

# Study delves into Nepal's household hazards

August 8 2014, by Nic White

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A pilot study of Nepalese kitchens aims to improve public health and reduce burn injuries in the poorest neighbourhoods of South Asia, a UWA burn researcher says.

Burn Injury Research Unit Assistant Professor Hilary Wallace says 75 per cent of burns in South Asia occur in the home, mostly in the kitchen, and targeted education and financial support interventions could help save many lives.

"What happens in the kitchen can improve or undermine [public health](#)," she says.

"In many of these poverty-stricken areas, burns are more common than AIDS or tuberculosis."

Dr Wallace says the study will use community volunteers to locate the most at-risk households, interview them to identify potential hazards in their homes and then deliver tailor-made interventions.

"This holistic approach doesn't just focus on one problem, it looks at domains like the cooking process instead—which might be harmful for lungs as well as risky for burns," she says.

Dr Wallace says risk factors could include open biomass fires, uncovered drinking water, hazardous electrical wiring, children playing close to cooking stoves and fires, storage of food, sanitation and hygiene, and cooking and diet practices.

"Cooking is often done on the floor—flames and pots of boiling liquid easily accessible. Flames catch the edge of women's saris and children knock pots over," she says.

Exploding kerosene and gas cylinders are particularly devastating but are routinely stored inside because of the likelihood of theft if stored outside.

Cheap and effective anti-theft devices could help this issue, but cylinders may also be bad quality or reused.

Dr Wallace says some 20 per cent of burns, particularly to women, are self inflicted.

"In South Asia there is a lack of social safety nets or other means to cope with crises, and people can find themselves in a situation they feel is unbearable," she says.

Dr Wallace says the interventions could range from simple advice about better cooking, lighting and heating practices to financial assistance through community-based savings and credit organisations to buy safer technology like improved cookstoves.

"There will be other domains around food preparation, sanitation, water quality, heating and lighting, electricity and storage of flammable liquids and poisons," she says.

The volunteers will return at regular intervals to support the women to implement the changes.

Dr Wallace says the interventions will be followed up with larger randomised controlled trials to see what approaches improve issues like respiratory disease, diarrhoea and burn injury.

Provided by Science Network WA

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