

Appendix 3

GWA Power Point Presentation “Sanitation, Hygiene and Gender”




WHERE ARE THE “LADIES”?

Sanitation and Hygiene Improvements and Gender

A Key note at SACOSAN – Dhaka, 22 October 2003
Mrs Rose Lidonde (WEDC) and Mr Jo Smet (IRC)



Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 1



Is Sanitation a gender issue?

- Sanitation is definitely a gender issue
- If not well addressed sanitation can create gender inequality in human society
- For instance women as traditional water bearers and custodians, shoulder a huge burden of coping with lack of sanitation services
- Lack of sanitary facilities faced by women contribute to poor hygienic behaviours.

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 2



State-of-affair

- Worldwide: 2.4 billion people no access to sanitary excreta disposal; contributes to:
- 2.2 million deaths due to diarrhoea / year
- 4 billion cases of diarrhoea / year
- Among them many infants and young children → women are main caretakers → gender concern!
- Lack of sanitary facilities → dirty hands, poor hygiene behaviour
- Poor families suffer
- But still societal barriers continue to restrict their involvement in sanitation programmes



Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 3



Gender

- This is NOT about women and girls only!
- Gender is all about **men and women** in the socially and culturally determined differences
- Different habits, different needs and demands, inequalities
- Reinforced by class, race, caste, ethnicity or age
- Reflect gender differences and challenges in policies, strategies and approaches

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 4



Gender approach


Recognition of gender differences and inequalities by applying them to:

- Knowledge and skills
- Needs and demands
- Types and division of sanitation-related work
- Types of decision; who is decision-maker?
- Financing and other inputs
- Benefits and negative impacts

Apply these differences/inequalities/challenges to the development of national plan – policies – strategies for more effective, equitable and sustainable sanitation and hygiene behaviour



Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 5



Health or convenience

Evidence shows that adequate sanitation, hygiene promotion and water supply :

- reduces diarrhoeal mortality by some 65% and related morbidity by some 26%
- Reduces governments' health costs resulting from poor sanitation and hygiene, from low workers' productivity, lower school enrolment, lower school retention rates amongst girls
- gives also poor the right to live in dignity!

Still sanitation and hygiene improvements low on family agenda for investments

- Livelihood has higher priority in family
- Sanitation because of convenience, privacy, status or peer pressure


More and more poor farming appreciate benefits from decomposed human excreta/ urine as fertiliser for poor soils.

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 6

School sanitation and hygiene

In many countries: schools are unhygienic places, ideal for disease transmission because of poor sanitation and hygiene behaviour:

- half of Primary Schools have adequate water supply
- 1 out of 10 has adequate sanitary facilities
- 40% of school kids have worms
- 1 out of 10 school-age girls do not attend school during menstruation or drop out at puberty
- Girls do not drink during the day



Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 7

Schools for long-term learning

Sanitary school environment

Short-term

- Better health
- Higher enrolment girls
- Less drop out girls
- Etc.

Long-term

- Influence on parents
- Good hygiene behaviour
- Good behaviour passed on
- Girls better educated
- Etc.

School Health Policies
Consult boys and girls
Involve parents
Involve students in operation and cleaning

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 8

Economic

Costs of in-action from high diarrhoeal incidence and deaths:

- Large economic loss due to non-productivity
- High health expenditures
- Negative publicity for governments and countries
- Peru: US\$ 200 million loss due to cholera epidemic
- USA: estimated US\$ 900 million loss per year due to gastro-intestinal diseases

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 9

Imbalanced investment

- 80% of total annual investment of US \$ 16 billion to water – what remains to sanitation and hygiene!
- While greater reduction on diarrhoeal incidence from improved sanitation and hygiene than from water supply only
- Imbalance also on target group: hygiene not only for women and girls! Also for men and boys!

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 10

Gender and technology

Specific demands of women and men

Technical and environmental conditions

Institutional aspects (small scale PS)

Specific women and men-friendly design (uninals)

Children latrine or child-friendly latrine

Social, cultural and community aspects

Use of human faeces and urine

Economic and financial conditions

BEST FITTING TECHNOLOGY

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 11

Institutional issues

HH LEVEL	VILLAGE LEVEL	DISTRICT-PROVINCE STATE LEVEL	NATIONAL LEVEL
Gender and child issues Sanitation and Livelihood (income)	Situation analysis? Gender perspective in planning? Sanitation Comm.? CBOs? Small-scale PS?	Sanitation strategies? Gender mainstreamed? Sanitation planning? Sectoral co-operation? Sanitation resource allocation?	Sanitation Policy? Strategies? Where is Sanitation housed? Multi-sectoral? What funds to Sanitation? Monitoring?

Rose Lidonde (WEDC) and Jo Smet (IRC) Sanitation, Hygiene Improvements and Gender 12