

COVID-19 Guidance on Face Masks

This document provides guidance on best practices for the use of nonmedical face masks, considering COVID-19. Currently, institutions have varying guidelines and Water Mission has taken these under advisement to produce recommendations for the ministry. Each country program should make sure to comply with national and local guidance, if stricter guidelines are in enforced.

Water Mission Recommendations

Taking into consideration current guidelines provided by the World Health Organization (WHO), the Center for Disease Control (CDC) (see Appendix 1) and other research, Water Mission makes the following recommendations for the use of cloth face masks in relation to COVID-19.

Category	Minimum Requirements
When to use a face mask	<ul style="list-style-type: none"> As of 4/27/20, Water Mission requires ALL STAFF ARE REQUIRED TO WEAR APPROVED FACE MASKS AT ALL TIMES
Approved face masks	<ul style="list-style-type: none"> Two-layer cloth face masks (see specifications below) Single-use nonmedical face masks
Provision of face masks	<ul style="list-style-type: none"> All Water Mission staff should be provided with five (5) cloth face masks per person (plus laundry soap for washing) If using single-use face masks, Water Mission staff should be provided with two (2) face masks per person, per day
Face mask training	<ul style="list-style-type: none"> All staff members must be trained on proper face mask use and management (click link for training presentation)
Proper face mask use	<ul style="list-style-type: none"> Wash hands with water and soap, or use alcohol-based hand rub, before putting on mask and after removing cloth face mask Avoid touching your face and the cloth face mask while wearing it Replace face masks as soon as they become damp with a new clean, dry face mask Single-use face masks should be disposed of immediately after removal Used cloth face masks should be stored in a separate bag until they can be washed
Cloth face mask cleaning and storage	<ul style="list-style-type: none"> Cloth face masks should be washed with soap and hot water after every use, or at least every 12 hours All clean face masks should be stored in a sealed bag (i.e. Ziploc bag)
Additional preventive measures	<ul style="list-style-type: none"> The use of face masks is NOT a substitute for practicing social distancing and hand hygiene Even with a mask on, staff MUST adhere to social distancing and hand hygiene requirements

Cloth Mask Specifications

As of April 22, 2020, the following are the approved specifications for cloth facemasks.

Fabrics	Specifications	Layers
Cotton	100% Cotton, 120-180 thread count	2
Cotton-polyester blend	65% cotton, 35% polyester	2
Canvas	0.4-0.5 mm thick	2

The following specifications are **NOT approved** for cloth face masks:

- Materials: Polyester, spandex, linen, vacuum or coffee filters, scarfs, bandana, cleaning cloths
- Construction: Single layer masks

When to use a cloth face mask

Masks should always be used if:

- A staff member, tap operator, or WASH promoter develops symptoms while conducting Water Mission activities. Upon developing symptoms, the person experiencing symptoms should go home
- Providing care for a person with suspected COVID-19 infection

As always, staff should adhere to requirements provided by national and local authorities. In situations where the use of masks is required, best practices should be followed about how to wear, remove, and dispose of masks, and for hand hygiene after removal (see mask management section below).

The use of a mask alone is insufficient to provide an adequate level of protection. Whether or not masks are used, maximum compliance with hand hygiene and physical distancing remains critical to prevent human-to-human transmission of COVID-19.

Proper cloth face mask use and management

For any type of mask, appropriate use and disposal are essential to ensure effectiveness and to avoid any increase in transmission. The following information on the correct use of masks is derived from best practices developed in health care settings.

- All clean masks should be stored in a sealed bag (i.e. Ziploc bag)
- Wash hands with water and soap, or use alcohol-based hand rub, before putting on mask
- Place the mask carefully, ensuring it covers the mouth and nose, and don securely to minimize any gaps between the face and the mask.
- Avoid touching the mask while wearing it.
- Remove the mask using the appropriate technique:
 - Remove from behind, do not touch the front of the mask
 - Do not touch your eyes, nose, and mouth
- After removal or whenever a used mask is inadvertently touched, wash hands with water and soap or use alcohol-based hand rub
- Replace masks as soon as they become damp with a new clean, dry mask
- When using cloth face coverings, they should be washed depending on frequency of use, or at least every 12 hours. Cloth face masks should be washed with hot water and detergent or soap.
- Cloth face masks should be stored in a separate bag until masks can be washed.
- Do not re-use single-use masks

- If a disposable face mask becomes damp before the end of day, replace with cloth face mask
- Discard single-use masks after each use and dispose of them immediately upon removal.

Provision of cloth face masks

- All Water Mission staff and representatives (i.e. tap operators, WASH promoters, and Safe Water Committee members) should be provided with cloth face masks
 - Five (5) reusable cloth masks per person (plus laundry soap for washing),
 - If country programs are utilizing disposable face masks at least two (2) disposable face mask per person, per day should be provided
 - Staff should always carry hygiene kits that include these masks
- Anyone who receives a mask from Water Mission must receive [training on proper use and cloth mask management](#)
 - Using a mask improperly can pose greater risks than not wearing a mask at all, and proper training is critical

Appendix 1

World Health Organization guidelines

According to the World Health Organization (WHO), there is currently no evidence that wearing a mask (whether medical or other types) by healthy persons in the wider community setting, including universal community masking, can prevent them from infection with respiratory viruses, including COVID-19. As such, the WHO recommends the use of masks should be reserved for health care workers and persons with symptoms, and caregivers when in the same room as the affected person.

The use of masks by healthy persons in the community setting may provide potential advantages of reducing:

- potential exposure from infected person during the “pre-symptomatic” period
- stigmatization of individuals wearing mask for source control.

However, the use of masks by healthy persons presents the following potential risks:

- self-contamination that can occur by touching and reusing contaminated mask,
- create a false sense of security, with neglect of other essential measures, such as hand hygiene practices and physical distancing,
- lead to touching the face under the masks and under the eyes,
- result in unnecessary costs and take masks away from those in health care who need them most, especially when masks are in short supply,
- depending on type of mask used, potential breathing difficulties,
- diversion of resources from effective public health measures, such as hand hygiene.

Acknowledging the potential advantages and disadvantages of mask use, the WHO emphasizes a mask alone is insufficient to provide an adequate level of protection, and other measures should also be adopted. Whether or not masks are used, maximum compliance with hand hygiene and physical distancing are critical to prevent human-to-human transmission of COVID-19.

Center for Disease Control and Prevention guidelines

The Center for Disease Control and Prevention (CDC) advises all persons to use simple cloth face coverings to slow the spread of COVID-19, especially in public settings where other prevention methods such as physical distancing are difficult to maintain and areas of significant community-based transmission.

Per the CDC, the use of face cloth coverings can help prevent the spread of COVID-19 through individuals that are asymptomatic or pre-symptomatic. However, hand hygiene and physical distancing remain critical to limiting the transmission of the virus.

The CDC also emphasizes the use of surgical masks or N-95 respirators are critical supplies that must continue to be reserved for health care workers.

Appendix 2

Quality Assurance/Quality Control

If country programs choose to source their own cloth face masks, the in-country staff and safety security point person is responsible for verifying quality of sourced masks before staff use. If country programs choose to construct their own masks for Water Mission use, please adhere to the QA/QC for cloth face mask construction. We recommend cloth face masks be sourced at country level and not by individual staff members.

Appendix 3

Risk Assessment

Recognizing that different country programs are at different stages in the outbreak, the use of face mask requirements should be followed in accordance to levels* described below:

- Level 1: Countries with no cases
- Level 2: Countries with one or more cases, imported or locally detected, without cases in Water Mission's area of work
- Level 3: Countries with clusters of cases, with cases in Water Mission's area of work
- Level 4: Countries experiencing large outbreaks and community transmission

Level	Who	Mask Use Required
Level 1	All community facing staff, tap operators, WASH promoters	No
Level 2	All community facing staff, tap operators, WASH promoters	No
Level 3	All community facing staff, tap operators, WASH promoters	Yes
Level 4	All community facing staff, tap operators, WASH promoters	Yes

***As of April 22, all country offices are at a level 3 or above.**

References

Recommendations are based on guideline provided by WHO, CDC, and studies on face mask efficacy completed by Cambridge University, Wake Forest Institute for Regenerative Medicine, Smart Air, and more.

Anna Davies, BSc, Katy-Anne Thompson, BSc, et al., “Testing the Efficacy of Homemade Masks: Would They Protect in an Influenza Pandemic?” *Disaster Medicine and Public Health Preparedness*, 22 May 2013.,
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7108646/pdf/S1935789313000438a.pdf>

Center for Disease Control and Prevention, “Recommendations for Cloth Face Covers,”
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>

Oxfam, “Responding during Covid-19: guidance for community facing staff,” accessed 14 April 2020,
<https://www.oxfamwash.org/response-types/covid-19>

Smart Air, “The Ultimate Guide to Homemade Face Masks for Coronavirus,” 21 April 2020,
<https://smartairfilters.com/en/blog/best-diy-coronavirus-homemade-mask-material-covid/>

Wake Forest Institute for Regenerative Medicine. “Testing Shows Type of Cloth Used in Homemade Masks Makes a Difference, Doctors Say,” 2 April 2020. <https://newsroom.wakehealth.edu/News-Releases/2020/04/Testing-Shows-Type-of-Cloth-Used-in-Homemade-Masks-Makes-a-Difference>

World Health Organization, “Advice on the use of masks in the context of COVID-19,” 6 April 2020,
[https://www.who.int/publications-detail/advice-on-the-use-of-masks-in-the-community-during-home-care-and-in-healthcare-settings-in-the-context-of-the-novel-coronavirus-\(2019-ncov\)-outbreak](https://www.who.int/publications-detail/advice-on-the-use-of-masks-in-the-community-during-home-care-and-in-healthcare-settings-in-the-context-of-the-novel-coronavirus-(2019-ncov)-outbreak)

Note

This is Version 2.0 developed on April 27, 2020. To make sure you are accessing the latest version, and to get other helpful resources, visit our [COVID-19 Resources](#) page.