





Essential services for quality care

Water, sanitation, hygiene, health care waste and electricity services in health care facilities

2025 Global Progress Report

Executive summary

1.1 Aims of report

This report provides the latest progress in ensuring universal access to water, sanitation, hygiene (WASH), waste and electricity services in health care facilities. It serves as the basis for reporting back on the 2023 United Nations General Assembly (UNGA) Resolution on WASH, waste and electricity in health care facilities (see Box 1).

In 2022,

close to 1 billion people in low- and lower-middleincome countries are estimated to be served by health care facilities that



to electricity

unreliable electricity supply (4)

This document highlights high-need countries that have demonstrated a readiness to scale up implementation (e.g., put in place national standards, roadmaps and monitoring); provides insights to improve WASH, waste and electricity in health care facilities; and presents recommendations on what needs to happen to achieve universal services and address inequities.

In 2023,

an estimated 1.1 billion people were served by health care facilities that lacked basic water services







2.8 billion lacked basic waste services in low- and lower-middle-income countries (5)



Box 1. Driving collective action through the United Nations General Assembly Resolution and supporting frameworks

The 2023 UNGA Resolution on "Sustainable, safe and universal water, sanitation, hygiene, waste and electricity services in health-care facilities" received broad support from Member States (1). It outlines priority national actions which are summarized in this report, including strengthening standards, improving regular monitoring within health systems and developing costed and financed roadmaps. In response to the resolution, UNICEF and WHO developed the Global Framework for Action (2024–2030) with targets, indicators and operational ways of working (2). Furthermore, a Consensus Statement, signed by leading organizations including WaterAid, World Bank, Gavi, Global Fund, and the International Federation of Red Cross and Red Crescent Societies (IFRC), outlines partner support to countries as they seek to implement the Resolution (3).

Note: The figures of 433 million people and 478 million people refer to four developing regions: Latin America and the Caribbean, the Middle East and North Africa, South Asia, and sub-Saharan Africa.

1.2. Significant acceleration of effort and investment is needed to meet 2028 and 2030 targets

While service coverage needs significant acceleration, many countries have made concrete efforts to update standards, establish baselines and develop roadmaps. These actions provide the needed foundation for investing in better services. However, significant acceleration of effort and investment is needed to meet 2028 and 2030 targets (see Table 1).

Table 1. Status in meeting global targets on policies, service levels and equity for WASH, waste and/or electricity

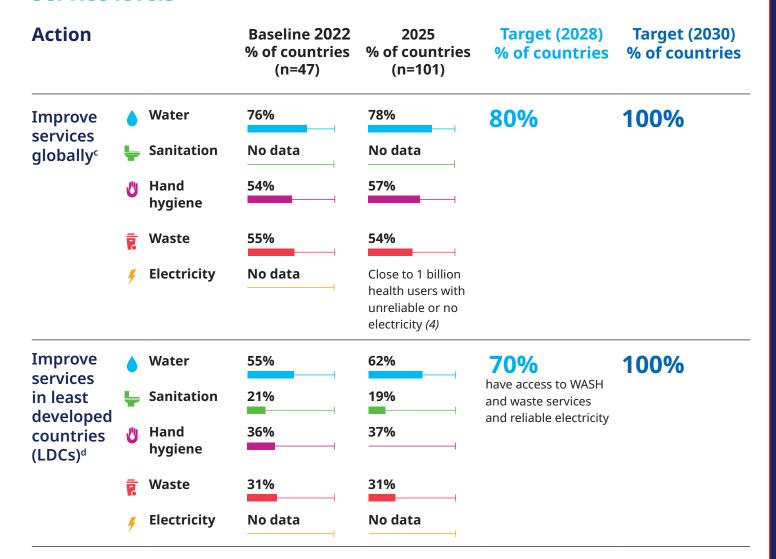
Integration, policy and governance

Action	Baseline 2022 % of countries (n=47)	2025 % of countries (n=101)		Target (2030) % of countries
Baseline service levels	75%	90%	100%	100%
National standards	52%	58%	75%	100%
Costed roadmaps with dedicated resourcing for improved WASH, waste and/or electricity	No data	46%	80%	100%
National coordination mechanisms and intersectoral governance and action	No data	58%	70%	100%
Monitoring WASH, waste and/or electricity in health information systems	10%	21%	50%	100%
Sufficient financing for services ^b	11%	17%	40%	100%

^a In the Global Framework for Action (2024–2030), the original targets were set at 2026. These have been adjusted to 2028 to align with reporting for the UNGA resolution, WHO/UNICEF Joint Monitoring Programme and Global Action Plan on IPC.

^b These data are from preliminary findings (as of May 2025) from the UN-Water GLAAS 2024/2025 country survey and denote countries which report that they have secured at least 75% of the financing needed to reach national targets on WASH and waste in health care facilities. For more information, refer to the GLAAS portal at https://glaas.who.int/.

Service levels



Equity, inclusivity and community engagement

Action	Baseline 2022 % of countries (n=47)	2025 % of countries (n=101)	Target (2028) % of countries	Target (2030) % of countries
Inclusivity of WASH services and processes at national and facility levels ^e	No data	84%	50%	100%

^c Data listed for 2020 are from 2019, and data listed for 2025 for water and hand hygiene are from 2022 and for waste from 2021, the most recent years for which global data estimates are available.

d Data for 2020 are from 2019, and data for 2025 are from 2023, except for hand hygiene which is from 2021, the most recent years for which data from LDCs is available.

Denotes the percentage of countries that report having plans that address inclusivity of WASH services and mainstream gender-transformative WASH and rights (equity, disability) in designing and implementing WASH systems. Such plans are resourced, implemented and monitored.

1.3. Spotlight on key findings

The main findings on this report indicate that many countries have made efforts to scale up improvements in WASH, waste and electricity services in health care facilities. This is especially the case for updating standards, establishing baselines and developing roadmaps. Progress on these actions suggests there is an immediate window of opportunity to build upon these fundamental systems strengthening efforts to invest in better services.

Country commitment to ensuring fully functional health care facilities is growing

In 2025, 101 countries provided validated data for the country tracker, more than doubling the 47 countries that submitted in 2020. This reflects a growing commitment by national authorities to assess their status and strengthen national capacities. A total of 24% of these 101 countries are low income, 40% are lower-middle income and 36% are upper-middle or high income.

Over half of countries have implemented multiple national actions, the most common being establishing baselines, updating national standards and conducting situational analyse

Most (81%) countries have fully implemented one or more national action, with the most common being developing standards on WASH and waste and undertaking baseline assessments.¹ Of these 82 countries, 24% have fully completed two actions and 56% have fully completed at least three actions.

Among many Least Developed Countries (LDCs), many national system actions have been implemented, reflecting readiness to implement

LDCs that have implemented most national actions, including assessing baselines, strengthening standards, regular monitoring and developing and implementing national roadmaps are Ethiopia, Lao People's Democratic Republic, Liberia, Madagascar, Malawi, Mali, Nepal, Niger, Rwanda, Sudan and Uganda.² To ensure these actions result in better services, committed leadership backed by regular, sustainable financing is needed.

Since 2020, more countries have conducted baseline assessments and situational analyses, and initiated regular monitoring

Across the 39 countries that submitted data in 2020 and 2025, the most progress occurred in conducting baseline assessments (from 38% to 67%), developing situational analyses (from 39% to 53%) and integrating WASH and waste into routine monitoring using health management information systems (HMIS) (from 11% to 26%). Over the five years, the countries which made the greatest progress across all national actions were Niger, Malawi, Maldives, Papua New Guinea and Uganda.

Most countries have updated and validated WASH and waste standards and are expanding national actions electrification.

The vast majority of countries have partially or fully implemented the national action focused on developing, updating and validating standards on waste (90% of countries) and WASH (70% of countries). Nearly half, 48% of countries (36 out of 75) have established a national baseline for electricity, 36% of countries (25 out of 69) have developed costed roadmaps, and 44% of countries (31 out of 71) have incorporated monitoring indicators for electricity access into their HMIS.

Few countries report sufficient funding to implement plans

While 54% of countries (n=97) have an approved national plan or strategy, only 21% of those countries have adequate dedicated funding (75% of more) to implement it.³ This gap indicates that countries need to both unlock and allocate domestic funding, which often is highly constrained. It also illustrates that external aid needs to align with and support national priorities and systems.

Gender and equity principles are streamlined within several national actions, but more efforts are needed to assess implementation

A large proportion (84%) of countries have integrated equity and inclusivity into their policies. This includes gender quality in planning and implementation processes, ensuring those with disabilities can access to toilet and hand hygiene facilities and targeting resources for vulnerable populations. However, limited monitoring has been conducted to assess how effectively these policies are being implemented.

Countries are integrating climate resilience and sustainability considerations into assessments, guidelines and policies on WASH in health care facilities

Nearly half (44%) of countries that are updating and/or implementing WASH and waste guidelines have integrated climate resilience, mitigation and sustainability considerations. These are specific to WASH, and include guidance such as installing safe water storage, upgrading pipes with green materials and reducing leaks and segregating and recycling non-hazardous waste. These efforts are an important step within a comprehensive approach towards climate resilient and environmentally sustainable health care facilities and health systems.

¹ "Fully implemented" refers to countries which achieved a score of 4 (scale 1–4) for the specific action. Refer to Annex 3 in the full report for the scoring criteria for each action.

² The determination of the top performers is based on total score achieved across all nine actions (calculated as a percentage). The overall score is calculated by summing the score for each of the nine scored national actions (1–4), for a possible total of 36. These are countries with overall scores of >81%, indicating nearly or fully implementing most of the national actions.

This is based on preliminary data from the GLAAS 2024/2025 country survey. The data and full report will be published in late 2025. More information can be found at https://glaas.who.int/.