



## Importance of WASH and Healthcare for enabling Agriculture-Nutrition linkages in India

### Focus policies and programmes

- **National Health Mission**
- **Swachh Bharat Abhiyan 2014**
- **Draft National Policy for Women 2016**
- **Draft National Plan of Action for Children 2016**
- **National Food Security Act 2013**
- **National Policy for Empowerment of Women 2001**

### Current policy scenario

The **National Policy for Empowerment of Women (2001)** provides that: Special attention will be given to the needs of women in the provision of safe drinking water, sewage disposal, toilet facilities and sanitation within accessible reach of households, especially in rural areas and urban slums. Women's participation will be ensured in the planning, delivery and maintenance of such services.

The **National Food Security Act (2013)** provides for the provision of access to 'safe and adequate drinking water and sanitation' and 'healthcare' for



advancing food security.

**Swachh Bharat Abhiyan** launched in 2014 aims at universal sanitation coverage by October 2019.

▲ A woman feeding her grandchild in a village in Koraput, Odisha.

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The draft **National Policy for Women** (2016) provides for universalising the concept of provision of water and sanitation facilities including menstrual hygiene.

## LANSA research evidence

State and district level studies linking child undernutrition to agricultural prosperity and provisioning of public services highlight the importance of public health provisioning such as sanitation, vaccination and healthcare facilities

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in rural areas, public provisioning for maternal health and women's education as well as social provisioning of food.

Provision of toilets has an important role in reducing child undernutrition. While own toilets are good, access to even public toilets show better nutritional outcomes compared to no access to toilets.

Another study demonstrated clearly that an adult woman's BMI is not only dependent on dietary diversity but also requires enabling environmental



↑ A community bath place for women in a village in Koraput, Odisha.

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## Further reading

Mara Van den Bold M, Kohli N, Gillespie S, Zuberi S, Rajeesh S and Chakraborty B (2015): **Is There an Enabling Environment for Nutrition-Sensitive Agriculture in South Asia? Stakeholder Perspectives from India, Bangladesh and Pakistan** *Food and Nutrition Bulletin* 36(2):231-47

<http://lansasouthasia.org/content/there-enabling-environment-nutrition-sensitive-agriculture-south-asia-stakeholder>

Kadiyala S, Harris J, Headey D, Yosef S and Gillespie S (2014): **Agriculture and Nutrition in India: mapping evidence to pathways.** *Annals of the New York Academy of Sciences* 1331: 43-56

<http://lansasouthasia.org/content/agriculture-and-nutrition-india-mapping-evidence-pathways>

Swarna S Vepa, Brinda Viswanathan, Rohit Parasar and Bhavani R V (2016): **Child Underweight, Land Productivity and Public Services: A District Level Analysis for India** *LANSA Working Paper Series* Volume 2016 No.6 March

[http://ims.ids.ac.uk/sites/ims.ids.ac.uk/files/documents/Land%20productivity%20and%20Child%20Underweight%20in%20TEMPLATE%2020-04-2016%20final\\_I\\_0.pdf](http://ims.ids.ac.uk/sites/ims.ids.ac.uk/files/documents/Land%20productivity%20and%20Child%20Underweight%20in%20TEMPLATE%2020-04-2016%20final_I_0.pdf)

Brinda Viswanathan, Getsie David, Swarna Vepa and Bhavani R V (2015): **Dietary Diversity and Women's BMI among Farm Households in Rural India.** *LANSA Working Paper Series* Volume 2015 No.3 September

<http://lansasouthasia.org/content/dietary-diversity-and-women%E2%80%99s-bmi-among-farm-households-rural-india>

Swarna S Vepa, Vinodhini Umashankar, R V Bhavani and Rohit Parasar (2014): **Agriculture and Child Under-nutrition in India: A State level analysis** *MSE Working Paper* 86/2014 July

<http://www.lansasouthasia.org/content/agriculture-and-child-under-nutrition-india-state-level-analysis>

<http://lansasouthasia.org/blog/agriculture-and-nutrition-leveraging-both-food-and-health>

conditions such as quality drinking water, good sanitation, smoke-free cooking facilities and better access to health care.

“ Adequate social provisioning must be made to ensure access to safe drinking water, sanitation and healthcare. ”

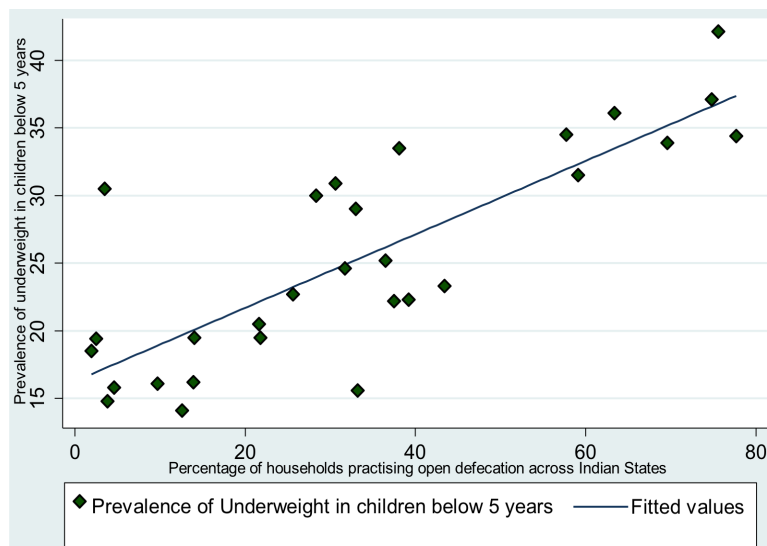
Open defecation is practiced by the majority in both the **Farming System for Nutrition (FSN)** study locations, in Wardha and Koraput districts. Ongoing research in the **FSN** study locations shows that when there is a single-piped water source in a village, women who are more distant/ do not have the time to access it easily, depend on less reliable sources for drinking water. Issues of caste and gender also need to be taken into account in ensuring provision of safe drinking water.

The enabling environment of WASH and healthcare is crucial for agriculture to impact on nutritional outcomes (See **Figures 1 and 2**).

### Recommendations for policy

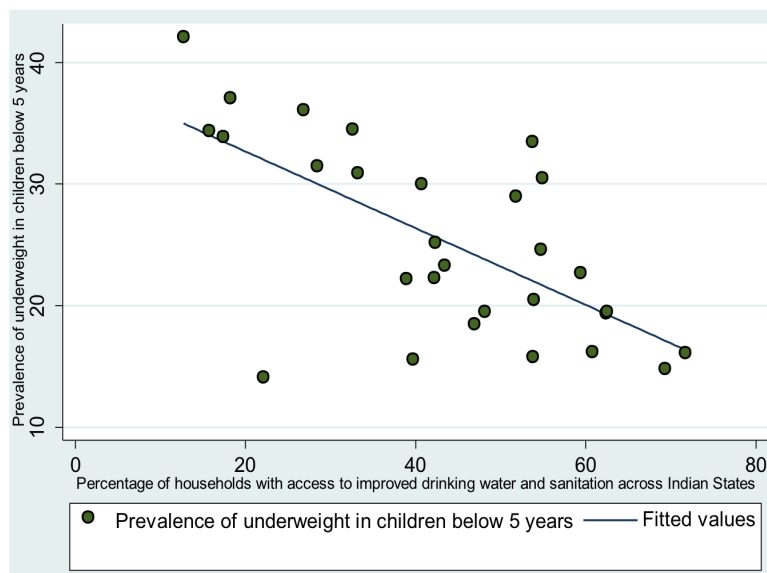
- Emphasis on **nutrition has to go hand-in-hand with access to safe drinking water, sanitation and health education.**
- **Adequate social provisioning** must be made to ensure access to safe drinking water, sanitation and healthcare. Due attention should be paid to the needs of women and marginalised groups in the process.
- **Sanitation is of utmost importance for better nutrition.** For optimal nutrient absorption, it is important that open defecation is eliminated as emphasized by the **Swachh Bharat Mission**. Along with this, there must

**Figure 1 Association of child underweight with practice of open defecation**



Source: Rapid Survey on Children (2013-14)

**Figure 2 Association of child underweight with households having improved drinking water source and sanitation**



Source: Rapid Survey on Children (2013-14)

be water provision to ensure the proper use of toilets. Public toilets with water connection may be built, where necessary.





Using cloth to filter water for home consumption is a common practice in most Indian villages. A scene from Maharashtra.

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- **Treated water supply:** Build water treatment plants and supply treated water in small towns and villages.
- **Public health:** Spread messages on prevention of diarrhoea and worm infestation, also disease control; provide for regular de-worming of children and promote full immunisation for infants and children
- The **National Food Security Act** provides for access to safe drinking water and sanitation in schools and *Anganwadi* centres. Awareness on WASH has to be disseminated at these institutional levels and extended to the homes. **Parents and communities should be sensitised** about WASH and the health problems associated with open defecation during parents meetings and in village level meetings.

## Credits

LANSA MSSRF team based on research conducted in India (2013–2016).

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LANSA is an international research partnership, exploring how agriculture and agri-food systems can be better designed to advance nutrition in South Asia. Led by MS Swaminathan Foundation, members include BRAC, Collective for Social Science Research, Institute of Development Studies, International Food Policy Research Institute and Leverhulme Centre for Integrative Research for Action on Health. LANSA is funded by the UK Government. The views expressed in this document do not necessarily reflect the UK Government's official policies.

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