THE WATER, SANITATION AND HYGIENE SECTOR AND ITS RESPONSE TO COVID-19: INITIATIVES IN LATIN AMERICA AND THE CARIBBEAN

Annex 3b: Measures adopted in Caribbean countries[1] in response to the pandemic.

Updated until: June 17, 2020

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1 This note maps measures taken by eight non-Spanish speaking Caribbean and South American countries. For the sake of simplicity, in the document we will refer to them as "the Caribbean countries" or region. The countries are: The Bahamas, Barbados, Belize, Guyana, Haiti, Jamaica, Suriname, and Trinidad and Tobago.

The COVID-19 pandemic has highlighted the importance of long-term water, sanitation, and hygiene (WASH) programming. Often WASH works separately from the health sector, there is now a need for WASH intervention to be considered an essential public health intervention.

Since the outset of the pandemic, SIWI, in collaboration with UNICEF, has conducted a mapping of initiatives that countries and WASH stakeholders are implementing in the COVID-19 response during the first months (March - May 2020).

On April 15, a brief concept note was published to present and list a number of measures and initiatives that Latin American countries have adopted and implemented in the response to assure WASH services to the population. The concept note was complemented with different annexes that updated the situation in March 31[1] and 15 May.[2] In addition to the Latin American and the Caribbean exercise, measures have been mapped in around 90 countries worldwide.[3] Initially, an analytical framework of 4 pillars and 43 activities was developed as a template for structuring the WASH response at country level. The impacts have been significant. The framework

1 Annexes 1 and 2 map measures and initiatives that the WASH sector has implemented in the COVID-19 response in the following countries: Argentina, Brazil, Chile, Panama, Paraguay, Guatemala, Ecuador, Honduras, Costa Rica, Perú, Colombia, El Salvador, Venezuela and Mexico. They have been prepared based on web searches of initiatives and measures taken by governments, utilities and bilateral and multilateral cooperation agents in Latin America and the Caribbean. Therefore, the main sources of information used have been the official websites of governments (national and/or provincial in the case of federal countries), websites of utilities and their national and international associations, news stories published in the media, references on Twitter and other social networks, and interviews with UNICEF staff, regulators and local stakeholders.

2 This mapping has been expanded to increase the number of Latin American countries from 16 up to 18, and a new Annex (Annex 2b) has been developed to show updated and new measures introduced in six non-Spanish speaking Caribbean countries.

3 Mapping in Middle East and North Africa (MENA) has included a total number of 21 countries, while 37 additional countries from East Asia and Pacific, South Asia, Eastern and Southern Africa and West and Central Africa have been also covered (5, 12, 5 and 16 countries, respectively)

has already been adopted by the national coordination platforms in 9 countries in Latin America and used to complement already existing national response plans in at least 2 other countries.

Based on this initial response framework, this annex first outlines an evolution of the concept. It works under the assumption that countries' response will evolve into four phases. These four emergency phases are: i) lockdown; ii) de-escalation from lockdown; iii) recovery and iv) working towards resilience. The content of these four phases are explained further down the document. The current update maps measures of the first two phases. The framework has been therefore expanded to include five target areas and more than 15 new initiatives. In so doing, it helps track certain activities in relation to the phases, and e.g., clearly show how WASH services are delivered during the de-escalation phase in public facilities such as schools, health care facilities, and public spaces.

Then, it complements previous annexes by presenting additional findings from the first update of the mapping for eight non-Spanish Caribbean and South American countries. It presents an overview of initiatives that WASH stakeholders have launched or are implementing in the COVID-19 response to assure WASH services in these countries. The database used for mapping the measures, with more detailed information at country level with its source can be seen here.

Evolving from lockdown to new emergency phases

As the crisis evolves from response to de-escalation and eventually to recovery, both the context and sector priorities will shift accordingly. SIWI and UNICEF LACRO are preparing a concept note[4] where the COVID-19 response is analysed along four different phases. Then, besides the lockdown phase, where typical measures included confinement, physical isolation, and severe mobility restrictions, three additional phases can be defined. In the **de-escalation phase**, countries return to the "new" normality and society restarts with new, more flexible physical distancing measures. It includes e.g. the partial back to work and the schools reopening. During the de-escalation, hygiene promotion and Infection Prevention and Control (IPC) will need to continue at scale with a focus on schools, health care facilities and public spaces and will need to be matched in ambition with the assured availability of soap, water, and handwashing facilities. Specific focus on vulnerable groups is needed, with parallel support extended both technically and financially to utilities. The focus in **the recovery phase** is on keeping the quality of services while extending the services for the population left behind. Users will need to pay for affordable services and support the financial viability of utilities and small service providers. In the last phase, namely **working towards resilience**, the sector learns from both failures and best practices, and prepares contingency plans (including prevention and mitigation measures) for new emergencies, either in the form of a new COVID-19 wave or any other disaster.

The figure below shows that each phase is characterised by a given context, which determines the needs and demands in relation to WASH, as well as the level of service to be delivered to households and in essential institutions. The design of the response therefore needs to be adjusted and adapted to the specificities of each phase, integrating new sets of activities and measures that can be implemented by countries. It is nonetheless important to point out that there is not a linear and standard evolution between phases, since countries will progress at different speeds, relapses can occur (e.g. in case of a second wave of infections), and the starting point for the recovery phase will differ greatly from one country to another and from one region to the other within countries.

4 SIWI (2020). Water, Sanitation and Hygiene (WASH) covid-19 response from governments, regulators and utilities. Beyond Crisis Management, towards resilience building (forthcoming).

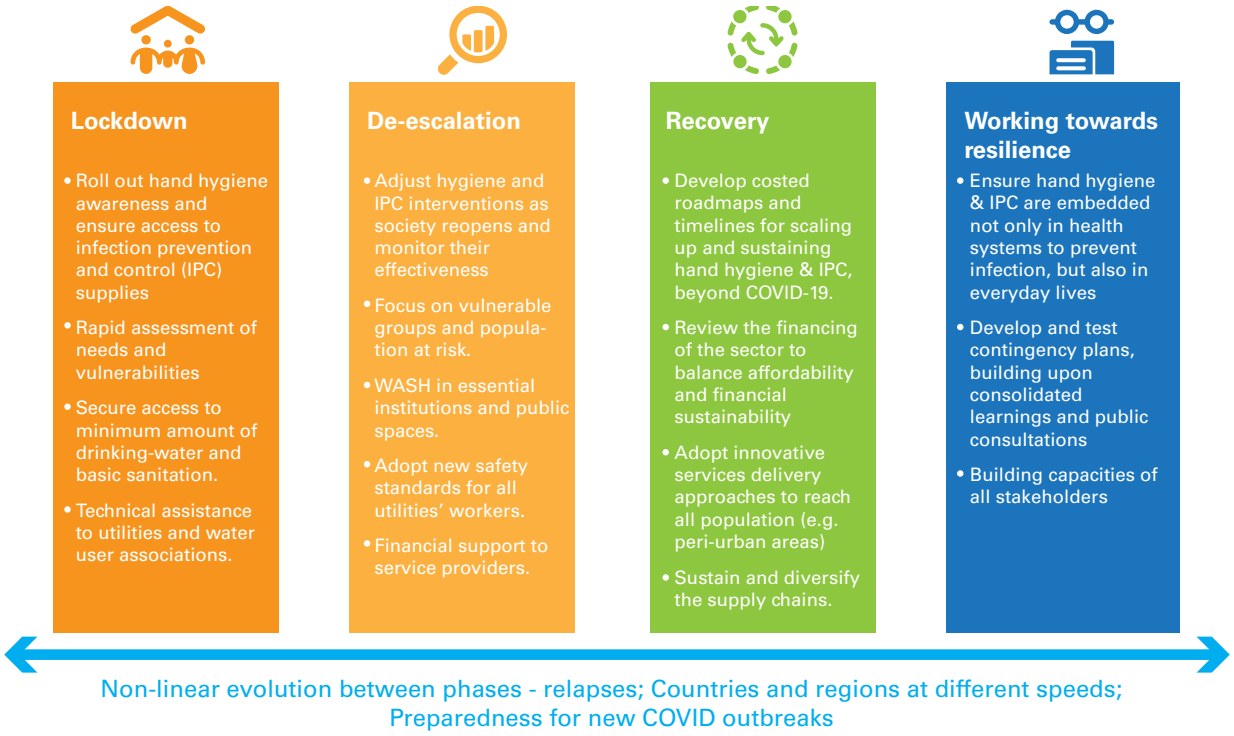

Figure 1. COVID-19 emergency phases and WASH priorities

Findings for the Caribbean.

Using data from CARICOM member's respective Ministries of Health and Johns Hopkins University, as of June 17th there had been over 7,000 official cases in the countries under review, with Haiti (over 5.400 cases) and Jamaica (over 680 cases) representing the vast majority. As the situation has developed, all countries reviewed have taken proactive measures in response to the COVID-19 emergency. Overall, a significant number of measures seek to increase availability and accessibility to drinking water for all. On the other hand, few measures have been identified to provide technical and financial assistance to utilities, which might hamper their capacity to provide services in the mid- and long-term. More specifically:

1. Many countries have implemented measures prohibiting the disconnection of users and reconnecting previously disconnected users, as well as ensuring a minimum daily volume of drinking water for vulnerable and unconnected households through infrastructure expansion. This includes e.g., the drilling of new wells in The Bahamas, increasing the number of water tankers reaching those districts that are affected by outages in Barbados, and increasing the water supply from 12h to 24h in key areas in Guyana.

2. An increasing number of countries have realized the economic hardship of customers, and have put in place measures to alleviate the cost of bills, such as in Guyana where VAT has been removed from water and electricity bills until the end of June, and in Belize, where water bills were reduced by 25% for three months for the majority of customers (those consuming less than 3000 gallons/month).

3. In order to sustain the increase, the coverage and provision of water and sanitation services several countries have cited the COVID-19 crisis as catalyst for expansion of infrastructure works through the acquisition of drilling rigs and the installation of new wells. However, no measure has been found regarding the need to ensure electricity access for utilities to perform their operations and very little has been found

with respect to ensuring the supply chains of material needed for these operations.

4. However, water utilities in several of the countries reviewed have cited a loss of revenue due to the pandemic. Unless supported by government or donor funds this might lead to lower quality services, or lower coverage in the next phases of the recovery, or that encouraging service expansions to previously unserved populations are not sustained.

5. In some countries, water trucking is ensuring poorly served or unconnected households get water, with both Belize, Jamaica and Trinidad and Tobago expanding their fleet of water trucks. This work is even more important because of drought and low water levels in key reservoirs. Thus, water conservation advice is also increasingly being communicated to users.

6. The water utilities in all countries reviewed have active Facebook pages where important information is communicated to customers. These pages existed even before the current pandemic and served as important information sources regarding e.g. planned or emergency water outages, but seem to have become more important in recent months.

7. Few measures have been found regarding the implementation of specific sanitation measures. In Guyana, Guyana Water Inc distributed care packages to Venezuelan migrants to reduce the risk of spreading COVID-19, including constructing Ventilated Improved Pit Latrines (VIP) and hand-washing sinks. Such measures are particularly relevant for displaced persons and confined people who do not have access to sanitation and need to use shared or public toilets, as well as for essential workers if public infrastructures are not available. There were some complaints of confined people, both in quarantine and in prisons, about poor facilities.[5]

8. As most countries are reopening as a result of falling number of daily cases, moving into a phase of deescalating the immediate responses to the pandemic, they are beginning to implement new measures for areas where people are likely to gather. Those countries which will reopen for tourists, such as The Bahamas, are introducing measures for the disinfecting of public spaces, as well as hygiene practices in hotels and restaurants.

9. Countries which are reopening schools, such as Jamaica and Trinidad and Tobago, are ensuring handwashing stations are equipped with soap and water and that areas are disinfected before each new school day.

10. While most countries have moved to reopen their countries, Suriname has been forced to reintroduce stringent measures after a number of new cases were discovered, particularly in the rural interior of the country, where new curfews have been announced and villages have been put under quarantine. The rural interior of the country is part of Amazonia, with fears that indigenous groups will be severely affected. On 11th June 11 out of 24 reported new cases were discovered in the village of Sipaliwini, on the Brazilian border. Various NGOs, such as the Amazon Conservation team have been working with indigenous groups, e.g. providing health safety infographics and posters, audio messages and videos in multiple languages, including indigenous languages (Sranantongo, Trio, Wayana, and Matawai).

11. Little evidence has been found with respect to ensuring that the needs of women and girls in relation to water, sanitation and hygiene (WASH) are being addressed. According to a recent report from the Economic Commission for Latin America and the Caribbean (ECLAC)[6], women are in a "particularly vulnerable situation" since they are often under informal employment

5 Guyana Chronicle. (2020). CHC, GWI and UNICEF to distribute hygiene kits in Region One. Available at: https://guyanachronicle.com/2020/06/08/chc-gwi-and-unicef-to-distribute-hygiene-kits-in-region-one?fbclid=IwAR0SP9wU7AT5t5IzPIlcwOIF6eUFPjIoZ55qxMHe79SV-Tgh6gK9cFuumas

6 Economic Commission for Latin America and the Caribbean (ECLAC) (2020). El desafío social en tiempos del COVID-19. 14 May 2020. Available at: repositorio.cepal.org/bitstream/handle/11362/45527/5/S2000325_es.pdf

situations, with few guarantees and limited access to social safety nets in many countries. Moreover, quarantine is likely to increase their burden of responsibilities at home, which in turn makes it essential to ensure that the provision of WASH services reaches this particular group. However, there are several initiatives, most small-scale, led by non-governmental organizations and private donors regarding the provision of hygiene kits for families at risk, including menstrual hygiene products.

12. Few interventions appear to be adopted by countries to secure the continuity of WASH services and improve intervention and prevention control in essential institutions, such as health care facilities or isolation centers. This puts specific vulnerable groups in higher risk.

13. Some utilities are putting their own measures in place to protect workers such as providing face masks and equipment to its employees. These measures include sanitary protocols to safely provide water to the general public and heightened safety protocols at work sites. However, no measures have been found for personal protective equipment (PPE) to informal water and sanitation workers.

14. Initiatives to provide the technical and financial support that utilities need has shown to be weak, with only very few operators receiving funds to guarantee operation of services. No measures have been identified to support small and/or community service providers operating in rural areas. Thus far, no monitoring initiatives have been detected to promote rapid detection of service delivery failures and promote corrective actions.

Coordinating the response of the Caribbean countries

Given the uniquely shared characteristics of the Caribbean countries several regional coordination platforms exist which have responded in various ways to the pandemic. This indicates experience in coordinating relief efforts and could be an advantage in responding to emergencies. For example:

15. The Caribbean Disaster Emergency Management Agency (CDEMA) which is a regional inter-governmental agency for disaster management in the Caribbean Community (CARICOM), mainly responding to the shared threat of hurricanes, cyclones and floods, yearly causing major losses in infrastructure and livelihoods. Consequently, response teams have been created to reinforce the preparedness and social protection systems ensuring access to safe water, emergency sanitation measures, while supporting efficient coordination of humanitarian assistance and management of information[7]. For this particular emergency, a Regional Protocol designed to support CARICOM States in their response to COVID-19 has been finalized with the support of Regional Institutions of CARICOM and submitted to the CARICOM Secretariat[8].

16. The Caribbean Water and Wastewater Association (CWWA)[9] is a grouping of water, wastewater and solid waste professionals in the public and private sectors who work closely with relevant authorities and disseminate relevant information to its members. On May 4th, Miya Water, in partnership with the Caribbean Water and Wastewater Association (CWWA), organised a webinar aimed at water supply and sanitation service operators to discuss how the Caribbean countries, and particularly the water industry, are responding to the challenges of COVID-19[10].

7 Pan American Health Organization (2020). Hurricane Irma and Maria in the Caribbean. 13 May 2020 Available at: https://www.paho.org/disasters/index.php?option=com_content&view=article&id=3613:hurricane-irma-and-maria-in-the-caribbean-2&Itemid=904&lang=en

8 Caribbean Disaster Emergency Management Agency (2020). COVID-19 Outbreak in CDEMA Participating States. 13 May 2020. Available at: https://www.cdema.org/CDEMA_Situation_Report_9_-_COVID_19_Outbreak_7May2020.pdf

9 Caribbean Water and Wastewater Association (2020). COVID-19 Guidance for Water Utilities. 13 May 2020. Available at: https://cwwa.net/news/covid-19-guidance-for-water-utilities/

10 The webinar can be accessed here: https://www.youtube.com/watch?v=KMpykDdUCUg

17. CAWASA (CAWASA) is a regional organization of water utilities dedicated to serving the growth and development of its members. CAWASA is the successor organization to the Caribbean Basin Water Management Programme Inc. (CBWMP Inc.).

18. Health agencies have also been involved in the response. The Caribbean Public Health Agency (CARPHA) has activated its Incident Management Team (IMT) and is coordinating the Regional preparedness and response to this new incident. CARPHA has issued Situation Reports (SITREPS) to CARPHA Member States (CMS) and other regional stakeholders.

19. Similarly, the Pan American Health Organization (PAHO) is coordinating support for the Caribbean countries. Direct assistance include PPE distribution to the Ministries of Health and Education in Barbados, Suriname and Belize, media training on reporting on COVID-19 for journalists in Suriname, as well as providing key recommendations on Water Sanitation and Hygiene in e.g. healthcare facilities and for sanitation workers for the Caribbean.

20. The World Food Programme established a Caribbean COVID-19 Logistics Cell (co-led by CDEMA) including the Pan American Health Organization (PAHO), UNICEF, Multinational Caribbean Coordination Cell (MNCCC) military members in the Caribbean, ECHO, Global Affairs Canada, UNOPS, IFRC and French Red Cross (with more entities joining) to strengthen coordination and to gain an understanding of regional supply chain needs and potential common service support.

21. UN Women Multi-Country Office for the Caribbean (MCO-Caribbean) hosts regular calls with the National Gender Machinery (NGM) to ascertain need as well as support sharing of better practices across countries in the region. The Belize NGM participated in the EnGenDER joint project pre-training UN Women MCO-Caribbean hosted on gender mainstreaming in COVID-19.

22. Many other actors including the multilateral banks, UN agencies, humanitarian and relief agencies are adjunting their programs to appropriately contribute to the response.

Table 1: Measures adopted in Caribbean countries in response to the COVID-19 pandemic. Last update: June 17, 2020

The activities in red are those referring to the de-escalation phase, and therefore have been mapped for the first time in this version of the matrix.

Legend: x = There is a governmental initiative at national level; x = There is a governmental initiative at sub national level or a non governmental initiative; No information

Measure / Initiative	CARIBBEAN COUNTRIES							
	BAH	BAR	BEL	GUY	HAI	JAM	SUR	TRI
1. Intensify behavior change population-wide initiatives and awareness-raising campaigns for handwashing with soap								
Promoting frequent and proper handwashing with soap and water using adequate communication strategies to reach all population segments in a gender sensitive manner, with a special emphasis on the most vulnerable groups.	x	x	x	x		x	x	x
Identifying and **training community leaders** in prioritized rural areas to promote and monitor frequent and proper handwashing and other IPC measures in their respective communities.					x		x	
Fighting **disinformation campaigns** and fake news, ensuring people are able to access reliable information.	x	x	x		x		x	x
2. Strengthen Infection Prevention and Control (IPC) in households and institutions								
Promoting other **IPC measures in households**. Special attention to confined households with shared WASH facilities and most vulnerable groups. Make content gender sensitive and available in the different languages used in countries.					x		x	
Promoting **domestic water treatment** if there is no access to safe drinking water (e.g. boiling water, chlorine tablets, filters, etc.) and proper handling and storage of treated water in households with no piped connection.								
Introducing measures and campaigns for **water-saving and efficiency**.		x	x	x		x	x	x
Promoting more stringent IPC measures in Health Care Facilities (HCFs) and develop safety protocols for patients and staff. Establish clear procedures for appropriate final disposal of hazardous and medical waste.			x	x				
Promoting other IPC measures at the schools and the early childhood centers, for children, students and staff. Establish clear procedures and develop safety protocols.						x		
Promoting other IPC measures at other public institutions, develop safety protocols. Establish clear procedures and develop safety protocols								x
Promoting other IPC measures at Internally Displaced People (IDP) camps, develop safety protocols. Establish clear procedures to process used masks and equipments								
Rehabilitating or constructing new handwashing stations and sanitation facilities in exposed collective sites and public spaces. The quantity of hand hygiene stations should consider the number of users to better encourage use, reduce waiting time (taking into account that it is estimated that women need the double of time to use a toilet than men) and guarantee physical distancing.				x	x	x		
Promoting **improved and water efficient cleaning and disinfection in public spaces** and high-risk areas (e.g., public fountains, recreational areas, schools, public places, institutions offices, etc.).	x				x	x		
Establishing monitoring programmes to measure and follow-up effectiveness of IPC measures and assess impact on specific target groups (households, schools, HCFs, etc.)								
3. Preserve the ability of all people, including the most vulnerable, to meet their basic needs in relation to water, sanitation and hygiene								
Identifying priority intervention areas, supporting national multi-sector mapping of those areas most at risk from COVID-19 ("hotspots") [1]. Gender dissaggregated data-driven, targeting of vulnerable groups and households, making best use of available data and conducting socio-economic studies where needed.					x	x	x	x
Forbidding disconnection of the water supply to households who are unable to pay bills, under any circumstances.	x	x	x	x	x	x		
Waiving payment of reconnection fee to all households disconnected for non-payment that do not currently receive water services.	x	x			x	x		

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Measure / Initiative	CARIBBEAN COUNTRIES							
Legend: x There is a governmental initiative at national level; x There is a governmental initiative at sub national level or a non governmental initiative; No information	BAH	BAR	BEL	GUY	HAI	JAM	SUR	TRI
Ensuring a **minimum daily volume of drinking water for all households** classed as vulnerable or not connected to the main network, through infrastructure rehabilitation, expansion and/or unconventional solutions respecting physical distancing (at least, one-meter between taps) - extended opening hours	x	x		x	x	x		x
Ensuring provision of WASH services to all segments of population **living outside a home** [2].				x	x	x	x	x
Ensuring that there are specific measures aimed at **addressing the needs, interests and socially defined roles of women and girls** in relation to water, sanitation and hygiene			x					
Establishing, maintaining and/or extending (in collaboration with social protection services) the **financial instruments** needed to **facilitate service payments**, particularly **for vulnerable households**: implementing Direct Cash Transfers, subsidy systems, social bonus, freezing bill collection, writing off debts for non-payment, waiving households from reconnection fees, postponement of tariff adjustments, etc.	x	x	x	x		x		x
Awareness raising and developing incentives to foster **willingness to pay for water and sanitation**								
Ensuring a free **minimum basic consumption** for families anticipating an increase in consumption due to better hygiene and the confinement of many people to their homes.					x	x		
Providing **non-centralized basic sanitation solutions** (e.g. compact toilets, latrine emptying and fecal sludge management, etc.), through unconventional technologies when needed, to all **households not connected to the sewerage system**, in order to prevent worsening the prevalence of open defecation.				x				
Ensuring the **availability and affordability of basic products for family hygiene** and domestic water treatment, either through direct distribution, cash-based interventions or market control mechanisms (e.g., by controlling prices fluctuations for WASH commodities).			x	x		x	x	x
Guaranteeing access to **electricity and communications** for users so they can communicate with service providers and authorities, receive information, make online payments, etc.	x					x		x
Establishing **communication channels between utilities and users**, such as dedicated webpages for COVID-19, hotlines, etc. Real-time information collection and advice (queries or concerns consumers may have about bills or service).	x	x	x	x	x	x	x	x
Ensuring availability of public waterpoints while guaranteeing that public or community bathrooms are open, available and accessible at an affordable price to people who do not have them at home and/or are doing essential work outside. **Conducting rapid assessments of the WASH situation in public toilets and public waterpoints (kiosks)**, to guarantee that public facilities are properly operated and maintained, securing the continuity and quality of water and sanitation services (24*7), including engaging caretakers implementing regular cleaning and disinfection practices with chlorine-based products.								
Integrating **gender sensitive approaches** in access, use and control of WASH services, focusing on specific needs and interests of men and women, including MHM measures.								
4. Guarantee the continuity, affordability, and safety of WASH services								
Identifying critical intervention areas ("hotspots") in the utility's service area to prioritize COVID-19 response interventions [3].								x
Undertake a needs assessment and technical assistance demands for informal WASH providers (create a directorate, assure info sharing, collect their needs of supplies, etc)			x					
Conducting regular **monitoring of WASH supplies and services** access and prices, and take corrective measures when needed.					x			
Advocating for reliable sub-national and national **WASH supply chains**, while sustaining, strengthening and diversifying the **supply chains of all products and materials needed to operate water and sanitation services** (chlorine-based products and disinfectants, chemicals, spare parts, etc.), ranging from rural small-scale systems to urban, large-scale systems. This might include from support to local production to exemptions for sanctions or special clearances for materials and equipment based on humanitarian need.					x			
Expanding **infrastructure and extending** coverage of water and sanitation services to **unconnected areas**.	x	x	x	x	x			x

Measure / Initiative	CARIBBEAN COUNTRIES							
Legend: x There is a governmental initiative at national level; x There is a governmental initiative at sub national level or a non governmental initiative; No information	BAH	BAR	BEL	GUY	HAI	JAM	SUR	TRI
Ensuring **proper operation of drinking water systems at all stages** (protection from source to consumption). Planning preventive maintenance tasks at all critical points of the system (e.g. at the intake, pipelines, in the treatment plant and in the distribution network). Monitoring residual chlorine at specific key points and for strategic users (e.g., health care facilities, nursing homes, early child development centers and schools). Ensure proper disinfection of water supply scheme to offices (networks not in use during lockdown) - Accelerate measures on water conservation and efficiency gains, e.g. leakage reduction to counteract the increased water demand.	x			x				x
Ensuring **proper operation of the sewerage system and non-centralized sanitation solutions** at every point of the sanitation chain: emptying of latrines and septic tanks and transport, treatment and final disposal of fecal sludge. **Ensure safe decommissioning of WASH services** in temporary facilities (e.g. temporary health care facilities, isolation and quarantine centres etc.)					x			
Adapt Monitoring and Evaluation (M&E) plans to control COVID-19 presence in water and wastewater, including a **proper analysis** of treated effluent in wastewater treatment plants - before its discharge to water bodies -, and in all critical points of the sanitation chain.								
Securing **access to energy / electricity for utilities,** to ensure the operation of water and sanitation services.								
Development of new online services waiting for back to normality / development of new relationship with costumers waiting for the reopening of offices and agencies.			x				x	x
Ensuring additional funding for service providers for the extra costs and lower income while coping with the emergency.								
Ensuring **proper waste management, at all stages.**					x			
Ensuring availability and access to **appropriate personal protective equipment (PPE)** for service providers' staff with risk of exposure to virus. Adoption of other protection measures.	x	x						x
Ensuring availability and access to **appropriate personal protective equipment (PPE)** for informal sanitation (excluding solid waste) workers with risk of exposure to virus. Adoption of other protection measures.								
Conducting rapid assessments [4] of the **WASH situation in health care facilities**, **securing the continuity and quality of water and sanitation services** (24*7) in health care facilities, including engaging in frequent hand hygiene using appropriate techniques, implementing regular cleaning and disinfection practices with chlorine-based products, and **safely managing health care waste (including PPE).** Adopt alternative and decentralized mechanisms, if needed.		x	x	x				
Securing the continuity and quality of water and sanitation services **in isolation centers and in social care institutions** (for elderlies, disabled, homeless, childcare centers, etc.) **and centers for women victim of violence**, including engaging in frequent hand hygiene using appropriate techniques and implementing regular cleaning and disinfection practices and safely managing waste (including PPE).								
Ensuring the availability, quality and continuity of **water, sanitation and handwashing services in schools (including early childhood development (ECD) centers)**, using unconventional mechanisms if necessary, in preparation of ECDs' and schools' reopening. Ensuring safe schools & early childhood centers operations and adapt school & early childhood centers' policies to use WASH facilities.				x	x			
5. Provide technical and financial support to utilities								
Promoting **correct monitoring of utilities** and middle to small-scale operators by the government. Developing a simple monitoring system to facilitate early detection of service delivery failures and promote corrective actions.								
Support tracking information in order to evaluate the **economic impacts of the crisis** for the sector and design of recommendations (solutions).								
Providing **technical assistance to utilities** for the implementation of appropriate strategies and service delivery models that secure provision of services for all (combining at the same time, if needed, centralised and descentralised solutions)								
Providing **technical assistance to utilities** for management, financing, planning, operation and maintenance, etc. Supporting the creation/updating and implementation of emergency response plans or contingency plans.					x			x
Ensure **dialogue with government and financial institutions** to negotiate the debts of utilities								

Measure / Initiative	CARIBBEAN COUNTRIES							
Legend: x There is a governmental initiative at national level; x There is a governmental initiative at sub national level or a non governmental initiative; No information	BAH	BAR	BEL	GUY	HAI	JAM	SUR	TRI
Temporary **revision of regulatory requirements according to the situation** (e.g. performance indicators, regulatory fees, etc.)								
Activating **special funds to guarantee the operation of services**, and to improve, upgrade and expand water and sanitation infrastructure to meet the specific needs caused by the pandemic.		x						x
Ensuring **urban utilities** receive the necessary **financial support and supplies** (including personal protective equipment) to guarantee the proper operation of services.								
Ensuring **rural and community operators** (both formal and informal) receive the necessary **financial support and supplies** (including personal protective equipment) and technical assistance to ensure continuity of service.								
Development of innovative **financial mechanisms to facilitate operators'** access to funds in relation to the crisis (e.g. Develop state guarantees for easing access to markets, adaptation of insurance policies, etc.)								
Establishing a **coordination platform and/or communication channels between government and utilities/ operators (including informal service providers)** and their associations for the exchange of information. Real-time and data disaggregated information collection and advice (queries, concerns about technical, financial, legal, and administrative issues)					x			
Establishing **multi-actor emergency coordination mechanisms** including international and multilateral organizations and other actors.	x	x	x	x	x	x	x	x
Ensuring multi-sector coordination mechanisms beyond the emergency.								

[1] Mapping vulnerability based on 1) multiple risk factors for maintaining basic preventive hygiene and physical distancing (population density, average age, percentage living in the informal economy and day-to-day income, etc.); and 2) multiple risk factors in the context of partial/total confinement and current and potential outbreaks of COVID-19 and other diseases. Areas of high population density and low coverage of WASH services must be especially considered, both at the household and at the community level (few public toilets, etc.), with cases of COVID-19. The presence of health care facilities, markets, nursing homes, prisons, juvenile detention facilities and centers of agglomeration of people with special needs in relation to water and sanitation should also be considered.

[2] Homeless people, people in shelters, nursing homes, refugee/returnee centers, juvenile detention facilities, detention centers, etc.

[3] Criteria for identifying these areas include (but are not limited to) areas of high population density with low coverage of WASH services at both the individual and community levels (few public toilets, etc.) with cases of COVID-19. The presence of health care facilities, markets, nursing homes, prisons, juvenile detention centers and other places where there are many people in need of access to water and sanitation should be taken into account.

[4] One particular methodology proposed for this purpose is the Water, Sanitation and Hygiene for Health Care Facilities Improvement Tool (WASH FIT): www.washfit.org