

WORLD TOILET DAY

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Better Sanitation For Better Nutrition





THE GLOBAL SANITATION CRISIS

We Can't Wait for 2.4 billion people to start using basic toilets.

Since 2000, the world has been working towards improving access to safe toilets and ending open defecation through the United Nations Millennium Development Goals (MDGs). 2.1 billion people have started using basic toilets and other improved sanitation facilities since 1990 – today around 68% of the global population have access.

Despite this progress, much work remains to be done. As highlighted in the final MDGs Assessment report, we have fallen short of the sanitation target by 700 million people. Today, 2.4 billion people still do not use basic toilets.¹ Stark inequalities in access to toilets threaten the survival, health, dignity, and safety of vulnerable populations, despite their human right to water and sanitation. Without improved sanitation, women and children are particularly at risk of disease and malnutrition.

2015 is an important year for World Toilet Day, and for development more broadly. As we embark upon the Sustainable Development Goals and look at what must be achieved by 2030 to ensure water and sanitation for all, this year's World Toilet Day theme highlights that improved sanitation is critical to ensuring positive nutrition and health outcomes--building blocks of a sustainable future.

¹JMP (2015). Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment. Accessible from: http://www.wssinfo.org/fileadmin/user_upload/resources/JMP-Update-report-2015_English.pdf



TOILETS AND NUTRITION? UNDERSTANDING THE LINK

Better sanitation supports better nutrition, especially for women and children.

Lack of access to clean drinking water and sanitation, along with the absence of good hygiene practices, are among the underlying causes of poor nutrition. The UN estimates that 946 million people practice open defecation.² Defecating openly means diseases like diarrhea and intestinal worms can quickly spread. According to the World Health Organization, roughly 50% of all malnutrition cases are associated with repeated diarrhea or intestinal worm infections as a direct result of inadequate water, sanitation and hygiene.³ A vicious cycle exists between diarrhea and undernutrition, especially for children.

Kids with diarrhea eat less and are less able to absorb and use nutrients from their food; in turn, malnourishment makes them more susceptible to diarrhea when exposed to fecal material from their environment. This has serious, and often fatal impacts on their health and development. Close to half of all child deaths are related to undernutrition and suboptimal feeding practices.⁴ Poor sanitation and hygiene have also been closely linked to stunting (short height for age) and wasting (low weight for height), which cause irreversible physical and cognitive damage. These conditions respectively affected 159 million, and 50 million children under the age of five in 2014.⁵

There are also devastating implications for young mothers. Women with good nutritional status face fewer risks during pregnancy and childbirth, and see their children enter the world healthy. Currently, at least 20% of all maternal deaths are related to women being stunted and having anaemia (low blood oxygen levels).⁶ These conditions can cause low birth weight, which impacts the child's physical and mental development.⁷

Improving sanitation can play a big role in the nutritional status of women and children. By safely separating feces from human contact and the environment, women and children are more protected from disease and malnutrition; children can realize their full potential, and women and their babies can live healthier and more fulfilled lives.

² JMP (2015). Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment. Accessible from: http://www.wssinfo.org/fileadmin/user_upload/resources/JMP-Update-report-2015_English.pdf

³ World Health Organization. (2008). 'Safer water, better health: Costs, benefits and sustainability of interventions to protect and promote health.' Available at: http://apps.who.int/iris/bitstream/10665/43840/1/9789241596435_eng.pdf

⁴ Black, Robert E., Cesar G Victora, Susan P Walker, Zulfiqar A Bhutta, Parul Christian, Mercedes de Onis, Majid Ezzati, Sally Grantham-McGregor, Joanne Katz, Reynaldo Martorell and Ricardo Uauy. (2013). 'Maternal and Child Undernutrition and Overweight in Low-Income and Middle-Income Countries', *Lancet* Vol. 382, No. 9890: 427–451.

⁵ Levels and Trends in Child Malnutrition UNICEF, WHO, World Bank Group Joint Child Malnutrition Estimates, 2015 edition <uni.cf/jmedashboard2015>

⁶ Black, Robert E., et al. (2008). 'Maternal and Child Undernutrition: Global and Regional Exposures and Health Consequences'. Retrieved from: [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(07\)61690-0/fulltext?dialogRequest=](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(07)61690-0/fulltext?dialogRequest=)

⁷ World Health Organization. (2014). WHA global nutrition targets 2025: Low birth weight policy brief. Accessible from: http://apps.who.int/iris/bitstream/10665/149020/2/WHO_NMH_NHD_14.5_eng.pdf



FACTS

General Water and Sanitation Facts⁸

- Since 1990, 2.1 billion people gained access to improved sanitation and 2.6 billion people gained access to improved drinking water sources.
- 2.4 billion people – that’s about 1/3 of the global population – still do not use a basic toilet (have access to improved sanitation)
- 946 million people—or 1 in 7 people worldwide—do not have access to any toilet, and are forced to go out in the open (practice open defecation).
- 9 out of 10 people who practice open defecation live in rural settings
- We must double our current efforts in order to end open defecation by 2030⁹

Child Health & Nutrition:

- 50% of all cases of undernutrition are associated with repeated diarrhea or intestinal worm infections as a direct result of inadequate water, sanitation and hygiene.¹⁰
- Close to half of all child deaths are related to undernutrition and suboptimal feeding practices ¹¹
- Nearly 1,000 children die every day from diarrhoeal diseases linked to a lack of safe water, sanitation and basic hygiene.¹²

⁸ JMP (2015).

⁹ UNICEF. (2015). Progress for Children. Beyond Averages: Learning from the MDGs. Available at: http://www.unicef.org/publications/files/Progress_for_Children_No._11_22June15.pdf

¹⁰ World Health Organization. (2008). 'Safer water, better health.'

¹¹ Black, Robert E. et al. 'Maternal and Child Undernutrition and Overweight in Low-Income and Middle-Income Countries.'

¹² Prüss-Ustün et al. (2014). 'Burden of disease from inadequate water, sanitation and hygiene in low- and middle-income settings: a retrospective analysis of data from 145 countries,' Tropical Medicine & International Health, Vol 19, no 8: 894-905.



FACTS

Stunting and Wasting:

- Poor WASH conditions have been closely linked to stunting and wasting, which cause irreversible physical and cognitive damage. In 2014 alone, 159 million children under five years of age (nearly 1 in 4 globally) suffered from stunting and 50 million from wasting.¹³
- At least 20% of all maternal deaths are related to women being stunted and having anaemia (low blood oxygen levels).¹⁴
- In 2013 between 15 – 20% of all babies born were under weight¹⁵
- Approximately 25% of all stunting can be attributed to 5 or more episodes of diarrhea before the age of 2¹⁶; 58% of cases of diarrhea are directly related to inadequate water, sanitation and hygiene¹⁷
- Research suggests that access to optimal sanitation reduces the odds of stunting by 27%¹⁸
- Poor sanitation explains 54% of international variation in child height¹⁹

¹³ Levels and Trends in Child Malnutrition UNICEF, WHO, World Bank Group Joint Child Malnutrition Estimates, 2015 Edition <uni.cf/jmedashboard2015>

¹⁴ Black, Robert. E., et al. 'Maternal and Child Undernutrition: Global and Regional Exposures and Health Consequences'

¹⁵ World Health Organization. (2014). WHA global nutrition targets 2025: Low birth weight policy brief. Accessible from:

http://apps.who.int/iris/bitstream/10665/149020/2/WHO_NMH_NHD_14.5_eng.pdf

¹⁶ Checkley, William, Gillian Buckley, Robert H. Gilman, Ana Mo Assis, Richard L. Guerrant, Saul S. Morris, Kåre Mølbak, et al. (2008). "Multi-Country Analysis of the Effects of Diarrhoea on Childhood Stunting." *International Journal of Epidemiology* 37 (4): 816–30. doi:10.1093/ije/dyn099.

¹⁷ Prüss-Ustün et al. (2014). 'Burden of disease from inadequate water, sanitation and hygiene in low- and middle-income settings: a retrospective analysis of data from 145 countries,' *Tropical Medicine & International Health*, Vol 19, no 8: 894-905.

¹⁸ Fink, Günther, Isabel Günther, and Kenneth Hill. (2011). "The Effect of Water and Sanitation on Child Health: Evidence from the Demographic and Health Surveys 1986–2007." *International Journal of Epidemiology*, June, dyr102. doi:10.1093/ije/dyr102.

¹⁹ RICE Institute. (2013). The nutritional value of toilets: how much international variation in child height can sanitation explain? Retrieved from: <http://riceinstitute.org/research/the-nutritional-value-of-toilets-how-much-international-variation-in-child-height-can-sanitation-explain/>



KEY RESOURCES

- JMP (2015). Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment. Accessible from: http://www.wssinfo.org/fileadmin/user_upload/resources/JMP-Update-report-2015_English.pdf
- WaterAid. (2015). Healthy Start: WASH and Child Nutrition. Accessible from: <http://www.wateraid.org/HSWASHandchildhealth>
- World Health Organization. (2014). WHA global nutrition targets 2025: Stunting policy brief. Accessible from: http://www.who.int/nutrition/topics/globaltargets_stunting_policybrief.pdf
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- World Health Organization. (2014). WHA global nutrition targets 2025: Anaemia policy brief. Accessible from: http://apps.who.int/iris/bitstream/10665/148556/1/WHO_NMH_NHD_14.4_eng.pdf
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