

Water and Sanitation for Development: High time for a Sanitary Awakening

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The substantial rise in India's urban population and the concurrent growth of slums has resulted in overstraining of infrastructure, and deterioration in public health. Access to safe water and sanitation is a basic human right essential for health and life. Safe water and sanitation reduces child mortality, and positively influences health and development of the Nation. As pediatricians, all of us have the responsibility of making our environment healthy and friendly in order to safeguard health of future generations. It is high time that we alert the public and the authorities for a sanitary awakening.

Diarrhea is a leading cause of death among children, accounting for one-tenth of all deaths among children under age of five years. In 2013, 1600 under-five deaths occurred each day; majority being children aged less than 2 years [1]. Many of these lives could have been saved through interventions to improve drinking water, sanitation and hygiene (WASH). Recurrent episodes of diarrhea leads to, and accentuate malnutrition resulting in a negative impact on overall development of the country. Simple interventions like hand-washing are well-known to substantially reduce the incidence of diarrhea and acute respiratory tract infections [2,3].

Access to drinking water in India has increased over the past few years; however, the negative impact of unsafe water on health still exists. The World Bank estimates that one-fifth of communicable diseases in India are water-related. Waterborne diseases affect around 37 million people in our country, 1.5 million children are estimated to die of diarrhea, and 73 million working days are lost due to waterborne disease annually [4]. Census data reports that the proportion of houses with television and telephones in rural India exceeds the proportion of households with access to toilet facilities [5]. Half of the billion people in the world, who defecate in the open, live in our country. Only half of the population in India wash hands with soap after defecation, and only 11 per cent of the Indian families dispose child's excreta safely. The proportion of schools

having facilities for safe drinking water and adequate usable toilets is also abysmally low. For adolescent girls, the problems are even more complex if the toilet facilities are not safe, private or not available. Girl-friendly toilets established in a few schools, with facilities to change and dispose sanitary napkins are good initiatives. However, much more needs to be done about providing the facilities for good menstrual hygiene in all schools. Indian Academy of Pediatrics (IAP) – under Action Plan 2011, had initiated 'Child Friendly School Initiative Program' where provision for one urinal for 60 students and one latrine for 100 students, with provision for daily cleaning, was one of the conditions for a school to be declared as Child-friendly

The seventh goal of Millennium Development Goals has one of the objectives as: to halve (by 2015) the proportion of the population without sustainable access to safe drinking water. It is essential to understand the mechanisms by which water gets contaminated, and formulate interventions at critical points to decrease and prevent contamination of drinking water. Regardless of the initial water quality, unhygienic practices during water collection and storage, poor hand washing, and inaccess to sanitation facilities accelerates the transmission of germs through the fecal-oral route. 'WASH at Schools' program launched by UNICEF shows its commitment to ensure that all children have access to high quality water and sanitation services at school [6]. Hygiene education to children at schools helps to create demand for safe water and sanitation facilities in future, and will transform the children into agents of change for the whole community.

Political and administrative commitment is evident at National level by Central Government's *National Bal Swachhata Mission* and *Swachh Bharat* campaign. Government is committed to improve the general quality of life of people, by promoting cleanliness, hygiene, and by eliminating open defecation. Now it is the time for the citizens to act with civic sense. Intersectoral coordination with departments of education, health, water and local

self-governments are essential. Water-safety planning and water-quality monitoring are the need of the hour. Establishment of an efficient water quality surveillance system and a model guideline regarding proper planning and execution of water supply and drainage systems are needed. IAP is committed to, and will promote WASH in schools. IAP will raise the voice for children for safe drinking water – to reduce child deaths, and to improve health and education of children.

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