**A Rapid Assessment Study on Health Care Waste Management in Nepal**

Nepal Health Research Council, Ramshah Path, Kathmandu, Nepal.

Date: 2007

**Background**

Health care institutes generate large amount of diverse wastes. With the steady increase in the number of health care institutions in Nepal, the amount of health care waste generate is also increasing. It was estimated that the total amount of health care risk waste generated by health care facilities in Nepal in 2001 was 20,18, 450 kg per year (with 0.5 kg/patient/day). In addition to increasing quantity, the composition of health care waste is also rapidly changing affecting its sound management. However, the majority of health care institutions in Nepal do not practice safe waste handling, storage and disposal methods. So far, there is no separate mechanism for the treatment of health care waste. This study is being conducted with an objective to assess the current status of the health care waste management activities and prepare a basis to enable medical establishments to comply with guidance and legislation on health care waste management in Nepal.

**Methods**

A steering committee comprising of key stakeholders was formulated for making this study participatory. The earlier studies, national legislations, guidelines, plans and programmers related to health care waste management in Nepal were thoroughly reviewed. Twenty four health institutions were purposively selected for the study. A semi-structured questionnaire and an observation checklist were developed to collect primary data from the selected institutions. The key persons identified on discussion with the chief were interviewed individually and/or in group using the pre-tested semi-structured questionnaire. Relevant action oriented photographs were taken. The quantitative data generated from the field study were first entered in excel sheet. Then Statistical Package for Social Science -13 was used to analyze the data and generate relevant information. The information from consultation meeting was summarized manually. The literature reviewed were scripted and summarized qualitatively.

**Results**

There was no practice of waste quantification in health care institutions in Nepal. Among the surveyed institutions, only 33.4% was found to follow guidelines. Mainly housekeeping department and chief of the health care institutions were termed as responsible body for the management of health care wastes. Management committee was present in only 25% of the surveyed health care institutions. Fifty percent of the institutions coordinated with municipality for health care waste management. All practiced reuse among the surveyed institutions. Almost all institutions were aware that waste should be segregated but it was not properly implemented. The common problem mentioned for no successful implementation of waste was lack of monitoring system. Use of transportation was very limited i.e. 33%. Incineration was present only in 25% of the health care institutions. Autoclave was present in all institutions whereas safe burial was practiced in 45.8% institutions. In most of the health care institutions, the sanitary staff did not use personal protective measures.

**Conclusions**

There needs to be a national policy on health care waste management. A central authorized body is necessary for management of health care waste.

**Keywords:** health care institutions; health care waste; health care waste management.