

BILL & MELINDA GATES foundation

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Integrating Gender into Sanitation









# Why is gender integration important in WSH?







Absence of adequate sanitation can have negative effects on human health and the environment.

Certain groups face more challenges in accessing adequate sanitation than others Limited access to sanitation programs and subsidies, despite encouraging policies.



Adequate sanitation is a basic human right. It is thus important to ensure that sanitation is available to all, at all times.

#### Who are excluded here



Women headed HHs



People with Disability



**Elderly** 



Transgender



Unorganised sector



Construction workers



Caste based groups (SC/ST/OBC)



Rag pickers/ Beggars/ Destitute/ Migrants



**Fishermen** 



Manual scavengers,
PH workers



Sex workers



Religious minorities



#### Impact of exclusion

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## Safety and security





Safety Risk due to open defecation at night, use of shared toilets, public or community toilets

#### Health Impact



Modification of Diet & consumption of less water to avoid use of toilets leads to severe health issues such as dehydration etc.



Unavailability of menstrual hygiene products leading to infections







Income generation opportunities for men are more compared to women in sanitation programmes

Women have to travel long distances for clean water & proper sanitation, adjust to unreliability in water supply, thus they have to give up jobs



## Impact on education



Increased dropout rates of girls in schools due to lack of toilets and MHM facilities



#### **Impact of exclusion**

## What can we do

#### Other marginalised groups



- Inadequate design of built infrastructure (toilets) such as steps or inappropriate pump handles, difficulty to squat, absence of ramps, inadequate signs etc.
- Difficulty to carry water for both anal cleansing and handwashing

Pregnant women are exposed to the risk of falling and having a miscarriage.



Absence of separate toilets and denial of access of transgender people in public, community toilets



- Vulnerable communities need to be organised, engaged and empowered to demand sanitation, make claims, negotiate and lead local initiatives.
- In order to do this constitute gender forums with participation from members of Self Help Groups, Mahila Aarogya Samitis, Town Level Federations, Accredited Social Health Activists, and members of various vulnerable groups etc.



- Gender Forums comprise of 10 to 15 members in every settlement
- Gender Forums work closely with the ULB and MEPMA to ensure the equal participation of the vulnerable population

#### What can we do

What can we do

- Gender Forums
   provides them a
   local structure to
   voice their concerns
   about sanitation
   services
- Gender Forums act as the first point of contact to understand the situation of the settlement and to reach out to the residents of the settlement



The Gender Forum can help in the following

- Reach out to the community to get participation from various vulnerable population.
- Spread awareness about challenges and needs of various vulnerable groups with help of gender forums

- Sensitize the community members regarding Swachh Bharat Mission guidelines, Faecal Sludge and Septage Management, Menstrual Hygiene Management, hand washing, health impact
- Provide support to community members in accessing services from the ULB by providing guidance about social and legal entitlements, procedure for accessing and getting IHHLs, CTs etc.
- Hold meetings to discuss WASH related challenges and necessities keeping in mind that needs of all vulnerable groups are addressed
- Monitoring, evaluation and reporting, so that all community members benefit from the implementation of inclusive WASH
- Support and facilitate the formation of gender forums with participation various vulnerable population in other settlements.

### **Experience from the** ground























# **Experience from the ground**

#### Ms. Savithri, Project Director, MEPMA, Anantapur Stakeholder Consultation in October 2018

MEPMA, ULB and IIGMF team have been working together in the city for almost 14 months on Gender based sanitation. We have been reaching the most vulnerable sections to ensure meaningful sanitation to one and all with the support of GFs, GRCs. We have also strengthened the support to SHGs, Livelihood Committees, Convergence Committees, MAS, so that these structures along with the GFs would create an enabling environment for sustainable sanitation.

#### Mr. Sreenivasulu, Community Organiser, Representative of ULB on Sanitation

The GFs have been involved in co-management of services along with the ULB. They have been addressing different issues such as ODF, construction of IHHL, educating the people in the settlement on MHM, etc. The ULB and GFs are successful in bringing a change in the slum, community and the administration in a short period of time.

Process Agency & Participation

#### Shameela, Gender Forum Member, Rani Nagar, Anantapur:

We initiated this Gender Forum with 18 members and started holding small group meetings and talked about the importance of menstrual hygiene, waste collection, hand washing and toilets. We have succeeded in get the community toilet in Rajamma Colony renovated with the support of the councilor and ULB.

#### Durga Bhavani, Outreach Worker, Kovvur:

We have been supporting the ULB in reducing the practice of open defecation and raising awareness on its ill-effects.

#### **Voice**

#### Narsamma , (S.C Community), Rani Nagar, Anantapur:

Many of the homes in our streets have no toilets; so men used the hospital ground and women went to dirty community toilets or practiced open defecation. None of the officials visit the slum; we complained multiple times but no action was taken.

### Satyanarayanamma, PWD group member, Fisher Folk Community, Ponnapalli, Narsapur:

We live here for the past 15 years and most of us are fisher folk. It was a huge challenge to deal with all the waste being dumped in the drain and with poorly maintained community toilet as the only facility, many people here practice open defecation.