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Sanitation and Mental Health

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Abstract: Though lack of sanitation is often seen in terms of physical health, psychologists, social workers and social scientists should see the impact of lack of sanitation on the mental health. While sanitation refers to formulation and application of measures designed to protect public health, mental health refers to a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. The lack of clean water and poor sanitation not only causes many diseases it also leads to poor mental health. The relationship between sanitation and mental health is evident through the life of slum dwellers. Slums are characterised by congested housing with lack of water, power and other facilities. In this connection, promotion of mental health is very essential. Mental health promotion attempts to encourage and increase protective factors and healthy behaviours that can help prevent the onset of a diagnosable mental disorder and reduce risk factors that can lead to the development of a mental disorder. Providing privacy and safety specially to women can promote their mental health.

Keywords: Sanitation, Mental health, Diseases, Resilience, Perception, Slums, Promotion of mental health.

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Introduction

Sanitation and Mental health are essentially connected. Though health is understood as state of complete physical, mental, and social well-being people give importance to physical health than to mental health. Among different factors, sanitation is one of the important factors of health. Good sanitation facilities lead not only to physical health but also to mental health. Most of the studies on public health research on sanitation has focused mainly on the impact of sanitation on infectious diseases and related sequelae. So, it is essential to concentrate on mental health. Mental health conditions include mental disorders and psychosocial disabilities as well as other mental states associated with significant distress, impairment in functioning, or risk of self-harm. Lack of sanitation leads to mental health conditions like stress, tension and impairment in functioning. This paper tries to examine the relationship between sanitation and mental health.

Sanitation

Though sanitation was a part of human life since the ancient times, it gained importance with the development of human civilisation. According to Bindeshwar Pathak, Founder of Sulabh International Social Service Organisation, in the ancient civilisation, there was no problem of sanitation, because humans were not provided with latrines or particular places, inside or outside the houses, for defecation. The people used open spaces, riverbanks and outskirts of habitats for defecation. With the development of human civilisation, there cropped up the problem of the disposal of human excreta. Further, with the development of latrine system in civilised societies people started facing the problem of disposal of human excreta. With the advancement of human knowledge, they implemented different kinds of technologies as a solution on the basis of different conditions prevailing in their habitats. (Pais 2015)

Sanitation refers to formulation and application of measures designed to protect public health. It also refers to the safe conditions which includes clean and safe water supply, clean and safe ambient air, efficient and safe animal, human, and industrial waste disposal, protection of food from biological and chemical contaminants, and adequate housing in clean and safe surroundings.

In the words of WHO, sanitation generally refers to the provision of facilities and services for the safe disposal of human urine and faeces. Inadequate sanitation is a major cause of disease world-wide and improving sanitation is known to have a significant beneficial impact on health both in households and across communities. The word 'sanitation' also refers to the maintenance of hygienic conditions, through services such as garbage collection and wastewater disposal.

According to UNICEF, sanitation literally means measures necessary for improving and protecting health and well-being of the people. Sanitation is any system that promotes proper disposal of human and animal wastes, proper use of toilet and avoiding open space defecation.

There are many benefits accrued from sanitation. These include reducing the spread of intestinal worms, schistosomiasis and trachoma, which are neglected tropical diseases that cause suffering for millions; reducing the severity and impact of malnutrition; promoting dignity and boosting safety, particularly among women and girls; promoting school attendance: girls' school attendance is particularly boosted by the provision of separate sanitary facilities; reducing the spread of antimicrobial resistance; potential recovery of water, renewable energy and nutrients from faecal waste; and potential to mitigate water scarcity through safe use of wastewater for irrigation especially in areas most affected by climate change. (WHO 2022)

Mental Health

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. Mental and physical health are equally important components of overall health.

Mental health is characterised by one's life satisfaction. A person's ability to enjoy life is frequently used as an indicator of mental health and wellness. It is often defined as the degree to which a person enjoys the most important aspects of their life. Secondly, it is characterised by resilience. Resilience is the ability to bounce back from adversity. People who are resilient also tend to have a positive view of their ability to cope with challenges and seek out social support when they need it. Thirdly, it is characterised by social support. Loneliness is linked with both physical and mental health issues including cardiovascular disease, depression, memory problems, drug misuse, alcohol misuse, and altered brain function. Finally, it is characterised by flexibility. Emotional flexibility may be just as important as cognitive flexibility. Mentally healthy people experience a range of emotions and allow themselves to express these feelings. Some people shut off certain feelings, finding them to be unacceptable. Lack of psychological flexibility has been linked to some types of psychopathology, while research suggests that increased flexibility is connected to better life balance and improved resilience. (Holmes 2023)

The social determinants of mental health generally encompass multiple factors, such as social factors, economic factors, environmental factors and structural factors. Social factors, including racism, adverse childhood experiences, discrimination, and social exclusion based on race, ethnicity, gender, age, or mental illness; health care inequity due to lack of access to care; and exposure to violence and the criminal justice system. Economic factors related to resources, lack of education, employment insecurity, and neighbourhood poverty that have cumulative effects on an individual. Environmental factors, including housing; pollution of the air, water, and ground; and climate change. Structural factors, including cultural norms; systemic policies; and laws and regulations that institutionalize disparities for populations, such as lower castes, untouchables, rural, and other minority communities.

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Sanitation generally includes excreta management systems, wastewater management systems, solid waste management systems and drainage systems for rainwater. The overall objective of a sanitation system is to provide a healthy living environment for everyone, to protect the natural resources (such as surface water, groundwater, soil), to provide safety, security and dignity for people when they defecate or urinate and break the cycle of disease.

Lack of sanitation or poor sanitation refers to the absence of sanitation. In practical terms it usually means lack of toilets or lack of hygienic toilets that anybody would want to use voluntarily. Lack of sanitation also refers to the lack of maintenance of hygienic conditions, through services such as garbage collection and wastewater disposal. The result of lack of sanitation is usually open defection, open urination and indiscriminate dumping of garbage and ill liquid waste disposal, with the associated serious public health issues. (Stay well world 2022)

The lack of clean water and poor sanitation causes many diseases and the spread of diseases such as anaemia, ascariasis (a type of intestinal worm infection), cholera, dengue, hepatitis, Japanese encephalitis, leptospirosis, malaria, scabies, trachoma, typhoid and paratyphoid enteric fevers. It is estimated that inadequate sanitation is responsible for 4 percent of deaths and 5.7 percent of disease burden worldwide. Lack of sanitation is a serious issue that is affecting most developing countries. The importance of the isolation of excreta and waste lies in an effort to prevent diseases which can be transmitted through human waste, which afflict both developed countries as well as developing countries to differing degrees. It is estimated that up to 5 million people die each year from preventable waterborne diseases, as a result of inadequate sanitation and hygiene practices. More than anything else, it also impacts mental health. Sanitation is a necessity for a healthy life.

Mental health generally emphasizes individuals' perceptions of - and responses to - social and environmental conditions and status. A key

component of mental health is how individuals and communities appraise their environments in relation to current and anticipated living conditions. Of interest in this appraisal process is how people perceive both the harm and suffering caused by stressors in the environment as well as the stock of resources they use to buffer against such harm and suffering. Thus, psychosocial distress is considered a relational concept that reflects a dynamic relationship between environmental demands, individual resources to cope with these demands, and appraisal of this relationship. With regard to water, distress can manifest from stressful experiences that arise from individuals' everyday roles and experiences. Such roles and experiences related to water and sanitation extend beyond physical inadequacy to include burden of collection, negotiating access and opportunity cost of buying from informal sources. Thus, mental stress is conceptualized as an outcome that arises through cultural and social norms, responsibilities and expectations regarding water and sanitation use, as well as physical barriers that limit adequate access or use. (Bisung and Elliott 2016)

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Further, understanding the long-term implications of psychosocial outcomes on mental health and physical well-being is important. For example, continuous imbalance between one's water and sanitation challenges and coping capacity can result in long-term mental and physical health issues. Though the impact of water scarcity on mental health has been well characterized for rural populations, it is also found in some city populations. Mechanisms may include stress and insecurity. It is also manifested in heat-related aggression, violence, and suicide; and high mental burden on women for their efforts to find and procure clean water.

The relationship between sanitation and mental health is evident through the life of slum dwellers. Slums are characterised by poor housing conditions with lack of water, power, lack of transport facilities and congestion from overcrowding. Slums are primarily inhabited by impoverished people. Slums are associated with poor sanitation due to lack of proper garbage and sewage disposal. It must be taken into consideration that slums are a product of multiple and

complicated psychological, economic and social factors; all of which contribute to behavioural traits exhibited by people.

Slum dwellers usually experience a high rate of diseases such as cholera, measles, malaria, dengue, typhoid, diarrhoea and drug resistant tuberculosis. Overcrowding leads to faster and wider spread of diseases due to the limited space in slum housing. Poor water quality is a cause of many major illnesses. Slums have been linked to epidemics. Child malnutrition in its worst form is also found in slums. It is closely related to family income, mothers' food practice, mothers' educational level, and maternal employment or housewifery. Poverty may result in inadequate food intake when people cannot afford to buy and store enough food, which leads to malnutrition.

A multitude of non-contagious diseases also impact health for slum residents. Examples of prevalent non-infectious diseases include cardiovascular disease, diabetes, chronic respiratory disease, neurological disorders, and mental illness. With the dearth of sanitation, food insecurity and bare-minimum incomes, slum dwellers fail to rectify their mental health. (Goswami 2022) Slums are characterised by poverty and unemployment. Often job insecurity induces worries and distress that inhibit a sense of well-being. Similarly, the proximity of people in slum areas leads instead to heightened competition for scarce resources, lack of privacy, the spread of epidemics and diseases, and therefore to an environment more prone to conflict and criminal activity, with related psychological distress. Mental health remains imperative as well as sensitive and it can have a significant impact on society as a whole. Their economic and social disadvantages make them bear the disproportionate burden of psychological distress, thus affecting the mental health of slum households.

Psychological distress is a major contributor to the slum's overall burden of functional impairment. The psychological distress, by creating and exacerbating deprivations that serve as sources of stress, by placing slum residents in an inherently antagonistic relationship with the government through the criminalization of basic needs, and by shaping a community identity built on a feeling of social exclusion from the rest of the city. Chronic illness, on the other hand, leads to emotional dysfunction among participants, like anxieties, uncertainties, fears and losses. An important toll on the psychological wellbeing of slum dwellers is taken by the financial insecurities related to living in a slum settlement, which directly affects their social life and consumption patterns. This results in feelings of isolation, loss of self-esteem and feelings of hopelessness that affect their mental wellbeing. Besides the usual misfortunes associated with insanitation and the like, the slum dwellers are confronted with other illimitable difficulties that alter their mental well-being. The perpetual fear of eviction or evacuation by the landlords and pandemics, and the absence major official documents potentially offer a stressful environment for them leading to common mental disorders.

Promotion of Mental Health

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Mental health promotion attempts to encourage and increase protective factors and healthy behaviours that can help prevent the onset of a diagnosable mental disorder and reduce risk factors that can lead to the development of a mental disorder. It also involves creating living conditions and environments that support mental health and allow people to adopt and maintain healthy lifestyles or a climate that respects and protects basic civil, political, socio-economic and cultural rights is fundamental to mental health promotion.

Specifically, mental health can be promoted through early childhood interventions (e.g., home visits for pregnant women, pre-school psychosocial activities); providing support for children (e.g., skills building programmes, child and youth development programmes); programmes targeted at vulnerable groups, including minorities, indigenous people, migrants, and people affected by conflicts and disasters (e.g., psychosocial interventions after disasters); incorporating mental health promotional activities in schools; violence prevention programmes; and, among others, community development programmes. (Youth.Gov)

In the study of Subbaraman et al. (2014) conducted in Mumbai slums showed that the slum's burden of common mental disorders exceeds

that for all other population. Psychological distress contributes greatly to the disability burden of the slum. Interventions to address slumrelated stressors and poverty might help to alleviate the high burden of mental illness and disability in slums. Women living in slum areas are prone to developing mental disorders and poorer mental health; therefore, supporting these women and creating job opportunities to raise their incomes and, subsequently, improve their social, economic, and living conditions should be taken into consideration. (Abdi 2021)

Since lack of sanitation is an important aspect of mental health, promotion of mental health has to start with sanitation. When people perceive or experience a lack of privacy or safety or assaults during open defecation or when using sanitation infrastructure, this can negatively influence their mental and social well-being. Generally, perceptions and experiences of privacy and safety are influenced by contextual and individual factors, such as location of sanitation facilities and user's gender identity, respectively. Privacy and safety require thorough examination when developing sanitation interventions and policy to ensure a positive influence on the user's mental and social well-being. (Sclar et al. 2018) So, providing privacy and safety specially to women can promote their mental health. Training in new approaches for bolstering psychological resilience can promote mental health.

Conclusion

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Lack of sanitation is a serious problem all over the world specially in developing societies. Lack of sanitation not only affects physical health but also mental health. Both the governments and the NGOs have tried to improve sanitation and thus improve physical health as well as mental health of the people. The role of Dr Bindeshwar Pathak in not only improving sanitation in India and abroad but also putting an end to the evil practice of untouchability and manual scavenging. In this connection, it is essential to improve the socio-economic condition of people is important and improvement in the socioeconomic conditions along with education will lead to healthy sanitation.

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Dr Richard Pais retired as Associate Professor and Head, Dept. of Sociology, St Aloysius College (Autonomous) Mangaluru. He is the Founder Managing Editor of Social Science Gazetteer, Managing Editor Samaja Shodhana and Editor of Sulabh Journal of Action Sociology.

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Dynamics of NEP: Rethinking the Future of Social Sciences and Research

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Abstract: The landscape of social sciences and research is undergoing a transformative shift with the emergence of the New Education Policy (NEP). This paper delves into the dynamic changes that NEP introduces, reimagining the future trajectory of social sciences and research methodologies. The NEP's comprehensive restructuring of educational frameworks, pedagogies, and research paradigms necessitates a critical examination of its implications on the social sciences.

Our exploration begins with an analysis of the foundational principles of NEP and their potential impact on the philosophy and objectives of social sciences. We examine the integration of multidisciplinary approaches, technology, and global perspectives as key components reshaping the research landscape. The paper also investigates the role of NEP in fostering innovation, creativity, and a more inclusive research environment within the social sciences.

Furthermore, we explore the challenges and opportunities that arise in the implementation of NEP, focusing on the need for a redefined skill set among social science researchers. The paper discusses how the evolving educational ecosystem demands a paradigm shift in research methodologies, encouraging a more collaborative, interdisciplinary, and