actions. Available: <https://www.susana.org/en/knowledge-hub/resources-and-publications/library/details/3855>.

³¹ WHO (2020). Considerations for school-related public health measures in the context of COVID-19. Available at: <https://www.who.int/publications/i/item/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19>

³² Recommendation on disinfection of Covid-19 public spaces: <http://www.cvs.saude.sp.gov.br/zip/COMUNICADO%20CVS-SAMA%2013-2020.pdf> and <http://www.cvs.saude.sp.gov.br/zip/COMUNICADO%20CVS-SAMA%2010-2020.pdf>

³³ Recommendation for rural workers and Covid-19: <http://www.cvs.saude.sp.gov.br/zip/COMUNICADO%20CVS-SAMA%2012-2020.pdf>

³⁴ Recommendation on urban solid waste management and Covid-19: <http://www.cvs.saude.sp.gov.br/zip/COMUNICADO%20CVS-SAMA%207-2020.pdf>

³⁵ Recommendation on drinking water in the prevention of risks associated with Covid-19: <http://www.cvs.saude.sp.gov.br/zip/COMUNICADO%20CVS-SAMA%206-2020.pdf>



The National Water Agency (ANA) postponed, for 4 months, payments for raw water catchment from rivers and reservoirs under federal responsibility. This action benefits those who hold a concession agreement for raw water catchment, such as industries, rural producers, irrigators, and water supply companies. However, the trigger for action was not on the services side, but following a request from the Ministry of Regional Development (MDR) to support the production sector, which faces operation and financial issues due to the pandemic as well. At the state level, many governments and agencies have postponed tariff adjustments during the pandemic.

On the other hand, while state governments have demanded utilities to waive debts and perform reconnection of disconnected users, very few states have provided financial support to water utilities. From the surveyed states, the only ones found to promote financial assistance are Bahia and Ceará, in which the government will cover costs for waived social tariffs³⁶. Meanwhile, there is a reduction of payments from customers, including industries and commerce, due to the economic impact of the crisis. As a result, service providers have reported an important drop in revenue³⁷. This will have a strong impact on the utilities and might threaten their long-term viability, particularly in rural communities' water associations and management schemes. No evidence of business continuity plans at the utility level has been found yet.

The World Bank Group is providing assistance to utilities in some states³⁸ to study the medium and long-term financial impacts of COVID-19 and the implemented measures. Indicative information from World Bank client countries shows that the financial implications have already reached many water utilities, including dramatically affecting revenues. A new World Bank study (World Bank, 2020)³⁹ highlights how due to COVID-19 “special attention will need to be devoted to the infrastructure sector, including energy, water, and transport, due to their strategic nature in the economy and potential contingent liabilities for

the government”. Indeed, the COVID-19 is producing financial stress in state-owned water and sanitation enterprises, with rapid accumulation on their liabilities and leaving little room for preserving service standards to the population. Some figures indicate decreases in revenues of these companies of as much as 70 percent in the first few weeks of the pandemic, so the economic burden of their financial liabilities can reach unsustainable levels⁴⁰. Two key policy actions should be considered to fight against this: a) Government allocating financial resources and established procedures for the implementation of contingency and recovery plans for utilities/service providers; and b) Provision of financial solutions and packages to the poor, vulnerable, and marginalized groups to have access to safe and affordable water and sanitation services at household and community levels (discussed earlier). The conditioning of utilities' support on performance targets that are tangible, transparent, verifiable, and under the service provider's control can avoid inefficiencies associated with traditional supply-side subsidies. Key performance indicators, developed by the government or regulator, may include standards for service continuity; non-revenue water reduction; meter installation or service repair schedules; the volume of waste treated or reused; or for addressing consumer complaints. These type of activities, particularly non-revenue water reduction programs, often have good financial recovery, are labor-intensive (listening for and repairing leaks) and therefore can help get people back to work quickly.

In terms of coordination across sectors, the national health contingency plan does not mention water and sanitation as key element to the response. The states, their health institutions and their water utilities seem to have been acting independently from each other with limited general guidance from the national government. At municipal level, the contingency plans found did not include actions related to water and sanitation services neither. At the same time, it seems that response actions for the pandemic have been decided largely through State or Municipal executive decrees, and the use of pre-existing

³⁶ State Law 14.256/2020 in Bahia and State Law 17.196/2020 in Ceará.

³⁷ Preliminary information from the Ministry of Regional Development.

³⁸ Assistance has started in COMPESA (Pernambuco) and CAGECE (Ceará).

³⁹ World Bank, 2020. COVID-19 In Brazil: Impacts and Policy Responses. <http://documents1.worldbank.org/curated/en/152381594359001244/pdf/Main-Report.pdf>

⁴⁰ World Bank, 2020. Considerations for Financial Facilities to Support Water Utilities in the COVID-19 Crisis. <https://openknowledge.worldbank.org/handle/10986/34043>

contingency or crisis management plans has been limited. Furthermore, local governments (states and municipalities) are not only highly exposed to the economic shocks perpetrated by COVID-19 containment measures, but they were showing financial insolvency prior to the COVID-19 crisis (World Bank, 2020). Specifically, for the water and sanitation sector, coordination with other sectors is essential to maximize the funds available for containment and recovery from the crisis. In the context of the Back to Safe Schools framework, a task force with the Ministry of Education, the National Council of Secretaries of Education (CONSED) and the National Union of Municipal Education Services (UNDIME)⁴¹ has been created and will have to consider WASH measures to be in place as part of the Framework.

3. Recommendations

As a result of this analysis, a series of actions are recommended to both ensure a more effective and equity-focused response of the WASH sector to the COVID-19 crisis, while strengthening systems that ensure access to quality water, sanitation and hygiene services for all parts of society throughout the country:

- A stronger cooperation between and within the different levels of government (municipal, state and federal) as well as horizontally with other sectors (e.g. health, education) is needed to achieve the most effective response. The actions undertaken by the different stakeholders need to be aligned and to strive to ensure equity for all citizens in the country.
- It is critical to ensure the availability of reliable and disaggregated data related to equitable access to WASH services, for households, schools and health care facilities; as well as to improve the use of this data for monitoring and planning of WASH interventions.

- An important focus of all public and private activities to expand WASH services needs to be placed on low-income settings and urban slums – both during the response and beyond, taking into consideration the specific needs of women. Social mobilization in the *favelas* needs to be complemented by more systemic approaches to ensure equitable and durable measures for infection prevention and control at household, community, schools and health care facilities.
- Financial packages need to be developed for the implementation of contingency and recovery plans for service providers, based on performance targets that are tangible, transparent, and verifiable.
- Based on the framework and guidelines for the safe reopening of schools, states and municipalities urgently need to assess the availability of safe water, sanitation and hygiene facilities in all schools and address existing gaps.
- Likewise, continued attention to mapping and addressing gaps in WASH access in healthcare facilities⁴⁰ is critical to prevent the spread of the disease in the facilities. This point should be a key focus of state/municipal coordination supported by federal policy and strategies.

Finally, a greater political commitment to support the water and sanitation sector at all governmental levels, coupled with additional financial resources will be needed in Brazil. During the crisis, the combination of increased spending to shore up the health care system to fight the pandemic, while simultaneously experiencing a shortfall in tax revenues, has increased the funding gap of states and municipalities by 1.5 percent of GDP (World Bank, 2020). This has led to limited financial resources available for reallocation to other sectors than health. The need for commitment is important not only in the short-term to fight the immediate effects of the pandemic, but also in the medium to long-term to overcome the impacts of the crisis and achieve sustainable water and sanitation services for all sooner.

⁴¹ CONSED stands for “Conselho Nacional Secretários de Educação” and UNDIME stands for “União Nacional dos dirigentes Municipais de Educação”

⁴² As it was pointed out, an important gap of systematically gathered disaggregated information is noticed for WASH in Healthcare Facilities in Brazil.

About this publication

This policy brief has been co-authored by a team from SIWI, UNICEF Brazil and the World Bank. Alejandro Jiménez, Virginia Mariezcurrena, and Isabel Alvarez, from SIWI; Paola Babos, Gregory Bulit, Willian Wives, Michael Klaus, Alban Nouvellon and Jorge Álvarez-Sala from UNICEF; and Rita Cestti, Juliana Garrido, Viviane Virgolim Zamian, Christian Borja-Vega, Tatiana Teles, Jean-Martin Brault and Luis Alberto Andrés from the World Bank.

About UNICEF

UNICEF works in some of the world's toughest places, to reach the world's most disadvantaged children. Across more than 190 countries and territories, we work for every child, everywhere, to build a better world for everyone.

About World Bank

The [World Bank Group](#), one of the largest sources of funding and knowledge for developing countries, is taking [broad, fast action](#) to help developing countries strengthen their pandemic response. We are supporting public health interventions, working to ensure the flow of critical supplies and equipment, and helping the private sector continue to operate and sustain jobs.

About SIWI

SIWI is a leading water institute, focused on water governance and capacity building in order to reach a just, prosperous and sustainable water wise world. It is well-known for its research, knowledge generation, and applied science, which helps to develop policy recommendations and supports the implementation of programmes. In addition, SIWI uses its trusted convening power to facilitate multi-stakeholder dialogues, most evident in its annual event, World Water Week.