WASH for health: reframing water and sanitation to address malnutrition in the Pacific

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Why integrate?

 Poverty and health challenges interact within people's lives, but health programs tend to focus on curative and biomedical interventions; ignore preventive interventions

 Better programmatic links between prevention and cure have potential for better impact (e.g. elimination, sustainability) and value-for-money



Not just taps and toilets

- Changing the way we think about WASH moving beyond infrastructure
- Water, sanitation and hygiene plays a fundamental role in improving health outcomes
- Health impact of WASH infrastructure limited without good hygiene and sanitation practices –
 WASH needs to be integrated too!
- WASH behaviour change for better health promotion



How do we integrate?



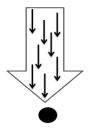
Convergence:

To converge – to come together and unite in a common interest or focus



Coordination:

To coordinate – to bring into common action, movement or condition



Integration:

To integrate – To make into a whole by bringing all parts together; unify

NB: several definitions across disciplines (e.g. IMCI, NTDs)



What does this look like in practice?

Papua New Guinea: Anglicare and WaterAid addressing health issues for people living with HIV

90% of people living with HIV

are vulnerable to infections and 90% will experience diarrhoea



Water, sanitation and hygiene prevents the spread of diarrhoea by

44%

hand washing with soap





36% ਦੀ



sanitation



65% the percentage of diarrhoeal deaths prevented when water, sanitation and hygiene behaviours are practiced together



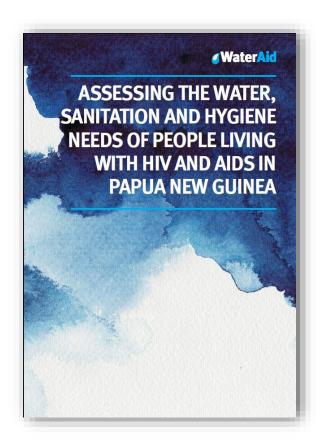
8 'Doable Actions'







- Treat drinking water
- Safely store treated water
- Safe handling and disposal of faeces
- Diarrhoea management
- Menstrual hygiene management
- Promote handwashing
- Personal and environmental cleanliness
- Safe food storage





WASH for health challenges in the Pacific



Image: Pasifika Media Association

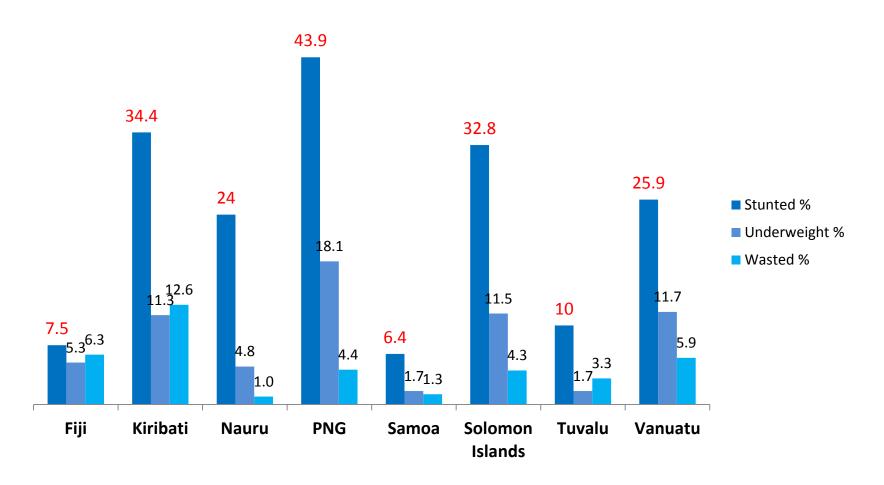


Malnutrition in the Pacific

- The double burden can't just talk about under or overnutrition
- Focus on rates of overweight and obesity, leading to NCDs but can't forget that undernutrition and stunting is still a significant problem



Stunting in children under 5



Global Health Observatory Data Repository (WHO, 2014)



The Barker Hypothesis

- Critical/sensitive periods in development during which lasting effects can occur
- Undernutrition at different stages of pregnancy, and in infancy, leads to:
 - Cardiovascular disease
 - Hypertension
 - Diabetes mellitus
 - Abnormal cholesterol levels



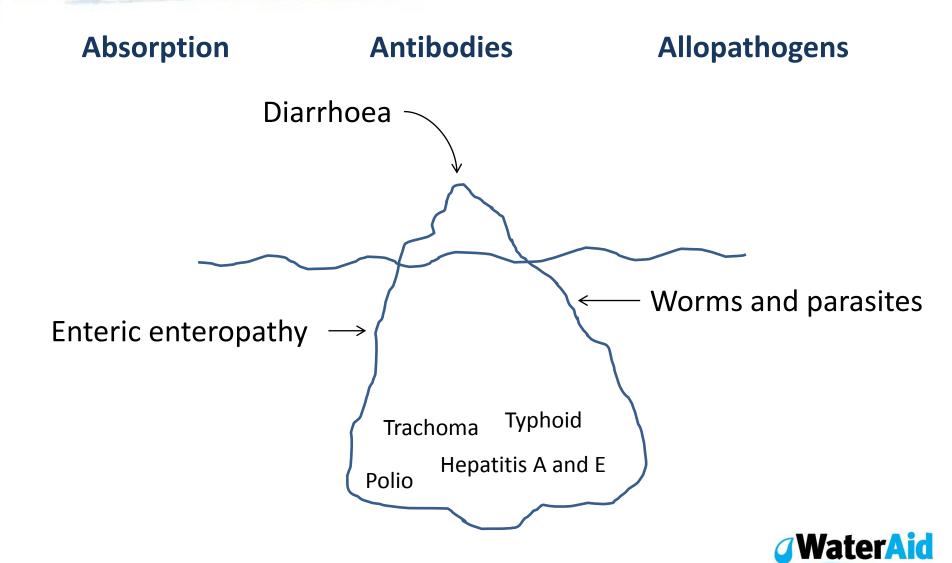
A holistic approach to nutrition programming

Safe water Safe sanitation Good hygiene practices

Curative

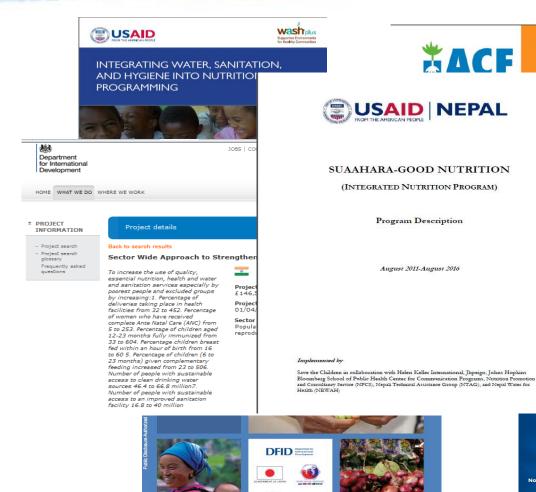


Prevention is the neglected approach



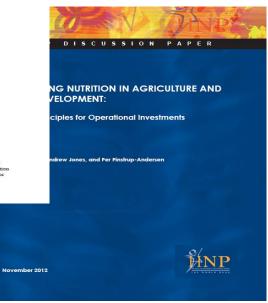
10 years in Australia

Current guidelines and programs



Undernutrition: What works?







Scale Up Nutrition (SUN)

Nutrition Specific

e.g.

- Micronutrient supplementation
- Deworming
- Treatment of severe acute malnutrition
- Exclusive breastfeeding

Nutrition Sensitive

e.g.

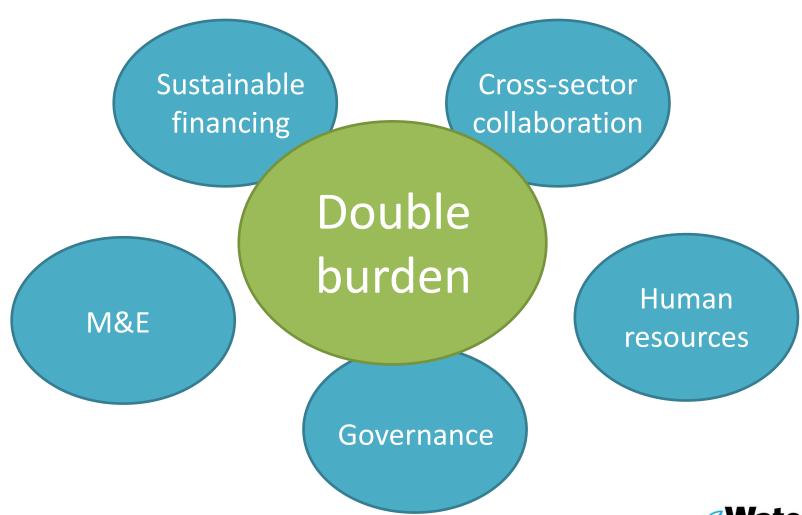
- Reproductive health services
- Cash transfers
- Promote school attendance for females
- Access to safe water and sanitation

Only 20% of stunting will be averted if there is 90% coverage of nutritionspecific interventions

Nutrition-sensitive interventions are needed to address the remaining 80%



Challenges





The change we need to see

Behaviour change for communities but also for donor agencies, NGOs, governments

Need to think how we collaborate and integrate



The change we need to see





Thank you



