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Background

With the adaptation of the 2030 Agenda for Sustainable Development in September 2015, the world embarked on a 15-year journey with ambitions to eradicate poverty, reduce inequalities, ensure equal opportunities and dignity, and tackle climate change among other objectives. At the heart of the agenda lies a commitment to "leave no one behind" (henceforth LNOB) in the process of development. It is found several times in the 2030 Agenda alongside a special recommendation to prioritise the "furthest behind". Furthermore, the Vision statement of the Agenda 2030 seeks to "realise the human rights of all" envisioning a world where among others the commitments regarding the human rights to safe drinking water and sanitation and availability of improved hygiene is reaffirm¹.

The Netherlands WASH SDG consortium programme (2017-2022) is a programme funded by Dutch Ministry of Foreign Affairs. It is being implemented in seven

countries by a consortium consisting of the WASH Alliance International (WAI)2, Plan Netherlands and SNV. It aims towards an improved WASH situation for all and is fully committed to principles of "human rights to water and sanitation" and greater equality and the freedom of people as well as "leaving no one behind". To fulfil this commitment the programme uses a socially inclusive and gender transformative approach meaning that long-term, broad-reaching measures are taken within its interventions to eliminate the barriers to participation for people who have long been marginalised, in particular women and girls, with understanding that focusing energy on those with the most barriers improve WASH situation for all. Simavi leads the WAI sub-programme of the WASH SDG consortium in Bangladesh, Nepal and Uganda and this factsheet highlights the key findings of the Gender and Social Inclusion (GESI) and relevant data from baseline assessment which was conducted in these three countries³, at household and community level.

- 1 https://sustainabledevelopment.un.org/post2015/transformingourworld paragraphs 7 & 8.
- 2 WASH Alliance International is an Alliance of 9 Dutch NGOs (Simavi, Amref, Akvo, IRC, RAIN Foundation, RUAF, PRACTICA and WASTE).
- 3 For more information about the programme please see https://simavi.org/what-we-do/wash-sdg-consortium/







Methodology and Scope

In order to deepen the understanding on the dynamics of the exclusion, the GESI assessment aimed to answer the below questions:

- Who are often left behind in the WASH sector (i.e. in WASH policies, legislations, practices, services and participating in wider decision making processes), in the country and in our intervention area?
- What are the barriers to their inclusion and underlying causes of their marginalization?
- How is the current division of WASH related gender roles assigned to women and men? Who controls the resources and takes the decisions?
- Level of participation of women and girls as well as

socially excluded groups in WASH decision making processes, at household, community and local government levels.

Data collection then was done through desk study, household survey⁴ and key informative interviews⁵ and focus group discussions. The JMP 2017 definition for Water, Sanitation and Hygiene ladders were used in developing and analysing the household survey. Data collection was done using the mobile phone based Akvo FLOW tool. Data analysis provided key insights on drivers of exclusion in each of these countries, some of which challenged our previous perceptions. The following section elaborates the results of the surveys and relevant observations.

1 - Who are left behind in WASH sector?*

Bangladesh (BLD)

Women, ultra-poor, rural & informal settings, elderlies, PWDs, nomads, disaster-prone/affected people, people with certain occupations (i.e. pit emptiers), hard to reach areas

Nepal (NP)

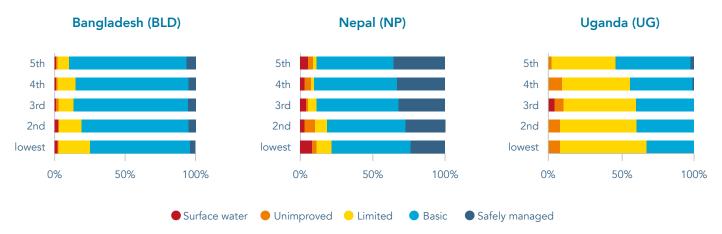
Women, the poor/ lower class, PWD, those marginalised based on cast (i.e. Dalits), religion (i.e. Muslims), language (non-Nepalese), elderlies, disaster-prone/affected people, remote and hilly areas

Nepal (NP)

Women, orphans, people living with HIV/AIDS, PWD and those providing care for them, elderlies, female/child/elderly headed households, rural areas, poor people

Observation: Women, People With Disabilities (PWD), elderlies, poor people were identified as those left behind in all the 3 countries.

2 - Access to Water vs Wealth **



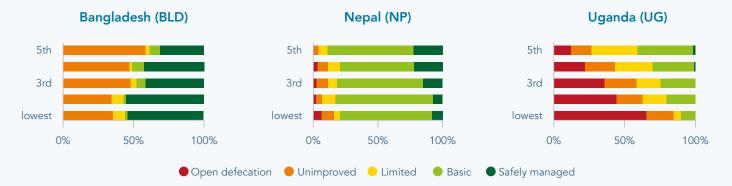
Observations: Although the poor have in general lower access, the gap is not drastically wide, probably because the community water supply is open to everyone. In Uganda, more people are using lower service levels of water (limited and below). In Nepal, while the ratio of access to safely managed is highest among the three countries, more people also use surface water.



⁴ Household surveys with 1,337 randomly selected households in Bangladesh (1171 female), 1,068 in Nepal (783 female) and 912 in Uganda (754 female).

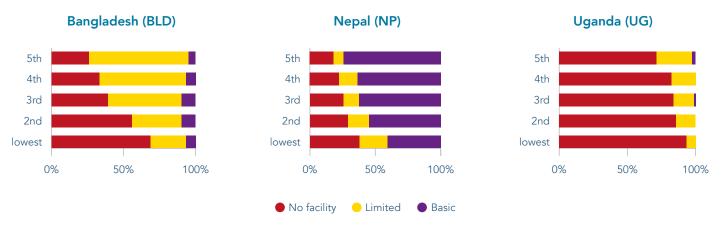
⁵ Key Informant Interviews with different stakeholders from the private sector, local government and communities.

3 - Access to Sanitation vs Wealth **



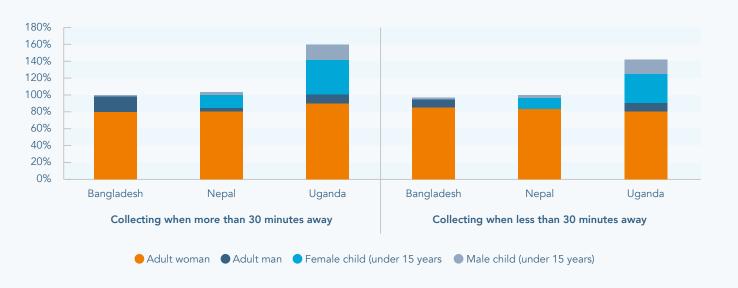
Observations: In Uganda, the access to sanitation seems to have direct co-relations with wealth and high percentage of people on the lowest quantile still practice open defecation. In Nepal, while the difference among the different quantiles is not substantial, but higher wealth quintiles seem to do slightly better when it comes to access to sanitation. Bangladesh's pride to be open defecation free is confirmed by our data. Strikingly, people on lowest quantile seem to have access to better sanitation services than the higher quintiles.

4 - Access to Handwashing vs Wealth **



Observations: Access to proper handwashing facilities seems to be higher among the wealthier population. In Nepal majority of the population has access to handwashing facilities with water and soap, and in Uganda a high percentage does not have access to any handwashing facility.

5 - Unpaid Work: Collecting Water**

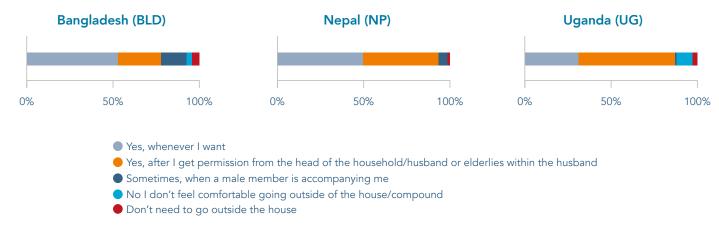




Observations: In all three countries the WASH burden is mostly with women, followed by female children, despite the distance to the main water source. In Nepal and Uganda it seems that men are more involved in collecting the water when the water source is located more closely to the house.

Note: In Uganda this question was asked as a multiple choice question, resulting in a total percentage of over 100%.

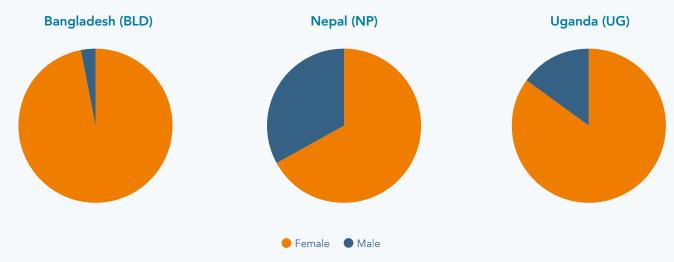
6 - Female Mobility Outside House **



Only female respondents

Observation: Majority of women cannot go outside the house on their own free will. In Uganda the percentage of women who does not feel comfortable going outside the house is higher. In Bangladesh, about 5% indicated that they don't need to go outside the house.

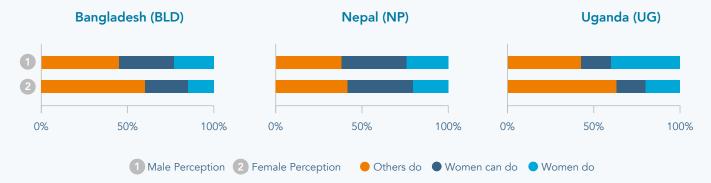
7 - Unpaid Work: Care Work**



Observations: In Bangladesh and Nepal 5% of the respondents indicated they have someone with some difficulties in self-case and 2% indicated having someone with a lot of problem with self-care. In Uganda, 20% of the respondents indicated they have someone with a disabilities within their household, but the level and type of disability varies.



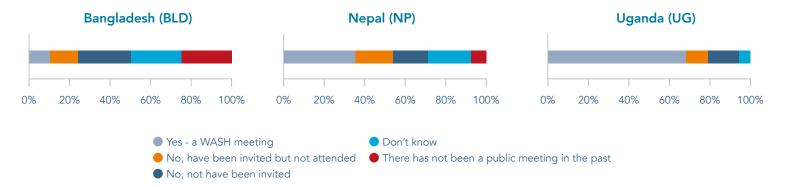
8 - Decision Making Power Within Household**



Observation: When it comes to decision making power within households, in Bangladesh and Uganda the women felt that others are making the decisions. In Nepal the situation is slightly better. Even although men think that the situation is slightly better still they think that in about 50% of situations women do not make the decisions within the HH.

Note: the male and female respondents are not from the same households and the number of male respondents is much smaller

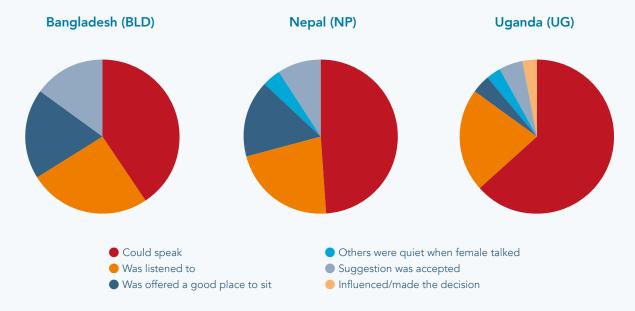
9 - Participation at the community meetings**



Observation: The female respondents were asked whether they have been invited to a WASH/public meetings in the past month. In Uganda, about 70% had been to a WASH meeting but the percentage in Bangladesh and Nepal is quite low (10% and 35% respectively).

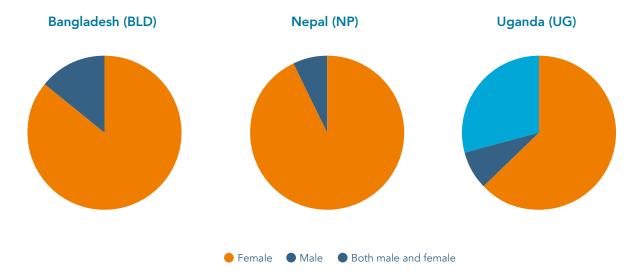


10 - Female feeling respected at WASH meeting**



Observation: The female respondents who had been to a WASH meeting were asked whether they felt respected at the meeting. The majority felt respected and the main reason for this was that they could speak. In Bangladesh, no one felt that they had been able to influence or make the decision. In Nepal and Uganda also very low percentage of the respondents indicated that they could influence the decisions.

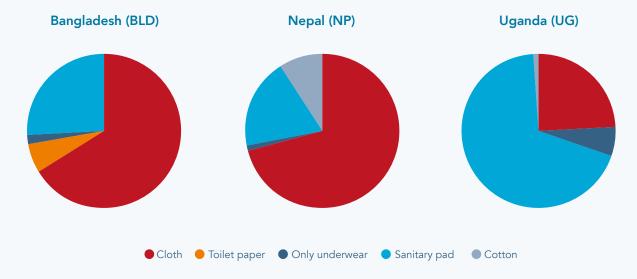
11 - Access to loans **



Observation: 44% of households in Bangladesh, 71% in Nepal and 68% in Nepal are part of a saving group. In all the 3 countries the women are the main beneficiaries of these saving groups.

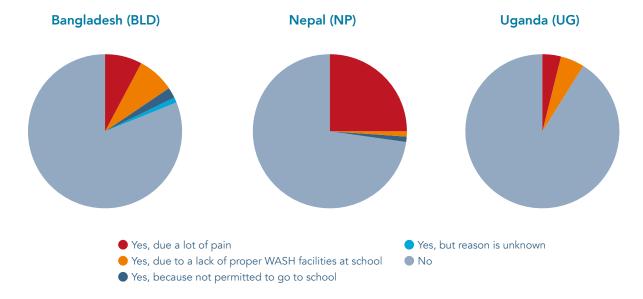


12 - Menstrual Health: Products used**



Observation: In Bangladesh and Nepal, majority of the women and girls use cloth during their periods. In Uganda, the majority of women and girls use the sanitary pad.

13 - Menstrual Health: Absence from Schools **



Observation: Most respondents mentioned that the girls of their household did not miss school during their periods. Main reasons given for missing school were having a lot of pain and a lack of proper WASH facilities at schools.

^{**} Source: Household Survey



^{*} Source: Desk Study, KII and FGD

Conclusions

- Gender stereotyping (i.e. women's roles and status marked by duties as homemakers), patriarchal system, limited female mobility outside house, discriminatory beliefs and stigma's against PWD and minorities, women lack of decision making power within household and community, and lack of knowledge of men and boys were among the major social and cultural barriers in these three countries.
- Limited control and decision making power of women over household and community investments/resources, women carrying most of the unpaid work within the household which is not even recognised by themselves were identified as the main barriers to economic inclusion. On the other hand women were the main recipients of the loans from saving and or credit groups, which combined to their limited decision making power can lead to their exposure to violence within and outside family.
- Lack of disability and elderly friendly WASH services and products, in particular at schools, health facilities and public places were identified as main technical and physical barriers to inclusion. Related to menstrual health, non-availability

- of pain killers, sanitary pads and proper WASH facilities, were among the main barriers for girls' school attendance.
- Lack of relevant gender and social inclusion policies or their implementations, lack of awareness, capacity and willingness of duty bearers about gender and social inclusion issues, laws and policies were identified as the main political barriers to inclusions.
- There was not a significant difference in access to water along different wealth quintiles, which can be the result of communal water supply being often accessible to all.
- The high access of the lower wealth quintile to better sanitation services in Bangladesh can be a result of different WASH programmes promoting safe sanitation amongst the lower wealth quintiles.
- Stigmas related to disability within family and issues related to menstrual health might have affected the response to relevant questions. We hope to learn more about the real situation during the implementation of the programme.
- The comparison of three countries shows how important it is to be specific in identifying the barriers to inclusion and drivers of exclusion in each context.

