

Policy Brief 3:

Strengthening WASH for Nutrition and Health Outcomes



Presented by
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Issue

Sanitation and hygiene practices remain critically poor:



Only 4.6% of households use improved latrines.



Over 45% of households dispose of child feces unsafely.



Handwashing at critical times is inconsistently practiced.

Policy Objective

To reduce sanitation-related disease burden and improve nutrition outcomes through improved access to water, sanitation, and hygiene (WASH).

Key Findings



Open defecation remains prevalent due to cost and infrastructure limitations.



Unsafe disposal of child feces is widespread.



Handwashing before feeding and after feces handling is low, particularly among men.

Policy Recommendations



Expand access to improved latrines using community-led total sanitation (CLTS) and subsidies for low-income households.



Promote safe disposal of child feces with subsidized child-friendly toilets and targeted hygiene campaigns.



Install handwashing stations (e.g., tippy taps) in homes, schools, and clinics.



Include hygiene education in school and antenatal curricula, with focus on key moments like before feeding and after toilet use.



Engage men in hygiene promotion to close gender gaps in sanitation behavior.

Policy Actions



Integrate WASH indicators into nutrition and health programs.



Incentivize latrine adoption through health or agriculture linkages (e.g., fertilizer vouchers).



Collaborate with local artisans to scale affordable toilet technologies.