LEFT BEHIND IN THE STORM

DALIT WOMEN SANITATION WORKERS AND THE FIGHT FOR WATER AND DIGNITY

RESEARCH BRIEFING

AMNESTY INTERNATIONAL

CONTENTS

1.	**SUMMARY**	**3**
1.1	Safe drinking water	3
1.2	Sanitation	4
1.3	Conclusion	5
2.	**METHODOLOGY**	**5**
2.1	Purpose and framing	5
2.2	Desk and field research	6
2.3	Further research	7
3.	**BACKGROUND**	**7**
3.1	Flood risk	7
3.2	Systemic discrimination against Dalits	11
3.3	Dalit sanitation workers	12
4.	**BARRIERS TO FULFILLING THE RIGHT TO WATER**	**14**
4.1	State obligations	14
4.2	Accessibility and availability	16
4.3	Water quality	22
4.4	Affordability	26
4.5	Exclusion from water infrastructure and decision-making	30
5.	**BARRIERS TO FULFILLING THE RIGHT TO SANITATION**	**31**
5.1	State obligations	32
5.2	Accessibility and availability	33
5.3	Adequate facilities	35
5.4	Affordability	40
5.5	Excluded from assistance	42
6.	**CONCLUSION**	**43**
7.	**RECOMMENDATIONS**	**44**

Cover Photo: Sanitation worker collecting water in a Kolshi (vessels) from a gher (open water source) close to her household in Ashashuni, Satkhira, May 2025. © Amnesty International

This briefing explores how the climate crisis deepens barriers to water and sanitation rights for Dalit sanitation workers in Khulna and Satkhira, Bangladesh. Dalit women face compounded discrimination—by caste, gender, and occupation—making them among the most affected yet least visible in climate and WASH policy responses.

1. SUMMARY

This briefing explores how the climate crisis intensifies barriers to the realization of the rights to water and sanitation for Dalit sanitation workers in Khulna and Satkhira. It focuses on Dalit women, who face compounded discrimination based on caste, gender and occupation, making them among the most affected, yet least visible, in climate and water, sanitation and hygiene (WASH) policy responses.

Bangladesh, home to more than 171 million people, is among the most climate-vulnerable countries in the world. Climate-induced disasters affect all communities in Bangladesh, but systematically excluded "low caste" groups, particularly Dalit sanitation workers, face disproportionate harm. Building on Amnesty International's 2022 report, *Any Tidal Wave Can Drown Us*, which documented the experiences of marginalized coastal communities, this briefing highlights how climate change acts as a multiplier of inequalities. Communities in Khulna and Satkhira face rising sea levels, cyclones, droughts and flooding, conditions that exacerbate existing discrimination and exclusion.

Between April and June 2025, Amnesty International returned to the Khulna Division (province) and the administrative districts Khulna and Satkhira to investigate how caste, gender and occupation intersect to exclude Dalit sanitation workers from access to water and sanitation amid climate change. The research assessed the state's compliance with the International Covenant on Economic, Social and Cultural Rights (ICESCR) to ensure marginalized groups' right to water and sanitation and with the International Convention on the Elimination of Racial Discrimination (ICERD) to adopt proactive measures to eliminate structural discrimination and guarantee equal access to all human rights. The research adopted a community-focused and participatory approach to climate justice, reintegrating excluded voices into policy conversations and advocating for their meaningful participation in shaping climate-resilient futures.

Amnesty International interviewed 22 Dalit sanitation workers – mostly women – in Khulna and Satkhira to document their lived experiences amid climate change. Dalit women sanitation workers face heightened challenges around their descent-based identity, health, safety, dignity and privacy when access to water and sanitation is further restricted due to climate-induced disasters. Despite their essential contributions at the frontline of post-disaster recovery efforts, they continue to face systemic discrimination and are rarely included in water, sanitation and hygiene (WASH) or disaster risk mitigation frameworks.

1.1 SAFE DRINKING WATER

Water is a fundamental human right recognized by treaties including the ICESCR, ratified by Bangladesh in 1998. World Health Organization (WHO) guidelines recommend 50-100 litres of water per person per day, yet as of 2022 only 59% of Bangladesh's population had access to safe drinking water. Dalit sanitation workers in Khulna and Satkhira remain acutely water-insecure. With no household water connections, they rely on carrying water by hand from distant ponds, rainwater collection or public wells, particularly outside the monsoon season.

Gender, caste, poverty and environmental stress converge to intensify these challenges. Climate change exacerbates both scarcity and infrastructure damage, and caste-based discrimination at public water sources continues unchecked. The burden of water collection – borne largely by women – not only limits economic opportunity but also reinforces gender and caste hierarchies, perpetuating exclusion and inequality.

Unsafe water sources are the norm, resulting in widespread illness. Ponds, often the most accessible water source, are stagnant and contaminated; tube wells frequently contain arsenic, E. coli and salinity. Rainwater is sometimes consumed untreated due to unaffordability and unavailability of purification tablets. During extreme weather and climate-induced events, these hazards multiply, forcing families to drink stored floodwater or pond water.

The inaccessibility of healthcare compounds this crisis. Due to financial constraints and caste discrimination, many Dalit families avoid or are denied adequate treatment. The intersection of structural inequality, environmental stressors and stigma results in human rights violations under the ICESCR and ICERD, which require safe water and healthcare to be accessible to all without discrimination.

Affordability is a significant barrier to water access. Safe drinking water should be economically accessible, but Dalit sanitation workers often spend up to a third of their monthly income buying water from desalination plants and reverse osmosis centres. The cost of 20-40 litres of water per day is unaffordable for families earning as little as BDT 3,000-8,000 (USD 24-65) per month. Rainwater harvesting systems, though promising, are inaccessible due to the cost of storage containers. Even with government subsidies, such infrastructure remains out of reach routinely for Dalit communities.

Dalit communities in Satkhira and Khulna are routinely excluded from water and sanitation governance structures. Bangladesh's WASH guidelines call for women's participation in planning, but Dalit women sanitation workers interviewed report never being consulted. Committee decisions regarding the placement of reverse osmosis centres and infrastructure often ignore the location and needs of Dalit settlements. Their distance from water infrastructure reflects caste-based exclusion reinforced through bureaucratic systems. This normalization of hardship further entrenches discrimination and violates the principle of meaningful participation enshrined in international human rights law.

1.2 SANITATION

Despite national reports claiming near universal sanitation coverage, Dalit women sanitation workers in Khulna and Satkhira continue to face significant gaps in access. Women share toilets with multiple households or rely on distant, unsafe public latrines, increasing their risk of violence, exposure and illness. Caste-based discrimination amplifies these barriers. Some Dalit women are denied access to toilets in workplaces or shelters, especially following disasters; others are forced to defecate in the open. Without data disaggregated by caste and gender, the specific plight of Dalit women remains invisible in national statistics and policies.

All women interviewees use pour-flush pit toilets constructed from scrap materials. These structures offer minimal privacy, lack lighting or proper doors, and are unusable during storms or flooding. Some Dalit women report delaying toilet use due to lack of safety or privacy, leading to urinary tract infections. They also report skin infections due to reliance on pond water for bathing, and unaffordability of soap. Menstrual hygiene management is largely absent; most women use old cloths due to the high cost of sanitary pads. Infections are common. There are no public education or supply programmes in the communities visited. These findings reflect violations of Article 12 of the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), which mandates adequate living conditions, including sanitation and water, to promote health and prevent disease.

Building a basic latrine is often unaffordable and upgrades to make them flood resilient are unattainable. Families can be forced to choose between rebuilding their house or toilet after each cyclone. Some take out loans; others go without functional sanitation for months. No government assistance was reported. Recurrent climate-induced disasters compound this financial strain. With 18 cyclones in 17 years, entire settlements are trapped in cycles of rebuilding.

The absence of durable sanitation infrastructure poses a clear loss and damage scenario under international climate justice frameworks, triggering obligations for remedy, compensation and protection. Despite being among the most affected, Dalit sanitation workers are rarely included in government or NGO sanitation aid programmes. Only two interviewees reported receiving any materials to rebuild toilets. The criteria for aid distribution are unclear with corruption and caste discrimination reportedly blocking access to relief. Dalit participation in disaster management

committees is either absent or merely symbolic. These barriers violate the right to participation and non-discrimination.

1.3 CONCLUSION

The findings in Khulna and Satkhira reflect a deeper national failure to uphold the rights of Dalit sanitation workers. These women, whose labour is essential for the functioning of Bangladesh's sanitation systems, are denied access to the very services they help sustain. Caste and gender-based discrimination, lack of inclusive infrastructure, economic marginalization and climate vulnerability converge to entrench cycles of exclusion and indignity.

The absence of caste-disaggregated data, targeted funding, and inclusive policy-making continues to leave Dalit communities behind. Without urgent, caste- and gender-sensitive reforms grounded in human rights, Bangladesh's water, sanitation and climate adaptation frameworks will continue to reinforce systemic inequalities. The briefing calls for inclusive, participatory, and climate-resilient WASH planning that centres the needs and voices of Dalit sanitation workers.

2. METHODOLOGY

- Geographical scope: Khulna and Satkhira in south-west, coastal Bangladesh are among the country's most climate-vulnerable districts, exposed to both slow- and rapid-onset hazards such as cyclones, tidal surges and saline intrusion. This makes them a critical site for examining the impacts of climate change.
- Demographic scope: The study centres on Dalit women sanitation workers – one of the most marginalized groups – whose intersecting identities place them at the frontline of post-disaster recovery, while excluding them from planning and services. Despite their essential contribution to sanitation, they continue to face systemic discrimination and are rarely included in water, sanitation and hygiene (WASH) or disaster risk mitigation frameworks. By focusing on this group, the research adopts a community-focused and participatory approach to climate justice, reintegrating excluded voices into policy conversations and advocating for their meaningful participation in shaping climate resilient futures.
- Material scope: Water and sanitation are used as a strategic focus because they are essential human rights that are both highly climate sensitive and deeply shaped by social inequality. This makes them a powerful entry point for understanding and addressing structural injustice.

2.1 PURPOSE AND FRAMING

The briefing documents the specific barriers Dalit sanitation workers face in accessing water and sanitation in the context of climate change. It uses an intersectional lens to examine how caste, gender, and occupation shape exclusion. It shows that these rights remain unfulfilled and assesses whether the state is meeting its obligations under international human rights law, including:

- the Committee on Economic, Social and Cultural Rights (CESCR) General Comment No. 15, which gives special attention to marginalized groups in realizing the right to water and sanitation; and
- the Committee on the Elimination of Racial Discrimination (CERD) General Recommendation No. 32, which specifies measures to eliminate structural discrimination and ensure equal access to rights.

2.2 DESK AND FIELD RESEARCH

Amnesty International conducted a comprehensive literature review, drawing on reports and publications from national and international NGOs, media coverage, UN human rights and climate experts and national policies related to water and sanitation to contextualize the research and inform the participatory design.

Research fieldwork focused on the sub-district of Dacope Upazila in Khulna Division[1] and the sub-district of Ashashuni Upazila in Satkhira Division.[2] Both are coastal areas threaded by rivers and contain or are close to land and water rich in biodiversity. Amnesty International took a participatory approach to the research, to ensure that it included marginalized communities. This also allowed the briefing to cover sensitive topics such as sanitation, discrimination and stigma related to caste and occupation. The researchers included local partner NGOs and existing community networks, who had credibility, trust and experience working with the communities, as well as local knowledge of the regions. The fieldwork was supported by Dalit researchers from the region.

Amnesty International interviewed 22 Dalit sanitation workers, 20 of whom were women, from the two sub-districts. In Khulna, researchers conducted one-to-one interviews with nine Dalit women sanitation workers and two men. One community discussion was conducted with 18 women and four men, of whom 14 women were working in sanitation-related jobs. In Satkhira, researchers conducted one-to-one interviews with 11 Dalit women sanitation workers. A community discussion brought together 25 participants, of whom 15 were Dalit women sanitation workers and 10 Dalit men.

Researchers conducted interviews in person, with follow-up conversations over the phone and in person, as needed, over a period of 10 weeks. This allowed researchers to build trust with individuals so they felt comfortable sharing more personal insights. It also provided flexibility to work around participants' availability and allowed researchers to maintain community engagement and to clarify points.

The purposive selection of participants allowed the study to focus on the lived experiences of Dalit women sanitation workers. While this resulted in a relatively small sample size, it enabled in-depth, meaningful engagement with marginalized communities. The aim was to highlight patterns of structural exclusion and identify systemic barriers that demand urgent, rights-based policy responses.

The methodological framing was shaped by an early and significant observation that Bangladesh's WASH surveys, policies and sector assessments lack caste-disaggregated data. This indicates structural racial discrimination and institutional failure to recognize, represent and respond to the rights and needs of Dalit communities. In many cases, inaction in the face of known structural inequalities constitutes a violation of non-discrimination obligations.

The researchers also interviewed:

- four officials in Khulna Division: Upazila Nirbahi Officer, (Sub-Disctrict Executive Officer) Divisional Commissioner, District Relief and Rehabilitation Officer in the Disaster Management Department, and Executive Engineer of Department of Public Health Engineering (DPHE);
- two officials in Satkhira Division: Disaster Relief and Rehabilitation Officer in the Disaster Management Department, and Executive Engineer of the DPHE;

[1] Dacope Union, Chalna Union, and the urban centers of Chalna and Dacope. Specific areas included: St. Michael's Church in Chalna, Sahib Abad Area in Dacope, Rishi Para in Dacope Union parish and area, Chalna Achabhuya Christian village, Chalna Gaurakathi Christian village, Khalshia Rishi village in Bajua Union, and Mathor Para in Dacope Union parish and area.
[2] Ashashuni Union and the municipal areas of Ashashuni and Buddahat. Specific survey areas included: Das Para / Colony in Buddahat, Christian Para / Colony and West Das Para / Colony in Ashashuni, No. 2 Ward, Dayar Ghat within Das Para, and Satkuna Das Para / Colony.

- two members of WASH and disaster local management committees: one in Satkhira and one member of Khulna District Village Water and Sanitation (WATSAN) Committee;
- a gynaecology and obstetrics specialist; and
- four civil society organisations (CSOs): Paritrran, Centre for Participatory Research and Development, Uddipta Mahila Unnayan Sangstha and Bangladesh Dalit Parishad. These are development or human rights organisations each with over 10 years of experience working with local communities.

Written and verbal consent was obtained prior to each interview and community discussions, with additional verbal consent for photographs. All names of Dalit sanitation workers interviewed for this study have been changed to protect their identities.

2.3 FURTHER RESEARCH

There are two critical and interrelated dimensions not covered in this research that warrant further investigation:

- the multifaceted impact of the climate crisis on occupational risks faced by sanitation workers, including increased exposure to hazardous waste, heat stress and waterborne diseases – issues exacerbated by climate variability and disproportionately impacting Dalit sanitation workers; and
- caste- and gender-sensitive emergency responses to natural and climate-induced disasters, which are crucial for ensuring equitable protection and recovery for Dalit women.

3. BACKGROUND

> **"People living in poverty will be affected the most."**
>
> UN Special Rapporteur on extreme poverty and human rights.[3]

With a population of nearly 171.2 million people, Bangladesh is one of the countries most at risk from the climate crisis.[4] Bangladesh faces several climate-induced, slow- and rapid-onset events, including drought, cyclones, floods and rising temperatures, all of which threaten access to water and food security.[5]

3.1 FLOOD RISK

Up to 90 million people in Bangladesh are potentially affected by climate risks.[6] People living in the southern coastal division of Khulna are particularly vulnerable. Geography is a significant factor: the region includes the Sunderbans mangrove forest, part of the Ganges Delta, and its low elevation places it at risk of ever-rising global sea levels.[7] Already, the Sundarbans coastline is retreating by up

[3] UN Special Rapporteur on Extreme Poverty and Human Rights, Eradicating Poverty beyond growth, Report of the Special Rapporteur on extreme poverty and human rights, Oliver De Schutter, 01 May 2024, UN Doc. A/HRC/56/61/Add.1, p. 17, para. 72
[4] The 2021 World Climate Risk Index ranked Bangladesh seventh on the list of countries most vulnerable to climate change, https://www.undp.org/bangladesh/publications/national-adaptation-plan-bangladesh-2023-2050
[5] World Bank Group, *Climate Risk Profile: Bangladesh*, 2024, https://climateknowledgeportal.worldbank.org/sites/default/files/country-profiles/16813-WB_Bangladesh%20Country%20Profile-WEB.pdf, pp. 7 and 21: Khulna has the "warmest annual mean temperature (26.36°C) in Bangladesh"; European Commission, "Index for risk management: Bangladesh country profile", DRMKC -INFORM, https://drmkc.jrc.ec.europa.eu/inform-index/INFORM-Risk/Country-Risk-Profile (accessed on 24 September 2025)
[6] UN Special Rapporteur on Extreme Poverty and Human Rights, Eradicating Poverty beyond growth, Report of the Special Rapporteur on extreme poverty and human rights, Oliver De Schutter, previously cited), p. 17, para. 70.
[7] UN Special Rapporteur on the Human Rights to Safe Drinking Water and Sanitation, Report: *Climate Change and the Human Rights to Water and Sanitation*, January 2022, https://www.ohchr.org/sites/default/files/2022-01/climate-change-1-friendlyversion.pdf

to 200m per year, threatening the future of this ecosystem.[8] Mangroves are incredibly important for carbon sequestration, which means they help capture and store carbon dioxide (CO_2) from the atmosphere, crucial for fighting climate change.[9] The region is also in the path of tropical cyclones; with wind speeds above 119km/h, these strike every few years, bringing deadly storm surges and coastal flooding.[10] According to the Bangladesh government, over 53% of households in the south-western coastal area and the Sundarbans have experienced damage due to cyclones in recent years.[11]

CYCLONE REMAL

Cyclone Remal struck Bangladesh on 26 May 2024.[12] Climate scientists and the director of the state-run Bangladesh Meteorological Department confirmed that warmer temperatures due to climate change are contributing to quick-forming, stronger and longer-lasting cyclones like Remal.[13] The cyclone made landfall at the Sundarbans in West Bengal and Bangladesh,[14] killing at least 85 people.[15] The Bangladesh Meteorological Department issued a distress signal in nine coastal districts, including Satkhira and Khulna.[16] Authorities in Khulna, Satkhira and Bagerhat districts had prepared 1,149 cyclone shelters, with the capacity to house more than 758,680 people.[17] Hundreds of thousands of people were evacuated, with the army, fire services volunteers and other government institutions on standby for post-storm rescue operations.[18] The cyclone shut down power for 37 hours in several coastal districts, including in the Khulna Division.[19] The tide surged to 1.5-2m high, breaking the embankment and flooding vast areas of coast. This caused widespread damage to homes, crops and livestock.[20] Most of the Dalit sanitation workers interviewed reported not receiving government assistance or resettlement options.[21] "Yes, some came and took our name, our photographs but no money or any other help came. I applied for relief many times but my application was always shown as 'pending'," said Maya.[22]

---

[8] Zoological Society of London, "Bengali forests are fading away", 11 January 2013, www.sciencedaily.com/releases/2013/01/130110212334.htm

[9] M.M. Rahman and others, "Co-benefits of protecting mangroves for biodiversity conservation and carbon storage", May 2021, *Nature Communications*, Volume 12, Article number 3875, https://doi.org/10.1038/s41467-021-24207-4

[10] World Bank Group, *Climate Risk Profile: Bangladesh* (previously cited).

[11] Ministry of Environment, Forest and Climate Change, Government of the People's Republic of Bangladesh, National Adaptation Plan of Bangladesh (2023-2050), 30 November 2022, https://www.undp.org/bangladesh/publications/national-adaptation-plan-bangladesh-2023-2050, p. 42

[12] AP News, "A tropical storm floods villages and cuts power to millions in parts of Bangladesh and India", 28 May 2024, https://apnews.com/article/cyclone-remal-bangladesh-india-climate-9d258d86f7745951112e82de2a532a5c#:~:text=DHAKA%2C%20Bangladesh%20(AP)%20%E2%80%94,10%20people%20died%20in%20Bangladesh

[13] Climate Impacts Tracker, "Tropical Cyclone Remal in India and Bangladesh 2024 – Post analysis", 13 June 2024, https://www.climateimpactstracker.com/cyclone-remal-in-india-and-bangladesh/

[14] Financial Express, "Cylcone Remal crosses Bangladesh coast", 27 May 2024, https://thefinancialexpress.com.bd/national/cyclone-remal-crosses-bangladesh-coast

[15] Business Standard, "20 dead, Tk7,482 crore loss incurred due to Cyclone Remal: State minister tells JS", 23 June 2024, https://www.tbsnews.net/bangladesh/20-dead-tk7482-crore-loss-incurred-due-cyclone-remal-state-minister-tells-js-882701

[16] Prothom Alo English, "Cyclone Remal: Great danger signal 10 in nine coastal districts", 26 May 2024, https://en.prothomalo.com/video/c6f470zknn

[17] Business Standard, "Coastal areas brace for Cyclone Remal's impact", 26 May 2024, www.tbsnews.net/bangladesh/cyclone-remal-coastal-communities-khulna-satkhira-brace-impact-860671

[18] BD News24, "আট হাজার আশ্রয়কেন্দ্র প্রস্তুত: দুর্যোগ প্রতিমন্ত্রী" Eight thousand shelters are ready: State Minister for Disaster Management. ""The State Minister also stated that sufficient food and medical supplies have been stocked in the shelters , 26 May 2024, https://bangla.bdnews24.com/bangladesh/7413f79f6da4 (in Bengali)

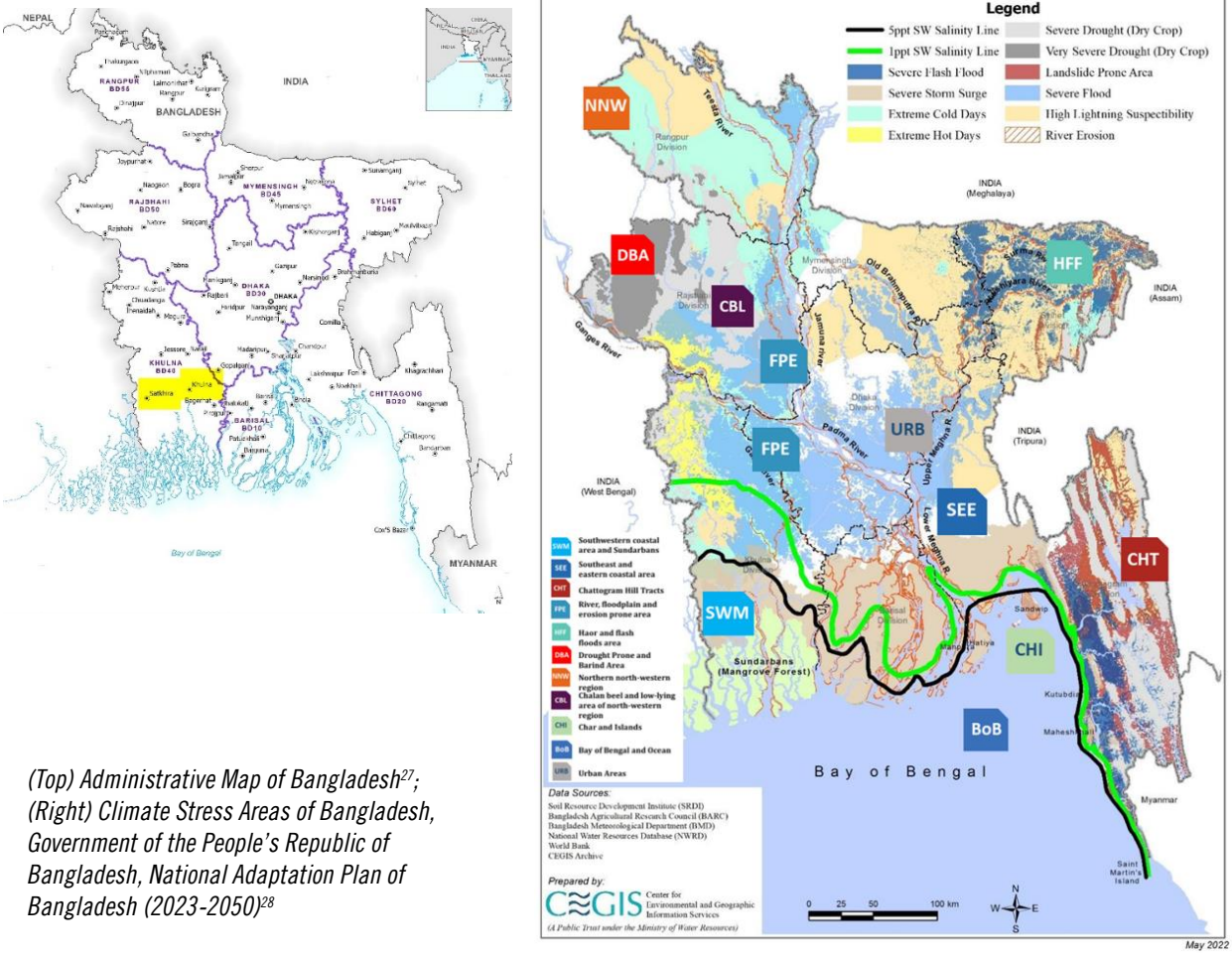
[19] Daily Star, "Remal leaves trail of havoc in its wake", 28 May 2024, https://www.thedailystar.net/environment/climate-crisis/natural-disaster/news/remal-leaves-trail-havoc-its-wake-3620481

[20] Prothom Alo English, "Cyclone Remal: Vast swathes of Sundarbans under water due to tidal surge", 26 May 2024, https://en.prothomalo.com/environment/4vm5h8m1xr

[21] Interviews with interviewees 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 and 11 (see Annex).

[22] Interview with interviewee 18.

Floods caused by cyclones and other storms destroy drinking water points and sanitation facilities, damage infrastructure and contaminate water sources.[23] The UN in Bangladesh reported that more than 20,000 water points and 134,000 latrines were damaged by Cyclone Remal.[24] Rising sea levels have caused high concentrations of salt in the water in the south-west coastal belt. [25] When people are forced use such water, they are prone to getting skin disease and diarrhoea. [26]



(Top) Administrative Map of Bangladesh[27]; (Right) Climate Stress Areas of Bangladesh, Government of the People's Republic of Bangladesh, National Adaptation Plan of Bangladesh (2023-2050)[28]

[23] UN Special Rapporteur on the Human Rights to Safe Drinking Water and Sanitation, Report: *Climate Change and the Human Rights to Water and Sanitation* (previously cited).
[24] UN in Bangladesh, *Cyclone Remal Humanitarian Response Plan 2024*, 9 June 2024, https://bangladesh.un.org/sites/default/files/2024-06/BGD-TCRemal-HRP-FINAL%209June2024_0.pdf
[25] UN Special Rapporteur on Extreme Poverty and Human Rights, Eradicating Poverty beyond growth, Report of the Special Rapporteur on extreme poverty and human rights, Oliver De Schutter, (previously cited), p. 17, para. 70.
[26] Ministry of Environment, Forest and Climate Change, Government of the People's Republic of Bangladesh, National Adaptation Plan (previously cited), p. 48.
[27] Bangladesh National Reference Map (Administrative Divisions), 2023,Bangladesh: Divisions (administrative level 1) (23 May 2023) - Bangladesh | ReliefWeb
[28] Ministry of Environment, Forest and Climate Change, Government of the People's Republic of Bangladesh, National Adaptation Plan (previously cited), p. 34.

Many people in Khulna and Satkhira live in extreme household poverty, with livelihoods that depend on natural resources. The UN Special Rapporteur on the human rights to safe drinking water and sanitation has recognized that climate-induced disasters "disproportionately burden the poorest who live in areas of greater vulnerability".[29] The World Bank reported the impact of such events, pointing out "average annual losses of roughly USD 1 billion that disproportionately affect lower-income households in southern divisions".[30] In his 2022 report, the UN Special Rapporteur on contemporary forms of racism, racial discrimination, xenophobia and related intolerance underscored that economic marginalization can also result from systemic discrimination that traps racially, ethnically and nationally marginalized groups in low-income brackets.[31] He also noted that disproportionate harm faced by systematically excluded group,[32] particularly Dalit communities, is also linked to entrenched caste-based discrimination, socio-economic marginalization and insecure land tenure.

In Khulna and Satkhira, Dalit sanitation workers interviewed by Amnesty International live in informal settlements or Dalit colonies ("paras") situated on the peripheries of towns and villages. These settlements are often located in low-lying, flood-prone areas that are highly exposed to climate hazards.[33] In Satkhira, the Dalit families visited by Amnesty International had all received land titles from the government;[34] however, in Khulna, most interviewees said they had no legal proof of ownership, even when the land had been allocated by the state or Christian missions.[35] This insecurity of tenure contributes to a pervasive fear of eviction and limits residents' ability to invest in permanent housing or sanitation infrastructure.

These structural barriers have direct implications for the realization of the rights to water and sanitation. The government has made remarkable progress in almost eliminating open defecation, from 34% in 2003 to 1.5% in 2019.[36] This 1.5%, however, disproportionately represents the poorest families, those in remote, marginalized or geographically vulnerable communities, who lack reliable access to toilets or face barriers to maintaining them.[37] This research demonstrates that Dalit sanitation workers tend to be excluded from WASH programming due to the technical challenges of providing safe water in flood-prone areas, where contamination is common. Moreover, the absence of land titles means that residents are either reluctant to invest in durable sanitation facilities or are actively discouraged from doing so by local authorities. As one resident from Satkhira explained, "They said not to make anything *pucca* [solid]. It is not my land, so they can tell me to stop coming when they want."[38]

---

[29] UN Special Rapporteur on the Human Rights to Safe Drinking Water and Sanitation, Report: *Climate Change and the Human Rights to Water and Sanitation* (previously cited).
[30] World Bank Group, *Climate Risk Profile: Bangladesh* (previously cited), p. 21
[31] UN Special Rapporteur on Contemporary Forms of Racism, Racial Discrimination, Xenophobia and Related Forms of Intolerance, Report: *Ecological Crisis, Climate Justice and Racial Justice*, 25 October 2022, UN Doc. A/77/549, p. 16, para. 50.
[32] UN Special Rapporteur on Contemporary Forms of Racism, Racial Discrimination, Xenophobia and Related Forms of Intolerance, Report: *Ecological Crisis, Climate Justice and Racial Justice* (previously cited), p. 16, para. 50; UN Special Rapporteur on the Issue of Human Rights Obligations Relating to the Enjoyment of a Safe, Clean, Healthy and Sustainable Environment, Report: *The Right to a Clean, Healthy and Sustainable Environment: Non-Toxic Environment*, 2022, UN Doc. A/HRC/49/53, p. 6, paras 22 and 25.
[33] Field observations by Amnesty International Researchers
[34] This is land allotted to Dalit families by the government; these families have been living on this land for generations. Interviews with interviewees 1, 2, 3, 5, 9, 11, 12, 13, 14, 15 and 16.
[35] For the following families land was originally allocated to Dalit communities by the Christian Missionary Charity with the intention of promoting empowerment, economic security and asset ownership. There is no proper legal documentation to prove ownership; interviews with interviewees 4, 6, 7, 8, 10, 17, 18 and 20.
[36] People's Republic of Bangladesh Country Overview https://www.sanitationandwaterforall.org/sites/default/files/2020-12/2020_Country-Overview_Bangladesh.pdf
[37] UNICEF reports that basic sanitation coverage varies widely. In 2017, 83% of the richest households had access to basic latrines, compared with just 46% of the poorest.
UNICEF Call to bridge gaps between sanitation access and service quality on World Toilet Day 2019, 19 Nov 2019, https://www.unicef.org/bangladesh/en/press-releases/call-bridge-gaps-between-sanitation-access-and-service-quality-world-toilet-day-2019
[38] Interview with interviewee 16.

3.2 SYSTEMIC DISCRIMINATION AGAINST DALITS

The Dalits of Bangladesh are a marginalized group whose identity is typically characterized as "low caste". Their birth status in the caste hierarchy, and current and ancestral occupations, are considered "impure". Dalits are designated as "untouchable" within the Hindu caste system of the Indian subcontinent. Untouchability refers to the subjugation and denial of the basic human rights of people who are labelled as "polluted" or "impure"; it is the most insidious manifestation of caste-based discrimination, specifically in South Asia.[39]

As such, Dalits face widespread discrimination in all aspects of life. Several NGOs have reported that Dalits have lower literacy rates, face barriers to education, healthcare, adequate housing and political participation, and have limited employment opportunities.[40] Dalit rights organizations estimate that there are up to 6.5 million Dalits in Bangladesh.[41] They are typically categorized as Bengali Dalits, non-Bengali Dalits and Muslim Dalits.[42] Dalits have reported being systematically excluded from shared spaces such as temples, restaurants and markets, as well as from accessing water and water sources.[43]

With its accession to the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD), Bangladesh undertook to prohibit and eliminate racial discrimination, including caste and descent-based discrimination.[44] As explained in CERD General Comment No. 29: "Discrimination based on 'descent' includes discrimination against members of communities based on forms of social stratification such as caste and analogous systems of inherited status which nullify or impair their equal enjoyment of human rights".[45]

Bangladesh's Constitution protects against discrimination on grounds of religion, race, caste, sex and place of birth.[46] Following his 2023 visit to Bangladesh, the UN Special Rapporteur on extreme poverty and human rights highlighted the "deplorable practices of 'untouchability', stigma, violence, and social as well as spatial segregation resulting in lack of access to education, healthcare, clean water, sanitation and hygiene, social protection, housing and land."[47] Further, he noted that the Constitution "does not identify the practice of untouchability as a form of discrimination" and called for the Bangladesh government to strengthen the legal and institutional framework to better prevent and protect marginalized groups from discriminatory practices.[48] Other UN experts have similarly

[39] Human Rights Watch (HRW), *Caste Discrimination: A Global Concern*, 2001, https://www.hrw.org/reports/pdfs/g/general/caste0801.pdf, p. 12
[40] International Dalit Solidarity Network (IDSN), Joint NGO Submission Related to the Review of Bangladesh for the Fourth Cycle of the Universal Periodic Review 2023: The Situation of Dalits in Bangladesh, 2023, https://idsn.org/joint-ngo-submission-related-to-the-review-of-bangladesh-for-the-fourth-cycle-of-the-universal-periodic-review-2023-the-situation-of-dalits-in-bangladesh/
[41] IDSN, Joint NGO Submission Related to the Review of Bangladesh for the Fourth Cycle of the Universal Periodic Review 2023 (previously cited).
[42] Banglapedia National Encyclopedia of Bangladesh, Dalit community, https://en.banglapedia.org/index.php/Dalit_Community (accessed on 24 September 2025)
[43] IDSN, "Bangladesh: Millions of Dalits need water and sanitation", 7 March 2016, https://idsn.org/bangladesh-millions-of-dalits-need-water-and-sanitation/
[44] International Convention on the Elimination of All Forms of Racial Discrimination (ICERD), adopted 21 December 1965, entered into force 4 January 1969, Articles 2, 5 and 7.
[45] CERD, General Recommendation No. 29: Descent-based Discrimination, 1 November 2002, UN Doc. CERD/C/GC/29.
[46] Bangladesh, The Constitution of the People's Republic of Bangladesh, Article 28.
[47] UN Special Rapporteur on Extreme Poverty and Human Rights, End of mission statement: *Visit to Bangladesh, 17-29 May 2023*, https://www.ohchr.org/sites/default/files/documents/issues/poverty/sr/20230529-EOM-Bangladesh-poverty.pdf, p. 4.
[48] UN Special Rapporteur on Extreme Poverty and Human Rights, End of mission statement: *Visit to Bangladesh* (previously cited), p. 5.

called for the government to "explicitly recognize the discrimination experienced by Dalits"[49] and Dalit rights organizations have long been calling for an anti-discrimination law.[50]

3.3 DALIT SANITATION WORKERS

A precise national statistic on the percentage of Dalits in Bangladesh working in the sanitation sector is not available through official government or international sources, but CSOs and local human rights groups consistently report that a significant proportion of Dalits in Bangladesh are employed in sanitation work, particularly in urban and peri-urban areas.[51]

3.3.1 OCCUPATIONAL ISSUES

Sanitation work includes:

- removing and collecting rubbish;
- manually emptying sewers, septic tanks and pit latrines;[52] and
- "other jobs deemed undesirable by dominant castes and classes".[53]

In 2010, UN experts reported that Dalits felt "trapped" in sanitation occupations and suffered "discrimination in all areas of life".[54] More recently, a joint report by the World Bank, International Labour Organization (ILO), WaterAid and the World Health Organization (WHO) highlighted that the "low income, financial stress, informality and social stigma attached to handling faeces can form a multigenerational poverty trap for many low-grade sanitation workers".[55]

Although some sanitation workers are employed at local government level, the majority are employed informally by private companies and individuals.[56] WaterAid reported that sanitation workers face numerous challenges including very low pay, low skill development opportunities, barriers to social protection and fears around job security due to the pervasive use of informal employment arrangements, including temporary contracts and sub-contracting chains.[57]

Sanitation workers face significant occupational health risks because they generally work without protective personal equipment[58] and are exposed to biological and chemical hazards, death, injury and health complications such as respiratory problems and skin diseases.[59] A key challenge in sanitation work is to deal safely with the faecal sludge collected from pit latrines and septic tanks;[60]

---

[49] UN Independent Expert on the Question of Human Rights and Extreme Poverty and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report, 22 July 2010, UN Doc. A/HRC/15/55*, p. 7, para. 26.
[50] IDSN, Joint NGO Submission Related to the Review of Bangladesh for the Fourth Cycle of the Universal Periodic Review 2023 (previously cited).
[51] Interview with NGO Paritrran, 29 May 2025 (over the phone).
[52] UN Independent Expert on the Question of Human Rights and Extreme Poverty and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report (previously cited), p. 7, paras 25-26.
[53] UN Special Rapporteur on Extreme Poverty and Human Rights, Eradicating Poverty beyond growth, Report of the Special Rapporteur on extreme poverty and human rights, Oliver De Schutter, (previously cited), p. 5, para. 16.
[54] UN Independent Expert on the Question of Human Rights and Extreme Poverty and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report (previously cited), p. 7, paras 25-26.
[55] World Bank, ILO, WaterAid, and WHO, *Health, Safety and Dignity of Sanitation Workers: An Initial Assessment*, 2019, https://cdn.who.int/media/docs/default-source/wash-documents/health-safety-dignity-of-sanitation-workers.pdf?sfvrsn=1eee5a94_10&download=true, p. 10.
[56] Local Government Division, Ministry of Local Government, Rural Development and Co-operatives, Institutional and Regulatory Framework for Faecal Sludge Management (FSM): Megacity Dhaka, 2017 https://psb.gov.bd/policies.php
[57] Water Aid, *Improving Social Protection for Sanitation Workers in Bangladesh*, 2023, https://washmatters.wateraid.org/sites/g/files/jkxoof256/files/2023-09/Improving%20social%20protection%20for%20sanitation%20workers%20in%20Bangladesh%20-%20policy%20brief.pdf, p. 4.
[58] UN Independent Expert on the Question of Human Rights and Extreme Poverty and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report (previously cited), p. 19, para. 75.
[59] Md. Mahmudul Hasan, "Understanding occupational health and safety for sanitation workers in order to achieve SDGs", Current Trends in Clinical & Medical Sciences, Volume 3, Issue 3, https://irispublishers.com/ctcms/pdf/CTCMS.MS.ID.000565.pdf
[60] DPHE, National Sanitation Dashboard, http://sanboard.gov.bd/about

however, health and safety protection is largely absent. Academics warn that "without an appreciation of the importance of sanitation employees' occupational health and safety, the overall sustainable development goals (SDGs) would be difficult to achieve in Bangladesh by 2030."[61]

3.3.2 OCCUPATIONAL HAZARDS COMPOUNDED BY CLIMATE EVENTS

Climate-induced (unnatural) disasters have compounded the occupational hazards faced by the sanitation workers interviewed for this research. Due to Cyclone Remal, 207 electricity poles reportedly fell in Khulna Division (85 in Satkhira alone).[62] Media sources also reported widespread fallen trees in Khulna and Satkhira, especially in coastal and forest-adjacent areas like the Sundarbans.[63] This required major efforts to clear blocked roads.

Sanitation workers interviewed for this research worked for the municipality cleaning roads and other public space;[64] in schools[65] or hospitals/clinics;[66] or for private households.[67] Regardless of the type of sanitation work they normally performed, all those who spoke to Amnesty International about their work following Cyclone Remal described performing demanding tasks beyond what was usually required of them, including clearing fallen poles and trees[68] or dead animals.[69] "I was immediately called to clean the flooded roads in my locality. There were dangerous materials [...] I had to remove waste, bodies of dead animals, leaves, clean the drains… Stopping was not an option," reported Pari.[70] Similarly many others had to work in unsanitary conditions, treading through mud and water, and sometimes clearing dead animals, without any protective equipment.[71] Interviewees reported chronic back pain, skin rashes, diarrhoea, and injuries.[72]

Despite their own personal hardship following the cyclone, women interviewees reported working long hours[73] without any compensation.[74] "I worked from 6am 'till 2pm, then again in the evening for emergency clean-ups. No money or health support was given to me. I still had to keep working because I had no choice,"[75] said Maya. They endured months in overcrowded emergency shelters,[76] unable to return home due to the destruction of their houses. When they finally returned, they found that the already inadequate water and sanitation conditions had further deteriorated. Despite their contribution to the post-disaster clean-up efforts, they were excluded from post-disaster planning or decision-making, leaving them feeling invisible and on the margins of recovery processes.

[61] Md. Mahmudul Hasan, "Understanding occupational health and safety for sanitation workers in order to achieve SDGs" (previously cited).
[62] Dhaka Tribune, "Cyclone Remal: Khulna division faces prolonged power outage", 28 May 2024, https://www.dhakatribune.com/bangladesh/nation/347690/cyclone-remal-khulna-division-residents-face
[63] Prothomolo English, "Cyclone Remal: 400,00 people affected, 50,000 houses destroyed in Khulna", 27 May 2024, https://en.prothomalo.com/bangladesh/local-news/jp819n30yr
[64] Interviews with interviewees 1, 2, 3, 4, 5, 6, 8, 14, 15, 16, 17, 18, 19 and 20.
[65] Interview with interviewee 12.
[66] Interviews with interviewees 7, 11 and 13.
[67] Interviews with interviewees 9 and 10.
[68] Interviews with interviewees 1, 5, 6, 7, 8 and 9.
[69] Interviews with interviewees 6, 7 and 8.
[70] Interview with interviewee 4.
[71] Interviews with interviewees 1, 7, 8, 9 and 11.
[72] Interview with interviewee 17.
[73] Interviews with interviewees 1, 2, 4, 5, 6, 7, 8, 9, 10, 13, 14, 15, 17, 18 and 20.
[74] Interviews with interviewees 5, 6, 7, 9, 11 and 15.
[75] Interview with interviewee 18.
[76] Interviews with interviewees 1, 3, 5, 6, 7, 11, 15, 17, 18, 19 and 20.

4. BARRIERS TO FULFILLING THE RIGHT TO WATER

The availability of water flowing freely from a tap is taken for granted by many around the world. In Khulna and Satkhira, however, Dalit women sanitation workers live with its absence every day. This section documents the daily challenges these women face in trying to secure water for their household. Barriers including having to walk and queue for water and the cost of buying purified water, as well as climate-induced factors, mean that these women often have to compromise their safety and health by drinking and cooking with water from unsafe sources.

4.1 STATE OBLIGATIONS

The CESCR states: "Water is one of the most fundamental conditions for survival."[77] The right to water is recognized as integral to the right to an adequate standard of living and the right to the highest attainable standard of health, as protected in Articles 11 and 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR), as well as necessary for the fulfilment of other rights.[78] Indeed, access to water is an essential condition for protecting the right to life,[79] and the full enjoyment of the right to water is dependent upon the realization of the right to a clean, healthy and sustainable environment.[80] Bangladesh has ratified the ICESCR, as well as the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which further protect the right to access water.[81]

International human rights standards have clarified that states have an obligation to ensure "in all circumstances" and without discrimination, that everyone has access to a sufficient amount of safe drinking water for personal and domestic use, and that water is available, accessible, acceptable and of sufficient quality.[82] This requires states to ensure that everyone has access to safe water for drinking, sanitation, washing clothes, food preparation, and personal and household hygiene, and that the water supply for each person must be sufficient and continuous to meet these needs.[83]

The quantity and quality of water should meet standards set by the WHO.[84] The WHO recommends 50-100 litres of water per person per day to ensure that most basic needs are met and few health concerns arise, with some people needing more depending on their health, work, climate conditions and other factors.[85]

The 2030 Agenda for Sustainable Development includes Goal 6 (Clean water and Sanitation): to achieve "universal and equitable access to safe and affordable drinking water for all".[86] Indicators of progress toward the target are linked to the availability, accessibility, acceptability and quality of water. States report on the proportion of the population using safely managed drinking water services and

[77] CESCR, General Comment No. 15: The Right to Water (Articles 11 and 12 of the International Covenant on Economic, Social and Cultural Rights), 20 January 2003, UN Doc. E/C.12/2002/11, pp. 2-3, paras 3-6.
[78] CESCR, General Comment No. 15: The Right to Water (previously cited), pp. 2-3, paras 3-6.
[79] UN Human Rights Committee, General Comment 36: Article 6: The Right to Life, 3 September 2019, UN Doc. CCPR/C/GC/36, p. 6, para. 26.
[80] UN General Assembly, Resolution adopted by the General Assembly on 28 July 2022,1 August 2022, UN Doc. A/RES/76/300.
[81] Access to clean drinking water is specifically protected as part of the right to health for children in the Convention on the Rights of the Child, Article 24 (2)(c); the CEDAW protects the right of rural women to adequate living conditions, including to water supply (Article 14 (h)); UN Human Rights Treaty Bodies, UN Treaty Body Database, https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=14&Lang=en, "Ratification status for Bangladesh" (accessed on 25 Sep 2025).
[82] CESCR, General Comment No. 15: The Right to Water (previously cited), pp. 2-3, paras 3-6.
[83] CESCR, General Comment No. 15: The Right to Water (previously cited), page 5, para. 12 (a).
[84] CESCR, General Comment No. 15: The Right to Water (previously cited), page 5, page 5, para. 12.
[85] Office of the High Commission for Human Rights (OHCHR), *The Right to Water: Fact Sheet No. 35*, 2010, https://www.ohchr.org/sites/default/files/2021-09/FactSheet35en.pdf
[86] UN General Assembly, Resolution adopted by the General Assembly on 25 September 2015, 21 October 2015, UN Doc. A/RES/70/1.

progress towards providing the whole population with access to a water source that is "located on the premises; available when needed; free of faecal and priority chemical contamination".[87]

As a UN member state, Bangladesh has pledged to achieve the SDGs, including on access to water and sanitation, but the country's limited water infrastructure for the extraction and delivery of water presents a key challenge. The latest country data (2022) indicates that despite progress only 59% of Bangladesh's population has access to safely managed drinking water.[88] Many people rely on accessing water from boreholes or tube wells, protected dug wells, protected springs, rainwater, and packaged or delivered water.[89] None of the 20 Dalit households visited in Khulna and Satkhira have a water pipeline connected to homes. Local officials in Khulna told Amnesty International that from May to September (monsoon season), people rely on rainwater for drinking. For the remaining six months, "there is a drinking water crisis".[90]

Government household survey data confirms this picture: 3.1% of households nationally – and 6.7% of the poorest – are unable to access sufficient drinking water when needed, due to cost or lack of accessible sources.[91] This data is not disaggregated by caste, which limits insight into the specific challenges faced by Dalit communities. Failure to monitor caste-based inequalities in access to water and sanitation, and to collect disaggregated data for that purpose, constitutes a violation of the obligation under international human rights law to refrain from discrimination and to ensure substantive equality.[92] The UN Special Rapporteur on the right to safe drinking water and sanitation and the Special Rapporteur on contemporary forms of racism, racial discrimination, xenophobia, and related intolerance have recognized that although there is no obligation under international human rights law to collect disaggregated data, failure to do so could amount to a breach of the obligation to ensure substantive equality under ICERD and in the realization of ICESCR rights.[93]

Racial discrimination, including caste-based discrimination, is a major barrier to the realization of the right to health, as recognized by both CERD[94] and the UN Special Rapporteur on the right to health.[95] Under the ICESCR and ICERD, the right to health, including access to healthcare, must be guaranteed without discrimination on the basis of race.[96] In General Comment No. 14, the CESCR elaborates that health facilities, goods and services must be accessible to all, particularly the most vulnerable and marginalized, both in law and in practice. It also emphasizes that the obligation to ensure non-discrimination is immediate and not subject to progressive realization.[97]

[87] UN Water, Sustainable Development Goals Indicator 6.1.1 "Proportion of population using safely managed drinking water services" accessed 8 June 2025 https://www.unwater.org/our-work/sdg-6-integrated-monitoring-initiative/indicator-611-proportion-population-using-safely

[88] UN Water, SDG 6 snapshot in Bangladesh, data 6.1.1 Proportion of population using safely managed drinking water services in Bangladesh, progress over time, accessed 8 June 2025 https://www.sdg6data.org/en/country-or-area/Bangladesh#anchor_6.1.1

[89] Bangladesh Bureau of Statistics and UNICEF Bangladesh, *Bangladesh Multiple Indicator Cluster Survey 2019: Survey Findings Report*, December 2019, https://www.unicef.org/bangladesh/media/3281/file/Bangladesh%202019%20MICS%20Report_English.pdf

[90] Interview by video call with Upazila Nirbahi Officer, Khulna, 18 June 2025.

[91] Bangladesh Bureau of Statistics (BBS) and UNICEF Bangladesh, *Bangladesh Multiple Indicator Cluster Survey 2019* (previously cited), p. 330, Table WS.1.5: Availability of sufficient drinking water when needed.

[92] UN Special Rapporteur on the Right to Safe Drinking Water and Sanitation, Report: *Common Violations to the Human Rights to Water and Sanitation*, 30 June 2014, UN Doc. A/HRC/27/55, para. 55.

[93] UN General Secretary, Report: Combating Racism, Racial Discrimination, Xenophobia and Related Intolerance and the Comprehensive Implementation of and Follow-up to the Durban Declaration and Programme of Action, UN Doc. A/70/335, para. 18; UN Special Rapporteur on the Right to Safe Drinking Water and Sanitation, Report: Common Violations to the Human Rights to Water and Sanitation (previously cited), para. 55.

[94] CERD, General Recommendation No. 37: Equality and freedom from racial discrimination in the enjoyment of the right to health, 2024, UN Doc. CERD/C/GC/37.

[95] UN Special Rapporteur on the Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health, Report: *Racism and the Right to Health*, UN Doc. A/77/197, 20 July 2022.

[96] ICESCR (previously cited), Article 12(1); ICERD (previously cited), Article 5(e)(iv).

[97] CESCR, General Comment No. 14: The Highest Attainable Standard of Health, UN Doc. E/C.12/2000/4, 11 August 2000, https://www.ohchr.org/en/documents/general-comments-and-recommendations/ec1220004-general-comment-no-14-highest-attainable

4.2 ACCESSIBILITY AND AVAILABILITY

The CESCR interprets the human right to water as including the requirement that it is accessible in all circumstances, and explains that accessibility has "four overlapping dimensions": "physical accessibility, economic accessibility, non-discrimination, and information accessibility".[98] The closest water sources for Dalit women interviewed in Khulna and Satkhira are ponds where the water is unsafe for personal and domestic use. Water treatment centres and some deeper tube wells with water pumps are relatively safer, but both present physical and economic accessibility challenges and safety concerns.

WALKING FOR WATER: A DAILY BURDEN FOR WOMEN

For many women sanitation workers, the burden of water collection is a daily struggle layered with gendered expectations, caste-based discrimination, and the physical toll of precarious labour. Out of the interviewees, eight women reported that men in their households occasionally help with water collection, but the responsibility overwhelmingly falls on them.[99] They are expected to secure water for drinking, sanitation and all household needs[100] – before and after long shifts of physically demanding sanitation work.

Amnesty International observed women walking up to 30 minutes to a water source and queuing for five minutes to several hours depending on the affluence of the area. Many women make multiple trips daily,[101] amounting to several hours of unpaid, physically strenuous labour. "The long waits eat my time," said Kala, who spends up to four hours a day collecting water. "Cleaning the streets is not easy – my body breaks."[102] The physical toll is immense. Soma, from Khulna, described carrying up to 20 buckets a day. "Even if I am late from work, I have to go and collect water."[103]

The burden is compounded by caste-based discrimination. Six women reported being forced to wait longer at public taps because of their caste identity.[104] "They make me wait… they say upper-caste people will collect water first," said Pari. "We don't even have rights over such common things. They always show us our real place."[105]

These testimonies echo findings from a 2023 UNICEF-WHO report, which noted that in Bangladesh women and girls spend more than 10 times more time fetching water than men. Government data from 2019 confirms that in 85.4% of households it is women and girls (aged 15+) who collect drinking water, rising to 95.4% in non-Bengali households.

4.2.1 WATER TREATMENT CENTRES[106]

In Khulna and Satkhira, access to safe drinking water is severely constrained by environmental contamination – salinity, arsenic and iron – exacerbated by climate-induced cyclones and floods (see section 4.2.3). The safest source of water is small-scale treatment centres using reverse osmosis (RO)

[98] CESCR, General Comment No. 15: The Right to Water (previously cited), para. 12.
[99] Interviews with interviewees 1, 5, 6, 10, 15, 16, 17 and 18.
[100] Interviews with interviewees 4, 5, 6, 7, 9, 13, 14, 15, 18 and 20.
[101] Interviews with interviewees 7 and 9.
[102] Interviews with interviewee 6.
[103] Interviews with interviewee 7.
[104] Interviews with interviewees 1,4, 5, 6, 15 and 20.
[105] Interviews with interviewee 4.
[106] Water treatment centres in Khulna and Satkhira are also referred to as "desalination centres" or "reverse osmosis centres".

technology to treat groundwater,[107] but government officials acknowledged that groundwater is often unusable, limiting the availability of public RO centres.[108]

Researchers visited eight RO centres[109] and found that Dalit sanitation workers, primarily women, face significant barriers to accessing treated water, including cost, distance and long waiting times. Centres are located 500m to 2km from the Dalit villages visited by Amnesty International, requiring women to walk 30 minutes to an hour each way, often carrying 15-20kg of water. [110] "One kolshi on my waist and one on my head," [111] said Diya, describing the physically demanding journey on rough, muddy roads. During extreme weather, access becomes impossible, making treated water critically unavailable.

Waiting times may further compound the burden: "We may have to stand in line for 1–2 hours to get just one drum," [112] said Maya. Kala added, "Some days I have waited for two to three hours… I stand behind the upper-caste people. These are the rules of the world." [113] Kala's testimony reflects the internalization of caste hierarchies that continue to limit access to essential resources.

Women collecting water in their lined up Kolshis (aluminium vessels) from a desalination centre in Khulna, April 2025. © Amnesty International

Electricity and water outages disrupt operations, increasing wait times and forcing longer travel to alternative centres. [114] SDG standards state that water collection exceeding a 30-minute round trip, including queuing, is considered "limited". [115] Amnesty International's findings show that Dalit sanitation workers struggle to access even this minimal level of service, underscoring the urgent need for equitable, climate-resilient water infrastructure in Bangladesh.

[107] Reverse osmosis technology uses a filter to remove dissolved contaminants, including salt and bacteria, from drinking water; Garud R.M and others, "A short review on process and applications of reverse osmosis", Universal Journal of Environmental Research and Technology, 2011, Volume 1, pp. 233-238.
[108] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025 (over the phone).
[109] Three desalination centres serve the localities visited in Khulna: Bajua Bajar Centre (located 0.5km from the Dalit colonies), Chalna Pourasabha Centre (3km from the Dalit colonies) and Bondhu Foundation centre, run by an NGO; three desalination centres serve the localities visited in Satkhira: Buddhahat Bajar Point (0.5km away from the Dalit colonies), Ashashuni Bajar (largest capacity, 2km away from the Dalit colonies) and a centre run by Nazreen Mission.
[110] Community discussions in Khulna, 14 April 2025, and in Satkhira, 18 April 2025.
[111] Interview with interviewee 19.
[112] Interview with interviewee 18.
[113] Interview with interviewee 6.
[114] There are frequent power shortages or "load shedding" in Khulna and Satkhira, linked to insufficient power production, fuel shortages and occasional grid failures, in addition to damage to power supply lines during cyclones. Dhaka Tribune, "Cyclone Remal: 27m consumers without electricity across Bangladesh", 27 May 2024, https://www.dhakatribune.com/bangladesh/347652/cyclone-remal-27m-consumers-without-electricity; Business Standard, "Relentless load shedding plagues Khulna, Barishal residents", 1 November, 2024, https://www.tbsnews.net/bangladesh/energy/relentless-load-shedding-plagues-khulna-barishal-residents-981976
[115] UN Water, Indicator 6.1.1: "Proportion of population using safely managed drinking water services", https://www.unwater.org/our-work/sdg-6-integrated-monitoring-initiative/indicator-611-proportion-population-using-safely (accessed 8 June 2025).

4.2.2 TUBE WELLS

In Khulna and Satkhira districts, public tube wells, installed by local municipalities, are a key source of free water for household and sanitation needs. Yet for Dalit sanitation workers, especially women, accessing these wells is limited by distance and caste-based exclusion.

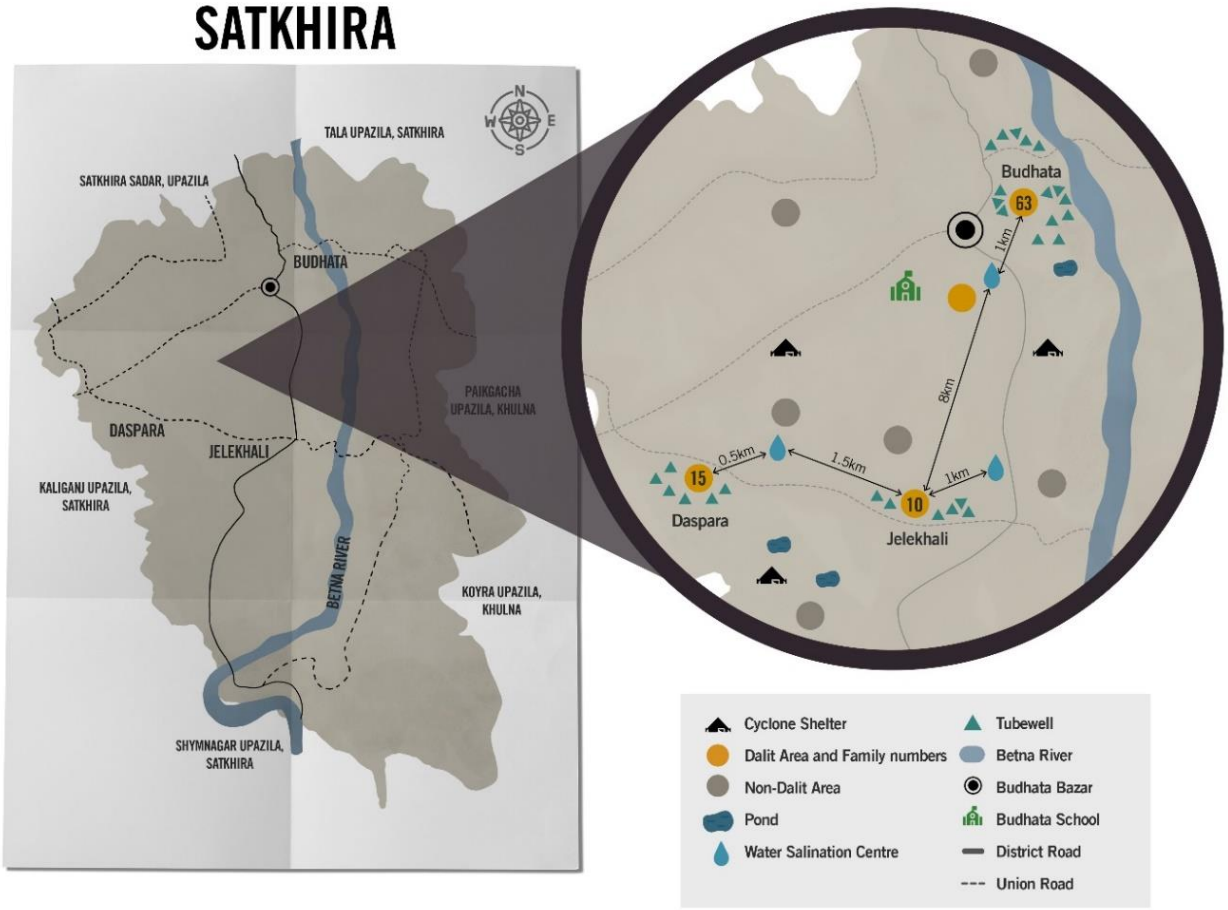
WHAT ARE TUBE WELLS?

Tube wells draw water from underground sources. They typically consist of a narrow-diameter pipe (about 5cm) drilled to depths ranging from 50-250m, equipped with a hand pump for water extraction. Generally, public tube wells extract water from a depth of around 76m.

Amnesty International researchers mapped 86 tube wells across six villages (in three villages in Khulna, 56 tube wells for approximately 140 Dalit families; in three villages in Satkhira, 30 tube wells for approximately 88 Dalit families).[116] Tube wells are widespread, but often located far from Dalit settlements, sometimes up to 1km away.[117] Women repeatedly told Amnesty International they want tube wells and water tanks closer to their homes.[118] Local officials reported challenges in installing tube wells in low-lying areas due to groundwater contamination from salinity, arsenic and iron.[119] Nonetheless, the placement of existing wells, often far from Dalit homes, highlights deep structural inequities.

A fragile, makeshift setup in Satkhira where a tube well—intended to provide safe drinking water—is precariously supported with bamboo poles, bricks, and string. Ashashuni, Satkhira, May 2025. © Amnesty International

[116] Field researchers observed the tube wells in Khulna between 11 April and 14 April 2025 and Satkhira on 17-18 April 2025.
[117] Interviews with interviewees 11, 12, 16, 17 and 18.
[118] Community discussion, Satkhira, 18 April 2025, and Khulna, 14th April 2025.
[119] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.



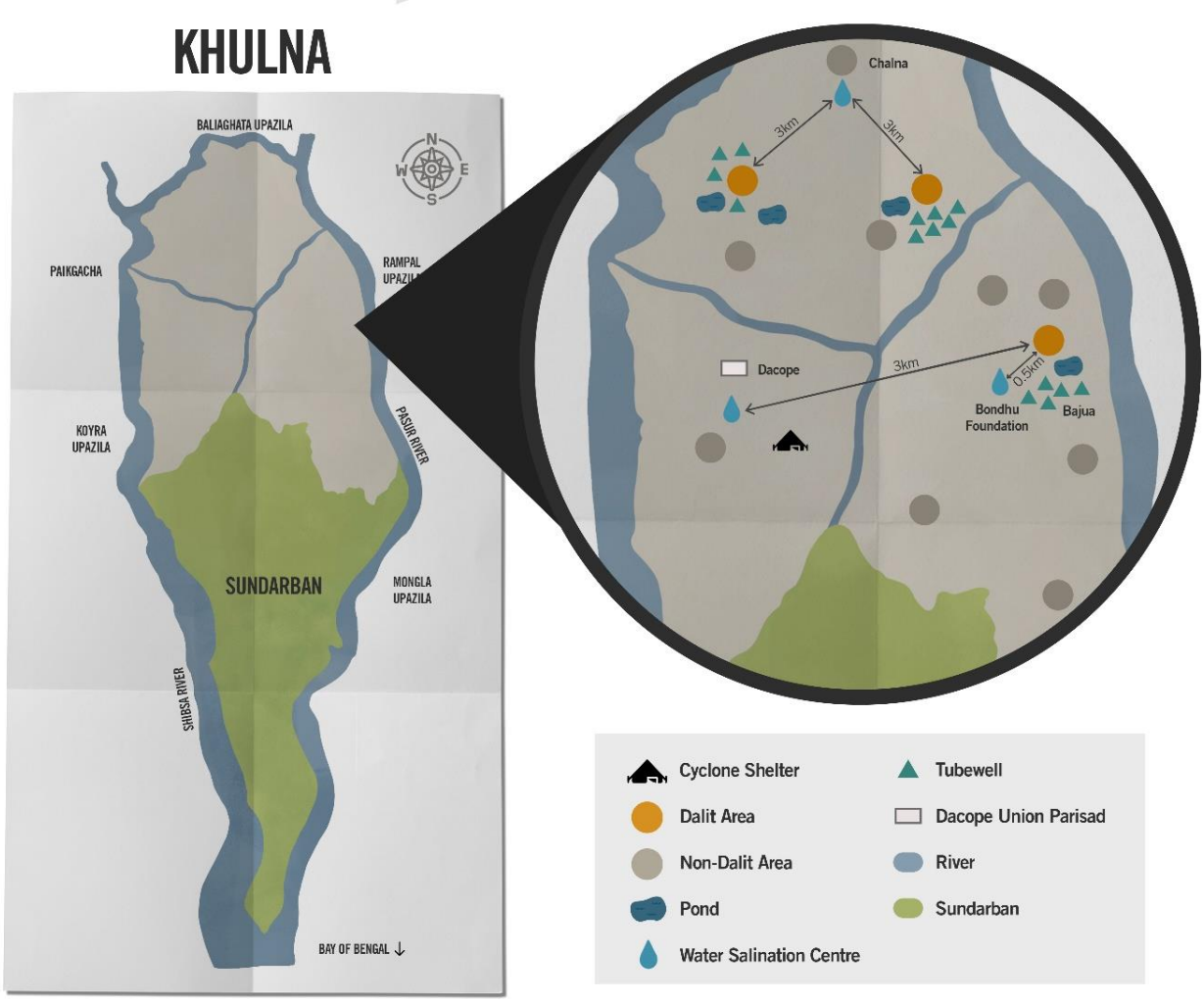
Field survey conducted in Ashashuni Upazila, targeting areas with a high concentration of Dalit communities vulnerable to environmental degradation and social exclusion. The investigation covered Ashashuni Union and surrounding localities, including Jelekhali and Budhata, within Satkhira District. © Amnesty International

Difficulty in accessing tube wells can be compounded by caste-based discrimination. "When I go to the tube well… I have to wait if it is crowded," [120] said Sunita from Satkhira. "People from the higher communities take the water first." Laila added, "They say it is 'their' tube well… I am often made to stand in line or they don't allow me to take any water." [121] Pushpa reported being denied access entirely: "They have stopped allowing us to use the same tube well."[122] These testimonies reflect broader patterns documented by Dalit rights organisations, which report that Dalits are routinely barred from using water sources in rural areas.[123] The discrimination not only reinforces social exclusion, but also increases the time and physical effort required to collect water, already a gendered burden borne disproportionately by Dalit women.

By accessing to ICERD, Bangladesh committed to prohibit and eliminate caste-based discrimination.[124] During the 2024 Universal Periodic Review (UPR), Bangladesh accepted recommendations to pass a long-pending anti-discrimination legislation;[125] however, the Anti-Discrimination Act Bill, first tabled in parliament in April 2022, remains under review and has yet to be enacted.[126] The bill reportedly includes protections for Dalits and specifically prohibits "denying

[120] Interview with interviewee 14.
[121] Interview with interviewee 20.
[122] Interview with interviewee 1.
[123] M. Islam and A. Parvez, Dalit Initiatives in Bangladesh, Health & Sanitation, IDSN, 2015, https://idsn.org/wp-content/uploads/2015/01/Dalit-Initiatives-in-Bangladesg.pdf, pp. 21-24; see also Bangladesh Dalit and Excluded Rights Movement (BDERM) and others, *NGO report to the United Nations Human Rights Committee on Caste Based Discrimination in Bangladesh*, 2017, https://ccprcentre.org/files/documents/Joint_report_.pdf, p. 4.
[124] ICERD (previously cited), p. 195, Article 5, in conjunction with Article 1
[125] UN Doc. A/HRC/55/13/Add.1
[126] bdnews24.com, "Bangladesh pitches sweeping new anti-discrimination bill to uphold equality", 5 April 2022, https://bdnews24.com/bangladesh/bangladesh-pitches-sweeping-new-anti-discrimination-bill-to-uphold-equality

access to public places and services" on the basis of caste. It also makes provisions for local and national bodies to oversee implementation and address complaints.[127]



Field survey conducted in Dacope Upazila, focusing on Dalit and marginalized communities residing in climate-vulnerable areas. The investigation covered Dacope Union, Chalna Union, and the adjoining urban centers of Chalna and Dacope. © Amnesty International

4.2.3 AVAILABILITY IN THE CONTEXT OF CLIMATE CRISIS

In General Comment 15, the CESCR clarifies what availability of water entails: "the water supply for each person must be sufficient and continuous for personal and domestic uses",[128] as well as of a quality that corresponds to the WHO guidelines. This research found that climate-induced droughts, cyclones and floods are disrupting both the quantity and continuity of water supply in the localities visited. In Satkhira, a woman reported that her nearest tube well runs dry during summer.[129] Media reports confirm this trend, with *The Daily Star* noting in May 2025 that "85% of tube wells in the region have run dry". [130] Women sanitation workers also stressed the physical difficulty of collecting

[127] bdnews24.com, "Bangladesh pitches sweeping new anti-discrimination bill" (previously cited).
[128] CESCR, General Comment No. 15: The Right to Water (previously cited), page 5-6, para.12
[129] Interview with interviewee 13.
[130] The Daily Star, "Water crisis deepens in Khulna", 14 May 2025, https://www.thedailystar.net/news/bangladesh/news/water-crisis-deepens-khulna-3894046; the publication reported similar concerns in 2023, The Daily Star, "Coastal areas of Khulna: Struggle for

water in the heat of summer.[131] These shortages are sometimes compounded by caste-based discrimination. “They [members of the majority community] take water first during the dry months, leaving us with a limited amount,” said Rajkini. “It’s better they take water first.” [132] Her remark suggests she has internalized caste-based norms, accepting unequal access as justified.

During extreme weather events, access becomes even more precarious. While such environmental disasters are not new, climate change is exacerbating the situation. “We collect and drink rainwater,”[133] said Laboni. After Cyclone Remal, Ujwala had to walk 3-4 km to fetch water.[134] Soma said, “We drank stored floodwater after trying to boil it.”[135] Piu added, “I could not get any clean water to drink… The water was never enough.”[136] “Roads get slippery and muddy… There is always risk of falling while carrying heavy buckets,” said Maya.[137] Pushpa described being forced to use pond water when tube wells are damaged, although even ponds become inaccessible during floods.[138]

A tubewell completely submerged in flood water. Floods render tubewells unusable for weeks, pushing already-excluded Dalit communities to unsafe alternatives like pond water or contaminated shallow wells. The image reflects how climate change intensifies water insecurity in these vulnerable regions. Photo: Paritrran. Khulna © Amnesty International

Local public health officials noted that, after cyclones and other climate-induced events, low-lying areas often become inaccessible except by boat, requiring the emergency delivery of jerry cans of water. In response, authorities have distributed water at primary schools and cyclone shelters, deployed mobile treatment plants, and partnered with NGOs to support emergency water access.[139] These relief measures are not sufficient. Under international human rights law, states have a clear obligation to adopt climate adaptation measures, particularly where climate impacts threaten access to essential services such as water. This obligation is grounded in the right to a clean, healthy and

safe drinking water getting tougher”, 22 March 2023, https://www.thedailystar.net/news/bangladesh/news/coastal-areas-khulna-struggle-safe-drinking-water-getting-tougher-3277241

[131] Interviews with interviewee 10 and 19.
[132] Interview with interviewee 13.
[133] Interview with interviewee 5.
[134] Interview with interviewee 9.
[135] Interview with interviewee 7.
[136] Interview with interviewee 10.
[137] Interview with interviewee 18.
[138] Interview with interviewee 1.
[139] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025 (over the phone), and Executive Engineer, DPHE, Satkhira, 17 June 2025 (over the phone).

sustainable environment,[140] and in related rights such as the right to life,[141] health,[142] and adequate standard of living,[143] which include access to safe drinking water and sanitation.

The UN Special Rapporteur on the human rights to water and sanitation has warned that climate change will increasingly threaten access to water, especially in flood-prone countries like Bangladesh.[144] Without urgent, inclusive and climate-resilient infrastructure, the right to water for Dalit sanitation workers – already undermined by structural inequalities and discrimination – will remain out of reach.

4.3 WATER QUALITY

Contamination, salination and other threats to water quality are major concerns for Dalit sanitation workers and their families. Water quality is compromised in virtually all the sources used by Dalit sanitation workers: tube wells, ponds, rainwater and even treated water.

4.3.1 TUBE WELLS

A 2019 government survey revealed that 37% of tube wells in Khulna contained moderate to high levels of E. coli and users faced an 81.7% risk of faecal contamination.[145] Salinity levels are also high in deep and surface water.[146] Public health officials confirmed periodic contamination with arsenic,[147] iron, chloride and salinity in both Khulna and Satkhira, particularly in low-lying areas.[148] Officials told Amnesty International that tube well water is tested upon installation; if contamination is detected, the site is either abandoned or replaced with an RO plant. Capacity is limited for ongoing monitoring, however, despite the fact that "the quality can change [over time]".[149]

A Dalit woman sanitation worker collects water from an elevated tubewell, surrounded by floodwaters in Khulna. Many families have no choice but to use contaminated or unsafe water due to the collapse of infrastructure after Cyclone Remal. Ashashuni, Satkhira, April 2025. © Amnesty International

[140] UN General Assembly, Resolution adopted by the General Assembly on 28 July 2022 (previously cited).
[141] International Covenant on Civil and Political Rights (ICCPR), adopted 16 December 1966, entered into force 23 March 1976, Article 6.
[142] International Covenant on Economic, Social and Cultural Rights (ICESCR), adopted 16 December 1966, entered into force 3 January 1976, Article 12.
[143] ICESCR, Article 11.
[144] UN Special Rapporteur on the Human Rights to Safe Drinking Water and Sanitation, Report: *Climate Change and the Human Rights to Water and Sanitation* (previously cited).
[145] Bangladesh Bureau of Statistics (BBS) and UNICEF Bangladesh, *Bangladesh Multiple Indicator Cluster Survey 2019* (previously cited), pp. 331-333.
[146] Dhaka Tribune, "Proper planning imperative to solving potable water crisis, say experts", 11 December 2024, https://www.dhakatribune.com/bangladesh/nation/367770/proper-planning-imperative-to-solving-potable;
K.M. Ahmed and others, *Alternative Water Supply Options for Coastal Communities of Bangladesh*, Research Gate, 2015, p. 3.
[147] Bangladesh Bureau of Statistics (BBS) and UNICEF Bangladesh, *Bangladesh Multiple Indicator Cluster Survey 2019* (previously cited), pp. 339-340.
[148] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025, and Executive Engineer, DPHE, Satkhira, 17 June 2025.
[149] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.

The CESCR states that water must be of acceptable colour, odour and taste.[150] Yet many Dalit women described water that is visibly discoloured and foul-smelling. "We know it's dangerous [to drink it], but what can we do? We need water to live," [151] said Laila, referring to the yellow, metallic-smelling water from her village tube well. Kishori added, "The iron is so high, we can't drink it." Although most community members expressed reluctance to drink water from tube wells due to contamination risks,[152] at least five Dalit households told Amnesty International they had no alternative, citing the cost, distance and limited availability of safer sources, especially during floods and cyclones.[153]

4.3.2 PONDS – A RISKY LAST RESORT

In the hierarchy of water sources, ponds are the least desirable option, but sometimes Dalit families have no alternative. Typically located within the community, ponds are used primarily for sanitation and household needs. Amnesty International surveyed four ponds in Dalit settlements.[154]

A pond with stairs for access, used for water collection by Dalit families, located close to Dalit households in Dacope. The pond water is stagnant with moss and green algae. and the banks of the pond are uneven and eroded due to the impacts of flooding and inundation. Dacope, Khulna, April 2025. © Amnesty International

Pond water poses serious health risks. Government data from a 2019 household survey found a 96.1% risk of faecal contamination in surface water, with high levels of E. coli.[155] Ponds are breeding grounds for mosquitoes and water-borne diseases, especially during floods when faecal matter contaminates the water. [156] Safety is a further concern. Most ponds lack basic infrastructure like steps or boundaries, forcing women to descend slippery slopes to collect water. In Khulna, the Christian Society had improved access to two ponds by installing stairs and boundaries.

[150] CESCR, General Comment No. 15: The Right to Water (previously cited), para. 12 (b).
[151] Interview with interviewee 20.
[152] Community discussion, Satkhira, 18 April 2025, and Khulna, 14 April 2025.
[153] Interviews with interviewees 1, 10, 13, 17 and 20.
[154] 88 Dalit families in villages visited in Ashashuni, Satkhira use two ponds and 140 Dalit families in villages visited in Dacope, Khulna use two ponds.
[155] Bangladesh Bureau of Statistics (BBS) and UNICEF Bangladesh, *Bangladesh Multiple Indicator Cluster Survey 2019* (previously cited), p. 333, Table WS.1.7: Quality of household drinking water - E. coli
[156] F.H. Rupa and M. Hossian, "Addressing public health risks: Strategies to combat infectious diseases after the August 2024 floods in Bangladesh", Journal of Preventive Medicine and Public Health, Volume 57, Issue 6, November 2024, https://pmc.ncbi.nlm.nih.gov/articles/PMC11626110/

Despite the risks, some families rely on ponds for drinking water during the dry season, when tube wells run dry. Rashmika described how her family collects water: "We tie nets to things like *shola* (thermocol substance) drag them to fetch water and pull them back." [157]

Pond sand filters (PSFs) can improve water quality,[158] but often fail to meet microbiological standards and faecal coliform levels remain unsafe.[159] Local officials in Satkhira admitted, "PSF is one of our failures," citing maintenance challenges.[160] Only one of the 12 ponds Amnesty visited had a functioning PSF. Most families resort to boiling water or adding alum, methods that do little to remove harmful contaminants.

Climate-induced events further degrade water quality in ponds.[161] Cyclones and floods increase saltwater intrusion and spread waste, polluting both surface and groundwater sources. [162]

A glass of visibly contaminated pond water collected by a Dalit sanitation worker family in Satkhira. With desalinated water unaffordable and tubewells often inaccessible or unsafe, many families are forced to rely on pond water—even for drinking—especially during cyclones and flooding, despite the health risks. Satkhira, May 2025. © Amnesty International

4.3.3 RAINWATER

Dalit families who can afford storage and treatment said that they rely on rainwater for cleaning and consumption during monsoons (see section 4.4.3 on rainwater harvesting). Researchers reported observing Dalit women drinking rainwater without boiling or filtering it. Contamination of rainwater with E.Coli is common. A 2019 government survey found that E. Coli was found in 90% of households who used rainwater as a source for drinking water, with 60% at high or very high levels.[163] Local public health officials noted that collected rainwater can be treated with chloride,[164] but local pharmacies confirmed that purification tablets such as Halotab are no longer available in the areas visited by Amnesty International.[165]

4.3.4 RISKS OF UNSAFE WATER

The health risks of unsafe drinking water are well established. A 2019 WHO report attributed 69% of global diarrhoea-related deaths to unsafe water, sanitation and hygiene.[166] In coastal Bangladesh, medical research has linked water contamination, particularly high salinity, to serious health impacts,

[157] Interviews with interviewee 13.
[158] The UN High Level Panel on Water defines PSFs as "slow sand filter units developed to treat surface water, usually pond water, for domestic water supply" and notes that they do not require chemical treatment. UN High Level Panel on Water, *Universal Access to Safe Water*, 2016, https://sustainabledevelopment.un.org/content/documents/hlpwater/13-UniversalAccess.pdf
[159] F.M Ashraful Alam and others, "Assessing the drinking water quality and performance of pond sand filters (PSF) in coastal area of Bangladesh: A cross-sectional study on Dacope Upazila of Khulna", International Journal of Advanced Geosciences, Volume 5, Issue 2, 2017, https://www.researchgate.net/publication/318456576_Assessing_the_drinking_water_quality_and_performance_of_pond_sand_filters_PSF_in_coastal_area_of_Bangladesh_a_cross_sectional_study_on_dacop_upazila_of_Khulna
[160] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[161] Interview with interviewee 10.
[162] Md. S. Khan and S.K. Paul, "Sources, consumption patterns and challenges assessment of freshwater in the coastal regions of Bangladesh", World Development Sustainability, Volume 6, 27 May 2025 https://doi.org/10.1016/j.wds.2025.100227
[163] Bangladesh Bureau of Statistics (BBS) and UNICEF Bangladesh, *Bangladesh Multiple Indicator Cluster Survey 2019* (previously cited), p. 333, Table WS.1.7: Quality of household drinking water - E. coli
[164] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.
[165] Fieldwork observations in Khulna, 14 April 2025 and Satkhira, 18 April 2025.
[166] WHO, The Global Health Observatory, https://www.who.int/data/gho/data/themes/topics/water-sanitation-and-hygiene-burden-of-disease, "Water, sanitation and hygiene – Burden of disease" (accessed on 25 September 2025).

including hypertension[167] and maternal complications such as pre-eclampsia.[168] A study conducted between 2008 and 2010 in Dacope Upazila, where Amnesty International carried out fieldwork, found that pregnant women had average urinary salt levels of 3.4 grams/day, well above the WHO's recommended limit of 2 grams/day.[169] More recently, a 2024 study in Satkhira by the International Centre for Climate Change and Development (ICCCAD) documented widespread cases of hypertension, stroke, diarrhoea and skin diseases associated with saline drinking water.[170] The area studied shares similar environmental vulnerabilities with Amnesty International research sites, including saltwater intrusion and climate-related shocks.

Dalit sanitation workers interviewed described frequent illness linked to water consumption. "We constantly battle illness – diarrhoea, fevers, skin infections. Doctors are expensive, so mostly we suffer silently. Our health deteriorates further after each cyclone," said a participant in a community discussion in Khulna.[171] Kala shared, "My youngest one got diarrhoea and we had to borrow money for treatment. My mother-in-law also suffered from stomach gas and indigestion. Doctor said it could be linked to impure water." [172] Many interviewees reported being unable to afford medical care.[173] "Children miss school and elders miss work. We cannot even afford to go to a doctor,"[174] said Maya. Diya added, "The doctor at the clinic does not touch us, and they don't treat us properly. All of my family gets the medicines from the medicine shop."[175] These accounts were corroborated by a local NGO.[176]

Three women linked recurring skin infections to poor water quality.[177] Sarita said she uses market water for her children, but relies on pond water for the adults due to the cost.[178] Medical studies support these concerns. A 2024 PennState Extension article notes that iron-rich water can cause skin irritation and exacerbate eczema.[179] Harvard Health reports that chronic exposure to arsenic-contaminated water, even without ingestion, can lead to hyperpigmentation, keratosis, and skin cancers.[180]

[167] Business Standard, "Senora's water tanks help Koikhali women overcome period ordeals", 13 September 2022; https://www.tbsnews.net/features/panorama/senoras-water-tanks-help-koikhali-women-overcome-period-ordeals-495262 M. Shammi and others, "Impacts of salinity intrusion in community health: A review of experiences on drinking water sodium from coastal areas of Bangladesh", Healthcare, Volume 7, Issue 1, 2019, https://doi.org/10.3390/healthcare7010050; A.M. Naser and others, "Stepped-wedge cluster-randomised controlled trial to assess the cardiovascular health effects of a managed aquifer recharge initiative to reduce drinking water salinity in southwest coastal Bangladesh: Study design and rationale", British Medical Journal Open, Volume 7, Issue 9, 2017, https://doi.org/10.1136/bmjopen-2016-015205

[168] M. Shammi and others, "Impacts of salinity intrusion in community health" (previously cited); A.M. Naser and others, "Stepped-wedge cluster-randomised controlled trial to assess the cardiovascular health effects of a managed aquifer recharge initiative" (previously cited).

[169] A.E. Khan and others, "Drinking water salinity and maternal health in coastal Bangladesh: Implications of climate change", Environmental Health Perspectives, Volume 119, Issue 9, 2011, https://doi.org/10.1289/ehp.1002804, pp. 1328-1332.

[170] ICCCAD, Salinity Intrusion and its Impact on Menstrual Hygiene among Coastal Women in Bangladesh, 2024.

[171] Community discussion, Khulna, 14 April 2025.

[172] Interview with interviewee 6.

[173] Interviews with interviewees 1, 2, 3, 13 and 14.

[174] Interview with interviewee 18.

[175] Interview with interviewee 2.

[176] Interview with Uddipta Mahila Unnayan Sangstha (NGO), 17 April 2025.

[177] Interviews with interviewees 3, 6 and 16.

[178] Interview with interviewee 16.

[179] PennState Extension, "Iron and sulfur bacteria – a slimy problem", 16 September 2024, https://extension.psu.edu/iron-and-sulfur-bacteria-a-slimy-problem

[180] Harvard Medical School, "Showering daily – is it necessary?", 16 August 2021, https://www.health.harvard.edu/blog/showering-daily-is-it-necessary-2019062617193

4.4 AFFORDABILITY

The right to safe drinking water includes affordability.[181] This should inform state policy-making on public financing for water and sanitation service provision. Specifically, the UN Special Rapporteur on the human right to safe drinking water and sanitation states that "public funds need to be directed towards extension of services for the most disadvantaged and for ensuring that such services are affordable".[182] Affordability is relative and affordability standards should be determined at the national or local level.[183]

4.4.1 WATER TREATMENT CENTRES

Dalit women sanitation workers in Satkhira face significant barriers to accessing safe drinking water, with many forced to spend a significant portion of their meagre incomes on purchasing water from desalination centres. Despite the cost, they prefer these centres due to concerns over the poor quality of water from other sources.[184] "I spend so much of my salary to buy water because drinking tap[185] [tube well] water was making me so sick,"[186] Laboni told Amnesty International.

RO centres are operated by government agencies, NGOs and private actors.[187] One desalination centre visited by Amnesty International, the Bondhu Foundation Centre, is run by an NGO and provides water free of charge.[188] Most other centres, however, sell water typically at BDT 30 (USD 0.25) for 20 litres, roughly USD 0.6 per litre.[189] Prices fluctuate, with many citing an average of BDT 1 (USD 0.009) per litre,[190] although costs reportedly spike during shortages.[191] Local officials explained that government-run RO centres set prices through community consultation, aiming to cover basic operational and maintenance costs, with prices ranging from BDT 0.25(USD 0.0021)[192] to BDT 1 (USD.008)[193] per litre. "Whereas for the private sector, their price is higher, double or triple. They decide that themselves,"[194] one official noted. In Satkhira, officials acknowledged that when government supply falls short, "the private sector [is] selling water to them [Dalits]".[195]

The financial burden is stark. Diya, a sanitation worker, spends BDT 10 (USD 0.081) daily for two small *kolshis* [utensils used to carry of water].[196] Soma's household of six requires 30-40 litres daily, costing up to BDT 80 (USD 0.66).[197] Most women reported monthly water expenses exceeding BDT 600 (USD 4.93), with an average of BDT 900 (USD 7.4). This is a substantial share of their household income: Amnesty International visited 20 Dalit households and their incomes ranged from BDT 13,000 (USD 106.4) for a household of six people to BDT 4,000 (USD 33) for a household of three.

---

[181] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation*, UN Doc. A/HRC/30/39, 5 August 2015, p. 3, para. 4.
[182] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation* (previously cited); A/HRC/30/39, p. 4, para. 6.
[183] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation* (previously cited), p. 9, para. 28.
[184] Interviews with interviewees 1 and 14.
[185] "Tap" here refers to a tube well or pond pump.
[186] Interview with interviewee 5.
[187] Fieldwork observations; see also: Palli Karma-Sahayak Foundation (PKSF), "Another RO desalination plant in salinity-hit Khulna", 6 October 2022,https://pksf.org.bd/another-ro-desalination-plant-opened-in-salinity-hit-khulna: Md. A.Islam and Md. A. Akber, "Water quality of small-scale desalination plants in southwest coastal Bangladesh", Water Supply, Volume 18, Issue 5, November 2017, https://www.researchgate.net/publication/321099194_Water_quality_of_small-scale_desalination_plants_in_southwest_coastal_Bangladesh
[188] Researchers visited the Bondu Foundation in Khulna on 11 April 2025.
[189] Information gathered by Amnesty International field researchers.
[190] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[191] Interviews with interviewee 5; community discussion, Khulna, 14 April 2025.
[192] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.
[193] Interview with Upazila Nirbahi Officer, Khulna, 18 June 2025.
[194] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.
[195] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[196] Diya lives with her husband and there are only two people in the household; interview with interviewee 2.
[197] Interview with interviewee 7.

KHULNA

INCOME VS EXPENSES

All figures are in Bangladeshi Taka

	MONTHLY INCOME				MONTHLY EXPENSES							
	Family members	Female Member Income	Male Member Income and Job Role	Total Family Income, Including Additional Loans	Food	Health	Fuel/ Transport	Water	Loan Repayment	Clothing	Misc.	TOTAL EXPENDITURE
RIDHI	6	3,000	4,000 *Sanitation Worker*	10,000	4,800	500	1,000	1,000	1,000	600	1,100	10,000
JIYA	5	4,000	7,000 *Rickshaw Driver*	11,000	6,000	400	700	1,200		700	2,000	11,000
PARI	6	5,000	8,000 *Sanitation Worker*	13,000	6,000	1,000	1,500	1,000	1,500	1,000	1,100	13,000
MAYA	5	3,000	7,000 *Sweeper*	10,000	5,000	500	600	900		1,500	1,500	10,000
LAILA	5	5,000	4,000 *Cobbler*	9,000	5,000	500	1,000	1,000		500	1,000	9,000
KALA	5	3,500	4,000 *Sweeper*	7,500	5,000	300	500	900		300	500	7,500
SOMA	6	4,000	5,000 *Cobbler*	9,000	5,000	300	700	1,800		600	600	9,000
MAMPI	3	8,000	0	8,000	4,000	500	1,000	600		600	1,000	7,700
PIU	5	4,500	6,000 *Rickshaw Driver*	10,500	5,500	600	1,000	900		1,000	1,500	10,500

Assessment of income sources and monthly expenditure patterns among interviewed sanitation worker families in Khulna. © Amnesty International

SATKHIRA

INCOME VS EXPENSES

All figures are in Bangladeshi Taka

		MONTHLY INCOME			MONTHLY EXPENSES							
	Family members	Female Member Income	Male Member Income and Job Role	Total Family Income, Including Additional Loans	Food	Health	Fuel/ Transport	Water	Loan Repayment	Clothing	Misc.	TOTAL EXPENDITURE
SUNITA	4	4,000	*Sweeper* 6,000	10,000	5,000	300	800	300		500	1,000	7,900
RASHMIKA	6	4,000	*Sanitation Worker* 7,000	11,000	6,000	300	1,000	300	1,000	1,000	1,800	11,400
PUSHPA	3	7,500	0	7,500	4,000	1,500	500	300		500		6,800
DIYA	2	5,000	*Sanitation Worker* 8,000	13,000	7,000	1,000	1,200	300		1,000	1,000	11,500
KISHORI	5	3,000	*Sweeper* 6,000	9,000	5,000	500	500	900		500	1,600	9,000
LABONI	4	3,000	0	5,500	2,000	300	500	900	400	200	400	4,700
UMA	5	3,000	*Cobbler* 6,000	9,000	6,000	400	600	500		500	1,000	9,000
UJWALA	4	8,000	0	8,000	5,000	100	800	1,200		500	400	8,000
MANISHA	3	2,000	*Van Driver & Bicycle Shop* 7,000	9,000	5,000	500	800	500	400	400	900	8,500
LEENA	4	3,000	*Rickshaw Driver and other odd jobs* 3,000	6,000	2,000	1,000	600	300		500	1,600	6,000
SARITA	5	4,000	*Sweeper* 7,000	11,000	6,000	500	1,000	900		1,100	1,500	11,000

Assessment of income sources and monthly expenditure patterns among interviewed sanitation worker families in Satkhira. © Amnesty International

Kala, who earns BDT 3,000-4,000 (USD 24.5-32.7) monthly, spends nearly a third of her income on water. "It's like paying to breathe. Water has become a luxury in my life. There are days when I have to skip vegetables or basic groceries to afford this water," she said.[198] Others echoed this, describing trade-offs with food, medicine and education.[199] This runs contrary to states' obligations to ensure water costs do not compromise access to other basic needs, as affirmed by the UN Special Rapporteur on the human rights to safe drinking water and sanitation.[200]

Some women are forced to ration water. "My husband and I drink less so that the children do not suffer," said Mumpi. "I have become used to managing dehydration, even when working under the scorching sun."[201] The CESCR states in General Comment No. 15 that "no one should be denied access to safe drinking water because they cannot afford to pay".[202]

The cost of water collection adds to the burden. Aluminium *kolshis* used to transport water cost up to BDT 375 (USD 3.1) for a 25 litre capacity, forcing some women to use large plastic drums instead. Additionally, as the UN Special Rapporteur on the right to water notes, the time spent collecting water – typically by women – must also be accounted for.[203] The time and labour women invest in collecting water highlights persistent gender inequalities in access to basic services.

Without urgent intervention, climate-related water scarcity is likely to force prices even higher, [204] deepening the crisis for Dalit sanitation workers already living on the margins.

4.4.2 TUBE WELLS

Despite government subsidies, none of the Dalit families interviewed had access to private tube wells, which remain prohibitively expensive. Even shallow wells cost around BDT 9,000 (USD 73.5),[205] far beyond the reach of most. Local authorities in Khulna described a subsidized community-based water supply scheme, where the government covers most construction costs and households contribute BDT 7,000 (USD 57) for a water connection.[206] Not a single Dalit sanitation worker interviewed for this research had been able to afford this.

Without private access, Dalit families must walk to public tube wells, adding to the daily burden of securing water. The exclusion from subsidized schemes underscores the structural barriers faced by Dalit communities, who are left behind even in programmes meant to expand access to safe water.

4.4.3 RAINWATER HARVESTING

Rainwater harvesting involves collecting rain from rooftops and storing it for later use. Dalit sanitation workers and local officials see it as a promising solution for safe water. Yet, despite its potential, nearly all the women interviewed said they could not afford the necessary storage containers. "I don't have anywhere to store the water… I also do not have the money to buy big drums," said Sandhya. [207]

Only two families had access to large-scale water storage systems – one private and one community-based. Laila, the only interviewee with a 2,000-litre tank, said it lasted her family a year, but at a cost:

---

[198] Interview with interviewee 6.
[199] Interviews with interviewees 5 and 7; community discussion, Satkhira, 18 April 2025, and Khulna, 14th April 2025.
[200] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation*, para. 24.
[201] Interview with interviewee 8.
[202] CESCR, General Comment No. 15: The Right to Water (previously cited), para. 12.
[203] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation,* para. 18.
[204] UN Special Rapporteur on the Human Rights to Safe Drinking Water and Sanitation, Report: *Climate Change and the Human Rights to Water and Sanitation* (previously cited).
[205] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.
[206] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.
[207] Interview with interviewee 14.

she took out a loan of BDT 14,000 (USD 106) and pays BDT 300 (USD 2.5) monthly from her already stretched income. "We skipped meals for days just to gather the down payment," she said. [208]

Government-subsidized rainwater harvesting units cost 1,500 BDT (USD 12.4), [209] but even this reduced price remains out of reach for most Dalit sanitation workers. Pari noted that some families received tanks through NGOs, but access often depended on connections or the ability to pay.[210] There are also some community-based initiatives.[211] Mumpi pays BDT 20 (USD 0.16) annually to access a shared 1,500-litre tank. "The rainwater is very good and clean… but we get only one pitcher every alternate day (average quantity of 20 litres). It's not enough, so we still have to buy water," she explained. A local official in Satkhira highlighted the opportunity for authorities to improve water access by investing in community-based rainwater harvesting systems.[212]

Rainwater is often contaminated so should be purified before consumption, but water treatment costs money and lack of awareness is also an issue. Nine families reported boiling water, which entails fuel costs,[213] and one family used,[214] which cost BDT 150-200 (USD 1.2-1.6).[215] Purification tablets are no longer available locally and public health officials noted that misuse due to lack of information is common. [216] Dalit sanitation workers remain excluded from safe, affordable water solutions – even when viable options like rainwater harvesting exist.

Dalit sanitation worker carrying a kolshi (vessel) on her way to collect water from a desalination centre. She crosses a non-Dalit colony with concrete houses, tubewells and storage tanks, within the premises of the house for personal use. Khulna, April 2025. © Amnesty International

4.5 EXCLUSION FROM WATER INFRASTRUCTURE AND DECISION-MAKING

This study found that Dalit communities in Khulna and Satkhira remain largely excluded from water infrastructure and decision-making processes. Local officials acknowledged the need to improve access to RO centres and rainwater harvesting, proposing a "multiple choice" approach.[217] One official noted, however, that rainwater harvesting alone cannot meet needs year round.[218] RO centres remain critical, but this research shows that they are often located far from Dalit settlements and

[208] Interview with interviewee 20.
[209] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[210] Interviews with interviewee 4.
[211] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[212] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[213] Interviews with interviewees 5, 6, 7, 8, 10, 11, 12, 13, 15 and 20.
[214] According to WHO, aluminium salt, when added to water, coagulate and flocculate impurities to promote rapid and efficient sedimentation: WHO Guidelines for drinking-water quality, 4th edition, incorporating the 1st addendum, p 155, Guidelines for drinking-water quality, 4th edition, incorporating the 1st addendum
[215] Interview with interviewee 4.
[216] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[217] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025 and Executive Engineer, DPHE, Khulna, 17 June 2025.
[218] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.

expensive. One sanitation worker stated, "There is no water infrastructure, tankers or machines ever provided to our colony, even though we are all government workers… I think we low-caste people are forgotten." [219] Local representatives claimed efforts were underway to address these issues, but one noted that Dalits were "used to walking a certain distance to collect safe water". [220] This reflects a troubling normalization of the hardship Dalit's endure.

Dalit communities are systematically excluded from water governance and decision-making. Since August last year, the location of government RO centres is decided by Upazila (sub-district)-level officials (Upazila Nirbahi officers), based on poverty and population density. [221] Centres are authorized by Union Parishads, the lowest tier of local government, and managed by community-based committees responsible for pricing and maintenance. [222] Yet, Dalit woman sanitation workers report being excluded from these bodies, despite being regular users of public water infrastructure.[223]

Distance and stigma were identified as mutually reinforcing barriers: distance deepens social exclusion and stigma, in turn, justifies the lack of accessible infrastructure. Dalit rights organization Paritrran explained, "None of them [committees] are Dalit-friendly. Because they are not near the Dalits." They also highlighted caste-based stigma: "Water touched by a Dalit person would become impure. So, there is no question of Dalits being involved in selling water." [224]

Community committees, called WATSAN committees, are established at the district level to collect information on challenges pertaining to water and sanitation, provide input in planning, help with water testing and raise public awareness.[225] A member of the Khulna District WATSAN Committee confirmed: "As far as I know, we don't really have anyone officially from those [Dalit] communities in the committee right now." [226]

Bangladesh's 2017 Operational Guidelines for WASH in Emergencies stress the need to consult marginalized women in WASH planning;[227] however, no such commitments exist for Dalit inclusion and Dalit women interviewed reported never being consulted.

Without targeted interventions to reduce physical and social barriers and ensure Dalit participation in water governance, existing inequalities will persist. Authorities must urgently address the inequitable placement of water facilities and ensure Dalit representation in decision-making processes. Failure to do so constitutes a violation of the right to safe drinking water and the obligation to ensure active, free, and meaningful participation.[228]

5. BARRIERS TO FULFILLING THE RIGHT TO SANITATION

Sanitation is not merely a matter of infrastructure; it is a cornerstone of human dignity, equality and opportunity. As Volkan Bozkır, then UN General Assembly President, emphasized in March 2021, access to water and sanitation is deeply tied to the essence of human rights and dignity.[229] Yet,

[219] Interview with interviewee 6.
[220] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[221] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.
[222] Interview with Executive Engineer, DPHE, Satkhira, 17 June 2025.
[223] Community discussion, Satkhira 18 April 2025.
[224] Interview with NGO Paritrran, 29 May 2025.
[225] Interview with member of Khulna District WATSAN Committee, 23 June 2025 (in person).
[226] Interview with member of Khulna District WATSAN Committee, 23 June 2025.
[227] Ministry of Local Government, Rural Development and Co-operatives, Government of the People's Republic of Bangladesh, *Operational Guidelines for WASH (Water, Sanitation and Hygiene) in Emergencies – Bangladesh*: *Second Edition*, 2017, https://dphe.portal.gov.bd/sites/default/files/files/dphe.portal.gov.bd/page/7e716d34_58de_494a_aaa3_105f03c3c101/2022-06-23-05-26-6b09a32c500a5fa82856d40324a7f7e1.pdf, p.121.
[228] UN Special Rapporteur on the Right to Safe Drinking Water and Sanitation, Report: *Common Violations to the Human Rights to Water and Sanitation* (previously cited), para. 55.
[229] UN News, "Billions without clean water and sanitation a 'moral failure': UN General Assembly President", 18 March 2021, https://news.un.org/en/story/2021/03/1087682

despite its fundamental importance, this right remains one of the most overlooked, especially for the world's most marginalized communities. The lived experiences of Dalit sanitation workers in Khulna and Satkhira are stark testimonies to this enduring injustice. This section discusses Bangladesh's obligations in respect of the right to sanitation and then explores the evidence of shortcomings that strongly emerged from this research.

5.1 STATE OBLIGATIONS

According to international human rights standards, sanitation services must be accessible and public and private facilities must meet certain criteria to be considered adequate. Human Rights Council (HRC) Resolution 16/2 (2011), which reaffirms the human rights to safe drinking water and sanitation, outlines these criteria and emphasizes that sanitation must be safe, hygienic, culturally acceptable, and physically accessible.[230] In this respect, the resolution calls for context-sensitive solutions, especially in informal settlements such as the ones visited by Amnesty International in Khulna and Satkhira. UN General Assembly resolutions,[231] HRC resolutions[232] and Special Rapporteur reports have further elaborated the right to sanitation to encompass criteria of non-discrimination, availability, affordability, safety, dignity and privacy.[233] CERD General Recommendation No. 37 (2024) on equality and freedom from racial discrimination in the enjoyment of the right to health also stresses the obligation to ensure non-discrimination in the fulfilment of the right to sanitation.[234]

SDG 6,[235] which calls for universal and equitable access to adequate sanitation and hygiene by 2030, specifies that sanitation services must be continuously available, not subject to arbitrary disconnections or seasonal limitations. Additionally, infrastructure must be resilient to climate change and induced disasters. This relates to this study where concerns around access to safe and hygienic sanitation during monsoons, or extreme climate-induced events such as cyclones, were discussed at length in both individual interviews and community discussions.

For sanitation to be available it needs to overcome the challenges around access due to stigmatization based on gender and caste.[236] It must also be affordable, a criterion that was specified by the UN Special Rapporteur on the human right to safe drinking water and sanitation in his August 2015 report.[237]

Article 12 of CEDAW obliges states parties to "take all appropriate measures to ensure adequate living conditions in relation to water and sanitation, which are critical for the prevention of diseases and the promotion of good healthcare".[238] The Special Rapporteur on the human rights to safe drinking water

[230] UN General Assembly, Resolution 16/2: *The Human Right to Safe Drinking Water and Sanitation*, adopted on 8 April 2011, UN Doc. A/HRC/RES/16/2.
[231] UN General Assembly, Resolution 70/169: *The Human Rights to Safe Drinking Water and Sanitation,* adopted on 17 December 2015, UN Doc. A/RES/70/169; UN General Assembly, Resolution 64/292: *The Human Right to Water and Sanitation,* adopted on 28 July 2010, UN Doc. A/RES/64/292; UN General Assembly, *Integrating Non-Discrimination and Equality into the Post-2015 Development Agenda for Water, Sanitation and Hygiene*, 8 August 2012, UN Doc. A/67/270.
[232] For example, HRC, Resolution 24/18: *The Human Right to Safe Drinking Water and Sanitation*, adopted on 8 October 2013, UN Doc. A/HRC/RES/24/18; HRC, Resolution 21/2: *The Human Right to Safe Drinking Water and Sanitation*, adopted on 9 October 2012, UN Doc. A/HRC/RES/21/2; HRC, Resolution 18/1: *The Human Right to Safe Drinking Water and Sanitation*, adopted on 12 October 2011, UN Doc. A/HRC/RES/18/1.
[233] UN Independent Expert on the Question of Human Rights and Extreme Poverty and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report (previously cited); UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Stigma and the Realization of the Human Rights to Water and Sanitation*, 2 July 2012, UN Doc. A/HRC/21/42.
[234] CERD, General Recommendation No. 37 (previously cited).
[235] United Nations, Sustainable Development Goal 6: Ensure availability and sustainable management of water and sanitation for all, https://sdgs.un.org/goals/goal6
[236] UN Special Rapporteur on the Right to Safe Drinking Water and Sanitation, Report: *Common Violations to the Human Rights to Water and Sanitation* (previously cited), para. 64.
[237] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation* (previously cited).
[238] CEDAW, General Recommendation 24: Article 12 of the Convention (women and health), 1999, para. 28.

and sanitation emphasizes, given the implication of these rights for the right to health,[239] that states must ensure "the necessary funding is available for service provision, and for using public financing where services would otherwise be unaffordable".[240] The research conducted by Amnesty International in Khulna and Satkhira suggests that local and locally implemented national initiatives fall short of this obligation.

5.2 ACCESSIBILITY AND AVAILABILITY

Women sanitation workers interviewed in Khulna and Satkhira reported numerous challenges to accessing sanitation services, ranging from having to share toilets with other families or using community and public latrines, or the location of the toilets requiring walking outdoors including at night and during heavy rains.

5.2.1 INADEQUATE SANITATION ACCESS

Despite national claims of progress in sanitation coverage, Amnesty International's research reveals that Dalit women sanitation workers in Khulna and Satkhira continue to face serious barriers to safe, dignified and accessible sanitation.

Of the 20 women interviewed, only 13 had access to a private toilet. Three relied on a neighbour's or landlord's toilet, and four shared a toilet with two to four other households. Those without private access described daily indignities and restrictions:[241] "We need to ask her [the neighbour] every time before using the toilet. Many times, she sends us away," said Piu.[242] Others, like Uma, expressed discomfort and fear: "I am not comfortable to use the toilet because so many people use it… I go only after everyone has used the toilet and left."[243]

All toilets, whether private or shared, were located outside the home, requiring women to walk in the open, sometimes at night or in poor weather. Mampi, who uses a public toilet, explained, "I had to walk so long to the toilet… I don't often feel safe." [244] Others described injuries from slipping in the dark or on muddy paths. "I got my foot hurt badly. After that day, I try to not go to the toilet after dark," Pari recalled. [245] One woman explained that her only option is a public toilet across a market and near a riverbank – an area that floods during monsoon season, making it dangerous or inaccessible. [246]

The UN Special Rapporteur on the human rights to safe drinking water and sanitation has emphasized that shared sanitation should only be a temporary solution, never a substitute for long-term, rights-compliant facilities. Where shared facilities are in use, states must ensure safety, privacy, hygiene and a clear plan to transition to individual or improved options, especially to protect women and girls. [247]

[239] UN Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report, 1 July 2009, UN Doc. A/HRC/12/24, pp. 9-11, paras 23-29.
[240] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation* (previously cited), pp. 3-4, para. 5.
[241] Interviews with interviewees 3, 4, 15 and 19.
[242] Interviews with interviewee 10.
[243] Interviews with interviewee 15.
[244] Interviews with interviewee 8.
[245] Interviews with interviewee 4.
[246] Interviews with interviewee 3.
[247] UN Special Rapporteur on the Human Rights to Safe Drinking Water and Sanitation, Report: *Human Rights to Safe Drinking Water and Sanitation of People in Impoverished Rural Areas*, UN Doc. A/77/167, para. 45; UN General Assembly, Report: *Human Right to Safe Drinking Water and Sanitation*, UN Doc. A/70/203, para. 52; UN General Assembly, *Integrating Non-Discrimination and Equality into the Post-2015 Development Agenda for Water, Sanitation and Hygiene* (previously cited).

5.2.3 CASTE-BASED DISCRIMINATION AND ACCESS TO SANITATION

The Bangladesh government reported in its 2015 submission to CEDAW that only 3% of households lacked toilets and 63.5% used improved sanitation,[248] but these figures mask the lived realities of marginalized groups. The report references poverty mapping, but fails to address caste-based discrimination. As the UN Special Rapporteur on contemporary forms of racism noted in 2022, the 2030 Agenda "completely ignores caste and descent-based discrimination," a critical oversight that undermines efforts to eradicate poverty and ensure equal access to basic services.[249] Discrimination and poverty both affect access to water and sanitation, but they stem from different causes. As highlighted previously, disaggregated data, including by caste and gender, is essential to reveal these differences and guide targeted solutions.[250]

Access to sanitation during working hours emerged as a significant concern in some testimonies, particularly among women employed to clean open spaces such as roads and markets. Diya explained: "I work in the market, so the public toilets in the market can be used, but it costs money and it is at the other end of the market from where I work. I do not have time to travel between work just to use the toilet." [251]

For Dalit women sanitation workers, the denial of access is compounded by caste and gender-based vulnerabilities. Sunita, who cleans roads and collects rubbish, described being forced to defecate in the open due to the absence of toilets and the threat of harassment: "There is one toilet nearby, but men from the majority community go there and smoke in groups. I avoid that area because they call [catcall] and say things to me… Maybe because I am from the Dalit community." [252]

In workplaces where toilets are available, several interviewees reported experiencing no caste-based discrimination,[253] although one woman employed at a school was barred from using the same toilet as the teachers, which she attributed to her caste.[254] These mixed experiences highlight the need for comprehensive data to inform targeted policy responses, as well as the adoption of the anti-discrimination bill with complaint mechanisms.

Caste-based discrimination in access to sanitation in emergency shelters was reported by several Dalit women during Cyclone Remal.[255] Two interviewees stated that Dalits were forced to use flooded lower-floor toilets.[256] In one case, authorities intervened after complaints to ensure access.[257] A woman sheltering in a school reported that the toilets had been locked, forcing her to defecate in the open: "The school authorities did it. They were scared that as we are Dalits, we will make their toilets dirty. You know, then upper caste people won't use it." [258] An NGO reported that this was a common occurrence.[259]

---

[248] Government of the People's Republic of Bangladesh, *The Eighth Periodic Report of The Government of the People's Republic of Bangladesh*, May 2015, https://mowca.portal.gov.bd/sites/default/files/files/mowca.portal.gov.bd/page/762c7e6e_69ce_4979_817c_f7dbc2b561ed/8th%20Periodic%20Report-%20CEDAW.pdf, para. 95.
[249] UN Special Rapporteur on Contemporary Forms of Racism, Racial Discrimination, Xenophobia and Related Intolerance, Report: *2030 Agenda for Sustainable Development, the Sustainable Development Goals and the Fight against Racial Discrimination*, 17 June 2022, UN Doc. A/HRC/50/60, para. 60
[250] UN General Assembly, Integrating Non-Discrimination and Equality into the Post-2015 Development Agenda for Water, Sanitation and Hygiene (previously cited), para. 63.
[251] Interview with interviewee 2.
[252] Interview with interviewee 14.
[253] Interviews with interviewees 2, 3, 7, 9, 12 and 17.
[254] Interview with interviewee 5.
[255] Interviews with interviewees 2, 3, 11 and 17.
[256] Interviews with interviewees 2 and 3.
[257] Interview with interviewee 2.
[258] Interview with interviewee 17.
[259] Interview with General Secretary, Assasuni Upazila Branch, Bangladesh Dalit Parishad (BDP), 17 April 2025.

These accounts, supported by NGO reports,[260] reveal entrenched discriminatory attitudes that persist even in the context of humanitarian response. Under ICERD, states are obligated to prohibit and eliminate all forms of racial discrimination and ensure equal access to services, including sanitation, without distinction based on caste or descent. The UN Special Rapporteur on the human rights to safe drinking water and sanitation has underscored that "stigma often results in serious human rights violations, […as it has] close links to a range of civil, cultural, economic, political and social rights". Therefore "meaningful participation of stigmatized individuals in crafting measures to combat stigma in relation to water and sanitation is absolutely essential".[261]

5.3 ADEQUATE FACILITIES

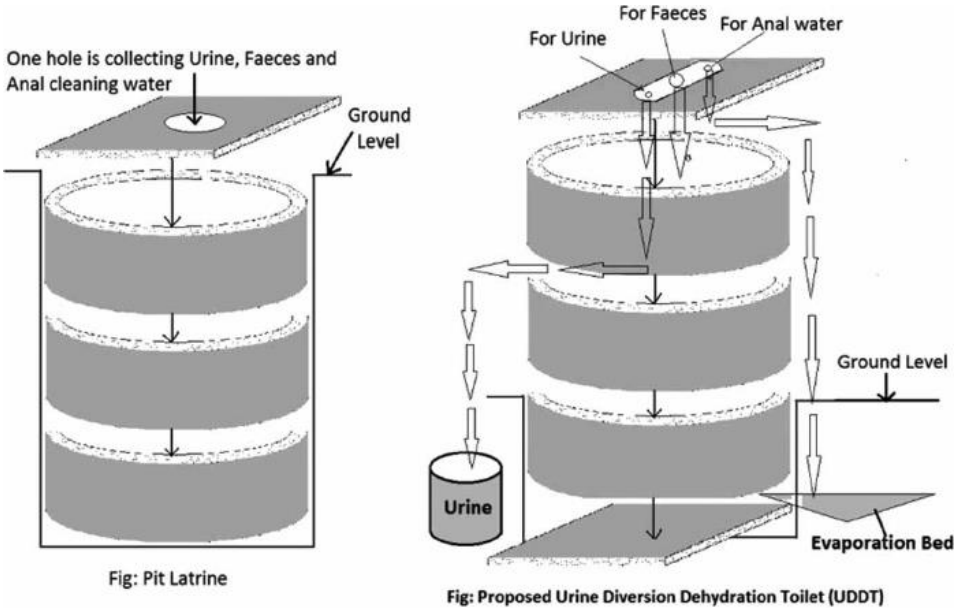
All the interviewees in Khulna and Satkhira use pour-flush direct drop toilets (see image below). For most interviewees (18), this was covered by a makeshift, flimsy and unstable structure with a roof made of tin sheets, and walls most often made of sacks, rugs and other scrap materials.[262] Only one interviewee had lighting inside the toilet[263] and only one had a water connection in the toilet.[264]

A ring slab pit latrine that awaits installation in a Dalit household. Location: Dacope, Khulna, April 2025. © Amnesty International

POUR-FLUSH DIRECT DROP TOILETS

The most common rural toilet design in Bangladesh is the pour-flush direct drop. Users pour water into the pan to flush waste directly into a pit below. The system typically includes a ceramic or plastic pan, concrete slab, concrete rings lining the pit and plastic pipes.[265] A deeper or elevated pit helps prevent overflow during monsoons or floods.

[260] Bangladesh Dalit and Excluded Rights Movement (BDERM) and others, *NGO report to the United Nations Human Rights Committee on Caste Based Discrimination in Bangladesh* (previously cited); interview with NGO Paritrran, 29 May 2025.
[261] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Stigma and the Realization of the Human Rights to Water and Sanitation* (previously cited), paras 43 and 60.
[262] Interviews with interviewees 1, 2, 3, 4, 5, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19 and 20.
[263] Interview with interviewee 20.
[264] Interview with interviewee 20.
[265] UNICEF, *Sanitation Market Analysis: Summary Report Bangladesh*, 2020, https://www.unicef.org/rosa/media/11526/file/Bangladesh.pdf, p. 8.



Flood-resilient and affordable sanitation technology in the context of Bangladesh. Photo Credit: ResearchGate[266]

5.3.1 PRIVACY AND SAFETY CONCERNS

UN General Assembly Resolution 70/169 affirms that under international human rights law sanitation must be "safe, hygienic, secure, socially and culturally acceptable and [must] provide privacy and ensure dignity".[267] Lack of privacy and safety were major concerns for most interviewees, regardless of whether they had access to a private toilet. Almost half of the women interviewed reported resorting to open defecation and bathing, especially during heavy rains or flooding when other options became unusable. These practices raise serious concerns about safety, dignity and basic human rights.

Toilet located outside the home of a Dalit woman sanitation worker. The structure consists of a basic pit latrine placed at the centre, with no roof overhead. The sides are enclosed using corrugated tin sheets, loosely supported by bamboo poles. There is no electricity or running water connected to the toilet, making it unsafe, unhygienic, and particularly difficult to use at night or during adverse weather. Location: Ashashuni, Satkhira, May 2025. © Amnesty International

[266] https://www.researchgate.net/figure/Schematic-design-of-the-common-pit-latrines-built-up-with-concrete-rings-left-and-the_fig3_274680116
[267] UN General Assembly, Resolution 70/169 (previously cited).

Privacy and safety in toilets

Testimonies collected by Amnesty International reveal that the overwhelming lack of privacy in both private and shared toilet facilities is a source of deep distress for women sanitation workers in Khulna and Satkhira. Women described the makeshift nature of their sanitation shelters, constructed from tin sheets, sacks and cloth screens offering virtually no protection.[268] During the day, people can see through holes in the walls, leaving women exposed. This is exacerbated during bad weather: "The tin roof would sometimes fly open in storms, exposing me while using the toilet," shared Soma.[269] This lack of privacy becomes even more acute during menstruation, when women have no secure space to change pads or wash cloths (see section 5.3.3, "Health impact of poor sanitation").

Most toilets lack a proper door, let alone a latch, offering no protection against intruders.[270] "I don't feel safe inside. During nights, I get more scared to use this toilet," explained Maya.[271] The fear of being seen or interrupted forces some women to wait until night time to relieve themselves or attend to their menstrual needs, which introduces further safety and health risks.[272] Others expressed concern about using the facilities early in the morning or late at night when visibility is low and the risk of harassment or assault increases.[273] "It [toilet] is not in our house; safety is a big thing here. There are risks especially for women and children. If we have to use the toilet at night, we get scared," explained Pari.[274]

Open defecation

As noted earlier, although Bangladesh has made notable progress in reducing open defecation, a 2023 NGO submission to the Universal Periodic Review, without disaggregated data, highlighted that 5% of the poorest still practice it.[275] Testimonies collected by Amnesty International from Dalit women sanitation workers in Khulna and Satkhira reveal that many remain excluded from this progress. Of the 20 women interviewed, nine had to resort to open defecation or bathing in public due to a lack of access to private, functional toilets. [276]

Several women cited the absence of a personal toilet as the main reason. Piu, from Khulna, explained that when her neighbour refused access to the toilet or when she felt unsafe asking, especially at night, she had no choice but to relieve herself behind her house. "Even animals have places to go. We don't," she said.[277] She described washing herself near a drain with a bucket of water, feeling ashamed and exposed to passers-by.

Extreme weather exacerbates the situation. Six women said they were forced to defecate in the open during storms or floods when their toilets became unusable.[278] One woman recalled covering her face with a veil when a man passed by while she and others were relieving themselves. "We were forced to cover our faces with sarees so men couldn't see us and recognise us to save our respect."[279] Another woman described how anxious she was of being seen and harassed, and waiting until dark to relieve

[268] Interviews with interviewees 1, 4, 7, 9, 11, 12, 14 and 17.
[269] Interview with interviewee 7.
[270] Interviews with interviewees 5, 13, 14, 16, 17 and 19.
[271] Interview with interviewee 18.
[272] Interviews with interviewees 1, 2, 4, 6, 7, 10 and 19.
[273] Interview with interviewee 4.
[274] Interview with interviewee 4.
[275] Simavi and others, *Universal Periodic Review of Bangladesh, 4th Cycle: Summary of the joint NGO submission by Simavi (main submitting organisation), DORP, GRAUS, Hope for the Poorest, Practical Action, Tahzingdong, Uttaran*, August 2023, https://upr-info.org/sites/default/files/country-document/2023-08/Simavi_joint_submission_2.pdf, p. 3.
[276] Interviews with interviewees 3, 4, 5, 6, 8, 10, 13, 18 and 19.
[277] Interviews with interviewees 4, 6, 10 and 19.
[278] Interviews with interviewees 6, 8, 13, 17, 19 and 20.
[279] Interview with interviewee 13.

herself in the open.[280] Fear of harassment and gender-based violence was a recurring concern: "These local boys say bad things when I went to use the toilet. This has happened many times."[281]

The cumulative effect of these conditions is a profound lack of dignity and safety. Whether it is the fear of being watched, the risk of exposure during storms or the absence of secure spaces during menstruation, the situation leaves these women without a safe, dignified option.

Bangladesh's 2011-2025 Sector Development Plan on Water and Sanitation contains detailed plans to tackle open sanitation countrywide.[282] Although it does recognize "lower castes of the Hindu community" including "sweepers" as disadvantaged groups, it does not contain specific operational plans to address or correct caste-based vulnerabilities and ensure greater access to adequate sanitation. Failure to design and implement a strategy based on human rights standards and principles, including principles of inclusion and non-discrimination, constitutes a violation of the obligation to fulfil the right to sanitation.[283]

5.3.2 VULNERABILITY TO WEATHER AND CLIMATE-INDUCED EVENTS

This research reveals that extreme weather events create significant additional challenges for Dalit women sanitation workers to access safe and dignified sanitation. The impact of climate-induced flooding on toilet infrastructure is both widespread and deeply distressing. Most households rely on pour-flush direct drop toilet constructed at or close to ground level, leaving them highly vulnerable to inundation.[284] Only two of the 20 interviewees had toilets built with sufficient elevation (using circular cement rings) to prevent flooding.[285] Most interviewees explained that their toilets flooded during heavy rains, causing faecal matter to overflow and contaminate nearby homes and water sources.[286] As Soma explained, "The waste comes up and it becomes difficult to use the toilet."[287]

A rudimentary ring slab pit latrine toilet in rural Satkhira constructed with tin sheets, bamboo sticks, and plastic sheeting. Without a lockable door or roof, this structure offers minimal privacy and security. Location: Ashashuni, Satkhira, May 2025. © Amnesty International

A ring slab pit latrine with a concrete ring slab inside a makeshift tin enclosure, covered with cloth on one side. There is one bucket with water that is collected from the nearby pond and a small vessel that they use for washing. Location: Dacope, Khulna, April 2025. © Amnesty International

[280] Interview with interviewee 6.
[281] Interview with interviewee 18.
[282] Local Government Division, Government of the People's Republic of Bangladesh, *Sector Development Plan (FY 2011–25): Water Supply and Sanitation Sector in Bangladesh*, 2011, https://www.psb.gov.bd/policies/sdpwsssbe.pdf
[283] UN Special Rapporteur on the Right to Safe Drinking Water and Sanitation, Report: *Common Violations to the Human Rights to Water and Sanitation* (previously cited), para. 38.
[284] Interviews with interviewees 4, 6, 7, 12, 15 and 18.
[285] Interviews with interviewees 8 and 13.
[286] Interviews with interviewees 2, 4, 6 and 7.
[287] Interview with interviewee 7.

The financial barrier to maintaining and improving sanitation infrastructure is impenetrable (see section 5.4, "Affordability"). Interviewees consistently reported that raising the floor or adding more rings to the toilet to make it more flood resilient was unaffordable.[288] "It would definitely help if we could raise the toilet [floor], but the cost involved in such work is something we can afford," Soma said.[289] Only one woman had managed to make structural improvements.[290]

Flooding not only renders toilets unusable but also introduces serious safety risks. Kala recounted how her daughter fell and broke her leg in a dark, slippery toilet.[291] Ujwala shared that her mother-in-law was bedridden for days after a fall.[292] Mani highlighted another hazard: "At night time, there is also a risk of snakes and insects, especially during rainy season. These insects can easily get inside the toilet with flood water."[293]

All 20 women interviewed reported that the flimsy shelters surrounding their toilets, often made of tin, jute sacks or cloth, were regularly destroyed during storms. Uma from Khulna explained, "The toilet is […] covered by jute sacks. It also doesn't have a roof. Strong winds can destroy it."[294] Pushpa said her toilet had to be rebuilt every other month due to storm damage.[295] Diya described how her toilet walls collapsed during Cyclone Aila, in 2009. Her family was only able to rebuild with support from a local NGO, Uttaran; they received no government assistance.[296] This lack of durable, climate-resilient infrastructure traps Dalit households in a cycle of poverty and vulnerability. Each extreme weather event destroys their sanitation facilities, forcing them to rebuild with the same inadequate materials.

These testimonies reflect a broader, longstanding issue. A 2010 report by the UN independent expert on human rights and extreme poverty warned that rising water levels in coastal regions like Khulna and Satkhira threaten the sustainability of low-cost toilets, increasing the risk of flooding, full pits and structural collapse.[297] The experiences of the women interviewed by Amnesty International confirm that these risks have already materialized.

5.3.3 HEALTH IMPACT OF POOR SANITATION

Dalit women sanitation workers in Khulna and Satkhira face serious health risks due to inadequate sanitation and lack of hygiene products. Some women reported delaying toilet use due to fear, lack of access, or unsafe conditions, sometimes for an entire day.[298] Two women said they and their children reduced water intake to avoid using unsafe toilets. "They (Women) drank less water and later got sick many times," one woman explained. "I got urine infection because of holding urine for too long."[299] A Senior Medical Officer in Khulna confirmed that urinary tract infections (UTIs) are common in the Sundarbans and can lead to serious complications such as pyelonephritis and kidney damage.[300]

Soap or cleaning products are unaffordable for some people.[301] "Soap is expensive. The ash works good," said Pushpa.[302] Ujwala described staying in unwashed clothes due to the lack of water, soap

[288] Interviews with interviewees 1, 2, 4, 5 and 7.
[289] Interview with interviewee 7.
[290] Interview with interviewee 16.
[291] Interview with interviewee 6.
[292] Interview with interviewee 9.
[293] Interview with interviewee 18.
[294] Interview with interviewee 15.
[295] Interview with interviewee 1.
[296] Interview with interviewee 2.
[297] UN Independent Expert on the Question of Human Rights and Extreme Poverty and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, Report (previously cited), p. 15.
[298] Interview with interviewees 1, 3 and 7.
[299] Interview with interviewee 7.
[300] Interview with Senior Medical Officer, Gynaecology and Obstetrics, Khulna, 22 June 2025 (over the phone). Pyelonephritis, also known as a kidney infection, is an inflammation of the kidney, often caused by bacteria that spread from a lower urinary tract infection (UTI)
[301] Interviews with interviewees 1, 15, 17 and 20.
[302] Interview with interviewee 1.

and privacy.[303] Flooding worsens environmental hygiene, causing waste to overflow and contaminate homes.[304]

Menstrual health challenges were universal among interviewees. Many could not afford sanitary products on a regular basis[305] and relied on reused cloths, often washed in unsanitary conditions.[306] "All that [sanitary products] is very costly… I just use old cloths from the house,"[307] said Piu. Improper disposal methods – such as burying or burning menstrual materials – were common.[308] Several women reported frequent infections, burning sensations and prolonged bleeding.[309] Despite these health risks, women in Khulna and Satkhira said they had not received any menstrual hygiene education, workshops or sanitary pad distribution in their communities.[310]

The Special Rapporteur on the human rights to safe drinking water and sanitation notes that "in some states, women sanitation workers are particularly vulnerable as they are exposed to an extremely dirty environment and contamination, which have a far greater impact during pregnancy and menstruation".[311] In this respect, he emphasizes that "they must have access to water and soap to wash their hands and body and facilities to dispose safely and hygienically of menstrual materials like pads, cups, cloths and tampons".[312]

A Senior Medical Officer in Khulna explained that poor menstrual hygiene and chronic exposure to saline water can cause cervical erosion, contributing to higher rates of cervical cancer in these areas.[313] Recurrent UTIs may also lead to pelvic inflammatory disease and, eventually, the need for a hysterectomy. Limited access to early screening further compounds these risks: "not all health complexes [clinics] in Satkhira's Upazilas, for example, have the facility for VIA [visual inspection with acetic acid] tests".[314] The Senior Medical Officer's observations illustrate how "women, girls and gender-diverse persons belonging to racial and ethnic groups are exposed to disproportionate health risks, harmful behaviours and practices, and inequalities in health systems and healthcare", as highlighted in CERD General Comment 37.[315]

5.4 AFFORDABILITY

This research revealed that Dalit households in Khulna and Satkhira face significant financial barriers to both constructing and maintaining basic sanitation facilities, with even modest upgrades proving unaffordable. These challenges are compounded by the recurring costs of rebuilding infrastructure after climate-induced disasters, which many must shoulder without government support.

Amnesty International's visit to Satkhira and Khulna, and conversations with NGOs working in the area, shed some light on what affordability of sanitation meant for Dalit households in these two districts. In relation to sanitation, assessment of affordability must incorporate:

- all direct and associated costs of constructing toilets;
- operational and maintenance costs (including water for cleaning and flushing, pit emptying and ordinary repairs);

[303] Interview with interviewee 9.
[304] Interview with interviewee 9.
[305] Interviews with interviewees 8, 10, 19 and 20.
[306] Interviews with interviewees 2, 6, 7, 8, 10, 17, 18, 19 and 20.
[307] Interview with interviewee 10.
[308] Interviews with interviewees 1, 4, 6, 9 and 15.
[309] Interviews with interviewees 8 and 10.
[310] Interviews with interviewees 7, 8, 11, 12 and 18.
[311] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report, 27 July 2016, UN Doc. A/HRC/33/49, p. 5, para. 12.
[312] UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report (previously cited), p. 10, para. 34.
[313] Interview with Senior Medical Officer, Gynaecology and Obstetrics, Khulna, 22 June 2025; see also ICCCAD, *Salinity Intrusion and its Impact on Menstrual Hygiene among Coastal Women in Bangladesh* (previously cited).
[314] Interview with Senior Medical Officer, Gynaecology and Obstetrics, Khulna, 22 June 2025.
[315] CERD, General Recommendation No. 37 (previously cited).

- repair costs (recurring costs due to weather and climate-induced damage to the infrastructure); and
- other associated costs to ensure hygiene (including water, soap and sanitary products).[316]

5.4.1 CONSTRUCTION AND MAINTENANCE COSTS

Dalit women and community workers interviewed for this research explained that to build a pour-flush direct drop toilet costs BDT 2,100 (USD 18.03):

- BDT 300 (USD 2.5) per ring;
- BDT 300 (USD 2.5) for the top slab; and
- BDT 300 (USD 2.5) for labour.[317]

According to interviewees, the total cost of constructing pour-flush direct drop toilets, including labour, ranges from 1,500 BDT (USD 12.3)[318] to 3,000 BDT (USD 24.6).[319]

Given the monthly incomes of sanitation workers who participated in this study (BDT 3,000-8,000, USD 24.5–65.4), an extra BDT 900 (USD 7.4), which is the cost difference between a toilet with three ring slabs and the much safer six-ring toilet, is significant. This explains why only two of the 20 people interviewed had a toilet built with six rings.[320] Based on recent projects,[321] the average cost of a climate-resilient toilets in Bangladesh, with an elevated structure, concrete base, gate-valve system and proper ventilation pipes and enclosed walls, typically ranges from BDT 30,300—60,600(USD 250-500) per unit, an amount totally out of reach for the sanitation workers interviewed.

The cost of water for flushing and washing and cleaning products should also be factored in to affordability assessments.[322] Some women said they could not afford soap or cleaning products, raising serious hygiene concerns.[323]

5.4.2 REPAIR COSTS

Khulna and Satkhira have been struck by 18 cyclones in the past 17 years,[324] so the ever-recurring cost of repairing sanitation facilities after climate-induced disasters weighs heavily on Dalit sanitation workers. Damaged houses must be repaired or rebuilt too, forcing people to make choices that compromise their dignity. "I did not have the money, and repairing the house was more important. What would you choose between repairing your toilet and your house?"[325] said Rajkini. Most interviewees said they had received no government assistance (see section 5.5, "No assistance").[326] "No government help came for us… My family is still living under these makeshift conditions," said Kanika.[327] "We took loans and worked hard to save little by little, then fixed it ourselves," added Laboni.[328]

---

316 UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation* (previously cited), para. 17.
317 Information shared by local partners including NGO Paritrran.
318 Interviews with interviewees 2, 13 and 14.
319 Interview with interviewee 8.
320 Interviews with interviewees 8 and 13.
321 Islamic Relief, "World Environment Day – Innovative latrines restore comfort and dignity in Bangladesh waterlogged villages", 5 June 2025, https://islamic-relief.org/news/world-environment-day-innovative-latrines-restore-comfort-and-dignity-in-bangladeshs-waterlogged-villages/
322 UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation, Report: *Human Right to Safe Drinking Water and Sanitation* (previously cited), p. 6, para. 17.
323 Interviews with interviewees 9, 15, 17 and 20.
324 Dhaka Tribune, "Khulna bears brunt of 18 cyclones in 17 years", 12 November 2024, https://www.dhakatribune.com/bangladesh/bangladesh-environment/364902/khulna-bears-brunt-of-18-cyclones-in-17-years
325 Interview with interviewee 13.
326 Interviews with interviewees 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11 and 13.
327 Interview with interviewee 6.
328 Interview with interviewee 5.

REMEDIES FOR LOSS AND DAMAGE

Loss and damage refer to the irreversible economic and non-economic harms caused by climate change. Although such impacts are already occurring, future losses can be reduced through appropriate climate mitigation measures (reducing greenhouse gas emissions) and adaptation – adjusting ecological, social or economic systems to minimize harm and seize climate-related opportunities. Unavoidable residual impacts, however, which are referred to as loss and damage, must be addressed through appropriate remedies.

In Bangladesh, sanitation workers have experienced loss and damage to their homes and facilities due to climate-exacerbated flooding. Under international human rights law, communities and individuals suffering loss and damage have the right to remedy, including restitution, compensation, rehabilitation and guarantees of non-repetition. Authorities must ensure that replacement infrastructure is climate-resilient to prevent future harm. Building climate resilience in low-income countries also requires strengthening essential services, such as water, healthcare, social protection, infrastructure and disaster preparedness. Responses must be inclusive, intersectional, gender-responsive, and advance equality for marginalized groups.[329]

Additionally, based on the duty to provide remedy for human rights violations caused by the failure to prevent foreseeable climate harm and in line with the common but differentiated responsibilities and respective capabilities principle, all states that can, particularly high-income historic emitters, other high-income G20 states and high-income fossil-fuel-producing states, must commit adequate, additional and predictable funding to address loss and damage in developing countries such as Bangladesh.

5.5 EXCLUDED FROM ASSISTANCE

Dalit sanitation workers in Khulna and Satkhira face systemic exclusion from government sanitation programmes and decision-making processes, despite being among the most vulnerable to poor sanitation and climate-related risks. Interviews by Amnesty International revealed that only two individuals in Satkhira,[330] and none in Khulna, had received government-provided materials such as rings and slabs to construct toilets. One family received support from an NGO.[331]

The DPHE confirmed that no nationwide sanitation programmes are currently active following the conclusion of the National Sanitation Project in 2022.[332] In Khulna, only two small-scale interventions are underway: the construction of 1,500 twin-pit toilets in Paikgachha and 145 in Dumuria.[333] Another official explained that inclusion in such programmes is decided by the Upazila Nirbahi Officer based on feasibility studies conducted by NGO consultants, with technical input from the DPHE. Once a vulnerable area is selected, households are assessed individually for income, needs and feasibility. Support is then provided to a limited number of households based on available funding.[334] The interviews revealed no clear or transparent criteria for selection. “There was no government help to fix the toilets. A ward member visited the neighbourhood with a relief list but never returned with supplies,” said Mampi, reflecting a widespread sense of arbitrariness.[335]

[329] Amnesty International and the Center for International Environmental Law (CIEL), *Climate-Related Human Rights Harm and the Right to Effective Remedy,* 13 February 2024 (Index: IOR 40/7717/2024), https://www.amnesty.org/en/documents/ior40/7717/2024/en/

[330] Interviews with interviewees 13 and 14.

[331] Interview with interviewee 2.

[332] Interview with Executive Engineer, DPHE, Khulna, 17th June 2025 (online); UNICEF, WASH field note FN/14/2022/ Integrating Climate Resilience into Sanitation Programming in Bangladesh, https://clearinghouse.unicef.org/sites/ch/files/ch/sites-PD-WASH-Strategy%20and%20Results%20Management-FN1422_Climate%20Resilient%20Sanitation%20in%20Bangladesh_Final-4.0.pdf

[333] Interview with Executive Engineer, DPHE, Khulna, 17 June 2025.

[334] Amnesty International Interview with DPHE, Engineering Executive Engineer, Satkhira, 17th June 2025.

[335] Interview with interviewee 8.

The interviews confirm a deep sense of exclusion from the allocation of government and NGO aid on account of caste and occupation.[336] Kishori, a sanitation worker, said: "I work hard cleaning the city's streets and drains, but my own family lacked safe places to use as a toilet. People expect me to live in dirt and silence, and whenever I raised my voice, I was not heard." She added, "We low-caste people are forgotten." [337] Others reported that access to aid often depends on bribes or personal connections, which are resources Dalit sanitation workers typically lack. [338] "We went to government offices many times but they didn't take us seriously. Only those who can bribe get heard. We have neither the money nor the power to bribe," said Piu.[339] One NGO confirmed that both caste discrimination and corruption affect access to government support, even for Dalit-led organizations.[340]

In addition to district-level WATSAN committees, community-based disaster management committees are established at the Upazila level, but Dalit participation in these bodies is reportedly absent or merely symbolic. "We haven't seen any clear plan or action to include all communities properly… [In one place] two Dalit men and one Dalit woman were added, but that group isn't recognised in the main committee," said a committee member in Satkhira.[341]

Participation must be active, free and meaningful – not tokenistic. While often valued for improving outcomes, participation is a right in itself and failure to ensure it, whether through direct exclusion or by neglecting to remove barriers, constitutes a human rights violation.[342]

6. CONCLUSION

Amnesty International's research found that Dalit women sanitation workers interviewed in Khulna and Satkhira do not have adequate supplies of safe drinking water and face barriers accessing water for personal and domestic use. Their access to sanitation is similarly compromised: the toilets they can afford offer no privacy, are difficult to access, and are not resilient to weather and climate-induced events. Government assistance programmes often fail to prioritize Dalits; the multi-layered barriers to inclusion range from entrenched systemic caste-based discrimination, economic barriers, the absence of documentation for land tenure, lack of awareness, and settlements in less accessible areas prone to flooding.

Under the rights to water and sanitation, and equality and non-discrimination, states have a duty to "give special attention to those individuals and groups who have traditionally faced difficulties in exercising this right". Through policies such as Bangladesh Delta Plan 2010, and the National Strategy for Water Supply and Sanitation (NSWSS) 2021, the Bangladesh government recognizes water, sanitation and climate adaptation as development priorities. Dalit rights groups have highlighted, however, that "the lack of gathering of caste disaggregated data on the availability and access to water and sanitation results in the lack of attention to the issue not only from the government but also from civil society, academics and experts".[343] This research further shows that Dalit sanitation workers in Khulna and Satkhira, who have an essential role in maintaining public health and sanitation infrastructure, are seldom included in decision-making related to water, sanitation and disaster planning.

[336] Interviews with interviewees 3, 6, 8 and 11.
[337] Interview with interviewee 3.
[338] Interviews with interviewees 4 and 10.
[339] Interview with interviewee 10.
[340] Interview with General Secretary, Assasuni Upazila Branch, Bangladesh Dalit Parishad (BDP), 17 April 2025.
[341] Interview with Disaster Management Committee Member, Khulna, 23 June 2025.
[342] UN Special Rapporteur on the Right to Safe Drinking Water and Sanitation, Report: *Common Violations to the Human Rights to Water and Sanitation* (previously cited), para. 38.
[343] Nagorik Uddyog and Bangladesh Dalit and Excluded Rights Movement (BDERM), *Equity Watch 2015: Access to Water, Sanitation and Hygiene (WASH) for Dalits in Bangladesh: Challenges and Ways Forward*, 2015, https://bderm-bd.org/wp-content/uploads/2019/01/Equity-Watch-WASH.pdf, p. 9.

Extreme weather events, made more frequent and severe by climate change, especially cyclones such as Remal – further magnify existing inequalities by compounding sanitation workers' occupational hazards, heightening the daily challenges they face to meet basic water and sanitation needs, entrapping impoverished communities in cycles of reconstruction costs, and further burdening women and girls who bear the brunt of poor water and sanitation facilities in terms of health, lack of privacy, and domestic workload. Relief and recovery programmes fail to account for caste and gender vulnerabilities, leaving these frontline workers unprotected and forgotten. Without urgent caste and gender-responsive loss and damage efforts and climate-resilient interventions, Bangladesh's adaptation frameworks will continue to reinforce systemic inequalities and exclusion.

7. RECOMMENDATIONS

Recommendations to the Government of the People's Republic of Bangladesh

- Gather caste-disaggregated data and ensure local-level surveys and mapping to include intersectional discrimination and vulnerabilities, with a specific focus on gender and caste.
- Adopt a comprehensive anti-discrimination law that prohibits caste and descent-based discrimination, applies to both public and private sectors, recognizes direct and indirect discrimination, ensures accessible legal remedies and provides for independent complaint mechanisms.
- Establish a national action plan to eliminate caste-based discrimination, with clear timelines and accountability mechanisms.
- Integrate human rights and anti-discrimination education into school curricula, with a focus on caste equality; conduct public awareness campaigns to challenge caste-based stigma and promote social inclusion; and support community-led initiatives that promote inter-caste dialogue and solidarity.
- Ensure active, free and meaningful participation of Dalits (particularly women) in decision-making processes, at all levels of government, specifically with respect to water and sanitation planning and disaster planning and responses.
- Instruct local authorities to ensure Dalits and particularly Dalit women participate actively, freely, and meaningfully in water and sanitation as well as disaster planning committees.
- Regulate the price of water to ensure affordable and adequate supply of safe water; install safe distribution water centres close to Dalit communities; accelerate and prioritize programmes aimed at providing vulnerable households with safe drinking water, with a specific focus on Dalit communities.
- Provide affordable access to climate resilient sanitation facilities including an adequate supply of pits and rings and other materials required to construct safe and hygienic sanitation.
- Partner with local NGOs and women-led cooperatives to distribute free or subsidized menstrual hygiene products in Dalit communities and to develop gender-sensitive, environmentally safe disposal systems.
- Develop awareness-raising on safe nutritional and sanitation practices in vulnerable communities, including Dalit communities.
- Ensure that anti-discrimination measures are enforced in all health facilities and deploy mobile health units in Dalit settlements for essential and recommended health screening.

- Revise and align Bangladesh Climate Change Strategy and Action Plan (BCCSAP), National Adaptation Plan of Action (NAP 2023–2050), and the Bangladesh Delta Plan 2100 to explicitly recognise Dalit sanitation workers as a vulnerable and at-risk group.
- Develop and integrate human rights and equity-based loss and damage mechanisms that recognise both economic and non-economic losses experienced by Dalits due to climate-related disasters and include adequate compensation for destroyed homes and toilets, assets and income lost due to extreme weather events, and psychosocial harm linked to displacement in cyclone shelters and caste-based exclusion.
- Create decentralized and locally based climate adaptation funds with dedicated and targeted allocations for Dalit communities in high-risk areas such as Khulna and Satkhira and provide technical and material support for the construction of flood and cyclone-resistant homes in high-risk areas.
- Address the systemic and intergenerational inequalities caused by landlessness; ensure that land tenure policies protect the right to rebuild safely and remain in place after disasters; and strengthen legal and administrative protections against eviction.

Recommendations to the international community

- Recognize caste-based discrimination as a systemic and structural barrier in addressing climate vulnerability in Bangladesh.
- Call on Bangladesh to ensure that all climate adaptation and humanitarian interventions – particularly those targeting water, sanitation, and disaster response – prioritize communities such as Dalits who face layered exclusion due to caste, gender and poverty. Hold the government accountable for accountable for inclusive and rights-compliant climate action.
- Ensure all climate finance and other means of support, such as technology and knowledge transfer to Bangladesh, particularly for adaptation and loss and damage, are conditional on being designed with full, effective and meaningful input from members of the Dalit community; are implemented in compliance with principles of equality and non-discrimination and on measurable inclusion and equity standards; and that reporting on progress and implementation includes caste-disaggregated data.
- All countries in a position to do so, particularly high-income, historical emitting countries and high-income fossil-fuel-producing states, must massively increase public, grants-based climate finance for mitigation and adaptation for lower-income countries, including Bangladesh, aiming to ensure a balance between the two and to close the adaptation finance gap.
- Invest in participatory, rights-based adaptation models that build the resilience of Dalits, particularly Dalit women sanitation workers, by promoting safe water and sanitation.
- Allocate loss and damage finance to build climate-resilient housing, and water and sanitation systems in Dalit settlements.
- Commit and deliver adequate funding for the Fund Responding to Loss and Damage and other funding arrangements to ensure that Bangladesh has the resources needed to address the losses and damages arising from climate change.

Board of the Fund for Responding to Loss and Damage

- Ensure that the fund establishes direct-access small-grant modalities for impacted communities.

ANNEX: LIST OF INTERVIEWEES AND INTERVIEW DATES

Interviewee 1 - Pushpa, Satkhira district on 17 April, 4 May and 1 June 2025
Interviewee 2 - Diya, Satkhira district on 16 April, 5 May and 1 June 2025,
Interviewee 3 - Kishori, Satkhira district on 18 April, 5 May and 1 June 2025
Interviewee 4 - Pari, Khulna district on 13 April, 4 May and 1 June 2025
Interviewee 5 - Laboni, Satkhira district on 17 April, 6 May and 1 June 2025
Interviewee 6 - Kala, Khulna district on 13 April, 5 May and 1 June 2025
Interviewee 7 - Soma, Khulna district on 10 April, 5 May and 1 June 2025
Interviewee 8 - Mampi, Khulna district on 12 April, 5 May and 1 June 2025
Interviewee 9 - Ujwala, Satkhira district on 18 April, 4 May and 1 June 2025
Interviewee 10 - Piu, Khulna district on 13 April, 4 May and 1 June 2025
Interviewee 11 - Manisha, Satkhira district on 15 April, 6 May and 1 June 2025
Interviewee 12 - Leena, Satkhira district on 15 April, 4 May and 1 June 2025
Interviewee 13 - Rashmika, Satkhira district on 17 April, 4 May and 1 June 2025
Interviewee 14 - Sunita, Satkhira district on 16 April, 5 May and 1 June 2025
Interviewee 15 - Uma, Satkhira district on 16 April, 6 May and 1 June 2025
Interviewee 16 - Sarita, Satkhira district on 15 April, 6 May and 1 June 2025
Interviewee 17 - Jiya, Khulna district on 12 April, 4 May and 1 June 2025
Interviewee 18 - Maya, Khulna district on 10 April, 4 May and 1 June 2025
Interviewee 19 - Ridhi, Khulna district on 10 April, 5 May and 1 June 2025
Interviewee 20 - Laila, Khulna district on 10 April, 4 May and 1 June 2025

Amnesty International is a movement of 10 million people which mobilizes the humanity in everyone and campaigns for change so we can all enjoy our human rights. Our vision is of a world where those in power keep their promises, respect international law and are held to account. We are independent of any government, political ideology, economic interest or religion and are funded mainly by our membership and individual donations. We believe that acting in solidarity and compassion with people everywhere can change our societies for the better.

Contact

info@amnesty.org

amnesty.org

facebook.com/AmnestyGlobal

@Amnesty

Amnesty International
Peter Benenson House
1 Easton Street
London WC1X 0DW, UK

Index: **ASA 13/0372/2025**
Publication: **October 2025**
Original language: **English**