

# **Sanitation Studies and Implications for India**

### What is the issue?

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- Various studies found there is a link between sanitation and stunting. Click <u>here</u> to know more about the issue  $\ln$
- India has much implications from the sanitation studies.  $\slashn$

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### What are the links between Sanitation and stunting?

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• Stunting (low height for age) is driven by multiple factors, one of which is inflammation.

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- Inflammation is a normal biological response of body tissues to stimuli such as disease-causing bacteria (pathogens).
- In but ironically repeated exposure to high doses of bacteria that are not linked with diseases or diarrhoea also cause inflammation.
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- Children living in poor hygiene conditions are regularly exposed to high doses of bacteria that will not cause diarrhoea.
- Inflammation down regulates growth factors, and thus impairs normal growth in children.

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### What are reason behind rejection of the sanitation study?

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 $\ensuremath{\cdot}$  Studies about sanitation has been conducted in lower and middle income

(LAMI) countries.

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- It had attracted considerable traction among health, nutrition and social researchers and policymakers around the world.  $\n$
- Water, Sanitation and Hygiene (WaSH) trials in countries like Kenya and Bangladesh ended, disappointingly, with no palpable reduction in stunting among children.

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• When the effect of poor sanitation is obviously passing on from one generation to the other, it might take at least a generation to adopt WaSH interventions before their outcomes can be seen.

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• Therefore, short-term trials like the ones in Kenya and Bangladesh are bound to show little or no effect.

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## What are the implications for India?

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• In India open defecation remains a persistent problem despite sustained and concerted efforts under the Swachh Bharat Abhiyan (SBA) campaign over the last few years.

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- About 52% of rural India still defecates in the open, India must understand SBA campaign is beyond mere construction of toilets.  $\n$
- Unlike in other countries taken for study, India has a large baseline of ODF (over 50% of open defecation against 1% in Bangladesh) even small improvements can demonstrate significant and palpable changes.  $\n$
- The difference in prevalence of open defecation in urban (7%) and rural (52%) India is large and the figures of stunting are much lower in urban children than among their rural counterparts.  $\n$
- This difference may not necessarily establish the cause-and-effect relationship but it certainly indicates that toilets and sanitation are important factors associated with stunting.  $\n$

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#### How Bangladesh managed sanitation woes?

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- It is indeed true that mere building of toilets cannot prompt people to use them as there are a lot of social, cultural and behavioural aspects attached to it.
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- Bangladesh has managed to bring down open defecation to less than 1% by 2016, from a whopping 42%, in 2006.  $\n$
- A huge chunk of public and charity money was spent on building toilets, and campaign volunteers slogged to change public attitudes and habits.  $\n$
- Children were used literally as whistle-blowers and agents of change while door-to-door campaigns were carried out.  $\n$
- It was done in a dogged campaign in mission mode supported by 25% of the country's overall development budget.  $\n$

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#### Source: The Hindu

