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Gender Equality in WASH Systems: the Why and the How

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19-21 October 2022

Dorothy Akinyi, CARE Kenya

Manyahshal Ayele, CARE Ethiopia

Harisoa Rasamoelina and Rodolphe Rokoto-Harisoa RANO WASH Madagascar



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- Gender Tools in Action: Social Analysis and Action (SAA)
- Discussion and Reflection
- <https://bit.ly/3TgFKJO>



There is decades of evidence of the disproportionate impact of WASH on women and girls...

SSM Popul Health. 2018 Aug; 5: 257–266.
Published online 2018 Jun 20. doi: [10.1016/j.ssmph.2018.06.005](https://doi.org/10.1016/j.ssmph.2018.06.005)

PMCID: PMC6077264
PMID: [30094321](https://pubmed.ncbi.nlm.nih.gov/30094321/)

The association between women's sanitation experiences and mental health: A cross-sectional study in Rural, Odisha India

Bethany A. Caruso,^{a,b,*} Hannah L.F. Cooper,^a Regine Haardörfer,^a Kathryn M. Yount,^{c,d} Parimita Routray,^e Belen Torondel,^e and Thomas Clasen^b

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Associated Data

▶ Supplementary Materials

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A Systematic Review of Water and Gender Interlinkages: Assessing the Intersection With Health

Panthea Pouramin^{1,*}, Nidhi Nagabhatla^{1,2} and Michela Miletto³

¹ United Nations University Institute for Water, Environment and Health (UNU INWEH), Hamilton, ON, Canada
² School of Geography and Earth Science, McMaster University, Hamilton, ON, Canada
³ United Nations Educational, Scientific and Cultural Organization World Water Assessment Programme (UNESCO WWAP), Perugia, Italy

Background: Significant developmental challenges in low-resource settings limit access to sustainable water, sanitation, and hygiene (WASH). However, in addition to reducing human agency and dignity, gendered WASH inequities can also increase disease burden among women and girls. In this systematic review, a range of challenges experienced by women relating to inadequate WASH resources are described and their intersection with health are explored. We further assess the effectiveness of interventions in alleviating inequalities related to the Sustainable Development Goals (SDGs) three (health), five (gender), and six (water).

Methods: We searched the MEDLINE database to identify research articles related to water (i.e., WASH), gender, and sustainability. An analysis of both observational and interventional studies was undertaken. For each study, content analysis was performed to identify the relevant WASH, gender, and health related outcomes, and the main conclusions of the study.

Results: Key themes from our search included that women and girls face barriers toward accessing basic sanitation and hygiene resources, including a lack of secure and private sanitation and of Menstrual Hygiene Management (MHM) resources. In total, 71% of identified studies reported a health outcome, suggesting an intersection of water and gender with health. Half of the research studies that included a health component reflected on the relationship between WASH, gender, and infantile diseases, including under-5 mortality, waterborne parasites, and stunting. In addition, we found that women and girls, as a result of their role as water purveyors, were at risk of exposure to contaminated water and of sustaining musculoskeletal trauma. A limited number of studies directly compared gender differences in accessing WASH resources, and an

DOI: [10.3362/1756-3488.2013.033](https://doi.org/10.3362/1756-3488.2013.033) • Corpus ID: 110366427

A framework for exploring gender equality outcomes from WASH programmes

N. Carrard, Joanne Crawford, +2 authors, J. Willetts • Published 22 October 2013 • Economics • Waterlines

This paper aims to assist practitioners and researchers in planning, identifying, and documenting gender outcomes associated with water, sanitation, and hygiene (WASH) programmes by proposing a conceptual framework for classifying gender equality changes. Gender outcomes that have been attributed to WASH initiatives encompass those directly related to improved services as well as outcomes that move into areas of relationships, power, and status. There is a growing body of literature identifying... [Expand](#)

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... fundamental to attaining all other human rights. Globally, safe drinking water at home, 2.3 billion do not have basic ... Women and girls are disproportionately affected by the ... ne facilities, due to their needs during periods of ... ration and reproduction.^{2–4} Women and girls also have a ... hygiene activities, including in agriculture and domestic

DOI: [10.2166/washdev.2020.232](https://doi.org/10.2166/washdev.2020.232) • Corpus ID: 225187410

WASH and Gender: a critical review of the literature and implications for gender-transformative WASH research

Jess MacArthur, N. Carrard, J. Willetts • Published 16 September 2020 • Sociology • Journal of Water Sanitation and Hygiene for Development

The connections between gender and water, sanitation, and hygiene (WASH) are profound, and the sector is beginning to explore the integration of gender-transformative principles into WASH programming and research. Gender-transformative approaches challenge inequalities and move beyond an instrumentalist approach to gender in development interventions. Through a critical review of academic empirical studies, this paper explores the last decade of WASH-gender literature (2008–2018). Trends were... [Expand](#)

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Corpus ID: 212411350

Transforming gender relations: Achieving and reinforcing change through water, sanitation and hygiene programming and monitoring in Vietnam

Leahy Winterford, +3 authors, Willetts • Published 2017 • Sociology

This article presents the results of empirical research conducted in Central Vietnam in 2016 into WASH initiatives. It uncovered changes in gender relations and power dynamics at both household and community levels, aiming to explore the extent to which both practical and strategic interests of women can be influenced and changed by WASH policies and programming. In particular, we were interested in assessing the impact of a Gender and WASH Monitoring Tool (GWMT), developed by Plan... [Expand](#)

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RESEARCH ARTICLE

Water, sanitation, and women's empowerment: A systematic review and qualitative metasynthesis

Bethany A. Caruso, Amelia Conrad, Madeleine Patrick, Ajilè Owens, Karl Kvilen, Olivia Zarella, Hannah Rogers, Sheela S. Sinharoy

Published: June 7, 2022 • <https://doi.org/10.1371/journal.pwat.0000026>

[See the preprint](#)

Article	Authors	Metrics	Comments	Media Coverage	Peer Review
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Abstract
Introduction
Methods
Results
Agency
Resources
Institutional structures
Discussion
Conclusion
Supporting information
Acknowledgments
References

Abstract
Historically, water and sanitation programs have focused on women's instrumental value in improving conditions and behaviors. No reviews have synthesized evidence on water and sanitation and women's and girls' empowerment. This review (a) identified empirical water and sanitation research that engaged empowerment and/or empowerment-related domains; (b) reported empowerment-related terminology used, research locations, methods leveraged, if water and/or sanitation was the focus; and (c) synthesized evidence. A conceptual model of women's and girls' empowerment, which includes three interrelated domains (agency, resources, institutional structures), informed the search and analysis. We searched MEDLINE, EMBASE, CABI Global Health, PsycINFO, CINAHL and AGRICOLA for peer-reviewed sources presenting research on water and/or sanitation and either empowerment and/or related terms from the model (4 May 2020). We identified 12,616 publications; 257 were included, representing over 1,600,000 participants. We used the Mixed-Methods Appraisal Tool (MMAT) and followed the 'best-fit framework synthesis' analysis approach, using the model domains and sub-domains as codes. We inductively identified two additional sub-domains relevant to water and sanitation: privacy and freedom of movement. Thematic analysis guided synthesis of coded text. The majority of research took place in Asia (46%; 117) or Africa (40%; 102); engaged adults (69%; 177); and was published since 2010; (82%; 211). The greatest proportion of studies focused on water (45%; 115). Over half of studies used the term empowerment, yet only 7% (17) provided a clear definition or conceptualization. Agency was the least commonly engaged domain (47%; 122); the Resources domain was dominant (94%; 241). Measures for assessing empowerment are limited. Inclusion of only peer-reviewed sources in English is a main limitation. Well-conceptualized water and sanitation research that engages women's and girls' empowerment is limited. A more comprehensive 'transformative WASH' that includes gender-transformative approaches to challenge and reduce systemic constraints on women's

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But there are relatively few women at the decision-making table...

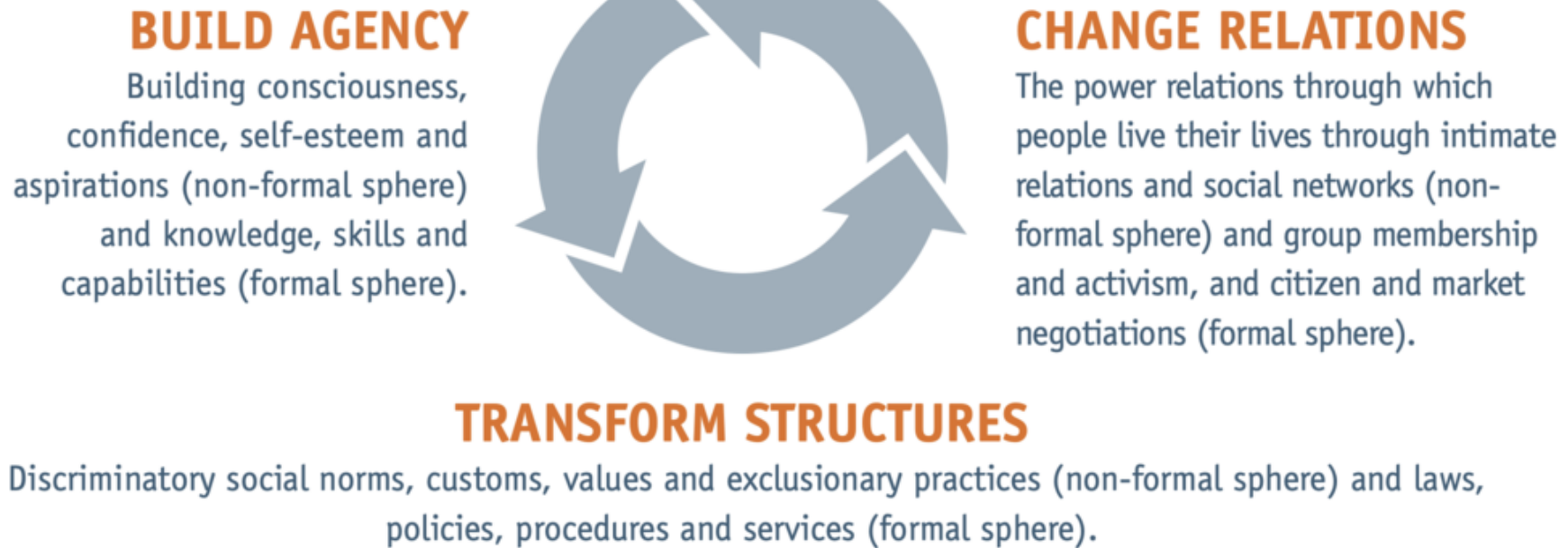


World leaders assembled for a photo at COP 26

Photo credit: Associated Press

Care's Gender Equality Framework

Figure 1: CARE's Gender Equality Framework

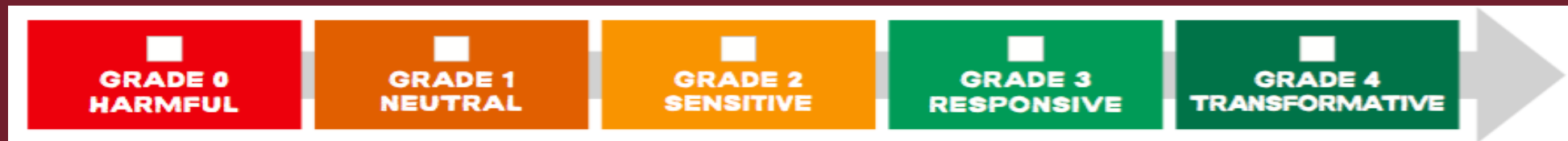


CARE'S Gender Marker

One of the key tools that supports the implementation of Gender Equality & Women Voice Approach.

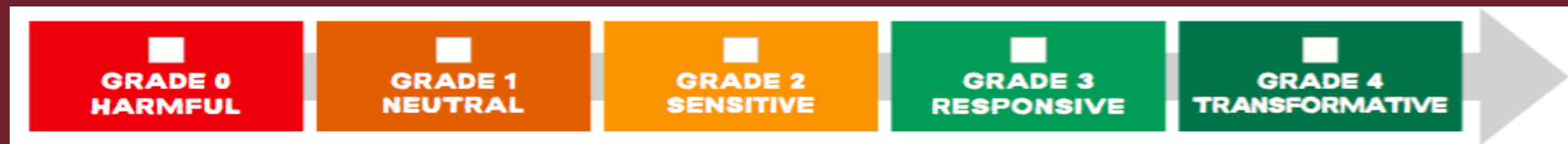
It is a self-assessment tool that measures the integration of gender into programming along the Continuum from harmful, neutral, sensitive, responsive to transformative.

The Gender Marker enables CARE to track, improve on, and support more effective, gender integrated programming. It is designed to be used in combination with Monitoring, Evaluation and Accountability systems to help reflect on the integration of gender to improve the gendered approach of their work.



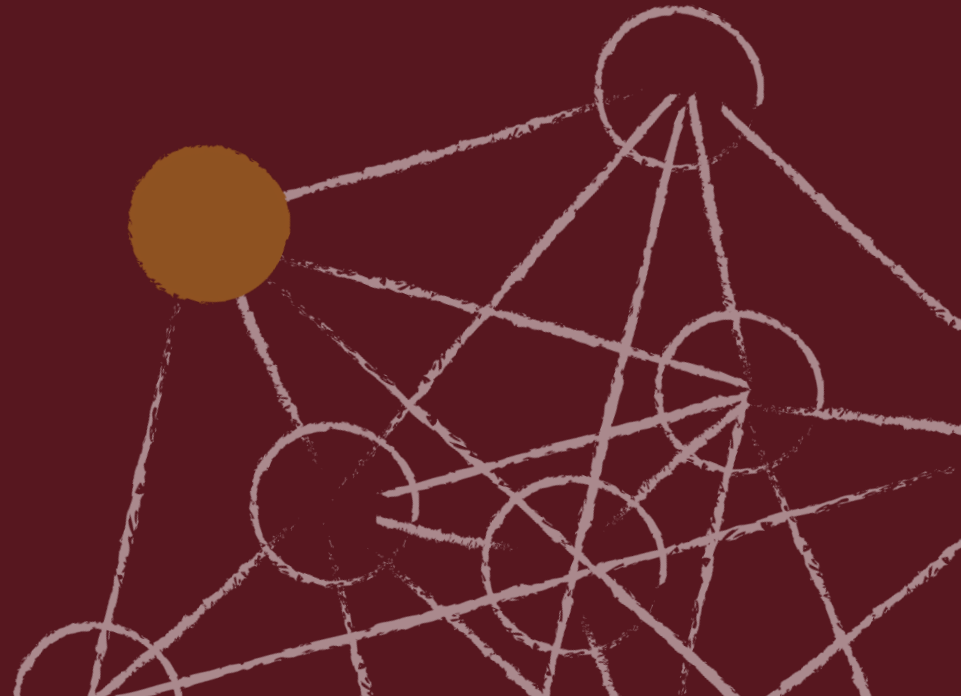
CARE'S Gender Marker: Where do these fall on the continuum?

Inviting women to WASH committee meetings



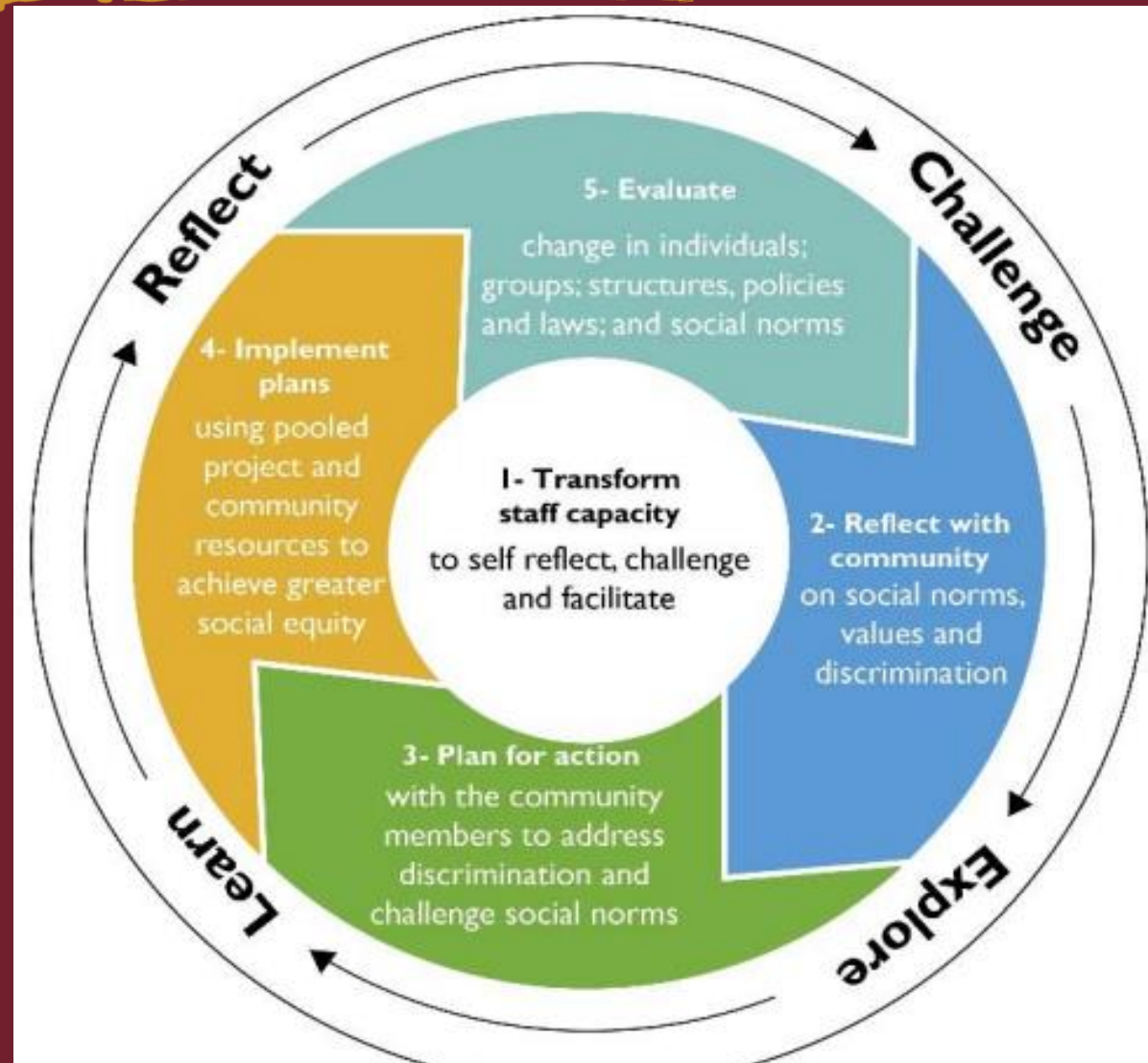
Using SAA to challenge negative social norms that hinder women and girls' equitable access to WASH services

The case of Alego Usonga- Siaya County, Kenya



Social analysis and action (SAA)

Social Analysis and Action (SAA) is a gender transformative approach used by CARE as part of a strategy for behavioral and social change through social transformation at the level of community groups and institutions



SAA WASH



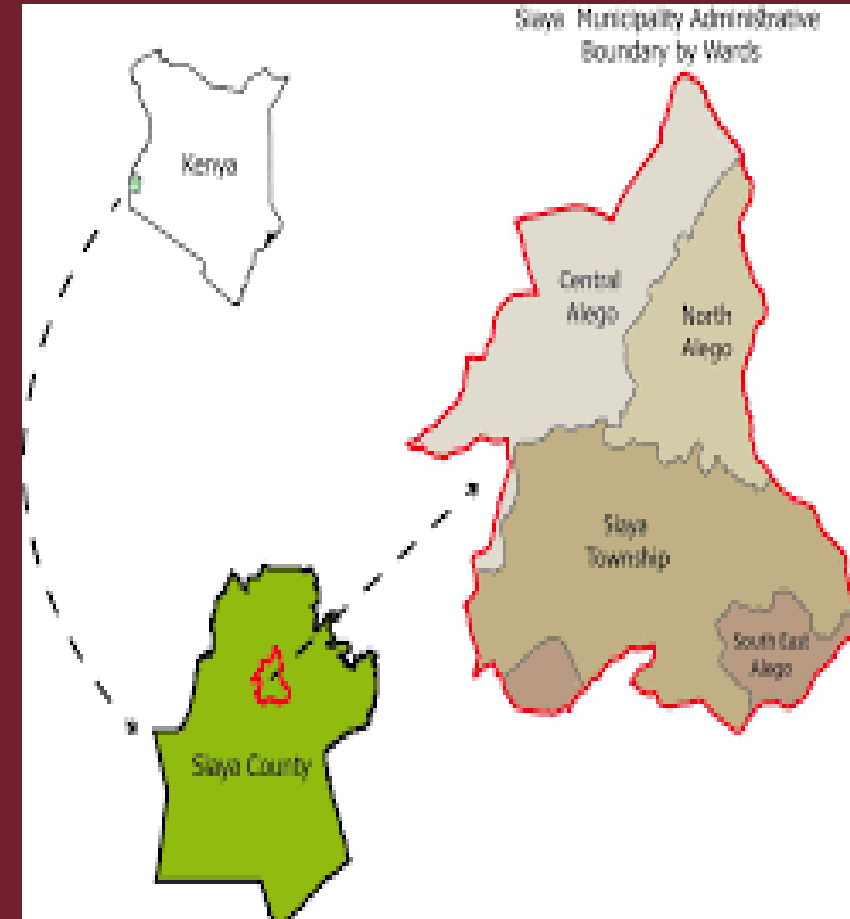
SAA in a WASH program is an approach to catalyze a process of exploration and reflection and to facilitate individual and community actions

These actions support behavioral and social change toward safe water use, personal hygiene management (including menstrual hygiene), creation of a defecation-free environment, as well as changing the governance of WASH services through addressing social barriers

SAA is a facilitated process through which individuals and communities explore and challenge the social norms, beliefs and practices that shape their lives – through activities & facilitated dialogues – which allow “answers” and “lightbulbs” to come from participants – not facilitators

Context

- Alego Usonga is one of the 6 sub counties in Siaya County in the Western region, of Kenya bordering Lake Victoria. It is one of the project sites where the P&G funded Children Safe Drinking Water Project (CSDW) had been implementing a safe water and hand hygiene project for over 3 years
- Although the knowledge of when and how to wash hands and treat water was well understood, the project wanted to address social norms that were hindering adoption and sustainability of these important practices
- A survey conducted in the area identified some key social and gender norms that could clearly be demonstrated as harmful and therefore a hindrance to adoption and sustainability of these practices



Harmful social norms identified and prioritized

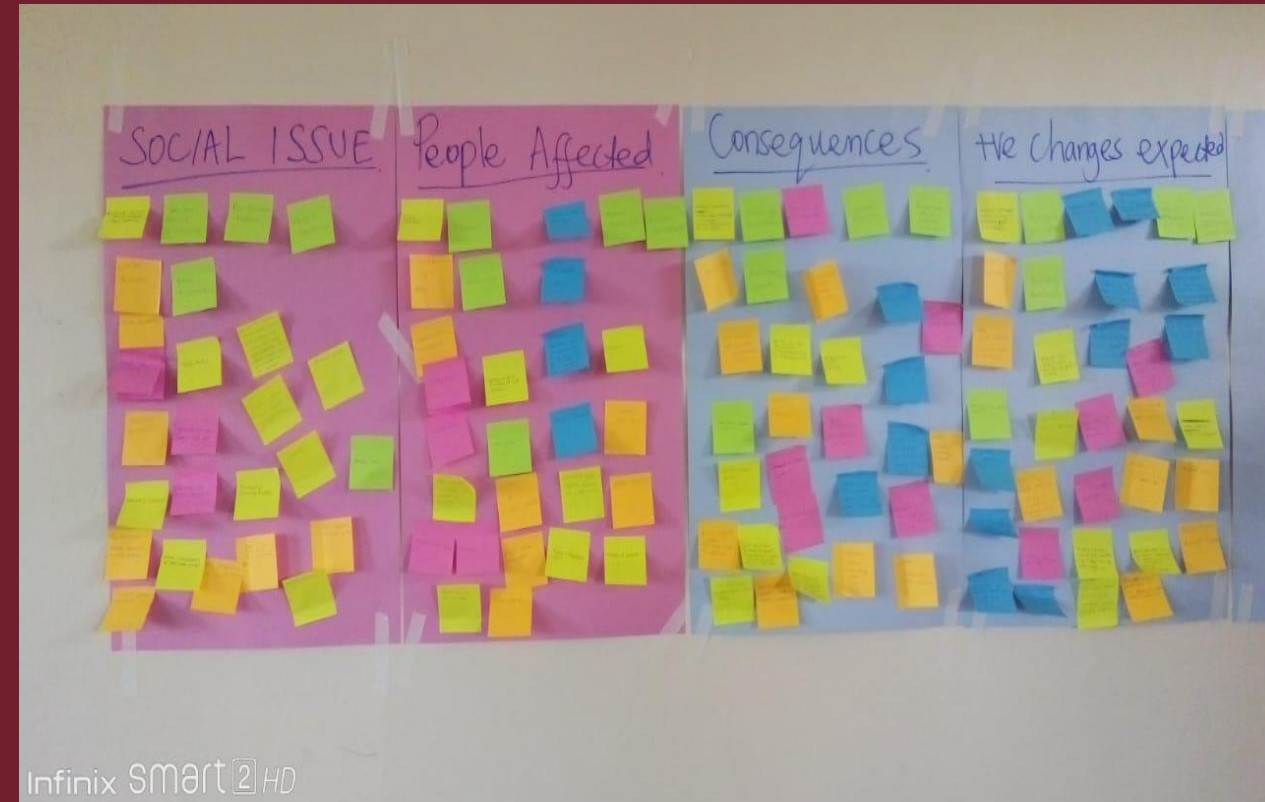
- Gendered division of labor- Women and girls were responsible for all household chores that hindered them time to participate in other community activities where important decisions on WASH were made
- Household decision making- Women and girls had no voice when it came to decision making on how household resources were used even when they contributed to household income
- Control over productive assets- No women and/or girls were allowed to own land and therefore would not influence where resources like water points would be situated within the community

Harmful social norms identified and prioritized

- Access to public spaces- Water points were identified as very far from households which posed risk for women and girls who had the responsibility of fetching water. They would be susceptible to GBV (physical and sexual)
- Women voices and leadership- Most of the existing groups in the community were headed by men with women either appointed or in positions with less influence in decision making. There were quite several WASH committees that were purely constituted of men
- Cultural beliefs –MHM was seen as a preserve of women and therefore men had no role to play in supporting women and girls during their menses. **‘A girl asking the father for pads is shameful and awkward’**
- Water was also believed to be blessed by god, ‘PI NE OGWEDHI’ so did not need any treatment before use even when drinking

What we did in Kenya: The How

- 10 existing VSLA groups were identified through a sister project within CARE, with one representative each trained on SAA process- one from each VSLA group
- Since they were community members, they were familiar with the harmful norms identified during KAP survey
- Before challenging any norm identified, the facilitators held a session, similar to staff transformation, to introspect, self-evaluate, on their own beliefs regarding the norm in question.
- They would do this with their maiden VSLA groups as well



What we did in Kenya: The How

- The trained SAA facilitator supported the community dialogues, action planning and monitoring of change processes. Dialogues were held twice a month with existing community groups
- A smaller committee from within the community dialogues was identified to support in implementation of action plans and as liaison with the facilitators



Evaluation



- Dialogues were conducted over a course of 18 months where facilitators documented the process using a checklist and a reporting tool drafted by the project to capture non-verbal's and verbal's
- Midline and endline survey were also conducted to evaluate the SAA process
- Identification and documentation of most significant changes and human-interest stories were also captured

Outcomes of the SAA WASH process in Kenya

- Men participating in SAA dialogues were three times more likely to express willingness to support in household chores, including WASH-related chores
 - Willingness rose from 19% to 67% of men participating in men-only SAA dialogues)
 - The percent of households in which men and women reported making joint decisions for utilization of household resources increased from 62% to 73%.
- Monthly reports submitted by VSLA groups leading SAA dialogues in Siaya county suggested increases in adoption of POU water treatment methods, handwashing practices, latrine coverage, and availability of household resources to support MHM.



Outcomes of the SAA process in Kenya

- Women and girls reported their spouses/fathers willingly providing funds to procure sanitary towels for their use during menses
- More women were presenting themselves for competitive leadership positions beyond being group secretaries or treasurers
- Men attending dialogues were reported to support leadership for women
- The WASH committees were now integrating women as mandated members by a minimum expected in the 1/3 gender rule

Lessons Learnt



Dialogue sessions targeting men only and couples only should be used more to help transform men. These sessions can be led by identified male or couple champions, or early adopters

Integrating the SAA approach into the community health services program would help empower Community Health Volunteers with more tools for community behavior change

There is still need for women to proactively participate in community forums where decisions are made that affect their lives. They should make deliberate efforts to be part of these community processes, a venture only achievable through the support of men as well

Lessons Learnt



Buy in from community gate keepers is key in ensuring implementation plans are actualized

Governments need to pay more attention to the WASH needs of the marginalized in the community. The old, physically and mentally disabled and emancipated teenagers who are heads of households

Cultural norms can be difficult to transform and so a continuous dialogue process is essential to keep the community talking about them

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Addressing Gender inequalities in WASH

The Case of Ethiopia (MHH & Seize the Moment)

19-21 October 2022 | Kempinski Hotel in Accra, Ghana



Content



1. Current Gender and WASH context in Ethiopia
2. CARE addressing inequalities
 - through improved Menstrual Health and Hygiene program
 - through supporting Government sector institutions
3. Lessons Learnt



Gender and WASH Ethiopia



- Men and women do not have equal decision-making power on household resources
- Girls and women have the least access to information, finance, education, etc. and face mobility restrictions
- Social norms limit women in leadership positions
- Women and girls are often victims of early marriage, FGM, GBV.
- Government institutions do not have either the capacity or resources to play meaningful role in gender equality
- Key sector Ministries in WASH such as Ministry of Water and Energy have no gender specific budget allocation, **nor gender disaggregated database**
 - Women make up 12% of higher leadership and 27% of middle leadership

Menstrual Health and Hygiene Management



The state of Menstrual Hygiene in Ethiopia

67%

of girls reported that they had not received education on menstruation at school¹

70%

of girls in Ethiopia have never heard of menstruation before it occurs for the 1st time²

25%

of girls living in rural areas reported not using any menstrual protection³

77%

of schools have no access to water services and 23% have limited water supply services⁴

90%

of students reported that their school did not have a separate sanitary facility for females⁵

27%

of the Ethiopian population practice defecation in the open air⁶

¹SNV, 2015. Scope: 18 schools in 6 woredas in 4 regions, 786 respondents. / ²PMA2020, 2017. Scope: National, 4,590 women surveyed./ ³FSG, 2016. "An Opportunity to Address Menstrual Health and Gender Equity". Scope: 7 regions, 8,000 women aged 15 to 49 surveyed. / ⁴JMP WASH in School, 2018. Scope: National/ ⁵BMC Public Health, 2014. Scope: 595 randomly selected adolescent schoolgirls. / ⁶World Bank 2015. Scope: National.

The state of Menstrual Hygiene in Ethiopia

Demanding and unclear regulatory system challenges the MHH supply chain:

- MHH related business are licensed in the cleaning, cosmetics, and inputs sector while MHH products are classified as medical devices
- Required to have high quality standards but not the benefits associated with the medical sector
- Insertable products (e.g. tampons, cups) are classified as medical devices with a perceived higher risk
- This means a multitude of regulatory frameworks apply to one sector, which is especially challenging for micro, small and medium enterprises (MSMEs).
- Regulatory bodies do not have the capacity to serve as a pivotal point of information and service, due to scattered regulatory information and implementing

A conducive environment for MHM

- **Creation of a special taskforce on MHM in 2016**
 - Led by Ministry of Health, with Ministries of Education and Water; support from UNICEF
 - to increase advocacy and awareness of public authorities on MHM.
- **Presidential taskforce to support women's empowerment**
 - specific component on MHM aimed primarily at universities.
 - Key ministries, major international organisations and private production companies have joined the initiative.
- **The OneWASH National Programme (OWNP)**
 - sector-wide approach led by the government since 2013 to achieve WASH goals set out in the country's Growth and Transformation Plan
 - One WASH activities include the promotion of MHM and the construction of menstrual-friendly sanitation facilities in schools.



@Mane – can you add photo caption and credit here



CARE was awarded the first project which focuses solely on Menstrual Health and Hygiene (MHH)

- Awarded in 2021 from AFD

MHH Project objective:

To drive in-depth changes in practices and beliefs related to menstrual health and hygiene in target communities and develop an effective intervention model that can be replicated

Three dimensions of the MHH project Ethiopia



Advocacy and awareness-raising on issues of menstrual health and hygiene (MHH) and related biological and psychosocial changes

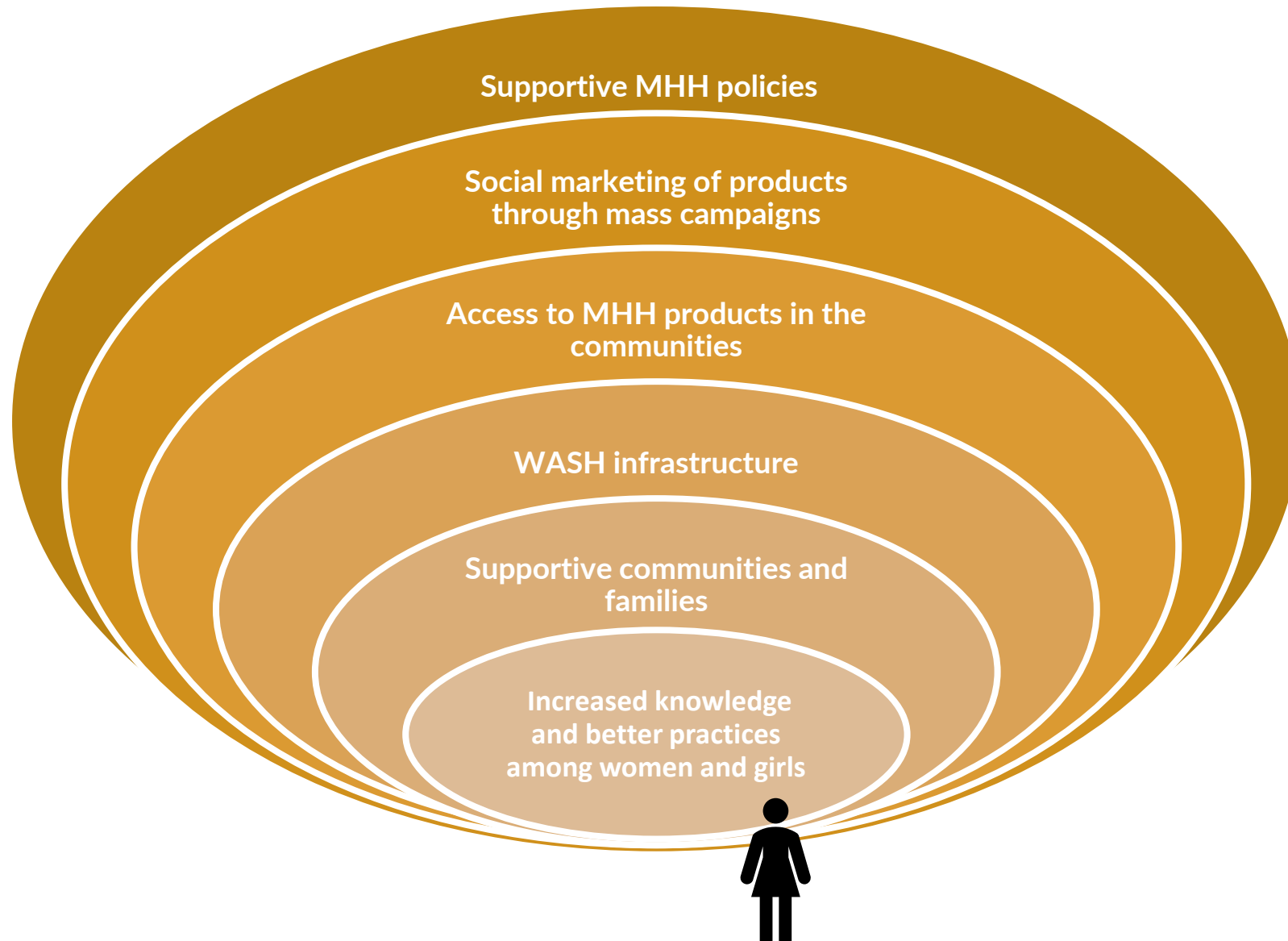


Production and distribution of quality, environmentally friendly menstrual hygiene products



Construction & maintenance of sanitary **infrastructures** adapted to MHH for girls and women in their living areas

Six-layered approach to changing MHH behaviors



Preliminary research phase – Findings and Recommendations

Pillar 1:

MHH awareness and demand assessment

Findings

- **80%** of schoolgirls miss classes 2 to 3 days per month
- **38.9%** of schoolgirls are shocked when they start their period
- **14%** of schoolgirls are bullied, mocked and insulted by boys
- Society considers a girl on menstruation **as if she lost her virginity** (only by seeing blood) or **she is ready to have sex and marry a man** (sign for maturity).
- **Menstruating women should isolate herself** from gatherings and religious ceremonies **because they are considered as not clean**

Recommendations

- Continuous awareness raising activities; capacitating schoolgirls' club to play promotion roles as well as training teachers on MHH
- Prioritize addressing harmful social norms that perpetuate discrimination of women and girls due to menstruation.
- Empower schoolgirls' club to influence social norms related to menstruation at school.
- Religious leaders should collaborate in the promotion of MHH and support appropriate MHH practices

Preliminary research phase – Findings and Recommendations

Pillar 2: MHH supply chain analysis

- There is **no reusable menstrual pads currently accessible** on the market
- **Access to sanitary products increases school attendance** (most of schools assessed had sanitary emergency pads but only 1 pad per student)
- **Schoolgirls reported side effects in using some disposable sanitary pads** (irritation, poor absorbability)
- Increase in number of availability of different types of sanitary products **but quality control remains a challenge**
- Promoting the use of reusable pads and create demands for the gradually growing market and support the stocking of MHH products at retail shops
- Advocate to the authorities concerned in terms of quality control for the sanitary MHH products
- Increase availability of low cost, sustainable and affordable menstrual materials to enable good practices of MHH

Pillar 3: Inventory of WASH and MHH facilities

- **13.3%** of schools do not have access to water
- **20%** of schools do not have latrine; those schools with latrines, most are far below the standard
- Most of the schools targeted have WASH and hygiene facilities **below government guidelines**
- **10%** of schools have MHH rooms
- Ensure there are MHH and WASH facilities respect the government guidelines
- Ensure there is space for changing sanitary materials with water, soap, basin, mattress and pain meds in schools
- Setting up appropriate disposal mechanisms for used sanitary products at all places

Seize the Moment – Sector level work in Gender



The Ministry of Women and Social Affairs is an institution that is mandated to hold other line ministries to account for delivery on gender-transformative outcomes

CARE is working to strengthen the Ministry as an institution to better support and deliver its responsibilities by providing learning, resources and technical support on gender inclusive governance



An Example: CARE's work with the Ministry of Women and Social Affairs (MoWSA)

Context Analysis

- Understanding the internal operating environment and external relationships of MoWSA

Social Analysis and Action (SAA)

- TOT of ministry staff to reflect on gender and social norms and discuss ways to change; quarterly reflection

Male Engagement

- Coaching and mentoring of senior male leaders to strengthen soft skills and gender knowledge



Lessons learnt from working on gender integration in Ethiopia:



- MHM related businesses are licensed in the 'cleaning, cosmetics and inputs' sector, while MHM products are classified as 'medical devices' - meaning there is a mismatch of regulation happens
- There is huge gap between the MHH infrastructure standard and the condition of sanitary infrastructures in schools.
- **Investing in sector institutions at different levels require capacity-building on gender – in order to better support to community level activities through policies, approaches and resources**

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How to integrate Gender and social inclusion in a WASH project: RANO WASH project case in Madagascar

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19-21 October 2022



1. Contents



1. RANO WASH Project overview
2. Gender analysis results and recommendations summary
3. RANO WASH gender strategy and key activities
4. Key results and changes





RANO WASH Project overview

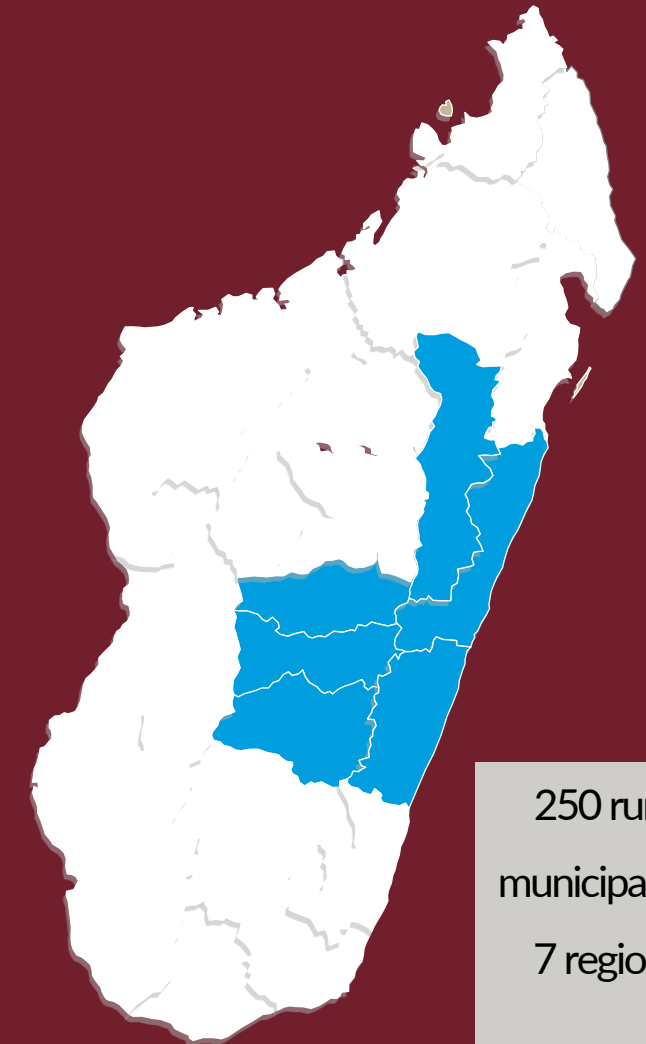
Rural Access to New Opportunities in Water, Sanitation, and Hygiene (RANO WASH): 2017 – 2023

– Budget: \$33 million USD (USAID)

Goal: to increase equitable and sustainable access to water, sanitation and hygiene services for rural communities, to maximize impacts on health & nutrition, and preserve environment.

Three strategic objectives:

1. Governance and monitoring of water and sanitation strengthened for sustainable and equitable WASH service delivery.
2. Increasing and improving private-sector engagement in WASH service delivery
3. Adoption and acceleration of healthy behaviors and use of WASH services



250 rural
municipalities
7 regions

2. Gender analysis and recommendations



Gender analysis: Key Results

- Women and girls are responsible for household chores and WASH activities.
- Female role models are: flexible, clean, hard-working and respectful of men.
- Violence and harassment, although illegal, are rarely reported or punished.
- People with disabilities and women are expected to be quiet and not contribute to conversations.
- People and children with disabilities have limited access to institutions, e.g. health centers & schools.
- Community committee activities and community decisions are for men and boys.
- Major decisions are made by men in terms of selling, buying and building.



Gender analysis: Key Recommendations

- Give women the freedom and opportunity to get involved
- Promote women's skills and leadership
- Expand the role of men and boys in gender equality
- Understand and use seasonal schedules
- Promote collaborative design
- Establish/strengthen feedback mechanisms
- Understand the signs of gender-based violence
- Streamline gender equality
- Intentionally inclusive



3. RANO WASH Gender Strategy and key activities



WASH System strengthening for inclusive and sustainable services



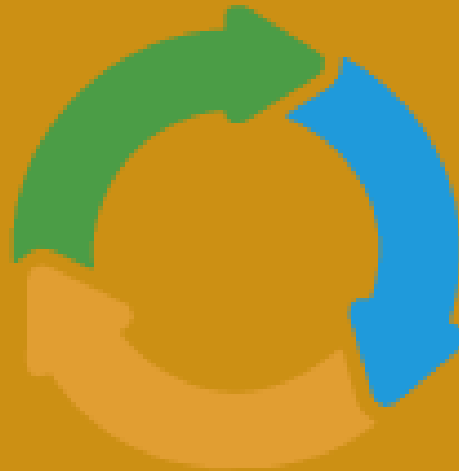
RANO WASH Gender Strategy

- **Training of women and youth:** entrepreneurs, in local structures
- Exchange between **women leaders**
- Promotion of **gender parity** in decision-making bodies

- **Networking and group building**
- Facilitation of access to financial services (Banks, MFIs, VSLA)
- Influence of groups and individuals

CONSTRUCTION AGENCY

Developing awareness, confidence, self-esteem and aspirations (non-formal sphere) and knowledge, skills and abilities (formal sphere).



POWER RELATIONSHIPS

by which people live their lives through intimate relationships and social networks (non-formal sphere) and group membership and negotiations with citizens and markets (formal sphere).

TRANSFORM STRUCTURES

Discriminatory social norms, customs, values and exclusionary practices (non-formal sphere) and laws, policies, procedures and services (formal sphere).

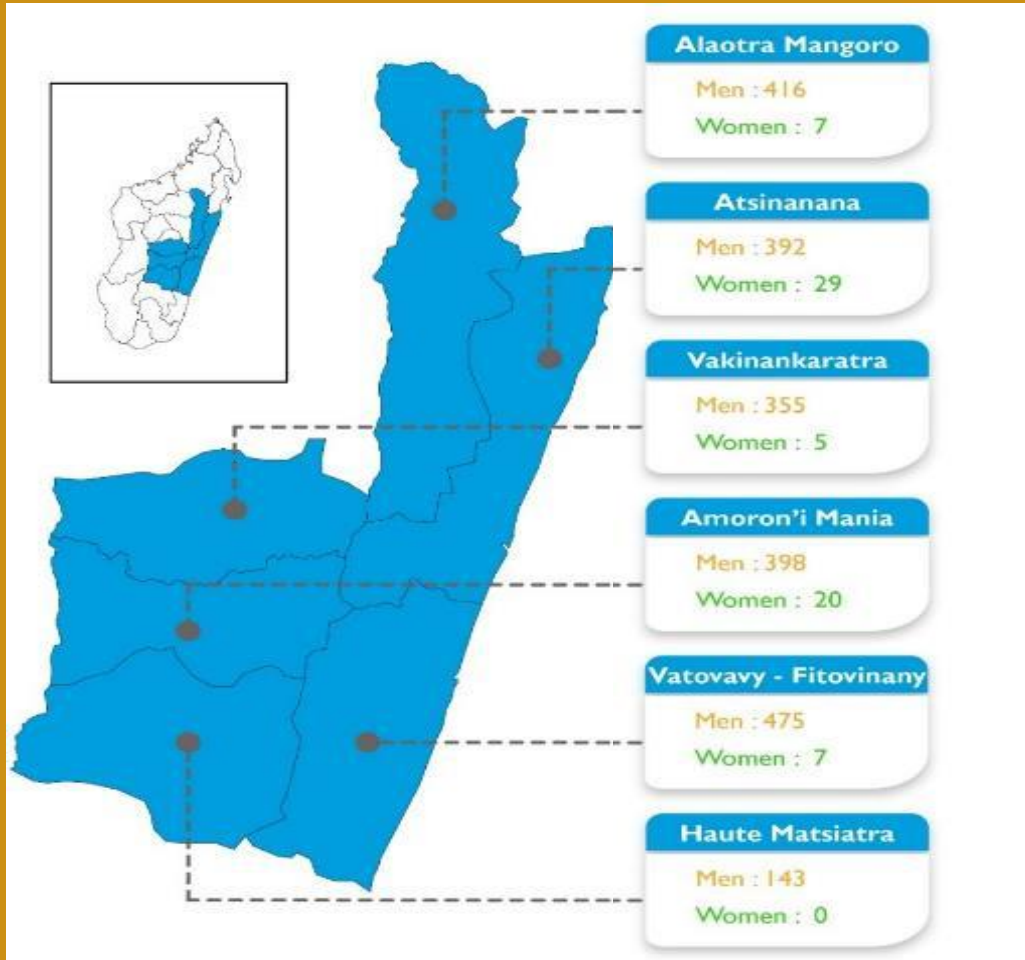
Changing norms to support community and household behaviour change.

- Local rules (dina)
- Transformation of social norms
- Procedures and mechanisms
- Institutionalization of change

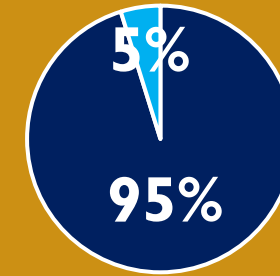
Committed men
Social analysis and action

Gender Mapping

Fokontany chiefs

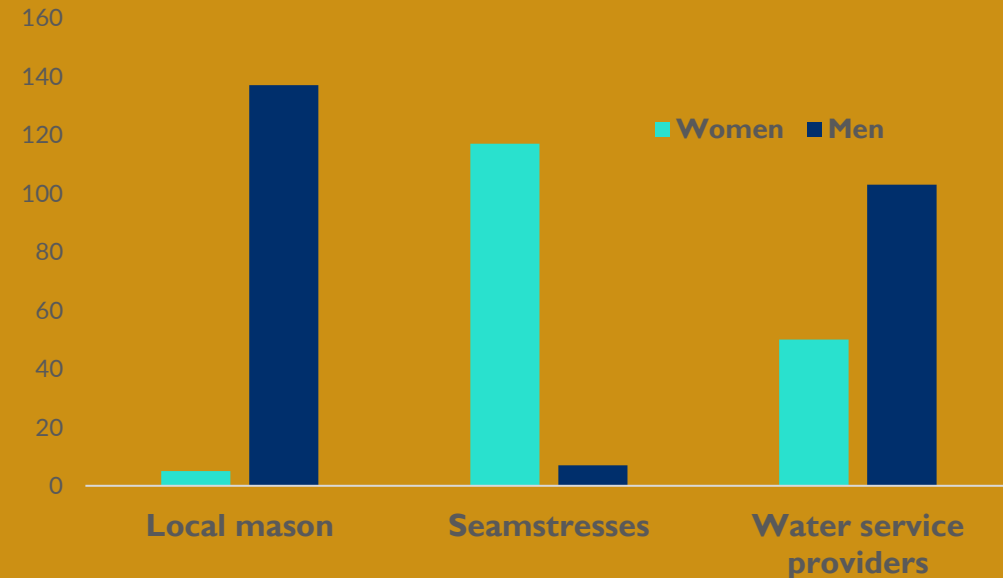


Mayors in the project's intervention municipalities



Men Women

WASH service providers





Timeline - Gender Mainstreaming and Social Inclusion - RANO WASH

2018

2019

2020

2021

2022



The voices of women and youth are not heard in WASH-related policy forums

Discussion spaces for women and youth participation are functional

The voices of all are represented and taken into account in WASH-related consultation spaces

Community level



Women, children and people with disabilities have limited access to and control over WASH services and products.

Promotional activities for WASH products and services are developed.

WASH-related infrastructure and facilities are available for men, women, youth, children and people with disabilities



Adoption of healthy behaviours is limited by gender inequalities and adherence to some harmful social norms

Women and men take decisions together for WASH activities

Men/boys and women/girls adopt healthy behaviors through equitable distribution of WASH roles

Key activities

Activity 1: Model Household with fair role distribution

Activity 2: Men committed to women's empowerment

Activity 3: Social Analysis and Action to identify gender norms



Activity 4:
Support women leaders

Activity 5:
Support for young
people and women
entrepreneurs

Activity 6:
Inclusive products and
services

Activity 7:
Advocacy for Gender
Consideration and
Social Inclusion



USAID
DU PEUPLE AMERICAIN



Diarin'ny tetikasako

“Hitondra fiovana mihabo eo amin'ny fiainako
sy ho an'ny tontolo manodidina ahy.”

Outil développé par:



BushProof



4. Key results and changes



What has changed?



Gender - Social Inclusion

- Women operators provide WASH services.
- WASH services consider specific needs
- Men and women can discuss menstrual hygiene
- Women participate in decision-making bodies
- Women are selected to become leaders in public and private institutions
- The distribution of roles and responsibilities in the family contributes to the adoption of healthy behaviours.
- Women, men and children eat together at home.



Institutional arrangements

- The functionality of the different development structures with the participation of men and women and youth: SRMO, SLC, local committees
- Consultation with the various entities in the planning process



Coordination - Integration

- Institution of a sector review every six months with all the players in the sector
- Region, District, STD, Regional Management conduct 'open defecation free' verification together.

What has changed?



Follow-up

- Monitoring of the communal action plan involving all local structures (Municipality/STEAH, ASUREP, civil society, leaders)
- Men and women private operators make detailed follow-ups of clients
- Efforts for disaggregated data in the SE&AM system



Strategic planning

- Consultation of community groups with representatives of various local structures during the development of the local WASH plan
- Inclusive Local Concertation Structure set up in each Commune
- Evaluation of governance at municipality level conducted in a participatory manner



Finance

- Implementation of WASH funds at the level of VSLA group
- Networking of local masons and local seamstresses (both men and women)
- Bringing together networks of local masons and seamstresses with microfinance institutions and VSLAs.
- Capacities of Mayors, including women Mayors to mobilize resources for WASH services.

What has changed?



Services - Behavior Change

- Monitoring of the communal action plan involving all local structures (Commune/STEAH, ASUREP, OSCEAH, leaders).
- Emergence of male, female and youth service providers
- Men and women private operators provide services adapted to the clients.
- Efforts for disaggregated data in the SE&AM system



Accountability & regulation

- Operational accountability mechanisms on WASH services at the communal level
- OSCEAH and ASUREP dynamic
- Traditional leaders committed to facilitating resolutions to WASH-related problems



Environment & Water Resources

- Increased use of washable sanitary pads in rural areas
- Model households practice environmentally friendly behaviour
- Private operators and ASUREP committed to protecting water systems and the quality of water delivered to the population
- Various local initiatives for reforestation activities and the establishment of firebreaks.

Outstanding Achievements

83 women leaders emerged at the community level prompting leadership changes in other women and girls.



864 individuals improved their income through WASH jobs created (51% women)



7,782 members of dialogue and consultation structures at the communal level, 35% women



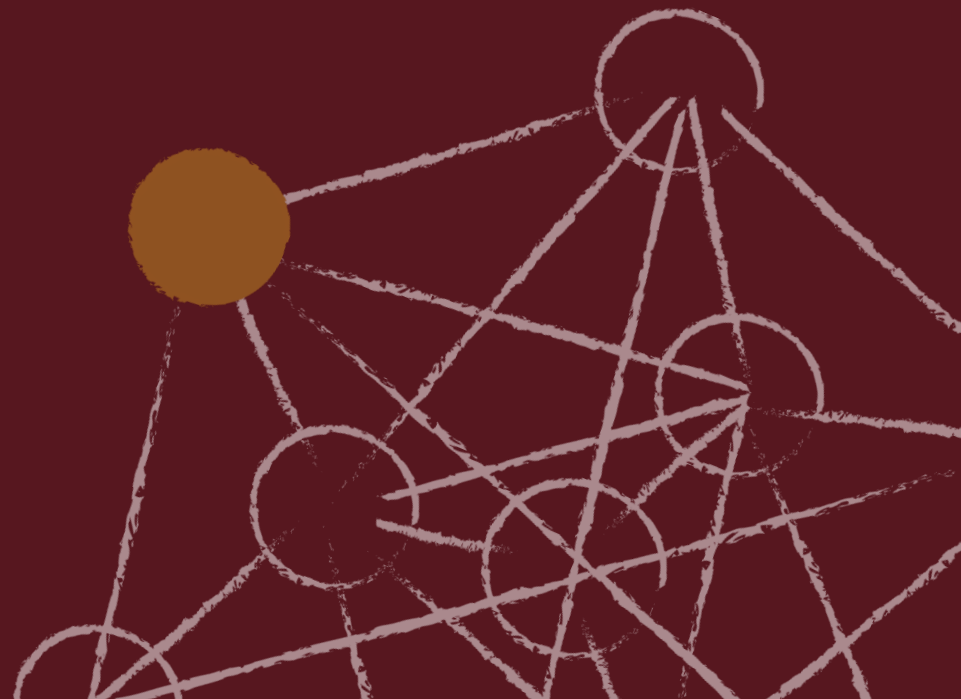
6,253 model households adopting the five healthy behaviours.



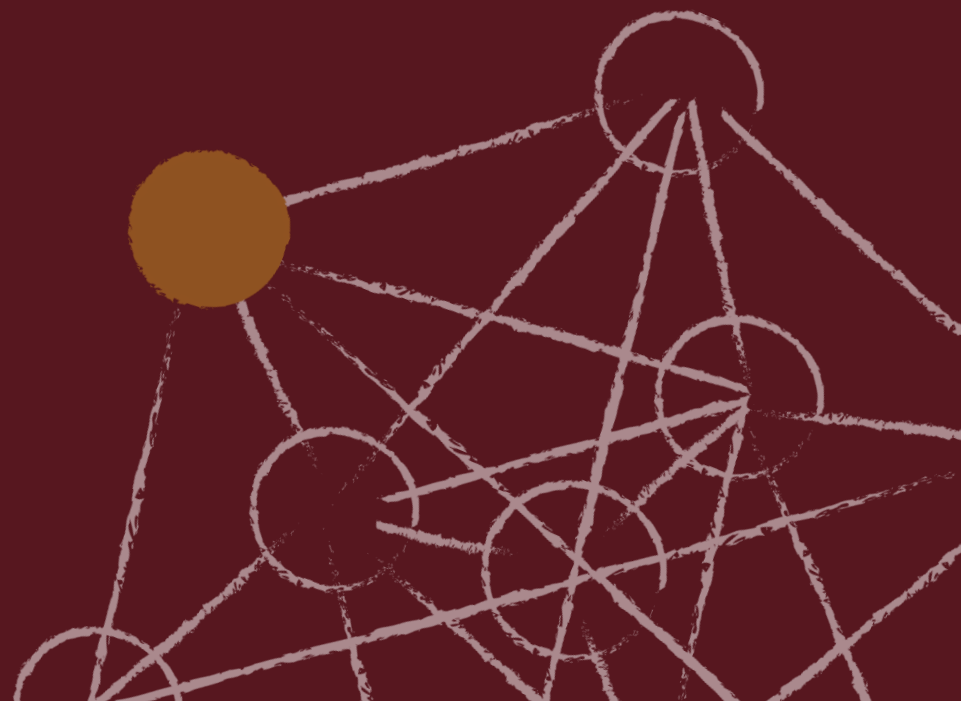
Gender focal points: 177, of which 112 are men and 65 are women



Questions?



Reflections



Closing: Key Messages



- Women's empowerment and gender equality aren't just about women's participation.
 - It's much larger. We have to address agency, structure, and relations.
- To reach gender equality in WASH, we need to understand and change gender norms
- Women's empowerment and gender equality can't be addressed at the community level alone.
 - If we want meaningful change, we have to focus on gender throughout the WASH system, including at government and institutional levels, and in businesses and services
 - Governments have the mandate to ensure gender equality, but may lack the tools and approaches to do this effectively
- Change at institutional levels often looks slow compared to change at the community level, but this institutional change is what drives and sustains gender equality at scale
- Gender is a key (but sometimes hidden) element of the WASH systems building blocks. We have to define how to address gender equality and social inclusion within each of the building blocks.

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